Ohio Police & Fire Pension Fund

alight

Frequently asked questions about Alight Retiree Health Solutions

Q. How will I know what to do next?

A. Alight will guide you through every step of the enrollment process. Here's what to expect:

- **Personalized support:** You'll receive a letter with details about your appointment with a licensed Benefits Advisor, enrollment timelines, and your OP&F stipend.
- **Online resources:** Alight's website offers information on Medicare Advantage, Medigap, and prescription drug plans, plus educational videos and FAQs to help you prepare.
- **Account setup:** You'll get instructions to log in to your Alight account using your personal Alight ID. Be sure to activate your account and complete your profile. Include your preferred doctors, hospitals, and prescription drugs. This helps match you with plans that may fit your needs.
- **Appointment confirmation:** When you receive your appointment details, confirm it to give your licensed Benefits Advisor permission to contact you.

Q. Why do I need supplemental coverage?

A. Medicare Parts A and B alone do not limit your annual out-of-pocket expenses. To protect yourself from unexpected health care costs, we have partnered with Alight Retiree Health Solutions. Alight can help you determine which plans may be right for your needs and your budget.

Q. Why should I trust Alight?

A. Alight is OP&F's trusted vendor partner and enrollment platform where you can shop for health insurance, enroll in coverage, and get personalized, unbiased guidance and support. Alight acts as an advisor, helping you understand and choose from various insurance plans, rather than being an insurance provider itself. Licensed Benefits Advisors offer guidance based on your specific needs and preferences.

Q. What services are available through Alight that I cannot get by enrolling someplace else?

A. Enrolling through Alight gives you several value-added services including:

- Access to an OP&F stipend.
- Automatic premium reimbursement from the stipend.
- Ongoing access to licensed Benefits Advisors who can help you with your health plan choices. This service does not cost you anything. You only pay for the plans you enroll in.
- Advocacy services that provide help with billing procedures, claims and appeals, benefit questions, and access-to-care problems.

Q. What more can you tell me about licensed Benefits Advisors?

A. Although you may be able to choose and enroll in individual health coverage on the Alight website, a licensed Benefits Advisor can provide personalized, unbiased guidance to help you find coverage that works for your needs. If you plan to use the Alight website to enroll directly, assistance will be available by phone or online chat if you need it.

Frequently asked questions

Q. Do licensed Benefits Advisors charge a fee for helping me?

A. No. You only pay the cost of the plans/coverage you select. Licensed Benefits Advisors do not receive special compensation to enroll you in a specific plan or with a specific insurance company. They offer objective guidance to help you make the choice that may be right for your needs.

Q. How much time should I plan on for my appointment with a licensed Benefits Advisor?

A. Depending on whether you enroll that day, or how many questions you have, your call may be 45-60 minutes. The length of your call will also depend on how much preparation you do in advance.

To prepare for your appointment, it is helpful to set up your Alight account to compare plans and narrow down your options. Look for your Alight ID in the communication you received from Alight.

- Go to retiree.alight.com/OP-F
- Activate your account, then add your doctors and prescription drugs. This will help match plans to your needs.
- Use the plan recommendation tool to compare plans and add them to your cart.

Note: Each person enrolling in a plan will need to activate his/her account separately.

Keep in mind, a licensed Benefits Advisor will take as much time as you need to feel comfortable with your plan selection.

Q. What happens if I do not confirm my phone appointment?

A. A licensed Benefits Advisor can only call if you have confirmed the appointment. This is regulated by the Centers for Medicare & Medicaid Services (CMS). You can reschedule the appointment if the time isn't convenient for you.

Q. Does Alight offer every policy available in my area?

A. No. Their goal is to create a competitive marketplace where you can shop for a variety of health policies. To maintain this, Alight follows stringent guidelines about the insurance companies that participate in its exchange by:

- Carefully selecting insurance companies and products based on the insurers' financial ratings, premium stability, member service level, and Medicare Five-Star Quality Rating System.
- Not offering the policies of insurers that cannot meet Alight's technology requirements for electronic enrollment, automatic premium reimbursements, etc., or have not demonstrated historical stability in a particular geographic area.

In some cases, certain insurance companies may not be listed because they currently choose not to offer their plans through a private retiree health exchange. However, Alight's experience has shown that the majority of retirees have a wide variety of competitively priced plan options and are able to find a policy that is the same or better than group coverage.

Q. Do all policies have guaranteed issue through Alight?

A. Most (but not all) policies offer this feature, which allows you to enroll in a plan without answering any medical questions. Here is how it works:

- Medicare Advantage plans and prescription drug plans that you are eligible for are guaranteed issue (GI)* — both during the initial transition and during each future Open Enrollment Period. Most Medigap plans offer GI when you are losing eligibility for your employer group plan. There are exceptions, so we advise that you speak with a licensed Benefits Advisor to get details that impact the decisions you make for your own health care needs.

