

# **Welcome to Medicare - 2025**

Presenting Medicare 101, the Kaiser Permanente Senior Advantage  
& Anthem Medicare Advantage Health Plans

**For the City of San José Retirees**

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A man with white hair and a woman with blonde hair wearing a straw hat are kneeling in a garden. The man is holding a small green plant, and the woman is using a yellow-handled trowel to help plant it. They are both smiling and looking at the plant. The background shows a wooden fence and various green plants.

MEDICARE FOR GROUP MEMBERS

## Understanding the basics of Medicare

## Who can join Medicare?

### You're eligible to join Medicare if:



You're 65 or older



You're under 65, but live with a disability

- Must be eligible for Social Security disability
- Requires a 2-year waiting period



You have end-stage renal (kidney) disease (ESRD)



You have amyotrophic lateral sclerosis (ALS)



U.S. citizen or a permanent legal resident who has lived in the United States for at least five years



## What is Medicare?

- Medicare is a federally funded health insurance program.
- Medicare was established in 1965.
- Medicare is administered by the Centers for Medicare & Medicaid Services (CMS).
- Medicare includes 4 parts:



**PART A**  
Hospital Insurance



**PART B**  
Medical Insurance



**PART D**  
Prescription  
Drug Coverage



**PART C**  
**(Medicare Advantage)**  
Includes Part A, B  
and usually D

Original Medicare





## Part A: Hospital Insurance

### What it does:

- Gives you coverage for inpatient hospital care
- Also covers skilled nursing care, hospice care, and home health care

### What it costs:

- Most won't have to pay a premium for Part A. To make sure you qualify for premium-free Part A, contact Social Security.
- If you worked less than 10 years, there is a monthly premium up to \$518\*, your monthly premium is set by a Medicare formula.

\* Amount is for <2025>



## Part B: Medical Insurance

### What it does:

- Helps cover doctors' and other health care providers' services, like lab and radiology
- Outpatient care, durable medical equipment, dialysis, and some preventive care services are also covered

### What it costs:

- Your monthly premium is usually deducted from your Social Security or Railroad Retirement Board check.
- Late enrollment penalty (LEP):
  - Your premium increases 10% for each 12-month period that you decline coverage.
  - Not a one-time penalty **but continues throughout enrollment.**
  - Not imposed if you continue to work for — and get your health coverage from — an employer or trust fund of 20 or more.  
(You have up to 8 months after your employment ends to enroll.)



## Part B: Medical Insurance

### 2025 Medicare Part B Monthly Premiums\*

Your yearly income†		You pay	Your yearly income†		You pay
Single-Standard‡ Married couple-standard‡	\$106,000 or less \$212,000 or less	\$185.00‡	If you're married but file a tax return separately from your spouse		
Single Married couple	\$106,001 - \$133,000 \$212,001 - \$266,000		\$106,000 – or less Standard‡	\$185.00‡	
Single Married couple	\$133,001 - \$167,000 \$266,001 - \$334,000	\$370.00	\$106,000 – less than \$394,000	\$591.90	
Single Married couple	\$167,001 - \$200,000 \$334,001 - \$400,000		Greater than or equal to \$394,000	\$628.90	
Single Married couple	\$200,001 - \$500,000 \$400,001 - \$750,000	\$591.90			
Single Married couple	Above \$500,000 Above \$750,000				

<sup>†</sup>Modified adjusted gross income as reported on your 2023 IRS tax return.

<sup>‡</sup>You will pay this Standard amount if you 1) enroll in Part B for the first time in 2025, 2) do not get Social Security benefits, 3) are directly billed for your Part B premiums. See **medicare.gov** for complete details.

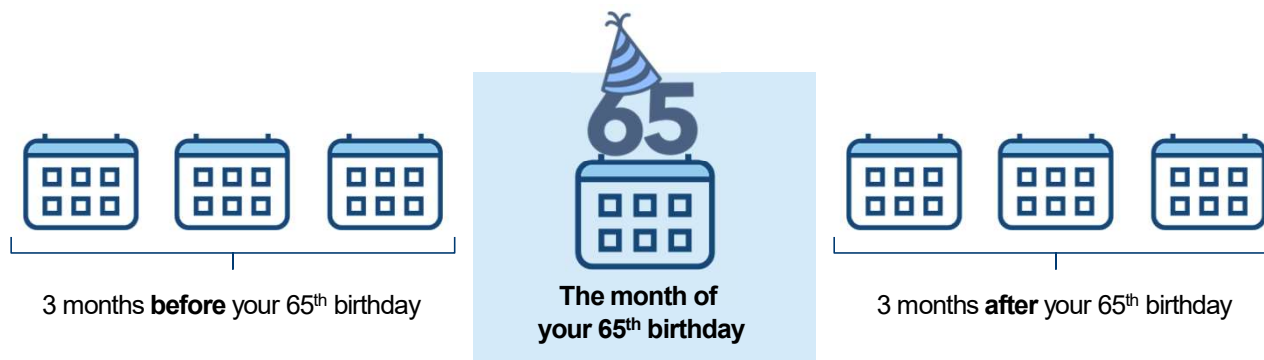
**\*Note:** The above dollar amounts are for 2025 and may change in 2026.



## Part A & B: Enrolling in Medicare When First Eligible

### Initial Enrollment Period

- If you're already getting benefits from Social Security, you'll be automatically enrolled in both Part A and Part B starting the first day of the month you turn 65.
- If you **do not** get benefits from Social Security, you'll need to contact Social Security.
- You can enroll over a 7-month period, which starts 3 months before your 65th birthday, known as the **Initial Enrollment Period**.
- You may be able to enroll online at **[socialsecurity.gov](https://www.socialsecurity.gov)**.



**Note:** Completing the application form and submitting it doesn't automatically enroll you in Medicare Part B. Social Security must first determine if you're eligible.

