

Updated Oct. 10, 2024

mn MANAGEMENT
AND BUDGET
STATE EMPLOYEE GROUP
INSURANCE PROGRAM

Open Enrollment for Retirees 65 and Older

Premiums,
plan changes,
contacts, and more

Health care coverage for 2025

Visit mn.gov/segip-oe for more information

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**Call 651-355-0100, 800-664-3597 or email segip.mmb@state.mn.us
to get this document in a format that is accessible to you.**



Open Enrollment is Oct. 24 through Nov. 13

Now is your chance to change medical insurance coverage.

As a retiree from the state of Minnesota you and your spouse may receive medical insurance benefits through the State Employee Group Insurance Program (SEGIP). Here's what you need to know for care you'll get in 2025.

Below are highlights of the two medical plans SEGIP offers to retirees age 65 and older. Get familiar with how your plan works. You need to meet the plan and plan administrator's current requirements in order to buy coverage.

SEGIP Member Services Center Special Hours

- Increased phone staffing starts Oct. 1
- Extended hours Nov. 13 to 7 p.m.
- Closed Monday, Nov. 11, for Veterans Day
- Call (651) 355-0100 or (800) 664-3597
- Telecommunications Relay: Use the service you prefer.
- Email: segip.mmb@state.mn.us

Important Reminders

If you are already enrolled and do not want to make any changes to your medical insurance, you do not need to take any action.

- Changes you make now take effect Jan. 1, 2025.
- Once you leave a SEGIP-sponsored retiree group, you are not allowed to return. You will see a lot of Medicare advertising. The ads are likely not for Medicare coverage offered through SEGIP.
- This book does not describe all procedures and requirements of the health plans. For example, this book may say something has 100% coverage. But you may need approval from Blue Cross or HealthPartners before you get care.

- The age 65 and over plan documents are available on the Blue Cross or HealthPartners website after Jan. 1, 2025. See page 20 for help finding them.
- Keep this booklet to refer to later if you have questions.
- Call (651) 355-0100, (800) 664-3597 or email segip.mmb@state.mn.us to get this document in a format that is accessible to you.



Meetings for Retirees Only

The Nov. 5 meeting is online through Webex.

All other meetings are in person only.

- You do not need to preregister.
- SEGIP staff and representatives from the health plans will share a short presentation of plan and premium changes. They will answer individual questions during the second half of the meeting.
- To request an accommodation, such as an ASL interpreter or real-time captioning (CART), contact SEGIP Member Services at 651-355-0100, 800-664-3597 or segip.mmb@state.mn.us two weeks before the meeting.

Date	Time	Location
Monday, Oct. 21	10 a.m. to noon	MnDOT – Baxter 7694 Industrial Park Road, Baxter, MN 56425
Tuesday, Oct. 22	10 a.m. to noon	Southdale Library 7001 York Ave. S., Edina, MN, 55435
Wednesday, Oct. 23	10 a.m. to noon	MnDOT - Rochester 2900 48th St. N.W., Rochester, MN 55901
Thursday, Oct. 24	10 a.m. to noon	Minnesota Pollution Control Agency 520 Lafayette Road, St. Paul, MN 55155
Friday, Oct. 25	10 a.m. to noon	MnDOT - Mankato 2151 Bassett Drive, Mankato, MN 56001
Monday, Oct. 28	10:30 a.m. to 12:30 p.m.	MnDOT – Duluth 1123 Mesaba Ave., Duluth, MN 55811
Tuesday, Oct. 29	10 a.m. to noon	Radisson Hotel St. Paul, Capitol Ridge Building 161 St. Anthony Ave., St. Paul, MN 55103 Parking: \$2 per hour. Pay with a credit card at the exit gate.
Thursday, Oct. 31	1 to 3 p.m.	Southdale Library 7001 York Ave. S , Edina, MN
Friday, Nov. 1	10 a.m. to noon	MnDOT - St. Cloud 3725 12th St. N., St. Cloud, MN 56303
Tuesday, Nov. 5	10 a.m. to noon	Live online. Visit mn.gov/segip-oe and select the Webex link on SEGIP's Open Enrollment website.

You and your spouse are age 65 or older

You have two options for medical insurance through SEGIP. Both options work with Medicare.

- **Blue Cross and Blue Shield of Minnesota**
Coordinated Plan which includes prescription drug coverage through Group MedicareBlue Rx.
- **HealthPartners Medicare Group Solution**
which includes prescription drug coverage.



