Your TRAIL Medicare Advantage Prescription Drug (MAPD) Program Decision Guide

Total Retiree Advantage Illinois

Your Trail to Better Health

- October 15 - November 15, 2019: Open Enrollment Period

If enrolling for the first time or making changes, you must complete your TRAIL Enrollment by November 15. Please note: No enrollments can be made prior to October 15.

- January 1 – December 31, 2020: 2020 coverage period

- TRAIL MAPD seminars begin October 15th. See back cover for the schedule of seminar dates, times and locations.

Teachers’ Retirement Insurance Program
Dear TRIP Member:

This is your State of Illinois Total Retiree Advantage Illinois (TRAIL) Medicare Advantage Prescription Drug (MAPD) Open Enrollment Decision Guide. This Decision Guide includes the 2020 rates for the TRAIL MAPD Program, a map of plan availability by Illinois county, how to enroll through the MyBenefits website at MyBenefits.illinois.gov, and a schedule of TRAIL MAPD seminars to be held in Illinois.

You Have Important Healthcare Coverage Decisions to Make

As a TRIP member who is eligible for Medicare, the Teachers’ Retirement Insurance Program (TRIP) offers you a retiree healthcare program called Total Retiree Advantage Illinois (TRAIL). Since you are newly-eligible for the TRAIL Program, you must enroll this fall to retain medical and prescription drug coverage after December 31, 2019.

The TRAIL MAPD Program provides you and your enrolled dependents comprehensive medical and prescription drug coverage through TRAIL plans. These types of Medicare Advantage Prescription Drug plans, commonly known as “MAPD” plans, are Medicare-approved plans that combine the different parts of Medicare into one plan. Since these plans are a type of Medicare, you must continue to pay your federal Medicare premiums in order to remain enrolled in TRAIL MAPD.

If you are NEWLY ELIGIBLE for the TRAIL MAPD Program this fall, you:

- MUST elect one of the TRAIL MAPD health plan options by November 15, 2019 via MyBenefits.illinois.gov, or by calling the MyBenefits Service Center (toll-free) 844-251-1777. You must do this by November 15, 2019 to have medical and prescription drug coverage through TRIP. Therefore, if you do not complete your enrollment into a TRAIL MAPD plan by November 15, you will no longer have medical and prescription coverage through the State of Illinois.
- Will have your medical and prescription drug claims processed by the TRAIL MAPD plan instead of Original Medicare and your current medical plan.
- Will only have one ID card to show at your doctor visits and when picking up your prescriptions.
- May cancel your TRIP coverage. Canceling will terminate your medical and prescription drug coverage through TRIP. Re-enrollment is allowed for TRIP only during the annual TRAIL Open Enrollment Period, or other qualifying enrollment opportunities.
Welcome to the TRAIL MAPD Enrollment Period

TRAIL MAPD Open Enrollment Period: October 15 - November 15, 2019

The Teachers’ Retirement Insurance Program (TRIP) offers members a healthcare program called Total Retiree Advantage Illinois (TRAIL). This program provides eligible members and their covered dependents comprehensive medical and prescription drug coverage through TRAIL Medicare Advantage Prescription Drug (commonly referred to as “MAPD”) plans.

As an individual who is enrolled in Medicare Parts A and B, your TRAIL MAPD Open Enrollment Period will be held in the fall of each year, rather than during May as in the past. For 2020, the plan year will begin January 1 and will go through December 31, 2020.

All Illinois counties have an HMO and PPO option. Members residing outside Illinois may elect the PPO option only.

The TRAIL MAPD Enrollment Period features a web-based online enrollment platform entitled MyBenefits at MyBenefits.illinois.gov.

This site streamlines your benefit options into a one-stop shop for your insurance needs. This includes learning more about your current insurance benefits, making enrollment decisions, changing your current coverage and finding contact information for all your plan administrators. How-to-enroll videos are on the site to walk you through the enrollment process.

The online system is comprehensive with the goal of providing information 24/7 and allowing you to make changes in real-time. The site will allow you to make benefit elections during open enrollment; it will also allow you to add/or drop dependents mid-year due to a qualifying change in status, or correct personal information. The website will include all your benefit information as well as educational information and interactive tools.

MyBenefits.illinois.gov is accessible via your computer, smartphone or tablet. You may also contact customer service representative for assistance Monday – Friday 8:00 AM – 6:00 PM CT (toll-free) 844-251-1777 or 844-251-1778 TDD/TTY.

To access the enrollment platform, you need to register on the website using information pertinent to you for self-authentication. Once registered, you will be provided your CMS-issued Employee ID Number (EIN), which you will need whenever you login to this site. If you lose your EIN, you will be able to retrieve it through the self-authentication process.

Members newly eligible for the TRAIL MAPD Program will be required to enroll during the TRAIL MAPD Open Enrollment Period which runs October 15 – November 15, 2019.
What is a Group Medicare Advantage Plan?