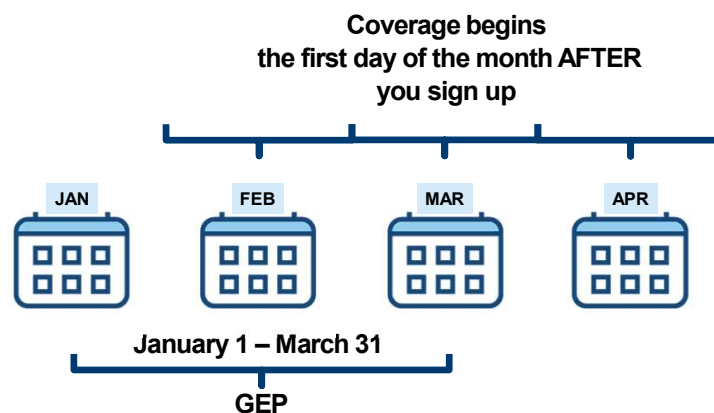




## Part A & B: Late Enrollment Into Medicare

### General Enrollment Period

- If you do not sign up for Part A and Part B when you're first eligible, you can sign up between January 1 and March 31 each year. When you sign up during this period, your coverage starts the first day of the month after you sign up.





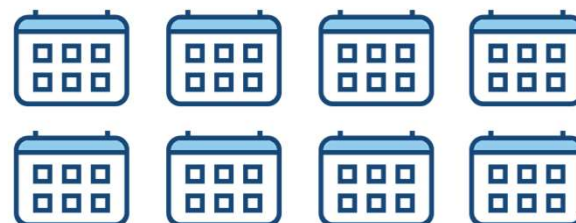
## Part A & B: Working Past Age 65? Enroll Into Medicare When You Retire

### Special Enrollment Period

- If you continue to work past your 65th birthday, you have 8 months to enroll in Parts A and B after you retire.



OR



While you have coverage  
from an employer

The 8 months after your coverage ends for Parts A & B



## Part D: Prescription Drug Coverage

### What it does:

- Covers outpatient prescription drugs

### To enroll:

- You have two ways of enrolling in Part D:
  1. Through an individual or employer/union Group Medicare Advantage (Part C) plan that includes Part D prescription drug coverage (ORS Plans include Part D).
  2. A stand-alone Prescription Drug Plan that offers prescription drug coverage only. (enrolling in an independent plan will dis-enroll you from your ORS coverage).

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Unlike with Parts A and B, you **sign up for Part D directly** with your plan. Part D is not directly offered by Medicare or Social Security.



## Part D: Prescription Drug Coverage

### Medicare Part D Income Related Monthly Adjustment Amount (IRMAA)

The Part D higher-income premium is in addition to the annual Part B premium adjustment and is determined according to formulas set by federal law.

**Based on your 2023 yearly income, your 2025 Part D monthly cost is:**

File individual tax return	File joint tax return	In 2025, you pay monthly
\$106,000 or less	\$212,000 or less	<b>No Part D IRMAA Premium</b>
\$106,001 to \$133,000	\$212,000 to \$266,000	<b>\$13.70</b>
\$133,001 to \$167,000	\$266,001 to \$334,000	<b>\$35.30</b>
\$167,001 to \$200,000	\$334,001 to \$400,000	<b>\$57.00</b>
\$200,001 to \$500,000	\$400,001 to \$750,000	<b>\$78.60</b>
above \$500,000	above \$750,000	<b>\$85.80</b>

**These amounts may change yearly.**





## Part C: Medicare Coverage Options

### Here are some ways you can get Medicare coverage:

- You get an Original Medicare Plan through the Centers for Medicare & Medicaid Services (CMS).
  - You can supplement Original Medicare by enrolling in a MediGap Plan. Premiums for these plans are not covered.  
(Note: Signing up for a MediGap plan will dis-enroll you from Medicare plans with ORS and is not advised)
  - Our City Anthem Medicare Advantage PPO plan offers the portability like a MediGap plan.
- You can sign up for a Medicare Advantage Plan, known as Medicare Part C, through private insurance companies.



## Part C: Medicare Advantage

### What it does:

- Combines your benefits from Parts A, B, and sometimes D (prescription drug coverage) in a single plan and are an alternative to Original Medicare\*
- Services under a network of providers that you must use for care

### What it costs:

- Medicare pays an amount for your coverage each month to private health plans.
- Some plans have additional monthly premiums; in many plans, you pay a copay for covered services.
- If you choose an out-of-network provider, you'll be financially responsible, except in the case of an emergency or urgent care.\*\*

\*Except care for some clinical research and hospice care (Original Medicare covers hospice care even if you're in a Medicare Advantage Plan).

\*\*Out-of-network/non-contracted providers are under no obligation to treat Plan members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services.



## Part C: Medicare Advantage

### **Types of Medicare Advantage plans:**

- Health maintenance organization (HMO) plans
- Point-of-service (HMO-POS) plans
- Preferred provider organization (PPO) plans
- Private fee-for-service (PFFS) plans
- Medical savings account (MSA) plans

## Medicare's Extra Help Program: Low-Income Subsidy

- For Medicare beneficiaries with limited income and resources
- Provides extra help with Part D premiums and outpatient drug copays
  - Degree of help depends on income and resources
- Additional facts about extra help:
  - Apply at Social Security or state Medicaid office
  - Administered by your plan, for CMS
  - You must be enrolled in a Part D plan to get help





## Get the confidence that comes with having a highly rated Medicare health plan

Kaiser Permanente market	Star rating*
California	★★★★½
Colorado	★★★★
Georgia	★★★★½
Hawaii	★★★★½
Mid-Atlantic States (MD, VA, D.C.)	★★★★½
Northwest (OR, SW Washington)	★★★★
Washington state	★★★★

All Kaiser Permanente Medicare health plans earned either 4 or 4.5 stars out of 5 stars for 2025.

\*Every year, Medicare evaluates plans based on a 5-star rating system.

# Anthem 2025 Star Highlights

## Star 2025 for COSJ (H4036)

### 4.0 Star Overall

For 2025, Anthem BC Health Insurance Company – H4036 received the following Star Ratings from Medicare.

Overall Star Rating	★★★★
Health Services Rating	★★★★
Drug Services Rating	★★★★★

Every year, Medicare plans based on a 5-star rating system.

