

Health care information for OP&F retirees

OP&F provides eligible retirees access to health care and assists members financially in purchasing a plan.

OP&F partners with the Alight Retiree Health Solutions to assist eligible retirees in selecting a health care plan that best suits their needs. Additionally, each eligible retiree will have a Health Reimbursement Arrangement (HRA) funded with an annual stipend from OP&F. Once enrolled in an eligible plan, retirees will pay premiums to the provider and can be reimbursed for approved expenses using the HRA.

The stipend amount depends on the retiree's Medicare status and also how many dependents are eligible. A chart with the stipend amounts is available online on the health care page at op-f.org.



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Complete and submit the Health Care Stipend Eligibility form to OP&F to confirm your eligibility for the stipend provided by OP&F at least 90 days prior to retirement.



Shop

Each of these options will keep you eligible for the health care stipend provided by OP&F.

If you are under age 65, select either:

- COBRA coverage, which is available from your employer, usually for up to 18 months. Contact your employer for enrollment information.
- A health care plan from the Alight Retiree Health Solutions. Go to retiree.alight.com/OP-F, or call 1-844-290-3674.
- You can shop for a qualified individual plan on your own, either online at healthcare.gov or from a broker of your choice.
- Pre-Medicare retirees must enroll in an Individual or Family major medical qualified health plan that is compliant with the minimum essential coverage rules under the Affordable Care Act (ACA) and contains the ten essential benefits purchased through Alight Retiree Health Solutions, healthcare.gov or any independent broker. The plan you choose must be an ACA accredited plan.

Medicare: If you are eligible and already enrolled in Medicare Part A and B, call the Alight Retiree Health Solutions at 1-844-290-3674 to set up an appointment to find supplemental medical and prescription drug coverage. Medicare participants must enroll in at least one eligible plan through Alight to receive the OP&F stipend. Any future plan changes must also be made through Alight, and not directly through the carrier, or you will lose eligibility for OP&F's stipend and must experience another QLE to again become eligible for the stipend.

Enroll

Enroll in an eligible plan of your choice within 60 days of losing access to your employer's plan. Remember, if you are Medicare-eligible, you must enroll in either a major medical or prescription drug plan using the Alight Retiree Health Solutions to receive the stipend. Short-term plans, non-accredited ACA plans and group plans are not eligible for the stipend (including an employer group plan, or your spouse's employer plan). Once enrolled, Alight will mail a Welcome Kit which contains instructions on accessing your HRA.

Eligibility

A retiree is eligible for the health care stipend unless they have access to health care through an employer. If a retiree is enrolled in a group plan sponsored by a spouse's employer or retirement system, they are not stipend-eligible. Eligibility of spouses or dependent children could increase the retiree's stipend amount. However, if the spouse or dependents have access to any health care plan from an employer or retirement system they are not eligible for stipend support from OP&F. Even if an OP&F member or their dependents are not eligible for a stipend, they can use the services of the Alight Retiree Health Solutions to select and enroll in a plan.

Enrollment

New retirees must enroll in a plan within 60 days of losing access to their employer's group health care plan. This involuntary loss of group coverage is considered a Qualifying Life Event (QLE). For OP&F members not enrolled in the plan, a QLE must occur to enroll and to be eligible for a stipend. Other common QLEs include marriage, divorce, at the time of Medicare eligibility, birth or adoption of a child and death. A complete list of QLEs is available online on the health care page at op-f.org.

COBRA

Members who elect COBRA coverage at separation from any employment for their health care coverage are eligible to receive OP&F's health care stipend for payment of COBRA premiums and related medical expenses. Members are able to use the stipend for these costs until the next OP&F open enrollment or until the end of COBRA eligibility, which-ever the member chooses. You must submit proof of coverage to OP&F within 60 days of enrollment. If your COBRA plan is terminated before the 18 month period has elapsed you must provide OP&F with proof of coverage in an ACA accredited qualified health plan within 60-days of COBRA termination.

QLE

If more than 60 days elapse from the time you lose group coverage, a member must have a Qualifying Life Event (QLE) to again become eligible for the stipend. Common QLE's include the involuntary loss of group coverage, Medicare eligibility, marriage, death, divorce and the birth of a child. You must submit proof of coverage to OP&F within 60 days of experiencing the QLE.

Open enrollment

The annual open enrollment dates for pre-Medicare individuals is Nov. 1 through Dec. 15. The open enrollment period for Medicare-eligible individuals is Oct. 15 through Dec. 7.

Federal subsidy

OP&F retirees are not allowed to have both the federal health care subsidy and the OP&F health care stipend.

Other important information:

- HRA Annual Funding is automatic for all eligible members Jan. 1 of each year at the current level. Newly enrolled participants will receive retiree only HRA funding until the Health Care Stipend Eligibility form and proof of enrollment is provided to OP&F.
- For pre-Medicare retirees, automatic premium reimbursement is available only after the member submits a manual claim form and supporting documentation to YSA, who partners with Alight on reimbursements.
- Paying for coverage is required prior to plan effective dates and prior to effective date of the HRA.
- HRA disbursements will be made by the 10th of each month and administered by YSA.
- Pre Medicare members who enroll in an eligible Individual or Family qualified health plan that is ACA accredited plan outside the Alight network can continue to receive assistance from Alight with the HRA process. However, Alight cannot assist these members with claims or other carrier related issues.
- Most carriers will advise you if there are any plan changes from year to year, such as premium amounts or plan offerings. Members should also contact their carrier with any plan, premium or enrollment questions.
- Stipend will be prorated based on effective date of enrollment and the funding level will be reduced in the year the member becomes Medicare eligible. Pre-Medicare dollars cannot be applied towards Medicare expenses and vice versa.
- Retirees who are 65 years of age or older must be enrolled in Medicare Part A and Part B and provide OP&F with a copy of their Medicare card.
- The stipend amount may not be enough to pay for all expenses throughout the year. Also, any funds remaining in the HRA at the end of the year will not rollover to the following year.

If you have any questions regarding enrollment in health care at retirement, contact Alight Retiree Health Solutions at 1-844-290-3674. Representatives are available Monday through Friday from 9 a.m. to 9 p.m. ET. If you have questions concerning eligibility, contact OP&F Customer Service at 1-888-864-8363.