A Group Medicare Advantage plan is designed just for TRIP members. Only eligible members can enroll in this plan. You can’t get it anywhere else.

Medicare Advantage plans are a part of Medicare that combine all the benefits of Medicare Part A (hospital) and Medicare Part B (doctor and outpatient) into one convenient plan. Plus, your TRIP-sponsored TRAIL MAPD plan includes Medicare Part D prescription drug coverage as well as programs that go beyond Original Medicare, for example:

**Humana Employer Medicare HMO offers:**
- SilverSneakers®
- Humana Well Dine
- Telemedicine (MD Live)

**Aetna Medicare Plan (HMO) offers:**
- Preferred Pharmacy Discounts
- In-Home Health Risk Assessments
- Teladoc

**Health Alliance MAPD HMO offers:**
- Care Coordination Services
- Fitness Center Benefit
- Preferred Pharmacy Program

**UnitedHealthcare PPO offers:**
- HouseCalls
- Renew by UnitedHealthcare
- Virtual Doctor Visits

You must continue paying your Medicare Part B premium to keep your coverage under this TRIP TRAIL MAPD plan.
• You must keep Medicare Parts A and B and continue to pay the applicable Medicare premiums.

• If the member's household Medicare information is not on file with MyBenefits, or the State's Medicare COB Unit by the end of the TRAIL MAPD Enrollment Period, the TRAIL MAPD and State medical insurance will be waived for the person(s) with the missing information and waived for the entire household if the member is missing information.

• You can only be in one Medicare Advantage or Medicare Part D (prescription drug) plan at a time. Enrollment in the TRAIL MAPD plan provides you with Medicare Advantage coverage as well as Medicare Part D coverage. Therefore, enrollment in a different Medicare Advantage or Medicare Part D plan will automatically cause your TRAIL MAPD coverage to end, which will include termination of your TRIP medical and prescription drug coverage.

• You can terminate the TRAIL MAPD coverage at anytime however, once you cancel your TRIP TRAIL MAPD coverage, re-enrollment is allowed for TRIP only during the annual TRAIL Open Enrollment Period, or other qualifying enrollment opportunities.

• If your residential or mailing address changes, you must notify your retirement system in writing as quickly as possible.

• If you are currently enrolled in one of the TRAIL MAPD HMO plans (Aetna Medicare Plan (HMO), Health Alliance MAPD HMO, and Humana Employer Medicare HMO) and move outside of the plan’s service area to a different county in Illinois or to a different state, you must elect a new Medicare Advantage plan available in your new area.

Do You Have Questions?

Visit our website at MyBenefits.illinois.gov on your computer, smartphone or tablet. You also have the option to call a customer service representative for further assistance or to enroll over the phone, Monday – Friday 8:00 AM– 6:00 PM CT (toll-free) 844-251-1777 or 844-251-1778 TDD/TTY.
How to Enroll or Change Your Coverage Election:

- Review this Guide, along with the information you receive in the mail from the TRAIL Medicare Advantage Prescription Drug (MAPD) plan administrators for which you are eligible (based upon where you live – see the map on page 10). Materials mailed to you from the TRIP-sponsored TRAIL MAPD plan administrators will feature the TRAIL logo (see logo to the right).

- Complete the online TRAIL MAPD enrollment process during the Open Enrollment period at MyBenefits.illinois.gov via your computer, smartphone or tablet. You also have the option to call a customer service representative for assistance Monday – Friday 8:00 AM – 6:00 PM CT (toll-free) 844-251-1777 or 844-251-1778 TDD/TTY. Please note: No elections may be made prior to October 15.
  - You and your covered dependents will all be enrolled in the same health plan.

- If you choose to enroll online, the TRAIL MAPD online enrollment process must be completed in its entirety. As you enroll online, follow the prompts until the end so you will know you have completed your coverage-election process. If you do not complete the process, your elections will not be saved. Please note, although you may use a post office box address to receive your mail, federal Medicare requires a residential street address. If your preprinted mailing address on this mailing is different than your residential address, such as a Post Office Box, be sure to contact your retirement system with any address changes as quickly as possible.

Who is Eligible

To be eligible for coverage under a Total Retiree Advantage Illinois Medicare Advantage Prescription Drug (MAPD) plan, you and your eligible dependents must all:

- Live in the United States or the U.S. Territories, AND
- Be enrolled in Medicare Parts A and B, on or before September 30, due to age or disability.

If you are new to the TRAIL MAPD plans this year, you must select one of the TRAIL MAPD plans by completing the online enrollment process at MyBenefits.illinois.gov or by calling (toll-free) 844-251-1777 or 844-251-1778 TDD/TTY. You will remain enrolled in your current TRIP health plan through December 31, 2019. The TRAIL MAPD plan you choose will start January 1, 2020.