Anthem has achieved at least 4 Star performance for its H4036 contract since 2015





## Kaiser Senior Advantage Plan Specific Additional Benefits

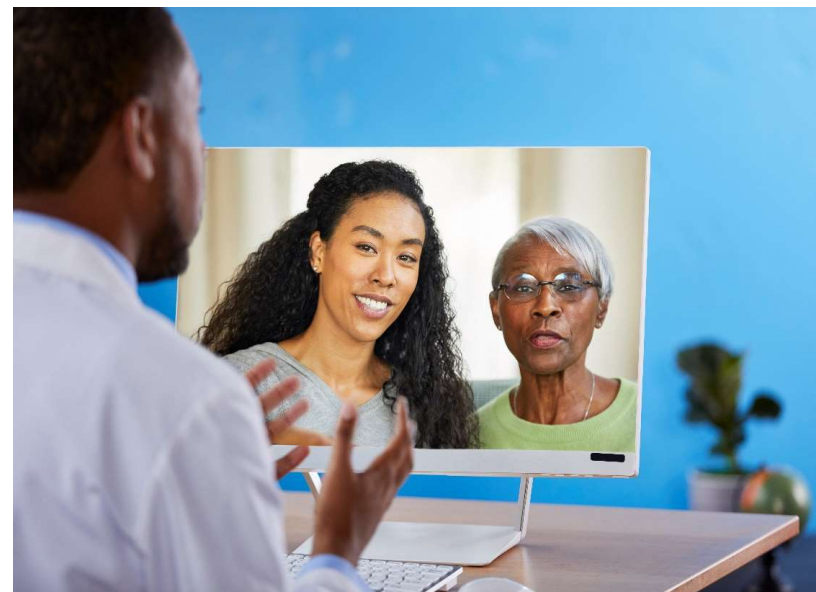




## History of Kaiser Permanente

**For more than 75 years, Kaiser Permanente has been providing high-quality, affordable health care services and improving the health of our members and the communities we serve.** It all began when an inventive young surgeon, Dr. Sidney Garfield, and a pioneering industrialist, Henry J. Kaiser, came together to build a new model for health care for tens of thousands of workers at the Kaiser Shipyards during World War II.

Whether it's advocating for equity and inclusion, protecting our environment, or tackling a pandemic head-on, the people of Kaiser Permanente are here for the tough stuff – with fresh ideas in hand. And, we tackle each challenge with one vision in mind: to help our members and communities experience more healthy years.





## Kaiser Permanente Medicare health plan

- Kaiser Permanente Medicare health plan is a Medicare Advantage plan for people with Medicare.
- Kaiser Permanente Medicare health plan provides services covered by Medicare (including Medicare Part D prescription drug coverage).
- As a Kaiser Permanente Medicare health plan member, you get your Medicare benefits through Kaiser Permanente.
- The Medicare program pays Kaiser Permanente to manage health care for people with Medicare (our Kaiser Permanente Medicare health plan members).



## City of San Jose

### Kaiser Permanente Medicare health plan—Summary of Benefits (01/01/25 – 12/31/25)

Services	City of San Jose
Annual Out-of-Pocket Maximum	<b>\$1,000 per calendar year</b>
Lifetime Maximum	<b>None</b>
Office Visits	<b>\$25 per visit</b>
Lab/X-rays	<b>No charge</b>
Outpatient Surgery	<b>\$25 per procedure</b>
Hospitalization Services	<b>\$250 per admission</b>
Emergency Services	<b>\$50 per visit</b>
Ambulance Services	<b>\$50 per trip</b>
Prescription Drugs (Generic and Brand)	<b>\$10 for up to a 100-day supply</b>
Durable Medical Equipment	<b>20% coinsurance</b>
Eyewear	<b>\$150 allowance</b>

This is a benefit summary of City of San Jose's Kaiser Permanente Medicare health plan. All benefits are subject to the definitions, limitations, and exclusions set forth in the Kaiser Permanente Medicare health plan **Evidence of Coverage**.

## Hear well, live well

Feel your best with hearing benefits built right into your Kaiser Permanente Medicare health plan.

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### Good hearing allows you to fully enjoy life

- You can improve your quality of life with the latest hearing products, which are smaller, more effective, and more comfortable than they were in the past
- Our Medicare health plan covers hearing aid checks, where your audiologist can recommend the correct hearing aid for you and confirm that it matches your prescription, at no extra charge
- As a Kaiser Permanente member, you'll get an allowance toward the purchase of a hearing aid in each ear (available once every 3 years) \$500.

### Hearing benefits





## Focus on a healthier you

Feel your best with vision benefits built right into your Kaiser Permanente Medicare health plan.

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Vision benefits are provided through Vision Essentials by Kaiser Permanente. With locations at most Kaiser Permanente medical offices, Vision Essentials can give eye exams and fill your prescription for eyeglasses or contact lenses in the same building.

### Why vision coverage?

- It's important to have your eyes checked regularly to spot minor as well as more serious eye problems
- When you see clearly, daily activities such as driving and reading, become much easier
- You'll get an allowance toward an eyewear purchase once every 2 years

## Vision benefits





## Work out your way and find your fit

One Pass® can help you find a fitness routine that's right for you, whether you work out at home or at the gym — and it's available at no extra cost.

### At the gym

Choose from a large nationwide network of gyms and fitness locations (included in the Core and Premium networks).

### At home

Work out at home with live, digital fitness classes or on-demand workouts.