Take These Four Steps

Step 1

Understand what changes.

- Review highlights starting on page 6.
- Attend a meeting in person or online. Go to page 6 for the times, dates, and locations.
- Call Blue Cross 800-262-0819 or 711 TTY or HealthPartners 866-993-7428 directly if you have questions about the doctors, hospitals, clinics, and other providers in the network, or plan details.

Step 2

Find out how much you will pay for insurance each month in 2025.

Compare the rates for 2025 on page 8.

- Blue Cross and Blue Shield of Minnesota Coordinated Plan premium increases 5.5%
- HealthPartners Medicare Group Solution Plan premium increases 18%

Step 3

Make your decision.

- Keep the same coverage you have now?
- Change to Blue Cross or HealthPartners?

Act

- If you pay through your bank, update the amount of your automatic payment.
- If you have MSRS deposit reimbursements into your bank account, contact MSRS with the new premium amount.

To keep the same coverage you have now

If you do not want to make any changes, you do not complete any enrollment forms. You keep the plan you have today.

To change to Blue Cross or HealthPartners

- Follow the instructions on page 11 to enroll in the Blue Cross Coordinated Plan.
- Follow the instructions on page 12 to enroll in the HealthPartners Medicare Group Solution Plan.

Step 4

Changes to Coverage for 2025

The Inflation Reduction Act of 2022 makes the following changes to your Medicare prescription drug coverage:

- The Coverage Gap is eliminated. You've heard it called the Donut Hole and medication gap. The big change for 2025 is it's gone—\$2,000 is the new out-of-pocket maximum for prescription medications covered by Medicare Part D.
- A new program, the Medicare Prescription Payment Plans, gives you the option to spread that \$2,000 of expense across the calendar year. You will pay the health plan each month instead of paying the pharmacy when you get medications. Here's how it works:
 - You ask your plan for a Medicare Prescription Payment Plan Participation Request Form. You complete the form and return it to your health plan.
 - This payment option may help you manage your expenses, but it doesn't save you money or lower your drug costs.
 - Call your plan for more information.





Eligibility

Blue Cross Coordinated or HealthPartners
Medicare Group Solution plans:

- Age 65 or older
- Retiree or spouse
- Enrolled in Medicare Parts A and B

If you need to provide coverage for a dependent under age 65, go to the Family Eligibility section of SEGIP's website. Here you will find out if your spouse, child, grandchild, foster child, or other dependent is eligible for coverage through SEGIP programs.

Cost

Retirees pay the full cost of health coverage. What you pay each month depends on the plan you choose and who you cover.

As part of the SEGIP retiree group, your plan offers benefits and coverage you can't buy on your own. This includes:

- Paying \$0 for infused medications that are covered under Medicare Part B (after deductible if you have one). Typically, most plans require their enrollees to pay at least 20% or more of the cost of the drugs.
- Low deductibles and out-of-pocket costs when you get care.
- Prescription drug copays that do not exceed \$50. You will not pay a percentage of the drug costs, even for the most expensive covered prescriptions.
- A plan that moves with you. These plans offer nationwide coverage. You won't have to shop for a new plan if your county of residence changes.

You Are a Retiree 65 and Older	Blue Cross Blue Shield	Health Partners
Retiree only invoice	\$385.00	\$382.20
Retiree's Spouse 65 and over invoice	\$385.00	\$382.20

You will receive separate invoices. The total cost per couple is \$770 per month for BCBS Coordinated Plan and \$764.40 for HealthPartners Medicare Group Solution.

You Are a Retiree's Surviving Spouse

As a surviving spouse who had coverage at the time of the retiree's death you may continue to buy your coverage through SEGIP indefinitely.

You Are a Surviving Spouse	Blue Cross Blue Shield	Health Partners
Spouse 65+ only	\$385.00	\$382.20



A black and white photograph of a smiling man with a beard and a white dog, likely a Golden Retriever, in front of a window with sheer curtains. The man is wearing a light-colored button-down shirt. The dog is looking towards the camera.

Benefits and Providers

The plan you choose determines what is covered, who will provide your care, and how your coverage works. The Certificates of Coverage or Summary of Benefits govern if there are differences among those documents and the highlights in this book.