If you are currently enrolled in one of the TRAIL MAPD plans, your enrollment will continue – you do not need to do anything unless you want to make a change. If you want to make a change to your current TRAIL MAPD health plan election or dependent coverage, you must complete the online process at MyBenefits.illinois.gov, or by calling (toll-free) 844-251-1777 or 844-251-1778 TDD/TTY.
During the TRAIL MAPD
Open Enrollment Period You:

- May elect to cancel your coverage. **Note:** If you cancel your TRIP TRAIL MAPD enrollment, medical and prescription drug coverage for you and your enrolled dependents will end December 31, 2019. Re-enrollment is allowed for TRIP only during the annual TRAIL Open Enrollment Period, or other qualifying enrollment opportunities.
- May elect to re-enroll in medical/prescription drug coverage if you previously canceled coverage.
- May add or drop dependent coverage. **IMPORTANT:** You must contact the MyBenefits Service Center (toll-free) 844-251-1777 if you want to add a dependent who is not enrolled in Medicare Parts A and B. If you add a non-Medicare dependent, you will be ineligible to enroll in a TRAIL MAPD plan.
- Must enroll in a TRAIL MAPD plan if you are newly-eligible for TRAIL MAPD.
- May change to a new TRAIL MAPD plan if you are currently enrolled in TRAIL MAPD.

Members newly-eligible for the TRAIL MAPD Program will be required to enroll during the TRAIL MAPD Open Enrollment Period which runs October 15 – November 15, 2019.
Newly-Eligible TRAIL MAPD Members FAQs

What do I need to know about TRAIL MAPD?
TRAIL MAPD is a retiree healthcare program sponsored by the Teachers’ Retirement Insurance Program (TRIP). The plans offered through the TRAIL Program are Medicare Advantage plans which include Prescription Drug coverage. These plans are typically called “MAPD” plans. **As a TRIP member who is newly-eligible for enrollment in a TRAIL MAPD plan, you must make a choice during this TRAIL MAPD Open Enrollment Period to enroll in one of the MAPD plans offered.** If you do not want TRAIL MAPD coverage, you can cancel which will terminate your medical and prescription drug coverage. **Opting-out does not allow you to stay in your current TRIP health plan.**

Why am I getting information to change now? I normally receive information to change health plans in May.
The TRAIL MAPD plans follow a calendar year. Therefore, you will no longer receive the ‘Benefit Choice’ mailings in the spring since your health plan options are now different than those being offered to non-Medicare members. This means you will be making health plan choices in the fall of each year.

What Does the TRAIL MAPD Plan Cover?
TRAIL MAPD plans are offered by private companies approved by Medicare. Medicare pays a fixed amount for your care each month to these companies. When you enroll in a Medicare Advantage Prescription Drug (MAPD) plan, you are no longer in Original Medicare, but still have the same covered services and the same rights and protections as people with Original Medicare.

The TRAIL MAPD plans provide all of your Part A (hospital) and Part B (doctor and outpatient) benefits, including emergency and urgent care, and Medicare Part D (prescription drug) coverage.

Is Medicare Advantage a Medicare Supplement?
No. Medicare supplement insurance fills gaps in Original Medicare coverage by helping to pay the portion of healthcare expenses that Original Medicare does not pay, such as deductibles and coinsurances. Medicare supplement insurance can be either a Medigap plan (labeled A through N plans) or retiree insurance from a former employer. Typically, retiree insurance from a former employer pays your health insurance claims after Original Medicare pays its portion. As a Medicare retiree enrolled in TRIP, the health plan you had prior to being enrolled in the TRAIL MAPD Program paid your claims ‘second’ after Medicare. That means any medical claims you incurred were sent first to Original Medicare for payment and the remaining balance was sent to your TRIP insurance plan.

If I enroll in the TRIP TRAIL MAPD plan, will I still have Medicare?
Yes, but you can only use your red, white and blue Medicare card for hospice care. All other claims for your healthcare services (including prescription drugs) should be sent to your MAPD plan administrator for processing and benefit determinations.
Do I need to continue to pay my Medicare premiums?
Yes! In order to maintain your TRAIL MAPD plan health coverage, you must continue to pay your Medicare premiums.

Can I stay enrolled in my current health plan?
No. Medicare-eligible TRIP members who want to continue medical and prescription drug coverage, are required to enroll in one of the TRAIL MAPD plans if they and their covered dependents are all enrolled in Medicare Parts A and B. Remaining in your current health plan is not an option. If you do not complete the online enrollment or call the MyBenefits Service Center to enroll by the November 15th deadline, we will assume you do not want the TRAIL MAPD coverage and your medical and prescription drug coverage will terminate effective January 1, 2020. If your TRIP medical and prescription coverage is terminated, you will have Original Medicare only for your medical coverage and will need to enroll in a Part D prescription plan for prescription drug coverage.

I have already paid my health plan deductibles for this year. Do I have to pay them again?
Yes. The MAPD plans are not permitted to take into account the deductible you might have already paid in your other plan. Any deductible paid to your current medical plan will not count toward your MAPD plan’s annual deductible. The PPO plan’s annual medical deductible will begin January 1, 2020.