### Brain training

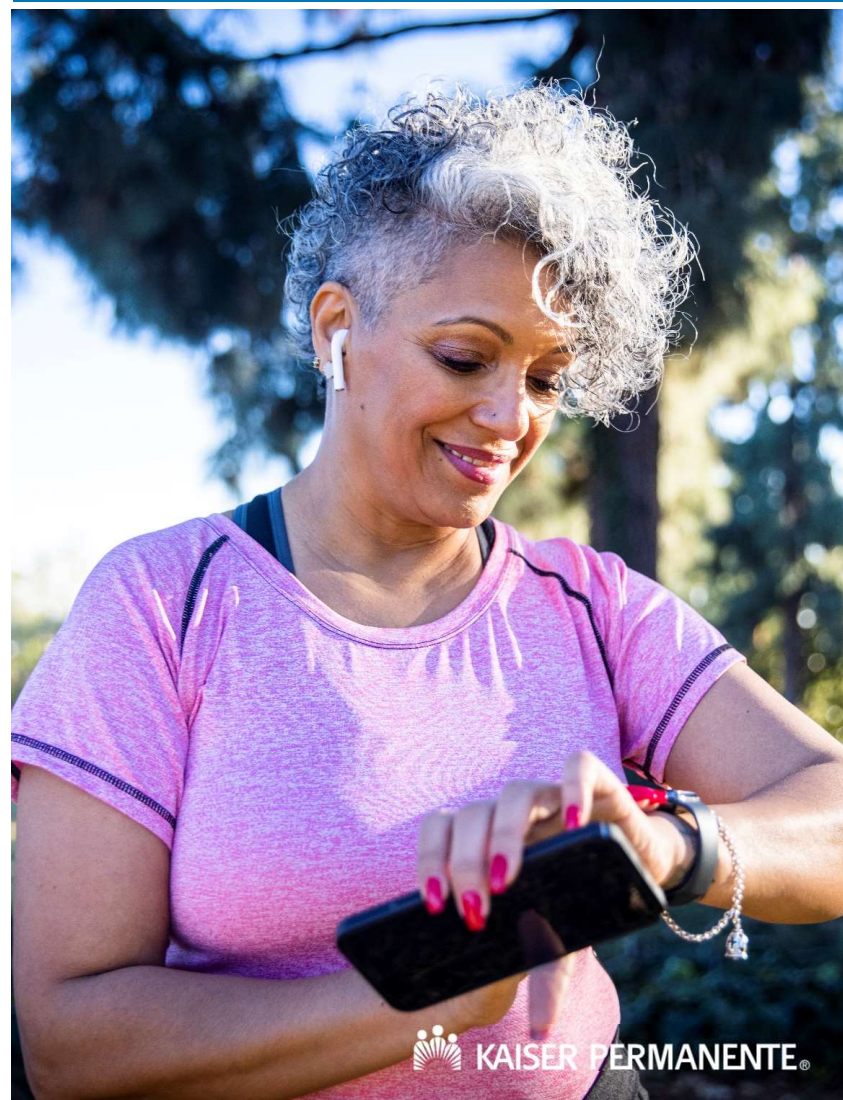
With One Pass, you can benefit from a complete brain workout program using interactive cognitive tests and brain exercises all available online.

### With new friends

Join a group class or find local clubs and social events that match your interests.

One Pass® is a registered trademark of Optum, Inc. in the U.S. and other jurisdictions and is a voluntary program. The One Pass program and amenities vary by plan, area, and location. The information provided under this program is for general informational purposes only and is not intended to be nor should be construed as medical advice. One Pass is not responsible for the services or information provided by third parties. Individuals should consult an appropriate health care professional before beginning any exercise program and/or to determine what may be right for them.

## One Pass fitness program



## Maintaining good brain health

Get a complete brain workout, including an initial cognitive test and an ongoing brain training program featuring a collection of games and activities to keep you engaged.

### Why is good brain health important?

- Maintaining good brain health is critical, especially as we age, because cognitive functioning declines over time due to various factors, including environment, drugs, stress, growth factors, learning, and aging.

### How do you take care of your brain health?

- Following a brain-healthy lifestyle is essential to maintaining cognitive health. This includes exercising, watching your nutrition, managing your stress, and stimulating your brain.

### How does the program work?

- It offers a collection of brain games to keep you interested, challenged, and engaged, similar to diversifying workouts with new activities at the gym.

26 \*Mid-Atlantic region partners with BrainHQ to provide cognitive health programs. All other regions partner with CogniFit, part of the One Pass platform.

## Brain health\* benefit



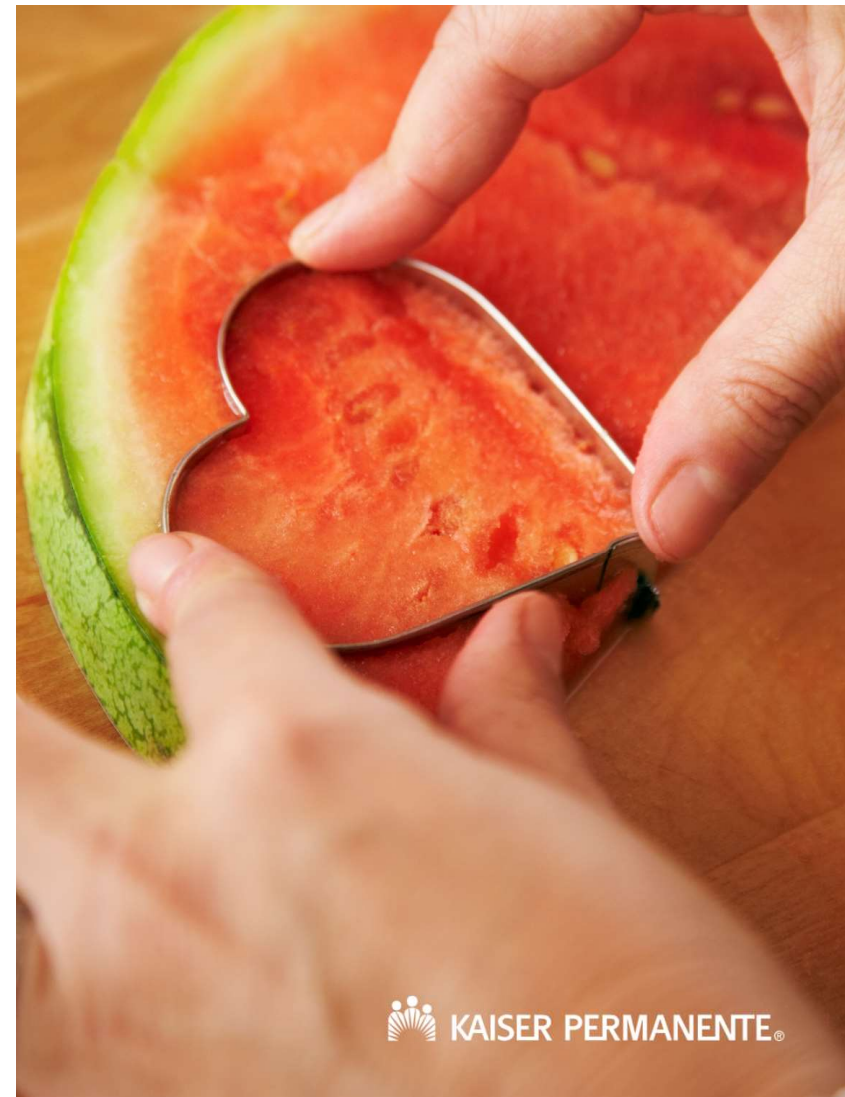
# Get fresh, nutritious meals delivered to your home at no charge

As a Kaiser Permanente Medicare health plan member, you can get fresh, healthy meals delivered to your home immediately following an inpatient stay at a plan hospital or skilled nursing facility.

