

Please review these questions and answers regarding the Abbott-sponsored Group Medicare Advantage (MA) plan and how it differs from the UHC Retiree Indemnity with Medicare (Indemnity) plan option. *Information shared below is specific to the plan offering for Abbott retirees who are eligible for Medicare.*

To confirm eligibility, please contact the Abbott Benefits Center at 844-306-9222 or access your account at www.abbottbenefits.com and click on the Abbott Benefits Center link at the top of the page.

Do I still need Original Medicare (Part A and Part B) to enroll in the MA plan?

Yes. Per Medicare rules, you must be entitled to Medicare Part A and enrolled in Medicare Part B. You must continue paying your Medicare Part B premium to remain eligible for coverage under the Abbott MA plan. Medicare also requires certain information in order to process your Group Medicare Advantage plan enrollment:

- A permanent U.S. street address (this cannot be a P.O. Box)
- Your Medicare ID card number (MBI)

If I sign up for coverage with Abbott, do I still need to use my red, white and blue Medicare card?

For the MA plan, the answer is no. You will only use your UHC Group Medicare Advantage member ID card. UHC pays all claims directly; the claims no longer go to Medicare first. Using your UHC member ID card will ensure that your claims are processed correctly, timely and accurately. Be sure to store your Medicare card safely.

For the Indemnity plan, Medicare is still primary so you will need to keep and use your red, white and blue Medicare card for services.

How much do the Abbott plans cost?

Cost is determined by your qualified years of service worked at Abbott. For details contact the Abbott Benefits Center. The MA plan is generally less than the Indemnity plan.

Is this the same Medicare Advantage plan that I have seen advertised on TV or by mail?

No. This is a custom Group Medicare Advantage (PPO) plan designed for Abbott retirees. This plan is different and should not be confused with individual Medicare Advantage plans available in your area. Other Medicare Advantage plans may offer low premiums but allow access only to limited networks; with Abbott's plan, you can access any provider accepting Medicare.

What is a 'lifetime maximum' and do the Abbott plans have one?

A lifetime maximum is the highest amount of total claims paid that your insurance benefit will provide during your lifetime. The Indemnity plan maximum is \$500,000 and the MA plan does

not have a maximum. Once you've reached the lifetime maximum under the Indemnity plan, your coverage will end under that plan. Individuals who meet the maximum are no longer eligible for future coverage with Abbott.

What is a deductible and do the Abbott plans have one?

A deductible is the amount that you pay before your insurance benefits begin. The Indemnity plan has a \$400 deductible, while the MA plan has a \$300 deductible. Some services, like the annual wellness visit, virtual visits and urgent care visits don't require you to satisfy the deductible first.

How does an 'out-of-pocket maximum' work and what is the limit?

An out-of-pocket maximum places a limit on how much money you pay for your medical expenses in a calendar year. This does not include prescription drug costs or plan premiums. The out-of-pocket maximum is \$2,000 per person, per year for both plans.

What providers can I use with these plans?

The MA plan is a unique Preferred Provider Organization (PPO) plan that allows you to see any provider (in-network or out-of-network) at the same cost share for covered services, as long as the provider has not opted out of or been excluded from Medicare. You can visit retiree.uhc.com/abbott or contact UHC to confirm local providers and facilities.

The Indemnity plan offers coverage to only those providers that participate in Medicare to ensure you get the best benefit in the Indemnity plan. With Medicare as the primary insurer and Abbott the secondary insurer, please visit [medicare.gov](https://www.medicare.gov) or speak with your provider to confirm participation in Medicare.

How do I get the credit towards my Medicare Part B premium ("subsidy") for the MA plan?

In 2024, the credit (per person enrolled) will be \$35 each month, which will be paid by UnitedHealthcare to each individual enrolled in the Abbott MA plan. UnitedHealthcare will coordinate with Centers for Medicare & Medicaid Services (CMS) to have the \$35 per month subsidy applied when you are enrolled in the Group Medicare Advantage plan.