Will this TRAIL MAPD plan cover everything that my current TRIP health plan covers?
Not necessarily. Your current health plan may cover services that Original Medicare does not cover. Medicare Advantage plans are required to cover all services covered by Original Medicare. In order to be covered, the service must be considered medically necessary and in certain cases, meet Medicare guidelines for approval. Some services have limits to how often they can be obtained.

What is the difference between TRIP and TRAIL?
TRIP stands for the Teachers’ Retirement Insurance Program (TRIP). TRIP offers group insurance to eligible members under the Teachers’ Retirement System (TRS) who retired from an eligible K-12 Illinois school district. Group insurance benefits under TRIP include medical and prescription drug coverage.

TRAIL stands for Total Retiree Advantage Illinois (TRAIL). TRAIL offers group insurance in the form of Medicare Advantage Prescription Drug (MAPD) plans to members already enrolled in TRIP. The TRAIL MAPD program is a part of TRIP, but is only offered to Medicare-eligible plan participants eligible for TRIP.
The UnitedHealthcare Medicare Advantage PPO (UHC PPO) is available in all Illinois counties and throughout the U.S.

UnitedHealthcare PPO, Aetna Medicare Plan (HMO), Health Alliance MAPD HMO and the Humana Employer Medicare HMO availability is indicated by the key below:

- UHC PPO and Health Alliance MAPD HMO
- UHC PPO and Aetna Medicare Plan (HMO)
- UHC PPO and Humana Employer Medicare HMO
- UHC PPO and Aetna Medicare Plan (HMO) and Humana Employer Medicare HMO
Your Health Plan Options: HMO vs. PPO

**Aetna Medicare Plan (HMO), Health Alliance MAPD HMO and Humana Employer Medicare HMO**

If you enroll in one of the Medicare Advantage Prescription Drug (MAPD) HMO plans available to you (based on the county in which you live), you must choose a primary care physician (PCP) from the MAPD plan’s network of providers. When you enroll online or over the phone, be sure to have your PCP’s identification number. That number can be obtained from the plan administrators’ provider directory, or by calling the plan administrators (see page 17). Your PCP will coordinate your care and refer you to specialists when needed. Out-of-network care is only available for emergencies; therefore, be sure to see a network provider when seeking services through an HMO plan.

All of the MAPD HMO plans offer a network of doctors, specialists and hospitals to choose from, plus a variety of programs and services to help improve your health and well-being.

**UnitedHealthcare Medicare Advantage PPO**

The UnitedHealthcare (UHC) Medicare Advantage Preferred Provider Organization (PPO) plan is a “passive” PPO plan. If you enroll in the UHC Medicare Advantage PPO plan, you may see any provider as long as they participate in Medicare and accept the plan. With the UHC PPO, you will not have the restrictions of in- and out-of-network coverage. So even though UHC has a network of providers, if you receive care from a provider not in the UHC network (i.e., an out-of-network provider), the PPO plan pays those providers the same amount Medicare would have paid; you pay the same out-of-pocket percentage as if you had received in-network care.

The majority of providers in Illinois and across the nation participate in Medicare and will accept the TRIP-sponsored UHC group plan. If the provider is not willing to bill UHC, call UHC at the number on page 17 and ask them to contact your provider to explain the plan. If your provider still refuses to bill UHC for your visit, you must pay the bill and submit a request for reimbursement to UHC for payment. UHC will then reimburse you the Medicare allowable amount, minus any deductible or coinsurance for which you are responsible.

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**Things to consider when choosing a Medicare Advantage Prescription Drug (MAPD) Plan**

<table>
<thead>
<tr>
<th>HMO Plan</th>
<th>PPO Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Your doctor is in the HMO network</td>
<td>You prefer the flexibility to see any Medicare provider and not stay in a network</td>
</tr>
<tr>
<td>You prefer copayments for medical services rather than deductibles and coinsurance</td>
<td>You travel a lot outside Illinois or you are a “snowbird”</td>
</tr>
<tr>
<td>You take prescription drugs (lower copays than the PPO plan)</td>
<td>You have medical conditions in which you need to have the ability to see any Medicare provider without the constraints of a network</td>
</tr>
<tr>
<td>You prefer a plan where network providers agree to help you obtain plan benefits</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Plan Costs</th>
<th>HMO Plan</th>
<th>PPO Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Medical Deductible</td>
<td>$0</td>
<td>$250</td>
</tr>
<tr>
<td>Primary Care Physician Office Visit</td>
<td>$20</td>
<td>20% coinsurance</td>
</tr>
<tr>
<td>Specialist Office Visit</td>
<td>$20</td>
<td>20% coinsurance</td>
</tr>
<tr>
<td>Diagnostic Tests</td>
<td>$0</td>
<td>20% coinsurance</td>
</tr>
<tr>
<td>Hospital Admission</td>
<td>$250</td>
<td>20% coinsurance</td>
</tr>
<tr>
<td>Outpatient Surgery</td>
<td>$150</td>
<td>20% coinsurance</td>
</tr>
<tr>
<td>Annual Medical Out-of-Pocket Maximum</td>
<td>$3,000</td>
<td>$1,100</td>
</tr>
<tr>
<td>Prescription Drug Tier 1 30-day copay</td>
<td>$10 copay</td>
<td>$10 copay</td>
</tr>
<tr>
<td>Prescription Drug Tier 2 30-day copay</td>
<td>$20 copay</td>
<td>$25 copay</td>
</tr>
<tr>
<td>Prescription Drug Tier 3 &amp; 4 30-day copay</td>
<td>$40 copay</td>
<td>$50 copay</td>
</tr>
</tbody>
</table>
## HMO Plans