Finding Lists of Providers and Plan Summaries Online

Blue Cross and Blue Shield of Minnesota

Go to bluecrossmn.com/segip to find information in these sections:

Coordinated Plan

- Coordinated Plan Benefit Overview
- State of Minnesota Retiree Coordinated Plan Certificate
- Find a Doctor: Aware and National BlueCard networks
- Group MedicareBlue Rx 2025 Group Formulary
- 2025 Group MedicareBlue Rx Summary of Benefits
- Find a Pharmacy

Go to bcbglobalcore.com to find doctors and hospitals outside of the United States, Puerto Rico and U.S. Virgin Islands.

HealthPartners

Go to healthpartners.com/segip to find information in these sections:

Medicare retirees

- Plan information booklet (PDF)
- Summary of Benefits (PDF)

Pharmacy information

- Select I'm a Medicare retiree to search the list of doctors and other providers.

Connection to Medicare

All SEGIP coverage for people 65 and older works with Medicare A, B, and D. Unlike the Minnesota Advantage Health Plan coverage you had when you were under 65, your drug coverage when you are 65 or older is through the HealthPartners or Blue Cross plan you select.



Important Plan Statements

- The State expects to continue the State Employee Group Insurance Program indefinitely. However, the state reserves the right to change or discontinue all or any part of the program, consistent with the state's rights and obligations under law and collective bargaining agreements.
- If you enroll someone as a dependent who does not meet the Plan's definition of a dependent, you will be liable for all claims paid by the Plan for that individual. The state assumes that this is fraud or intentional misrepresentation. You will receive a 30-day notice that coverage will be rescinded effective the date the coverage started.





Blue Cross Coordinated Plan

How to Enroll

- Complete the form on page 24. Mail the form to the Blue Cross Coordinated Plan address on page 20.
- If you are currently enrolled in HealthPartners Medicare Solution, mail the disenrollment form on page 26 to the HealthPartners address on page 20.

Blue Cross will mail two forms to your home address:

- Enrollment Form for State of Minnesota Coordinated Plan
- Group MedicareBlue Rx (PDP) Participant Enrollment Form

Note:

Complete and return the Enrollment Form for State of Minnesota Coordinated Plan and Group MedicareBlue Rx (PDP) Participant Enrollment Form to Blue Cross before the date in your letter.

Using the Plan

To get the best value, go to providers that contract with Blue Cross.

While you may go to any provider who accepts Medicare, there are advantages to seeing a provider who is in the Blue Cross and Blue Shield of Minnesota Aware and National BlueCard networks. These advantages include:

- You're not in the middle. Providers will file medical claims for you and Blue Cross pays the provider directly. Also, Aware and National BlueCard network providers are responsible for getting prior approvals, providing timely notifications, and taking care of other processes required to make sure your care gets paid for.
- You'll pay less. Providers agree to accept the "allowed amount" as payment in full. You are only responsible for the deductible, coinsurance, and copays for eligible services. Providers that do not have a contract with Blue Cross may charge more for services than Blue Cross allows. The provider may require you to pay charges that exceed the allowed amount. It's called balance billing.



HealthPartners Medicare Group Solution

How to Enroll

- Complete the form on page 24. Mail the form to the HealthPartners address on page 20.
- If you are currently enrolled in Blue Cross Coordinated Plan, mail the disenrollment form on page 26 to the Blue Cross address on page 20.

HealthPartners will mail the 2025 HealthPartners Medicare Group Solution Enrollment Form to your home address:

- Complete and return the form to HealthPartners immediately or complete the form online. The form you receive at home will include a website address specific to your enrollment if you'd like to complete the application online.

Note:

Complete and return the HealthPartners Medicare Group Solution Enrollment form to HealthPartners before the date in the letter.

Using the Plan

If you live in Minnesota, Puerto Rico, or any other state (excluding North Dakota, South Dakota and eight* Wisconsin counties):