If you pay your Part B premium through:	Then:
A deduction in your Social Security benefit	The \$35 subsidy will be applied to your Social Security benefit
A quarterly bill from Social Security/Medicare	Your Part B bill will be reduced by \$105 on a quarterly basis (<i>e.g., \$35 times 3 months</i>)
A deduction in your annuity check	The \$35 subsidy will be applied to your annuity benefit

It can take up to 90 days from when you enroll in the Medicare Advantage plan for the Part B premium subsidy to be applied for the first time. The first subsidy will be backdated to include

any months missed. You may not see a separate line item for the subsidy on your Medicare Statement, you may only see a reduced total for Part B (Medical Insurance) If you do not see the subsidy credit, please contact UHC directly.

What programs does the MA plan offer that the Indemnity plan does not?

- **Virtual Visits** allows you to live video chat with a provider from your computer, tablet or smartphone — any time, day or night. Doctor visits include minor health care concerns such as cough/cold, allergies, fever, flu or sore throat. Behavioral Health includes health concerns such as stress and anxiety, or depression.
- **Nurse Support** connects you with experienced registered nurses 24/7 to learn about conditions and treatment options, get recommendations on healthy living or find doctors, hospitals and urgent care centers in your area to fit your needs.
- **UnitedHealthcare® HouseCalls program** connects plan members with a health care professional at home for up to a full hour to review your health history and current medications, discuss important health screenings, identify health risks and provide health education.
- **Renew Active™** is a fitness program for body and mind that's available to you at no additional cost. With Renew Active, you'll receive a free gym membership with access to an extensive network of gyms and fitness locations, an online brain health program and access to the Fitbit® Community for Renew Active members, including access to thousands of workout videos. Renew Active can help you stay fit, focused and ready for what's next. To find a list of fitness locations near you, visit UHCRenewActive.com/location.

Can I enroll in both the MA plan and the Indemnity plan at Abbott?

No. You can only enroll in one plan. Also, any Medicare-eligible individuals within a single household need to be enrolled in the same plan. This means if you select the MA plan for yourself and you cover your spouse, your spouse is only eligible to enroll in the MA plan.

Can I enroll in multiple plans outside of Abbott?

For the MA plan, the answer is no. Medicare has rules about what types of coverage you can add or combine with a group-sponsored MA plan. You may only be enrolled in one MA plan and one Medicare Part D prescription drug plan at a time. If you enroll in another MA plan after your enrollment in this group-sponsored plan, you will be disenrolled from this plan and you may not be able to re-enroll.

What prescription plan comes with the plans?

The prescription drug coverage is administered by Express Scripts and is the same for both Abbott plans. You can visit express-scripts.com/abbott for details.

When can I enroll?

If you are currently enrolled in benefits, the Abbott Benefits Center will send you a notice when your enrollment window for Medicare-eligible plans opens. If you are not yet enrolled as a retiree, please contact the Abbott Benefits Center.

Can I switch plans?

You can enroll or switch plans during Open Enrollment each year in the fall.

When will I get my ID cards?

Both UHC and Express Scripts will send out cards within a few weeks of receiving your enrollment. If you don't receive your cards, please contact these organizations directly.

What happens to my dependent's coverage if he/she is under 65 and/is not eligible for Medicare?

Dependents who are not eligible for Medicare will remain in their current Abbott plan. When your dependent turns 65 or becomes entitled to Medicare, contact the Abbott Benefits Center to initiate a change in coverage to an Abbott Medicare plan.

Where can I find more information?

Visit retiree.uhc.com/abbott to view plan comparisons and find information on live informational sessions.

Contact Information:**Abbott Benefits Center:** AbbottBenefits.com

For questions about eligibility and pricing, please contact the Abbott Benefits Center:
844-306-9222 7:00 a.m. – 7:00 p.m. Central time, Monday – Friday

UHC Medicare Advantage Plan: retiree.uhc.com/abbott

For questions about plan details, coverage or providers, please contact UHC:
866-561-4042 8:00 a.m. – 8:00 p.m. local time, Monday – Friday

Note: Available 7 days a week from October 15 – December 7

UHC Indemnity Plan: myUHC.com

For questions about how this plan pays secondary to Medicare, please contact UHC:
800-603-3813 7:00 a.m. – 10:00 p.m. Central time, Monday – Friday