

Frequently asked questions about your University of Minnesota Plan 2 coverage:

Q: What are the plan premiums and deductibles?

A: The total monthly premium for 2021 is \$167.00. It is billed separately: \$80.10 for medical and \$86.90 for prescription drug. Your deductible is \$2,340 for 2020. (This amount is subject to change in 2021.)

Q: Will I be able to see my current doctor?

A: Your plan gives you access to doctors and hospitals in the United States that are Medicare contracted. Use the Find a Doctor tool on bluecrossmn.com/umnretirees or the call customer service number on the back of your ID card to see if your provider is in the network.

Q: If I have a current health condition, will I be denied coverage?

A: No, there are no limits or restrictions on your new coverage.

Q: Will my new plan cover surgery that is already scheduled?

A: Your new plan will provide benefits for covered services as outlined in your benefits document as long as the services are provided while your plan is in effect. Please check your Certificate of Coverage to see what services are covered.

Q: How much do I pay for my out-of-pocket expenses?

A: You are responsible for all health care costs until you have met your deductible. After you have met the deductible, the plan will cover 100% of your Medicare copayments or coinsurance for eligible services and supplies the remainder of the year.

Q: Does this plan replace Medicare Part B?

A: No. This plan coordinates with your Medicare coverage. Medicare is the primary payer for all health care services. And there is virtually no paperwork as Medicare will submit the claim to Blue Cross and Blue Shield of Minnesota for processing in most instances.

Q: How does my coverage work when I travel?

A: The University of Minnesota Plan 2 provides you with in-network benefits, including emergency care when you travel anywhere in the United States and use a Medicare contracted provider. You have emergency benefits only when you travel outside of the United States.

You do not need to call to activate coverage for your travel benefit. Simply carry your Medicare and Blue Cross ID cards with you and show them to your providers when you need care.

Q: Do I need to meet my deductible first to use my preventive health care benefits?

A: No. Medicare provides coverage for many preventive care services including a Welcome to Medicare exam, Annual Wellness Exam, cancer screenings and more. Visit Medicare.gov to see a full list of Medicare approved preventive services.

Q: Do I have coverage for virtual doctor visits?

A: Yes. With Doctor on Demand you can connect in minutes with board-certified doctors without the hassle of the waiting room. Visit doctorondemand.com/Medicare to get started.

Q: How do I use my benefits for diabetic supplies?

A: Diabetic supplies may be covered by Medicare Part B and/or Medicare Part D, depending on the type of supply you're purchasing.

Medicare Part B-covered supplies

Medicare and your health plan provide coverage for glucometers, test strips, lancets, calibration solutions and continuous glucose monitors (CGM). Present your Medicare ID card and your health plan ID card to your participating provider or pharmacy to ensure the claim will be processed correctly.

Medicare Part D-covered supplies

Your prescription drug plan provides coverage for syringes, injectable insulin, needles, and alcohol swabs. You will pay only your copayment or coinsurance when you present your Group MedicareBlueSM Rx ID card to your participating provider or pharmacy.

Q: How do I use my benefits for vaccinations?

A: Vaccinations may be covered by Medicare Part B and/or Medicare Part D, depending on the type of vaccine and whether it is administered to you at your clinic or pharmacy.

Medicare Part B-covered vaccines

Together, Medicare and your health plan provide coverage for flu, pneumonia and Hepatitis B vaccines, and vaccines given as treatment for an injury or direct exposure to an illness. Present your Medicare ID card and your health plan ID card at a participating clinic to ensure the claim is processed correctly.

Medicare Part D-covered vaccines

Your Group MedicareBlueSM Rx plan provides coverage for the shingles (Zostavax) and tetanus/diphtheria vaccines, and other vaccines not covered by Medicare Part B (such as the polio vaccine). How you receive your benefits for these vaccines depends on where you have them administered:

At a participating pharmacy

If you have covered vaccines administered at your participating pharmacy, you will pay only your copayment or coinsurance when you present your Group MedicareBlueSM Rx ID card at the pharmacy.

At a participating clinic

If you have covered vaccines administered at your participating clinic, you will be responsible for paying the clinic for the service. To be reimbursed for the amount covered by the plan, you will need to submit a claim form with an itemized bill to Group MedicareBlueSM Rx. Your claim will be reimbursed for the cost of the covered vaccine (and all or a portion of a vaccine administration fee if charged) minus your applicable copayment or coinsurance. Visit www.yourmedicareolutions.com for a claim form or call customer service to request one.

Frequently asked questions about Group MedicareBlueSM Rx (PDP) Medicare Part D prescription drug coverage:

Q: Can I continue to use my same pharmacy?

A: Group MedicareBlueSM Rx (PDP)'s nationwide network includes more than 66,000 pharmacies. To verify that your pharmacy is in the network, check your pharmacy directory, visit www.yourmedicareolutions.com or call customer service.

Q: Will my new plan cover my current medications?

A: View your formulary booklet or visit www.yourmedicareolutions.com or to verify your current medications are included on the formulary.

Q: What if my prescription drug is not on the formulary?

A: You can ask your doctor to prescribe a similar drug that is on the formulary or your doctor may request a formulary exception once your coverage begins. To obtain a copy of a formulary exception form for your doctor to submit, visit www.yourmedicareolutions.com or call **877-838-3827**, TTY users call **711**. Assistance is available 8 a.m. to 8 p.m., daily, Central Time.

Q: Can I use a mail order service?