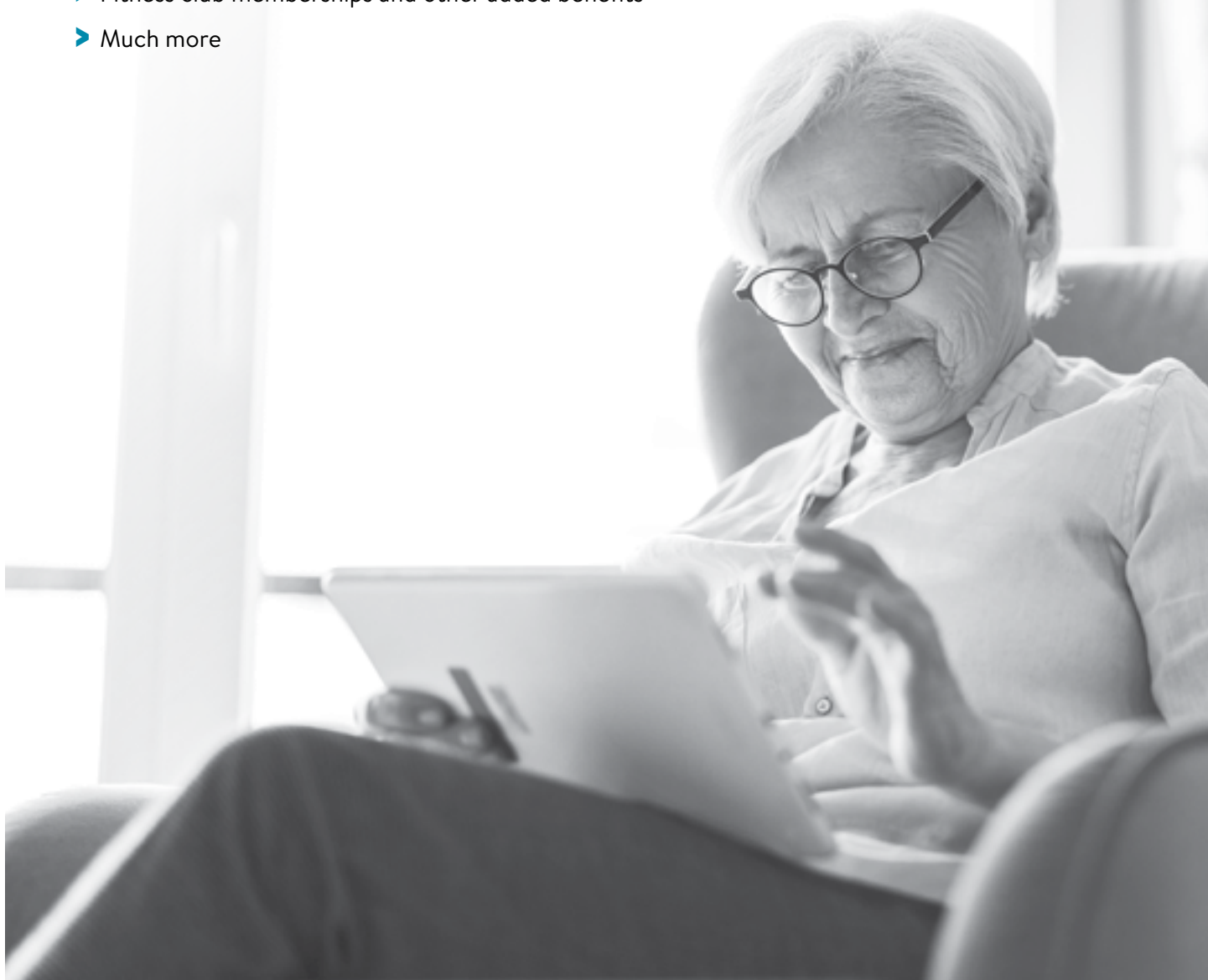
You will receive one member ID card from HealthPartners. It will say HealthPartners Journey. You will use that card when you get care and at the pharmacy. The provider will bill HealthPartners for your care. HealthPartners will work with Medicare as needed.

*Residents in Barron, Burnett, Douglas, Dunn, Pierce, Polk, St. Croix, and Washburn counties in Wisconsin, along with North Dakota and South Dakota residents, will receive two ID cards from HealthPartners. One is for your Retiree National Choice (RNC) medical coverage. The other is for your Part D prescription drug coverage. When you get care, present both your original Medicare and HealthPartners medical ID card. The provider will bill Medicare first and then HealthPartners. Use the prescription drug card at the pharmacy.

Compare Your Options

The tables on pages 15 through 18 will help you compare:

- The premiums you'd pay each month
- How much you pay out-of-pocket when you get care
- Coverage if you travel within the United States or internationally
- Coverage if you move away from the local service area permanently
- How much you pay for prescription medications
- The cost for hearing aids
- Fitness club memberships and other added benefits
- Much more



What if one of these plans is not right for you?