## How does the meal plan work?

- 1 Upon discharge from an inpatient stay at a plan hospital or skilled nursing facility, a representative from the meal provider will call you to talk about available menu options and schedule delivery.
- 2 You can choose from over 70 entrées to support your dietary needs, including heart-healthy, diabetic-friendly, gluten-free, and more
- 3 You can get 3 meals per day for up to 4 weeks, for a total of 84 meals

## Meal delivery





## Need a ride to the doctor? Your plan covers that

You can get a ride to and from your doctor visits at no charge.\*

### You can get a ride for:

- Doctor appointments
- Medical services, such as labs or X-rays
- Picking up medications or medical equipment

### Types of transportation available:

- Rideshare, taxi, or other private transportation (can accommodate wheelchairs and walkers that collapse and fit into the trunk)
- Wheelchair van or gurney van service available for those who are unable to sit in a private vehicle for the duration of the ride

\*Your plan covers up to <24 one-way trips> (<50 miles per trip>) per calendar year.

## Transportation benefits



## Now more shopping power for your common basics

As a Kaiser Permanente Medicare health plan group member, you can get Over-the-Counter (OTC) health and wellness products delivered to your home - at no cost.

Your plan includes a **\$70** quarterly benefit limit for OTC products.

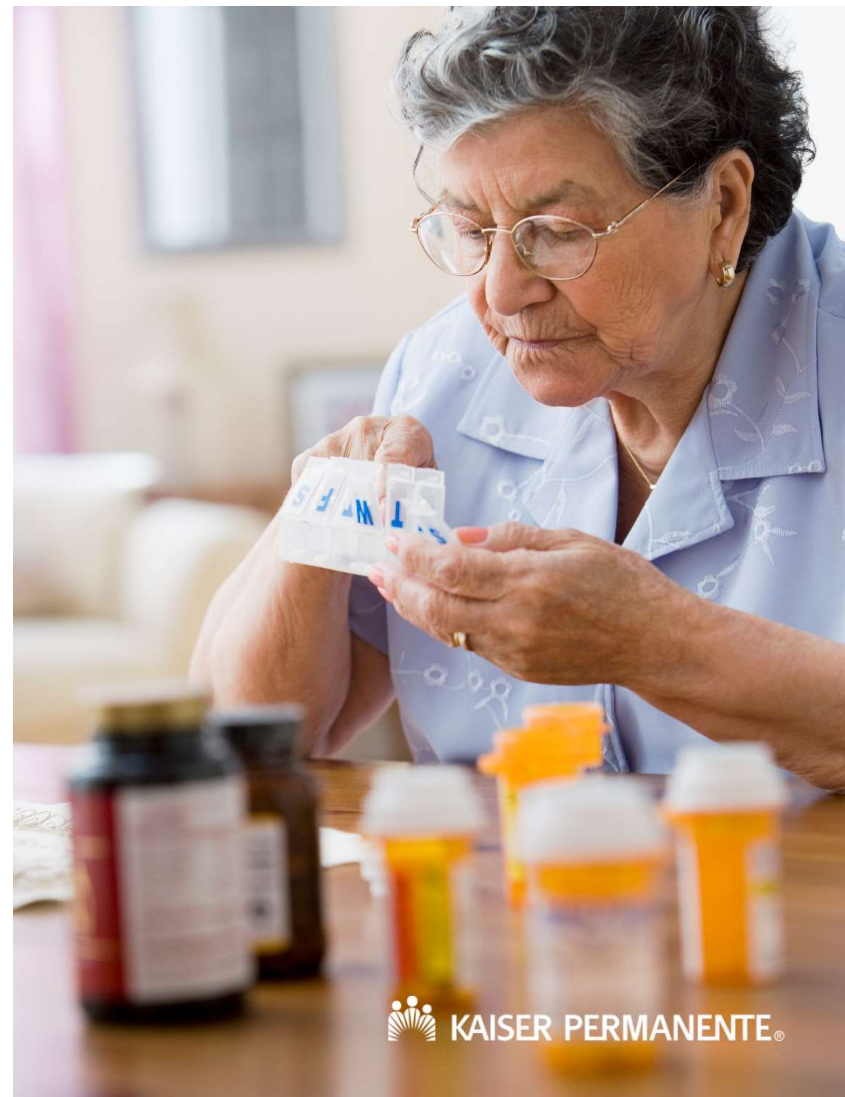
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### You can use your benefit to order:

- Vitamins and minerals
- Allergy, cough and cold remedies
- Antacids, laxatives, and stomach aids
- Pain relievers and fever reducers
- First aid kits, joint supports, and incontinence products
- Blood pressure monitors and thermometers
- Diabetic supplies such as compression stockings and sharps containers

To get a digital catalog or to place an order online visit: [kp.org/otc/ca](https://kp.org/otc/ca)

## Over-the-Counter wellness benefits



## Contact Information

If you have questions about the Office of Retirement Services Kaiser Permanente Medicare health plan, contact your HR Benefits Department.

**Kaiser Permanente Member Services:** 1-800-443-0815 (TTY 711)  
*7 days a week, 8 a.m. to 8 p.m.*

**Office of Retirement Services:** 1-800-732-6477 or 408-794-1000  
*7 days a week, 8 a.m. to 5 p.m.*

**Social Security:** 1-800-772-1213 (TTY 1-800-325-0778)  
*Monday through Friday, 8 a.m. to 7 p.m.*

**Medicare:** 1-800-MEDICARE (1-800-633-4227) (TTY 1-877-486-2048)  
*24 hours a day, 7 days a week.*







# Medicare Advantage PPO

City of San Jose



## Accessing care – A Nationwide Network



### With this PPO plan, you can:

- Have access to one of the largest Medicare PPO networks in the U.S. with over 1 million providers.\*
- Find care in the following service areas: All 50 states, Washington, D.C., Puerto Rico, Guam, U.S. Virgin Islands, American Samoa and Northern Mariana Islands.
- Continue to see your current doctor as long as they accept Medicare.
- See any care provider who accepts both Medicare and your health plan without a referral.
- Pay the same cost share whether you see care providers in or out of your plan's network.