**Aetna Medicare Plan (HMO), Health Alliance MAPD HMO and Humana Employer Medicare HMO**

The chart below highlights Medicare Advantage Prescription Drug (MAPD) benefits for the HMO plans under the *Total Retiree Advantage Illinois* program.

<table>
<thead>
<tr>
<th>HMO Medical Benefit</th>
<th>Members must use network providers, except for emergency services</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Annual medical deductible</strong></td>
<td>None</td>
</tr>
<tr>
<td><strong>Annual out-of-pocket maximum</strong></td>
<td>$3,000</td>
</tr>
<tr>
<td><strong>Doctor office visit</strong></td>
<td>Plan pays 100% after you pay $20 copay per visit</td>
</tr>
<tr>
<td><strong>Specialist office visit</strong></td>
<td>Plan pays 100% after you pay $20 copay per visit</td>
</tr>
<tr>
<td><strong>Preventive services</strong></td>
<td>Plan pays 100%; you pay 0%</td>
</tr>
<tr>
<td><strong>Emergency</strong></td>
<td>Plan pays 100% after you pay $120 copay per visit (can use non-network provider if nearer to you than network provider); copay is waived if you are admitted within 24 hours</td>
</tr>
<tr>
<td><strong>Inpatient hospital</strong></td>
<td>Plan pays 100% after you pay $250 copay per admission</td>
</tr>
<tr>
<td><strong>Outpatient surgery</strong></td>
<td>Plan pays 100% after you pay $150 copay</td>
</tr>
<tr>
<td><strong>Diagnostic tests (lab, x-ray, radiology)</strong></td>
<td>Plan pays 100%; you pay 0%</td>
</tr>
<tr>
<td><strong>Hearing Instruments and related services</strong></td>
<td>$2,500 for hearing instrument and related services every 24 months for individuals 65 and older, when a hearing care professional prescribes a hearing instrument. Contact plan for additional details.</td>
</tr>
</tbody>
</table>

### HMO Prescription Drug Benefit

<table>
<thead>
<tr>
<th>Retail And Mail Order Pharmacy (Initial and Coverage Gap Stages)</th>
<th>Copayments for prescriptions filled at a retail pharmacy are listed in the chart below. You may obtain a 61-90 day supply of drugs through mail order for 2.5 times the 30-day copayment amount.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>30-Day Supply</strong></td>
<td><strong>60-Day Supply</strong></td>
</tr>
<tr>
<td>Tier 1*</td>
<td>$10</td>
</tr>
<tr>
<td>Tier 2</td>
<td>$20</td>
</tr>
<tr>
<td>Tier 3 and Tier 4 (specialty drugs)**</td>
<td>$40</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Catastrophic Coverage Stage</th>
<th>Copayments are capped as indicated below once a member reaches $6,350 in true out-of-pocket prescription drug costs.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Aetna Medicare Plan (HMO), Health Alliance MAPD HMO and Humana Employer Medicare HMO</strong></td>
<td>Greater of 5% of the retail cost of the drug OR $3.60/Generic or $8.95/Non-generic; the 5% cannot exceed the caps below:</td>
</tr>
<tr>
<td>30-Day Supply</td>
<td>60-Day Supply</td>
</tr>
<tr>
<td>$40.00</td>
<td>$80.00</td>
</tr>
</tbody>
</table>

* HMOs may also have a pharmacy saver program, contact the plan provider for more information.

** Specialty drugs may only be available in a 30-day supply; varies by plan.
# PPO Plan

**UnitedHealthcare PPO**

The chart below highlights Medicare Advantage Prescription Drug (MAPD) benefits for the PPO plan under the *Total Retiree Advantage Illinois* program.