First, make sure you understand what you would be giving up. When you leave a SEGIP-sponsored retiree plan, you are not allowed to return. While you will find plans where you pay less in premiums each month, you will likely pay much more when you need care or prescription drugs. Be sure to watch for:

- Inpatient hospital copays that are hundreds of dollars per day versus per stay or per year.
- Inpatient skilled nursing care coverage that require three-day hospital stays, in addition to high copays.
- Prescription drugs that cost you a percentage of the price of a medication vs a flat copay of \$10 to \$50 a month.
- Outpatient diagnostic tests such as observation stays, MRIs and procedures like cataract surgery that cost you hundreds of dollars versus \$0.
- Medicare Part B drugs such as chemotherapy that cost you 20% or more of the drug's cost versus \$0.
- Medical plans with no prescription drug coverage.

If you are going to compare your options, start by talking with a Medicare expert working in your current plan. These people understand the nuances of the coverage SEGIP sponsors. Once you're familiar with plan details, you'll be better able to evaluate options. The Senior Linkage Line through the Minnesota Board on Aging can help you compare plans outside of SEGIP. They are not experts on SEGIP's plans but do have training on Medicare plans in general. You may contact them at 800-333-2433 or mn.gov/senior-linkage-line.



Once you leave a SEGIP-sponsored retiree group, you are not allowed to return.

SEGIS-Sponsored Plans for Retirees 65 and Older

For more detail, see the plan's Certificate or Summary of Benefits. Page 20 will help you find the documents on the Blue Cross and HealthPartners websites. The table displays what you will likely pay when you get care. The most you will pay in 2025 for covered services are the out-of-pocket maximums.

2025 plan information	Blue Cross and Blue Shield of Minnesota Coordinated Plan	HealthPartners Medicare Group Solution
Premium per month per person	\$385	\$382.20
Medical Care Annual Out-of-Pocket Maximum	*\$1,040	\$3,400
Prescription Drug Annual Out-of-Pocket Maximum	\$2,000	\$2,000
Deductible: Part A Services	\$200	\$0
Deductible: Part B Services	*\$240	\$0
Deductible: Part D Medications	\$0	\$0
How the Plans Work	<p>You pay the premiums, and the copays, co-insurance, and deductibles for medical care, up to the out-of-pocket maximum.</p> <p>You pay copays for prescription drugs up to the out-of-pocket maximum.</p>	<p>You pay the premiums, and the copays, and the co-insurance, for medical care, up to the out-of-pocket maximum.</p> <p>You pay copays for prescription drugs up to the out-of-pocket maximum.</p>
Network Providers	<p>In Minnesota: Aware</p> <p>Outside Minnesota: National BlueCard</p> <p>The provider may require you to pay the difference between the amount the provider bills and the amount BCBS allows if you see a provider who does not contract with BCBS.</p>	You may see any provider that accepts Medicare.
Type of Policy	Works with Medicare and includes a Medicare Prescription Drug Plan.	*Works with Medicare and includes a Medicare Prescription Drug Plan. The county where you live determines other details about the policy.

*Note:

- 2024 out-of-pocket maximum for BCBS will change if Medicare changes the 2025 Part B deductible.
- 2024 deductible set by Medicare. Medicare may change it in 2025. As of Sept. 13, 2024 Medicare has not announced the 2025 Part B deductible.
- Residents of North Dakota, South Dakota, and eight western Wisconsin counties who choose HealthPartners will have Retiree National Choice (RNC) coverage. Others will have Journey coverage. Details on page 24.

Outpatient Hospital	Blue Cross and Blue Shield of Minnesota Coordinated Plan In Network - Aware in Minnesota and National BlueCard Non-BCBS providers may make you pay more.	HealthPartners Medicare Group Solution Any Medicare provider who will see you
	Outpatient Surgery	\$0
	Lab/X-Ray, CT scan, MRI, other outpatient diagnostic tests	\$0
	Emergency Services	\$50 copay, waived if admitted
	Urgent Care Visits	\$0
	Ambulance in the U.S.	\$0
Inpatient	Blue Cross and Blue Shield of Minnesota Coordinated Plan In Network - Aware in Minnesota and National BlueCard Non-BCBS providers may make you pay more.	HealthPartners Medicare Group Solution Any Medicare provider who will see you
	Hospital	\$100 copay per admission
	Skilled Nursing	\$0 for up to 100 days per year 3-day hospital stay waived in Journey, but required in RNC.
	Mental Health	\$100 copay per admission, unlimited days
	Substance Use Disorder	\$100 copay per admission, unlimited days
Outpatient Medical	Blue Cross and Blue Shield of Minnesota Coordinated Plan In Network - Aware in Minnesota and National BlueCard Non-BCBS providers may make you pay more.	HealthPartners Medicare Group Solution Any Medicare provider who will see you
	Preventive	\$0
	Physician Office Visit	\$15 copay
	Medications Delivered in Physician Office Setting and Paid under Medicare Part B	\$0
	Yearly Routine Eye and Hearing Exams	\$0