### It's easy to find care.

Once you enroll, you'll be able to use our Find Care tool to search for doctors and other care providers in your area by:

- Visiting [anthem.com/ca/cs](https://anthem.com/ca/cs) or the Sydney<sup>SM</sup>Health app and selecting Find Care.
- Contacting Member Services by calling the number on the back of your plan membership card.
- If you're not enrolled yet, you can still use the Find Care tool to search as a guest.

\* Blue Cross Blue Shield Association internal data, January 2024.

## Anthem Medicare Preferred (PPO) medical benefits summary

Covered services	In network	Out of network
Deductible	\$0	\$0
Out-of-pocket maximum (Combined in and out of network)	\$0	\$0
Physician services, including doctor's office visits (Medicare-covered services): <ul style="list-style-type: none"> <li>• Physician visits</li> <li>• Specialist visits</li> </ul>	\$0 copay \$0 copay	\$0 copay \$0 copay
Preventive care and screenings	Covered by plan at 100%	Covered by plan at 100%
Lab/X-rays	\$0 copay	\$0 copay
Urgent care	\$0 copay	\$0 copay
Emergency outpatient care (waived if admitted within 72 hours)	\$0 copay	\$0 copay
Outpatient surgeries	\$0 copay	\$0 copay
Inpatient hospital care Hospital days are unlimited. Covered services include, but are not limited to, a semiprivate room (or a private room if medically necessary.)	\$0 copay	\$0 copay
Skilled nursing facility (days 1-100 per benefit period)	\$0 copay	\$0 copay

# Anthem Medicare Preferred (PPO) medical benefits summary

Covered services	In-network	Out-of-network
<b>Routine hearing services</b> <ul style="list-style-type: none"> <li>Routine exams</li> </ul> Maximum benefit is \$70 every calendar year	Must use a Hearing Care Solutions Provider.	
<ul style="list-style-type: none"> <li>Hearing aids</li> </ul> Maximum benefit is \$500 every calendar year	\$0 copay	*\$0 copay
*Out-of-network providers must order hearing aids through Hearing Care Solutions		
<b>Vision care</b> <ul style="list-style-type: none"> <li>Routine exams</li> </ul> Maximum benefit is \$70 every calendar year	Must use a Blue View Vision Provider.	
	\$0 copay	\$0 copay
<b>Routine Foot Care</b>		
Up to 12 covered visits per year	\$0 copay	\$0 copay
<b>Additional Acupuncture services</b>		
Limited to 20 visits per year	\$0 copay	\$0 copay
<b>Additional Chiropractic services</b>		
Limited to 20 visits per year	\$0 copay	\$0 copay
<b>Foreign Travel Emergency</b> <ul style="list-style-type: none"> <li>Urgent Care</li> <li>Emergency Outpatient Care</li> <li>Inpatient Care (60 days per lifetime)</li> </ul>	\$0 copay	\$0 copay

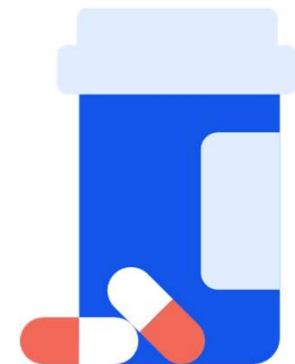
## Summary of your cost for covered drugs

Retail services	30-day supply	90-day supply
Select generics	\$0 copay	\$0 copay
Generics	\$10 copay	\$30 copay
Preferred brands	\$25 copay	\$75 copay
Non-Preferred drugs & Non-Formulary	\$40 copay	\$120 copay
Specialty drugs	10% coinsurance up to \$100 maximum copay per prescription.	
Home delivery	90-day supply	
Select generics	\$0 copay	
Generics	\$20 copay	
Preferred brands	\$50 copay	
Non-Preferred drugs & Non-Formulary	\$80 copay	
Specialty drugs (limited to 30-day supply)	10% coinsurance up to \$300 maximum copay per prescription.	
Maximum Out-of-Pocket Limit	\$2,000	

## Benefits for select generic drugs

Here are examples of some of the categories and specific drugs covered under your select generics benefit.\*

Cardiovascular	Cholesterol	Diabetes	Osteoporosis
<ul style="list-style-type: none"><li>• Amlodipine/benazepril capsule</li><li>• Atenolol tablet</li><li>• Benazepril HCL tablet</li><li>• Bisoprolol-hydrochlorothiazide tablet</li><li>• Carvedilol tablet</li><li>• Chlorthalidone tablet</li><li>• Enalapril maleate tablet</li><li>• Furosemide tablet</li><li>• Hydrochlorothiazide capsule/tablet</li><li>• Lisinopril tablet</li><li>• Losartan potassium tablet</li><li>• Metoprolol tartrate tablet</li><li>• Olmesartan tablet</li><li>• Ramipril tablet</li></ul>	<ul style="list-style-type: none"><li>• Atorvastatin tablet</li><li>• Lovastatin tablet</li><li>• Pravastatin sodium tablet</li><li>• Simvastatin tablet</li></ul>	<ul style="list-style-type: none"><li>• Glimepiride tablet</li><li>• Pioglitazone tablet</li><li>• Metformin tablet</li></ul>	<ul style="list-style-type: none"><li>• Alendronate sodium tablet</li></ul>



\* Please see your drug list for a full list of select generics. Not all generic drugs within a drug category are included in your select generics benefit.



## Have your prescriptions delivered with CarelonRx Pharmacy

Anthem has partnered with CarelonRx to simplify your prescription drug coverage and delivery while keeping your out-of-pocket costs down.

With home delivery, you can:

- Get 90-day supplies of maintenance medications delivered to your home.
- Set up automatic refills, reminders, and track your orders.
- Speak with a pharmacist 24/7.

