

Retiree Frequently Asked Questions

Coverage Areas for over 65 HMO plans:

Medicare Blue Choice counties: Broome, Cayuga, Chemung, Cortland, Livingston, Monroe, Onondaga, Ontario, Oswego, Schuylers, Seneca, Steuben, Thompsons, Tioga, Wayne and Yates.

MVP Health Care Counties: Allegany, Cattaraugus, Chautauqua, Erie, Genesee, Livingston, Monroe, Niagara, Ontario, Orleans, Schuylers, Seneca, Steuben, Wayne, Wyoming and Yates.

Can I add new dependents to my plan after I retire?

Any dependents that are on your insurance policy will remain on so long as they qualify as a dependent. However you **MAY NOT** add any new dependents to your insurance policy after retirement.

What happens to my benefits if I retire and I am under 65 years old?

You will be placed in the retiree group and remain on the plan applicable to active employees until you reach the age of 65. At this time ASAR and RAP members contribute the same amount as when actively working. Any BENTE member that hired on/after July 1, 2007 will contribute the same amount as when actively working. Dental for retirees is not covered by the District; you will be offered COBRA if you wish to continue Dental coverage.

What happens to my benefits if I retire and I am over 65 years old?

You should already be enrolled in Medicare Part A thru the Social Security Administration. In order to continue health insurance coverage through the District you must be enrolled in both Medicare Parts A and B. In your retirement packet, you will receive a special enrollment letter to take to Social Security to enroll in Part B. You will be offered a choice of Medicare supplemental plans that work with Medicare. They are Medicare Blue Choice, MVP Gold Standard, Retiree+ Enhanced EPO and the Traditional BCBS (Basic). The District contributes the cost for the Traditional BCBS (Basic) plan towards the supplemental plan that you choose. The difference (if any) between the cost of the Traditional BCBS (Basic) and the plan you choose is paid for by the retiree.

What happens to my benefits if I retire and I am over 65 years old and my spouse is under 65?

You should already be enrolled in Medicare Part A thru the Social Security Administration. In order to continue health insurance coverage through the District you must be enrolled in both Medicare Parts A and B. In your retirement packet, you will receive a special enrollment letter to take to Social Security to enroll in Part B. You will be offered a choice of Medicare supplemental plans that work with Medicare. They are Medicare Blue Choice, MVP Gold Standard, Retiree+ Enhanced EPO and the Traditional BCBS (Basic). Your spouse may remain in the plan applicable to active employees. Your spouse will need to complete the application provided in the retirement packet.

What happens to my benefits if I retire and I am under 65 years old and my spouse is over 65?

You will remain in the plan applicable to the active employees. Your spouse should already be enrolled in Medicare Part A thru the Social Security Administration. In order to continue health insurance coverage through the District they must be enrolled in both Medicare Parts A and B. In your retirement packet, your spouse will receive a special enrollment letter to take to Social Security to enroll in Part B. They will need to be enrolled in a Medicare Supplemental Plan through the District and will be offered a choice of Medicare supplemental plans that work with Medicare. They are Medicare Blue Choice, MVP Gold Standard, Retiree+ Enhanced EPO and the Traditional BCBS (Basic).

What happens to my benefits if I move?

If you move out of the coverage area and you are under 65 your benefits remain the same. If you are enrolled in Medicare Blue Choice and moving to Allegany, Cattaraugus, Chautauqua, Erie, Genesee, Niagara, Orleans, Schuyler, Steuben or Wyoming county, you may enroll in the MVP Gold Standard plan. If you are over 65 and in the Medicare Blue Choice plan and you do not move to a county that MVP covers, you will have a choice to move to the Retiree+ Enhanced Plan and pay the premium or you can choose the Traditional (BCBS) which is free. Note: the Traditional (BCBS) plan does not have out-patient or prescription coverage.

How long does the COBRA dental insurance last and what do I do once it ends?

You can continue the COBRA dental for up to 18 months from the date you retire if you continue to pay the premiums. Once the 18 months finishes your coverage in the District's dental plan ends. You have the option of enrolling in the MetLife Take Along Dental. The District does not contribute towards this dental plan. You can find out more information about this plan at <https://metlifetakealongdental.com> or by calling 1-844-263-8336.

What happens if my spouse or I become disabled and become Medicare eligible?

If you or your spouse become disabled, Medicare may be offered. If Medicare is offered, you must enroll in Medicare Parts A and B. Medicare Part B covers 80% of services. The Medicare Supplemental Plans pays 20% of the services. If you are not enrolled Medicare Part B, there may be additional costs to you as the District Supplemental Plan does not pay the 80% cost of services that Medicare would cover so the cost would be passed on to you.

It is very important that if you or your spouse becomes Medicare eligible due to a disability, that the Benefits office is notified as soon as possible. At that time, a Medicare Supplemental plan must be selected to continue coverage.

What happens when my spouse or I turn 65 and become Medicare eligible?

When you or your spouse reaches the age of 65, you become Medicare eligible. You must be enrolled in Medicare Parts A and B and choose a District Medicare Supplemental Plan in order to continue your coverage in the District's Retiree group. Approximately 6 to 8 weeks prior to turning 65, you will receive a packet from the Employee Benefits department that will provide you with the necessary information. Paperwork must be returned to the Employee Benefits department at least two weeks prior to the first of the month that age 65 is reached. There are currently four plans available to retirees and/or spouses that are Medicare eligible. They are the Basic BCBS, Medicare Blue Choice, MPV Gold Standard and the Retiree+ Enhanced EPO plan. A comparison chart will be sent in the benefits packet to aid in the decision as to which plan is best for the retiree and/or spouse.

What happens to my spouses' benefits if I pass before my spouse does?

Upon your passing, your spouse has the option to continue on the coverage. Your spouse will be billed at the full cost of the plan.

What options do my children have once they are no longer eligible for coverage because they have hit the maximum age of coverage?

Any dependent who ages off your plan has the option of 36 months of medical COBRA coverage and 18 months of Dental COBRA coverage.