Outpatient Medical (Continued)	Blue Cross and Blue Shield of Minnesota Coordinated Plan In Network - Aware in Minnesota and National BlueCard Non-BCBS providers may make you pay more.	HealthPartners Medicare Group Solution Any Medicare provider who will see you
Outpatient Mental Health	*\$240 Medicare Part B deductible, then \$0	\$15 copay individual \$7.50 copay group
Outpatient Substance Use Disorder	*\$240 Medicare Part B deductible, then \$0	\$15 copay individual \$7.50 copay group
Podiatry	*\$240 Medicare Part B deductible, then \$0	\$15 copay
Physical, Occupational, Speech and Language Therapy	*\$240 Medicare Part B deductible, then \$0	\$15 copay
Home Health Care	*\$240 Medicare Part B deductible, then \$0	\$0
Chiropractic Care (Medicare covered)	*\$240 Medicare Part B deductible, then \$0	\$15 copay
Chiropractic Care (Non Medicare covered)	*\$240 Medicare Part B deductible, then \$0 when meeting medical necessity rules	No coverage. You pay the full cost.
Acupuncture (Medicare covered)	*\$240 Medicare Part B deductible, then \$0	\$15 copay
Acupuncture (Non Medicare covered)	*\$240 Medicare Part B deductible, then \$0 when meeting medical necessity rules	\$15 copay
Durable Medical Equipment including prosthetics	*\$240 Medicare Part B deductible, then \$0	10% of the cost
Hearing Aids	20% for basic hearing aids every 3 years with an in-network provider. You pay for upgrades.	Through TruHearing network only. Covers one per ear, per year. Cost varies based on hearing aid technology: \$99 standard, \$199 advanced, \$499 premium
Prescription Drugs	Blue Cross and Blue Shield of Minnesota Coordinated Plan In Network - Aware in Minnesota and National BlueCard Non-BCBS providers may make you pay more.	HealthPartners Medicare Group Solution Any Medicare provider who will see you
Generic	\$10 copay	\$10 copay
Preferred Brand	\$30 copay	\$30 copay
Brand and Specialty	\$50 copay	\$50 copay
Supplemental, not covered by Medicare ➤ Cough and Cold ➤ Sexual Dysfunction	You pay 25% of the cost	No coverage. You pay the full cost.
Mail Order or Preferred Pharmacy	3-month supply for 2 copays	3-month supply for 2 copays through Welldyne mail order only.

Added Benefits	Blue Cross and Blue Shield of Minnesota Coordinated Plan In Network - Aware in Minnesota and National BlueCard Non-BCBS providers may make you pay more.	HealthPartners Medicare Group Solution Any Medicare provider who will see you
Fitness Club Membership	Silver Sneakers Fitness Program	Silver Sneakers Fitness Program
Nurseline, over the phone 24/7 access	No	Yes
Online care	Doctor on Demand, Medicare Part B deductible, then \$0	Virtuwell, unlimited, \$0 visits in 17 states
Other Wellness Benefits	Wellness Discount Marketplace: blue365deals.com/bcbsmn	Current members, log in to the healthpartners.com/segip website to find HealthyDiscounts. Non-members, call for details.
Travel and Out-of-Area Benefits	Blue Cross and Blue Shield of Minnesota Coordinated Plan In Network - Aware in Minnesota and National BlueCard Non-BCBS providers may make you pay more.	HealthPartners Medicare Group Solution Any Medicare provider who will see you
Domestic Travel Benefits	No limitation on time.	No limitation on time if the provider accepts Medicare. Assist America if more than 100 miles from home.
International Travel, U.S. Territories	*\$240 Part B deductible, then \$0. Blue Cross Global Core	You pay 20% of the costs for emergency and urgently needed care. Assist America
International Ambulance	You pay \$0.	You pay 20% of the cost.
Option to Live Outside of Service Area	Yes	Yes

Coverage in Special Circumstances

Contact SEGIP prior to an event such as a marriage if you're adding coverage for a spouse who is age 65 or older.