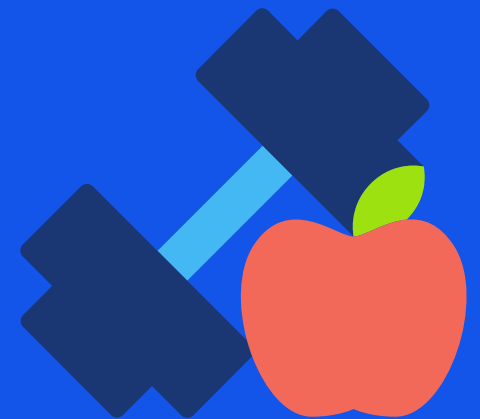
To sign up after enrollment, call CarelonRx Pharmacy Contact Center at 1-833-396-0309.

You can also log in to your account on the Sydney Health app and switch your medications to CarelonRx Pharmacy.

CarelonRx, Inc. is an independent company providing pharmacy benefit management services on behalf of your health plan.



Anthem's online tools,  
additional benefits,  
and well-being programs



# Benefit programs



## Sydney Health

- Sydney Health App makes it easy to:
  - Find healthcare providers on the go.
  - Access plan programs, resources, benefits, and ID cards.
  - Review prescription information and costs.
  - Check the status of claims.
  - See a doctor from home with Virtual Visits.
- 



## LiveHealth Online

- Have a live video visit with a board-certified doctor from the comfort of home for common conditions like colds, flu, sinus infections, and rashes.
- Have prescriptions sent to your pharmacy, if needed.<sup>1</sup>
- Set up a video counseling session with a licensed therapist or psychologist to find help when you feel depressed, anxious, or stressed.<sup>2</sup>

<sup>1</sup> Prescription availability is defined by physician judgment.

<sup>2</sup> Online counseling is not appropriate for all kinds of problems. If you are in crisis or have suicidal thoughts, it's important that you seek help immediately. Please call 988 (National Suicide Prevention Lifeline) or 911 and ask for help. LiveHealth Online is offered through an arrangement with Amwell, a separate company, providing telehealth services on behalf of your health plan.

# Benefit programs



## 24/7 NurseLine

Connect with a registered nurse day or night, who can help you:\*

- Assess symptoms.
- Understand a condition and course of treatment.
- Address questions about prescriptions or over-the-counter medications.
- Recommend the right setting for the care you need.

\* The information contained in this program is for general guidance only. Your doctor will be specific regarding recommendations for your individual circumstances. Recommended treatments may not be covered under your health plan.

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## Medicare Community Resource Support (MCRS)

- Connect with social workers to help bridge the gap between medical needs or benefits and available community resources.\*
- Available support and resources may include:
  - ✓ Food pantries
  - ✓ Home maintenance programs
  - ✓ Copay assistance programs
  - ✓ Social activities
  - ✓ Help around the home
  - ✓ Transportation assistance

# Benefit programs



## My Health Record

My Health Record offers a holistic view of your health history. You can:

- Get an overall view of your medical records from your different care providers.
- Download and share your health history and electronic medical records (EMR) with your care providers, caregivers, and family members.
- View your health history through charts and graphs that track your records over time.



## Special Offers

- Take advantage of savings and discounts at SpecialOffers by logging in to your member website and clicking on the link for Discounts found under the Care menu.
- Retailers with SpecialOffers for Anthem's Medicare Advantage members include:\*



1800 contacts®



**GLASSES**.com

\* Vendors and offers are subject to change without prior notice. Anthem Blue Cross does not endorse and is not responsible for the products, services, or information offered by the vendors or providers. We negotiated the arrangements and discounts with each independent vendor or provider in order to assist our members. The products and services described above are neither offered nor guaranteed under our contract with the Medicare program. In addition, they are not subject to the Medicare appeals process. Any disputes regarding these products and services may be subject to the grievance process.



# The House Call program

The House Call program helps you stay on top of your healthcare between checkups — at no additional cost — from the comfort and convenience of home.\*

A licensed clinician will perform a comprehensive health evaluation in-person or virtually to:

- Chat about any health questions and concerns.
- Provide basic health screenings.
- Take notes on your discussion and record evaluation results.
- Share the evaluation results with you and your personal doctors.
- Receive a \$50 gift card when you complete a House Call visit.



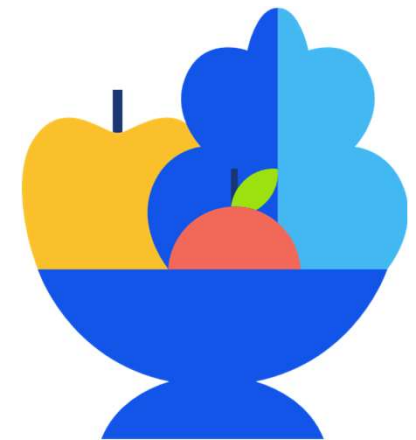
\* The House Call program is administered by an independent vendor. It is only available to those who qualify.

# Healthy Meals

Proper nutrition is key to maintaining your health if you are chronically ill and can also improve your recovery after a hospital stay.

Our Healthy Meals benefit delivers nutritionally balanced meals to your home — at no added cost to you. This benefit is available if you have:<sup>1</sup>

- Recently been discharged from the hospital or a skilled nursing facility.
- A chronic condition such as chronic kidney diseases, chronic lung disorders, chronic heart failure, cardiovascular disease, or diabetes and have a high risk for hospitalization.
- Provides up to 14 meals per qualifying event, allows up to four (4) events each year (56 meals in total).



1. The benefits mentioned are Special Supplemental Benefits for the Chronically Ill (SSBCI). You may qualify for SSBCI if you have a high risk for hospitalization and require intensive care coordination to manage chronic conditions such as Chronic Kidney Diseases, Chronic Lung Disorders, Cardiovascular Disorders, Chronic Heart Failure, or Diabetes. For a full list of chronic conditions or to learn more about other eligibility requirements needed to qualify for SSBCI benefits, please refer to Chapter 4 in the plan's Evidence of Coverage.

## Fitness benefits

SilverSneakers is a no-added-cost benefit to help you step up your fitness.