## PPO Medical Benefit

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Annual medical deductible</strong></td>
<td>$250</td>
</tr>
<tr>
<td><strong>Annual out-of-pocket maximum</strong></td>
<td>$1,100</td>
</tr>
<tr>
<td><strong>Doctor office visit</strong></td>
<td>Plan pays 80%; you pay 20% after annual deductible</td>
</tr>
<tr>
<td><strong>Specialist office visit</strong></td>
<td>Plan pays 80%; you pay 20% after annual deductible</td>
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<tr>
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<tr>
<td><strong>Diagnostic tests (lab, x-ray, radiology)</strong></td>
<td>Plan pays 80%; you pay 20% after annual deductible</td>
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<td><strong>Hearing Instruments and related services</strong></td>
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<td>Tier 1</td>
<td>$10</td>
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<tr>
<td>Tier 2</td>
<td>$25</td>
</tr>
<tr>
<td>Tier 3 and Tier 4 (specialty drugs)</td>
<td>$50</td>
</tr>
<tr>
<td><strong>Catastrophic Coverage Stage</strong></td>
<td>Copayments are capped as indicated below once a member reaches $6,350 in true out-of-pocket prescription drug costs.</td>
</tr>
<tr>
<td><strong>UnitedHealthcare PPO</strong></td>
<td>Greater of 5% of the retail cost of the drug OR $3.60/Generic or $8.95/Non-generic; the 5% cannot exceed $50.00</td>
</tr>
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</table>
TRIP TRAIL MAPD Medical Contributions

TRAIL MAPD Plan Monthly Contributions Effective January 1, 2020

Members in the Teachers’ Retirement Insurance Program (TRIP) are responsible for a monthly contribution for Medicare Advantage coverage that includes prescription drug benefits. If your school district currently pays your TRIP insurance premium, it may continue to pay the premium on your behalf after you enroll in TRAIL. If you wish to verify the premium payment arrangements for your TRAIL MAPD coverage, you should contact your school district.

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<th>HMO Plans</th>
<th>PPO Plan</th>
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<tbody>
<tr>
<td></td>
<td>Humana Employer Medicare HMO</td>
<td>Aetna Medicare Plan (HMO)</td>
</tr>
<tr>
<td>Member Rate</td>
<td>$35.18</td>
<td>$36.90</td>
</tr>
<tr>
<td>Dependent Rate</td>
<td>$105.51</td>
<td>$110.69</td>
</tr>
</tbody>
</table>
Prescription Drug Coverage

A TRAIL MAPD plan includes Medicare Part D prescription drug coverage. Prescription drug formularies (i.e., list of drugs covered) vary by health plan. The TRAIL MAPD prescription drug coverage must follow Medicare rules for which types of drugs can be covered. Drugs covered under a non-Medicare Part D plan may not be covered under a Medicare Part D plan. If you are uncertain whether a drug will be covered, you should call the health plan in which you are interested in enrolling to inquire.

Part D Coverage Stages
Since the TRAIL MAPD prescription drug coverage is a Medicare Part D plan, the member’s cost for prescription drugs under the TRAIL MAPD Program must follow the Medicare Part D drug coverage stages. There are four drug payment stages: Annual Deductible, Initial Coverage, Coverage Gap, and Catastrophic Coverage. At the beginning of the year, you start out in the Annual Deductible stage. If the plan has no prescription drug deductible, then you begin in the second stage, the Initial Coverage stage. You progress to the next stage once you have met the cost requirements for the current stage.

Unlike a standard Part D plan in which the enrollee is required to pay a percentage of the full retail cost of the drug, TRIP members enrolled in the TRAIL MAPD Program pay only the plan’s standard copayment through the Initial Coverage and Coverage Gap stages. Paying only the standard copayment through the Coverage Gap is a valuable benefit for TRAIL MAPD members. Once a member reaches the Catastrophic Coverage stage (when the true out-of-pocket costs reach $6,350 for prescription drugs in 2020), the member will pay either a small copayment or 5% coinsurance that is capped to limit a member’s out-of-pocket costs.

- **Annual Deductible**: You start here. You will pay the full cost of your Part D prescriptions drugs. Once you have paid the plan’s deductible, you move on to the next stage.

- **Initial Coverage**: If the plan has no prescription drug deductible you start here. You will pay copays in this stage. Once you and the plan have spent $4,020 on your Part D prescription drugs, you move to the next stage.

- **Coverage Gap**: You will pay no more for your prescription drugs in this stage as you did in the previous stage. Once you have spent $6,350 on your Part D prescription drugs, then you move on to the next stage.

- **Catastrophic Coverage**: If you reach this stage, you stay in this stage through the end of the plan year (December 31). You may pay more for your prescription drugs in this stage, but what you will pay will be capped (a limit is placed on the most you can pay for a prescription, see pages 12 & 13 for Castastrophic Coverage amounts).