Family Coverage/Life Events

If you chose coverage for yourself but not family members when you retired, there are two scenarios where you may add dependents. If within the last 30 days:

- Your spouse or other dependent loses coverage through their employer or other group.
- You are newly married.

If you are eligible to add coverage now

Submit a Qualifying Status Change form to SEGIP. You'll find it in the Find a Form section of the website. Requirements also include:

- If you're newly married, complete the Spouse Eligibility Certification form. Include a copy of your certified marriage certificate.
- If your dependent lost coverage, you need a document on company letterhead. The document must state the coverage your dependent had and the date it ended. Be sure it includes the date of the event that is causing the loss of coverage.

Surviving Spouses and Dependents

A spouse who is covered by the Blue Cross and Blue Shield of Minnesota Coordinated Plan, HealthPartners Medicare Group Solution and UCare Medicare Group when the retiree dies may continue to participate in SEGIP indefinitely.

Divorce after Retirement

You and your spouse age 65 or older may maintain your SEGIP-sponsored coverage. Contact SEGIP for more information.

Plan Contact Information

Administrator	Address and Website	Phone Numbers
Blue Cross and Blue Shield of Minnesota Coordinated Plan	Blue Cross and Blue Shield of Minnesota P.O. Box 64560 St. Paul, MN 55164-9756 bluecrossmn.com/segip	800-262-0819 711 – TTY
MedicareBlue Rx	bluecrossmn.com/segip	877-838-3827 711 – TTY
National PPO for Advantage - Blue Cross Blue Card	bluecrossmn.com/segip	800-810-2583
HealthPartners Medicare Group Solution, including prescription drug coverage	HealthPartners Attn: Riverview Membership Accounting PO Box 21662 Eagan, MN 55121-0662 healthpartners.com/segipmedicare Select Pharmacy from the top of the page for information on prescription drug coverage.	952-883-7428 866-993-7428
State Employee Group Insurance Program (SEGIP)	MMB - Employee Insurance 400 Centennial Office Building 658 Cedar St. St. Paul, MN 55155 mn.gov/mmb/segip	651-355-0100 800-664-3597 segip.mmb@state.mn.us
Medicare and Social Security Contact Information SEGIP cannot answer questions related to Social Security or Medicare. Contact the appropriate agency below to get those questions answered.	Website	Phone Numbers
Medicare	www.medicare.gov	800-MEDICARE 800-633-4227 877-468-2048 TTY/TDD
Social Security	www.ssa.gov	800-772-1213 800-325-0778

Glossary

Allowed amount: A set amount that an insurance company and provider have agreed to as payment for a specific health care service or product. If you see a provider who is not in your health plan's network, you may have to pay the difference between the allowed amount and the amount the provider charges.

Brand name drugs: Drugs sold under a specific trademark and protected by a patent. The patent gives the drug company exclusive rights to make and sell that drug for a certain period.

Certificate of Coverage: A contract that details the conditions of the coverage you have with an insurance company. The certificate of coverage for the Coordinated Plan from Blue Cross is on the website. When looking for information on MedicareBlue Rx on the site, look for the Summary of Benefits.

Coinsurance: This is a percentage. It's what you pay for certain services after you've paid the deductible. For example, a coinsurance of 10% means the plan pays 90% of the cost of the service and you pay 10%.

Copay: This is a set dollar amount. You often pay it when you get a medical service. For example, the copay for an office visit is \$15 in HealthPartners Medicare Group Solution. The copay is \$0 for preventive care such as annual check-ups.

Coverage Gap/Donut Hole: Ends in 2025 for prescription drug coverage through Medicare.

Deductible: How much you pay for care each year before your plan starts to pay for certain services. For example, the Coordinated Plan through Blue Cross has a \$200 deductible for in-patient care. You can get some care without paying the deductible first. For example, you can usually get checkups and an annual flu shot without paying the deductible.

Dependent: Someone who is eligible for coverage under your policy or plan, usually a spouse and children. Go to the Family Eligibility section of SEGIP's website to learn more.

