2018 60/30 RETIREE INSURANCE QUICK REFERENCE

WHEN YOU BECOME ELIGIBLE TO "60/30" RETIRE, YOUR CURRENT COVERAGE UNDER GA-23000 WILL CONVERT TO THE NATIONAL EARLY RETIREMENT PLAN **GA-46000**. HOWEVER, ENROLLMENT INTO GA-46000 IS NOT AUTOMATIC. YOU SHOULD CALL UNITED HEALTH CARE AT **(800) 842-5252** AT LEAST 90 DAYS PRIOR TO RETIRING AND ASK FOR ENROLLMENT FORMS FOR GA-46000. THERE IS NO CHARGE FOR THE BASIC GA-46000. THE SUPPLEMENT TO GA-46000 IS **GA-23111, PLAN E**. THE PLAN E COST IS $220 PER MONTH FOR THE RETIREE AND THE SAME PRICE FOR THE DEPENDENTS PACKAGE. CONSIDER ENROLLMENT FOR 18 MONTHS OF DENTAL/VISION UNDER COBRA AT THIS TIME. CONTACT RRB 90 DAYS PRIOR TO YOUR PLANNED RETIREMENT DATE (877) 772-5772.

GA-46000 PAYS 80% OF COVERED EXPENSES AFTER A $100 CALENDAR YEAR DEDUCTIBLE. GA-46000 HAS PRESCRIPTION COVERAGE INCLUDED. THE LIFETIME MAJOR MEDICAL BENEFIT IS $157,800.00 BUT THE PURCHASE OF THE GA-23111 PLAN E SUPPLEMENT ADDS $500,000.00 TO THE LIFETIME MAJOR MEDICAL COVERAGE. **PLAN E SUPPLEMENT** PAYS 70% OF THE 20% LEFT UNPAID FROM THE GA-46000 80% PAYMENT. IN CASES WHERE SPOUSE IS ON SS DISABILITY AND MEDICARE ELIGIBLE BUT BECAUSE YOU WERE AN ACTIVE EMPLOYEE SHE CONTINUED ON YOUR GA-23000, BE AWARE, WHEN YOU RETIRE, SPOUSE MUST THEN ENROLL IN MEDICARE PART B AND FOR A SUPPLEMENT, PURCHASE GA-23111 PLAN F.

WHEN THE RETIREE REACHES AGE 65 AND BECOMES ELIGIBLE FOR MEDICARE, GA- 46000 IS ELIMINATED FOR BOTH THE RETIREE AND DEPENDENTS. AT THAT POINT IF SPOUSE HAS NOT REACHED AGE 65 YOU MAY WANT TO PURCHASE PLAN A, B, OR C FOR YOUR SPOUSE UNTIL HE/SHE BECOMES ELIGIBLE FOR MEDICARE. A UHC RETIREMENT SPECIALIST (AT 1-800-842-5252) WILL QUOTE YOU THE PRICES OF EACH PLAN.

WHEN YOU ARE ELIGIBLE FOR AGE 65 MEDICARE OR EARLY MEDICARE (**WITH A DISABILITY FREEZE OR T&P DISABILITY**) YOU MAY WANT TO PURCHASE **GA-23111, PLAN F** FOR YOUR MEDICARE SUPPLEMENT INSURANCE**; CALL (800) 809-0453.** IF YOU CHOOSE ANOTHER PLAN F OUTSIDE THE UNION PLAN, BEWARE, YOU MAY HAVE TO WAIT FOR OPEN ENROLLMENT TO RETURN. MEDICARE HAS A PART D PRESCRIPTION DRUG PROGRAM: (800) 842-5252. ALSO, BLET/IBT (TEAMSTER) MEMBERS ARE ELIGIBLE FOR **"TEAMStar" MEDICARE PART D PRESCRIPTION DRUG PROGRAM, FOR INFORMATION, CALL (866) 524-4173.**

YOUR $2000.00 **RETIREE LIFE INSURANCE** IS HANDLED BY MET-LIFE AT: (800) 310-7770. MAKE CERTAIN YOUR BENIFICIARY IS CORRECT.

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STEEL & MOSS LAW FIRM

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