Part D IRMAA Premium
Medicare requires those enrolled in a Medicare Part D plan whose annual income is above a certain limit to pay an additional premium called IRMAA (Income-Related Monthly Adjustment Amount). Medicare will look back at your tax return from two years ago to determine your income. For those members whose income is verified by the IRS to exceed the established limits, the Social Security Administration will send a predetermination letter. If applicable, IRMAA applies to both Medicare Parts B and D; therefore, members who pay an additional premium for their Medicare Part B coverage are the same members who will be charged the Medicare Part D IRMAA amount. Members will receive a quarterly bill in the mail from Social Security for these additional premiums. To remain in the Medicare Advantage plan, affected members must pay these additional premiums. Go to medicare.gov for IRMAA premium amounts.
Go Online at MyBenefits.illinois.gov, or call 844-251-1777 (toll-free) if:

- Your dependents experience a change of address.
- Your dependent loses eligibility. Dependents who are no longer eligible under the Program (including divorced spouses or partners of a dissolved civil union or domestic partner relationship) must be reported online immediately. Members should also notify TRS immediately.
- You get married or enter into a civil union partnership, or your marriage, domestic partnership or civil union partnership is dissolved.
- You gain legal guardianship of a child or adopt a child.
- You have insurance benefit questions • insurance plan options in your residential area • to enroll into an insurance plan • to add a dependent to your insurance plan • to provide a marriage certificate to add a new spouse to your insurance plan • to term a dependent from your insurance plan • and to find out more about your insurance coverage.

Contact:

State of Illinois Medicare Coordination of Benefits Unit (MCOB Unit)
Customer service phone number: 800-442-1300

- For Medicare requirements for the State of Illinois Group Insurance plans
- To turn in a copy of a Medicare identification card
- To inform the State of the loss of Medicare benefits
- For questions regarding the Medicare Advantage Plans after enrollment or a termination of coverage has occurred.
- You experience a change in Medicare status. A copy of the red, white and blue Medicare card must be provided to the State of Illinois Medicare Coordination of Benefits (COB) Unit when a change in your or your dependent's Medicare status occurs. The Medicare COB Unit’s address and phone number can be found on page 17.

Social Security Administration (SSA)
Customer service phone number: 800-772-1213
Website: ssa.gov/medicare

- To enroll in Medicare
- To check on the status of Medicare enrollment
- To request a Medicare identification card
- For questions about Medicare premiums or about IRMAA premiums.

Federal CMS Medicare Office (Center for Medicare and Medicaid Services)
Customer service phone number: 800-633-4227 (800-MEDICARE)
Website: medicare.gov

- To find out other Medicare plan information

Who Do I Call if I Have Questions About . . .

- Plan ID cards, Claims, provider networks, prescription formularies or coverage for specific procedures, call the plan directly:
  - UnitedHealthcare PPO 888-223-1092
  - Humana Employer Medicare HMO 800-951-0125
  - Aetna Medicare Plan (HMO) 855-223-4807
  - Health Alliance MAPD HMO 877-795-6131

- If you have a financial or medical power of attorney (POA) whom you would like to be able to make decisions and get information on your behalf if you become incapacitated.

- Teachers’ Retirement Insurance Program (TRIP) premiums or changes to your address, contact your retirement system:
  - Teachers’ Retirement System 877-927-5877
    2815 W. Washington Street
    PO Box 19253
    Springfield, IL 62794-9253

- TRAIL MAPD eligibility criteria or completing the TRAIL MAPD online enrollment process, call the MyBenefits Service Center:
  - MyBenefits Call Service Center (toll-free) 844-251-1777 or 844-251-1778 TDD/TTY
# Plan Administrators

<table>
<thead>
<tr>
<th>Plan</th>
<th>Administrators’ Name and Address</th>
<th>Customer Service Phone Numbers</th>
<th>Website Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>UnitedHealthcare Group Medicare Advantage PPO</td>
<td>UnitedHealthcare Group Customer Service Dept. PO Box 29675 Hot Springs, AR 71903-9675</td>
<td>888-223-1092 TTY users, call 711</td>
<td>uhcretiree.com/soi</td>
</tr>
<tr>
<td>Aetna Medicare Plan (HMO)</td>
<td>Aetna Medicare Plan (HMO) PO Box 981106 El Paso, TX 79998-1106</td>
<td>855-223-4807 TTY users, call 711</td>
<td>stateofillinois.aetnamedicare.com</td>
</tr>
<tr>
<td>Health Alliance MAPD HMO</td>
<td>Health Alliance 3310 Fields South Drive Champaign, IL 61822</td>
<td>877-795-6131 TTY users, call 711</td>
<td>healthallianceretiree.org/soi</td>
</tr>
<tr>
<td>Humana Employer Medicare HMO</td>
<td>Humana Employer Medicare HMO PO Box 14168 Lexington, KY 40512</td>
<td>800-951-0125 TTY users, call 711</td>
<td>humana.com/soi</td>
</tr>
<tr>
<td>Medicare COB Unit</td>
<td>CMS Group Insurance 801 South 7th Street PO Box 19208 Springfield, IL 62794-9208</td>
<td>217-782-2548 800-442-1300 800-526-0844 (TDD/TTY)</td>
<td>benefitschoice.il.gov</td>
</tr>
<tr>
<td>Retirement System</td>
<td>Teachers’ Retirement System 2815 W. Washington St PO Box 19253 Springfield, IL 62794-9253</td>
<td>877-927-5877 866-326-0087 TDD</td>
<td>trsil.org</td>
</tr>
<tr>
<td>Medical Plans</td>
<td>MyBenefits Service Center 134 N. LaSalle Street Suite 2200 Chicago, IL 60602</td>
<td>844-251-1777 844-251-1778 (TDD/TTY)</td>
<td>MyBenefits.illinois.gov</td>
</tr>
</tbody>
</table>