*Effective January 1, 2021, individuals with End Stage Renal Disease (ESRD) are eligible to enroll in Medicare Advantage plans. For more information, talk with a licensed Benefits Advisor.

Q. Does OP&F choose the insurance coverage options offered through Alight?

A. No. As a private exchange, Alight is able to offer many plans from regional and national insurance companies so you have many more options to choose from.

Frequently asked questions

Q. Is there a deadline for choosing new Medicare coverage each year?

A. Yes. Unless you qualify for a special election period, the deadline to enroll is Dec. 7 in order to have benefits on Jan. 1, and avoid a lapse in coverage. The sooner you enroll, the sooner you will get your new ID cards.

Q. What if I do not enroll in an individual medical plan?

A. Even if you choose not to enroll in a medical plan, you will need to choose a new prescription drug plan through Alight to be eligible for the OP&F stipend. However, we recommend that you consider additional medical coverage in addition to Original Medicare (Parts A and B). This is because, under Medicare Parts A and B alone, there is no limit on your out-of-pocket expenses. Plus, you could face penalties if you do not enroll in coverage during the specified enrollment period but decide to enroll later. You can find more information at www.medicare.gov.

Q. I'm retiring and my spouse and children are not eligible for Medicare. Can they continue to receive OP&F group coverage?

A. No, the OP&F group plan will no longer be offered. They will need to enroll in a qualified Individual & Family plan through Alight Retiree Health Solutions, healthcare.gov, or a local agent. Contact Alight if you need help choosing coverage.

Q. Can Alight help me find coverage for a Medicare-eligible dependent under the age of 65?

A. Yes. Through Alight, your dependents also have access to a variety of plans and coverage options. These services are available at no additional cost. You only pay the insurance premium for the plans you choose.

Q. Is it possible that a local insurance broker can get me a better rate than what I can buy through Alight for the same plan?

A. If the rate is different for the same plan, there is a reason for it. Here is why:

- By law, the price you pay to purchase the same policy from the same carrier will not differ, whether you purchase it through Alight or through another broker.
- Alight cannot add a surcharge to any premium.
- The quotes you receive directly from local brokers or insurance companies may already include potential discounts for a number of factors like direct debit payments, couple enrollment discounts, etc. In general, the prices listed on Alight may not yet reflect these discounts since the insurance company has to review and approve your application to determine which discounts may apply. If you qualify for a discounted rate when enrolling with an insurance company through Alight, you will get the same discounted rate as you would from a local agent or broker.
- Though the same policies from the same insurance company will have the same price regardless of where or how you enroll, in some cases, the policy that a local agent or broker offers, while similar, is actually different from the one offered through Alight. There may be value-added services and features that could affect the premium, so it is important to carefully review plan details.

Q. How do I pay the premiums for the plans I enroll in through Alight?

A. You will be responsible for paying premiums directly to your new insurance company. To avoid missing a payment and risk losing coverage, we recommend that you take advantage of automatic payment features, like direct debit, through your new insurer.

Q. When do I pay for my coverage?

A. Insurance plans generally invoice monthly and may require you to authorize automatic debit from your bank.

Q. Is there financial assistance to help pay for coverage?

A. Yes. To qualify for your OP&F stipend, you must enroll in a medical or a prescription drug plan through Alight.

Frequently asked questions

Each year, OP&F intends to issue a stipend that you can use to reimburse yourself for qualifying expenses.

Premiums: You may use your stipend to reimburse for your medical, prescription drug, dental, and vision insurance premiums.

Out-of-pocket expenses: You may also use your stipend to reimburse for eligible expenses such as copays, deductibles, and other health-related services, up to the amount in your account.

If you and an eligible dependent enroll through Alight, the contribution amount will be increased. If you enroll after January, contributions will be prorated. Should you or your eligible dependent turn 65 and become eligible for Medicare mid-year, your stipend will change and will again be prorated at that time.

OP&F also sponsors a Low Income Stipend Increase Program for individuals or families who qualify. For more information on this program, please contact OP&F.

Q. Where can I go with questions?

A. You will find detailed answers to most questions, as well as contact information at **retiree.alight.com/OP-F**, or by calling Alight at (844) 290-3674.

Q. What do I do if I have an issue with my new plan after enrolling?

A. When you enroll in a plan through Alight, you'll get ongoing support. If you have basic questions about your plan, contact your insurance company. More complex issues involving claims, billing procedures, appeals, or difficulty getting appointments with specialists can be directed to Alight at no additional cost to you.

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