The program includes:

- Thousands of participating fitness center locations nationwide.
- The ability to enroll at multiple locations across the U.S.
- Group activities and classes offered outside the gym.
- Daily classes and workshops focused on exercise and led by trained instructors through SilverSneakers LIVE™.
- The SilverSneakers On-Demand digital library with hundreds of workouts you can do anytime.
- The SilverSneakers GO app so you can find locations near you, participate in live classes from your phone, and tailor workouts to your fitness level.

Get started by visiting [SilverSneakers.com/StartHere](https://www.silversneakers.com/starthere)  
or call 1-855-741-4985, Monday to Friday, 8 a.m. to 8 p.m. ET.



## Excellent service is our priority

Our First Impressions Welcome Team will help you make a smooth transition into your plan with:

- Retiree-dedicated expertise.
- Individual support, tools, and resources.
- Answers to your questions about prescriptions, coverage, and choosing care providers.
- Visit us at [www.anthem.com/ca/csj](http://www.anthem.com/ca/csj)

Call us at 833-848-8729, TTY: 711, Monday through Friday,  
8 a.m. to 9 p.m. Eastern time, except holidays.



# Office of Retirement Services Medicare Transition Process & Resources



*The Office of  
Retirement Services*



## Medicare Transition Process

- A Medicare Transition packet will be sent approximately three (3) months prior to your 65<sup>th</sup> Birthday month.
- This applies to members and spouses
- Those who are enrolling as part of a Special Enrollment Period (SEP) will need to contact our office for forms. A SEP applies to those who have worked past age 65 and have had active health insurance through their employer.
- You must have 15 years of service to qualify for enrollment in a CSJ Medical Plan\*.
- You have until the end of your IEP (7 months total) to complete the enrollment process and return packets to ORS. If you do not complete the process during your IEP, you and any of your dependents will be dropped from health coverage until which time you are able to secure your Medicare and submit the packet to our office.

\* VEBA members can qualify regardless of years of service but pay full premium cost

# Medicare Transition Packet

- The packet will include:
  - Medicare Cover Letter
  - Medicare Info Sheet with instructions to enroll in Medicare Part A\* and B
    - \***Retirees** hired prior to March 7, 1986 who do not have enough credits (40 quarters) to qualify for Premium Free Part A coverage are exempted **if** you do not qualify under any other way. You may be able to qualify under a spouse, former spouse, or a deceased spouse.
  - Medicare Transition Checklist (specific to provider)
  - INS650 ORS Medicare Transition form
  - Vendor (Kaiser or Anthem) Enrollment forms
- San Jose Municipal Code with Medicare Mandate is available upon request

## Enrollment in Medicare

- If you are currently collecting Social Security Benefits, you will automatically be enrolled in Medicare. A card will be mailed to you approximately 3-4 months before your 65<sup>th</sup> birthday month.
- Otherwise, you must enroll in Medicare by:
  - Contacting Social Security at 800-772-1213
  - Enrolling online at [ssa.gov/medicare/sign-up](https://ssa.gov/medicare/sign-up)
- **Remember, ORS provided health coverage IS NOT Employer Provided Health Coverage!**

## Medicare Part B

- ORS **does not** pay for Medicare Part B premiums. It is your responsibility to pay your premiums.
- If you do not pay your premiums, you will lose your health coverage (and all of your dependents will lose it too)!
- Medicare will bill you quarterly or monthly for your Medicare premiums. This applies to members who are not eligible for Social Security benefits, or those who are not yet collecting SS benefits.
- If you are receiving Social Security benefits, Social Security will deduct your Medicare premiums directly from your Social Security benefit check.
- If your monthly benefit check is not enough to cover your Medicare premiums, Social Security will bill you for any additional amount owed once per year (typically in November).

## Medicare Part C

- Medicare plans offered by ORS are Part C or Medicare Advantage plans.
- For our City plans, you are required to enroll in Part A\* and Part B through Social Security. Once you submit plan forms to us, we will send them to the plan provider (Kaiser or Anthem) and they will enroll you in Part D.
- If you are paying more than the base amount of \$185 for your Part B premiums, you will also have a cost (IRMAA) for your Part D.
- The City does not pay for your Medicare premiums – this is your responsibility (and your cost). If you do not pay your Medicare premiums, you will lose your health insurance! **Please Pay Your Premiums!**

- **$A+B+D=C$**



## Final Steps

Submit your paperwork to ORS

- Once you have received your Medicare card with effective dates for Medicare Part A and Part B, you will need to submit the following items to our office:
  - INS650 Medicare Transition Form. This form is filled out and signed by the Retiree/Member (regardless of who is transitioning to Medicare).
  - Vendor/Plan insurance form (Kaiser Senior Advantage Group form or Anthem Medicare Advantage PPO Group form). This form is filled out and signed by the person enrolling in the Medicare Advantage plan.
  - A copy of your Medicare card or Medicare Award letter reflecting Medicare number and effective dates of coverages.
  - Please note that anyone who is a Part B only member (specific circumstances) must provide both Medicare card and Medicare Award letter (stating that they do not qualify for Premium Free Part A).

## How to submit your paperwork:

- ❖ They can be mailed to:

Office of Retirement Services  
1737 North First St., Ste 600  
San Jose, CA 95112

- ❖ They can be submitted via your secure Member Direct portal via message attachment
- ❖ They can be faxed to 408-392-6732
- ❖ You can hand deliver them to our office at the address above. Please note, our office is open Monday-Friday from 8:00am-5:00pm

## Medicare Transition Resources

- To enroll in Medicare, contact Social Security at **800-772-1213** or **[ssa.gov/medicare/sign-up](https://ssa.gov/medicare/sign-up)**
- Payments, billing questions, and all Medicare Part A, Part B and Part D inquiries should be directed to Medicare at 800-633-4227
- Official Medicare Website: [www.medicare.gov](https://www.medicare.gov)
- Office of Retirement Services: 408-794-1000
- Office of Retirement Services Health Desk: 408-794-1018 or 408-793-6967
- Contact Donna via email at: [donna.hepp@sanjoseca.gov](mailto:donna.hepp@sanjoseca.gov)
- ORS Address: 1737 N. First St., Ste 600 San Jose, CA 95112



**Questions? Type them in the chat...**