**Disclaimer**
The State of Illinois intends that the terms of this plan are legally enforceable and that the plan is maintained for the exclusive benefit of members. The State reserves the right to change any of the benefits, program requirements and contributions described in *Your TRAIL Medicare Advantage Prescription Drug (MAPD) Program Decision Guide*. This Guide is intended to supplement the *Benefits Handbook*. If there is a discrepancy between the *Benefits Handbook* and state or federal law, the law will control.
## TRAIL MAPD Seminar Schedule

Any impacted retiree may attend any meeting. Reservations not required.

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Location</th>
<th>Details</th>
</tr>
</thead>
</table>
| October 15, 2019 | 9:00 a.m. – 11:00 a.m. | Radisson Hotel & Conference Center  
200 S. Bell School Rd.  
Rockford, IL        |  
If you are unable to attend in person, you can log on to your computer, smartphone or tablet to view the seminar via live-stream webinar on October 22. Just login online at [MyBenefits.illinois.gov](http://MyBenefits.illinois.gov). Click on the TRAIL MAPD tile and watch from the comforts of your home. If unable to attend a live seminar, a video will be available at [MyBenefits.illinois.gov](http://MyBenefits.illinois.gov). |
| October 16, 2019 | 9:00 a.m. – 11:00 a.m. | Hilton Garden Inn  
4070 East Main St.  
Saint Charles, IL |  
Hilton Garden Inn  
4070 East Main St.  
Saint Charles, IL  
9:00 a.m. – 11:00 a.m.  
1:00 p.m. – 3:00 p.m. |
| October 17, 2019 | 9:00 a.m. – 11:00 a.m. | Courtyard Chicago  
Downtown/Magnificent Mile  
165 East Ontario Street  
Chicago, IL |  
Courtyard Chicago  
Downtown/Magnificent Mile  
165 East Ontario Street  
Chicago, IL  
9:00 a.m. – 11:00 a.m. |
| October 18, 2019 | 3:00 p.m. – 5:00 p.m. | Hilton Chicago  
9333 S. Cicero Ave.  
Oak Lawn, IL |  
Hilton Chicago  
9333 S. Cicero Ave.  
Oak Lawn, IL  
3:00 p.m. – 5:00 p.m. |
| October 19, 2019 | 9:00 a.m. – 11:00 a.m. | Holiday Inn & Convention Center  
18451 Convention Center Dr.  
Tinley Park, IL |  
Holiday Inn & Convention Center  
18451 Convention Center Dr.  
Tinley Park, IL  
9:00 a.m. – 11:00 a.m. |
| October 21, 2019 | 9:00 a.m. – 11:00 a.m. | Holiday Inn & Suites  
Peoria at Grand Prairie  
7601 N. Orange Prairie Road  
Peoria, IL |  
Holiday Inn & Suites  
Peoria at Grand Prairie  
7601 N. Orange Prairie Road  
Peoria, IL  
9:00 a.m. – 11:00 a.m. |
| October 22, 2019 | 3:00 p.m. – 5:00 p.m. | Eastland Suites Hotel  
1801 Eastland Dr  
Bloomington, IL |  
Eastland Suites Hotel  
1801 Eastland Dr  
Bloomington, IL  
3:00 p.m. – 5:00 p.m. |
| October 23, 2019 | 9:00 a.m. – 11:00 a.m. | DoubleTree by Hilton  
Mt. Vernon  
22 Potomac Blvd  
Mt. Vernon, IL |  
DoubleTree by Hilton  
Mt. Vernon  
22 Potomac Blvd  
Mt. Vernon, IL  
9:00 a.m. – 11:00 a.m. |
| October 24, 2019 | 3:00 p.m. – 5:00 p.m. | The Regency Conference Center  
400 Regency Park Drive  
O’Fallon, IL |  
The Regency Conference Center  
400 Regency Park Drive  
O’Fallon, IL  
3:00 p.m. – 5:00 p.m. |
| October 25, 2019 | 9:00 a.m. – 11:00 a.m. | Hilton Garden Inn Champaign/ Urbana  
1501 South Neil Street  
Champaign, IL |  
Hilton Garden Inn Champaign/ Urbana  
1501 South Neil Street  
Champaign, IL  
9:00 a.m. – 11:00 a.m. |