A: You can also use the mail order service offered by CVS Caremark to obtain your medications. To verify that your medications are included on the formulary, consult your formulary booklet or visit the website at www.yourmedicareolutions.com. You can also create a personal account on www.yourmedicareolutions.com to view your prescription drug claims.

Q: Will I be able to fill my prescription for a non-formulary drug without an approval on my file?

A: New members can fill up to a 30-day supply within their first 90 days of new enrollment without the exception. Future refills will require the necessary approval for the drug. To request approval, ask your doctor to submit a formulary exception request on your behalf. To obtain a copy of a formulary exception form for your doctor to submit, visit www.yourmedicareolutions.com or call **877-838-3827**, TTY users call **711**. Assistance is available 8 a.m. to 8 p.m., daily, Central Time.

Q: How do I take advantage of extended day supplies for prescription drugs?

A: You can get a 90-day supply of your prescription drugs by mail order and at select retail pharmacies, called Preferred Extended Supply (PXT) Pharmacies. If you choose this option you will pay two copays or the applicable coinsurance. The Preferred Extended Supply Pharmacy network includes pharmacies like Walgreens, CVS, Target and many others. Information about how to enroll in the mail order program is included in your Group MedicareBlueSM Rx Welcome Kit and available online at www.yourmedicareolutions.com.

Other frequently asked questions:

Q: Can I access my personal information online or on my smartphone?

A: Yes, once you receive your member ID card, you can register to view claims and benefits, find in-network doctors and pharmacies, view, print and order member ID cards, and more. Register online at bluecrossmn.com/umnretirees or search for "BlueCrossMN Mobile" in your app store.

Q: How do I enroll?

A1: Complete the Open Enrollment Change of Coverage form found in the retiree booklet mailed to you before Open Enrollment. Mail or fax the completed form to the U of MN Office of Human Resources:

Total Compensation
100 Donhowe Bldg.
319 15th Avenue SE
Minneapolis, MN 55455-0103
Fax: 612-626-0808

A2: An enrollment kit will be mailed to you by Blue Cross Blue Shield of Minnesota. Complete and return the Enrollment Form for U of M Retiree Plan Option 1 and the Group MedicareBlueSM Rx (PDP) application in the postage-paid return envelope provided in the enrollment kit.

Q: What if I want to keep the same plan I currently have?

A: If you are not making any plan changes for 2021, no further action is required to maintain your current healthcare coverage.

Q: How will I be billed for my coverage?

A: An invoice for your coverage will be mailed to your home address monthly. Invoices can be paid via check through the mail or on our secure member portal. You may enroll in automatic premium payments using our online e-Bill platform or completing our Pay-It-Easy form. To learn more visit your member portal at www.bluecrossmn.com/umnretirees.

Q: When will I receive my ID card?

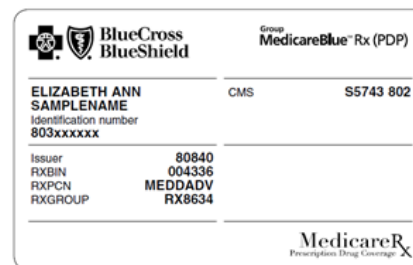
A: University of Minnesota Plan 2 and Group MedicareBlueSM Rx: We will send your medical ID card approximately 10 days after we process your enrollment. The Centers for Medicare & Medicaid Services (CMS) must approve all enrollment applications. Once CMS approves your enrollment, we will send you a confirmation letter within 10 days of the approval. Your ID card will be mailed separately after your enrollment has been approved.

Q: Why do I have two identification cards?

A: Blue Cross coverage is similar to your previous plan, however you now have stand-alone health and prescription drug plans, and they each have a separate member ID card:



Your health plan member ID card



Your prescription drug member ID card

Be sure to contact your providers and your pharmacy to update your insurance information before your next visit. Your providers and pharmacist will then have all the information they need to properly file your claims.

Q: Does the U of M Plan 2 include a fitness benefit?

A: SilverSneakers® is a fitness and lifestyle benefit included with your Blue Cross Blue Shield of Minnesota health plan at no additional cost.

Q: What does SilverSneakers® include?

A: Your SilverSneakers benefit includes memberships to thousands of fitness locations, group exercise classes designed for all abilities, fun activities held outside the gym, and SilverSneakers On-Demand™ online workout videos that feature tips on fitness and nutrition. Learn more at www.SilverSneakers.com/StartHere.

Q: Where can I find answers to other questions?

A: The benefits documents in your Enrollment Packet provide information to help you make the most of your plan and understand what's covered. Review the Evidence of Coverage or Certificate of Coverage for additional information.

Customer service can also help once you receive confirmation of your enrollment. The phone numbers will be listed on the back of your ID card[s] and in your benefits documents.

- **Pre-Enrollment Customer Service**
1-888-870-6297 (TTY 711)
Monday through Friday, 8 a.m. to 8 p.m., Central Time
- **Post Enrollment Customer Service**
1-800-531-6686 (TTY 711)
Monday through Friday, 8 a.m. to 8 p.m., Central Time
- **Group MedicareBlueSM Rx**
1-877-838-3827 (TTY 711)
Monday through Friday, 8 a.m. to 8 p.m. Central Time

This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments, and restrictions may apply. Benefits, premium and/or copayments/co-insurance may change on January 1 of each year. You must continue to pay your Medicare Part B premium.

For information about the premium you will pay for this coverage, contact customer service at the number listed on the back page. You must be entitled to Medicare Part A and enrolled in Medicare Part B. You must also continue to pay your Medicare Part B premium.

CVS Caremark Part D Services is an independent company providing pharmacy benefit management services.

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