Effective date: The date on which coverage begins under an insurance policy or plan.

Eligible expenses: The medical expenses a health plan covers. Some health providers may charge more than what an insurance plan considers eligible. In these cases, the covered person is responsible for paying the additional costs.

Explanation of Benefits: This document shows you the total charges for your visit. It helps you understand how much your health plan pays, and what you'll pay when you get a bill from your provider.

Evidence of coverage: This document describes in detail the health care benefits covered by the health plan. It provides documentation of what that plan covers and how it works, including how much you pay.

Formulary: A list of medications that's covered by your plan. The decisions on what drugs to cover is made by a committee of physicians and pharmacists working with the health plan or company that manages the prescription drug part of the benefit.

Generic drugs: A medication that has been on the market long enough that no single manufacturer has an exclusive right to make or sell it.

In-network: The health care providers your plan administrator works with to provide you care. Ask if a provider is still participating with your plan before you seek services because networks may change during the year.

Medicare: Health insurance sponsored by the federal government for people 65 or older, or people with End-Stage Renal Disease, Lou Gehrig's disease, and some disabilities. It pays part of an individual's medical expenses for hospital, clinic, provider, drug, and other medical care. SEGIP-sponsored plans for people 65 and older work with Medicare. In fact, you have to have Medicare Parts A and B in order to qualify for a SEGIP plan.

- **Medicare Part A:** Pays for inpatient hospital services and care provided in skilled nursing facilities.
- **Medicare Part B:** Pays for medically necessary doctors' services, outpatient hospital services, and other medical services and supplies not covered by Part A.
- **Medicare Part C:** Coverage that combines Medicare parts A, B and D into one plan. It's also called Medicare Advantage. (It is not connected to the Minnesota Advantage Health Plan for state employees.)
- **Medicare Part D:** Is prescription drug coverage through Medicare. SEGIP-sponsored plans include prescription drug coverage in the premium you pay each month. Do not buy Part D coverage outside of SEGIP. Doing so takes away your SEGIP-sponsored coverage.

Open Enrollment: The one time each year when people can change medical plan administrators. Open enrollment for SEGIP-sponsored coverage is Oct. 24 to 11:59 p.m. on Nov. 13, 2024. The term Open Enrollment is also used to market Medicare. Medicare open enrollment is not connected to SEGIP open enrollment.

Out-of-pocket costs: What you pay for health care products and services. Deductibles, copays, and co-insurance are all part of what you pay out of pocket.

Outpatient services: Care that does not require hospitalization.

Preferred brand: Often two brand-name drugs can treat the same condition. Usually a pharmacy benefits manager can get one less expensively than the other. That drug becomes a preferred drug. That's why copays are less for preferred medications.

Preferred Provider Organization

(PPO): A PPO is a type of health plan. The PPO uses a network of providers including physicians and hospitals. As a retiree age 65 and older, your costs may be higher if you get care outside the network, even if the provider accepts Medicare and is willing to see you.

Prescription Drug Plan (PDP): A type of prescription drug coverage. People age 65 and older with coverage through SEGIP should not buy a PDP, or Medicare Part D prescription drug plan. Drug coverage is included in the premium paid each month to Blue Cross or HealthPartners. If you participate in SEGIP and buy a PDP outside of your SEGIP-sponsored plan, Medicare disenrolls you from the SEGIP plan.

Primary care: Routine medical care, usually provided in a doctor's office. Internist, family or general practitioner, obstetrician-gynecologist, osteopath, and pediatricians all provide primary care.

Provider: A doctor, therapist, chiropractor, dentist, or another licensed medical practitioner. Your medical plan has a list of providers who have agreed to provide you services. These are your in-network participating providers.

Retiree Plan: Medical coverage options sponsored by SEGIP for state retirees and their dependents. There are plans for people age 65 and older, general retirees under age 65, and special retirees under age 65.

Senior Plan: Medical plan sponsored by SEGIP for a state retiree and their spouse who are age 65 and older.

Special Retiree: Minnesota law provides that specific retirees continue to have their employer pay part of the premium every month like they do for active employees. Go to mn.gov/mmb/segip/retirement for details.

Summary of Benefits: A document that provides details about coverage through HealthPartners Medicare Group Solution and Group MedicareBlue Rx. When searching for information on other SEGIP-sponsored plans, look for the certificate of coverage.