



# Discover a unique Medicare plan designed only for AT&T retirees

August 28, 2021

We understand that having a choice can improve your experience, and we are again pleased to offer the AT&T Group Medicare Advantage (PPO) plan insured by UnitedHealthcare®. **More than 75,000 AT&T members are enrolled in this plan with a 95% satisfaction rate<sup>1</sup>.**

This is a custom Group Medicare Advantage (PPO) plan for AT&T retirees and your eligible dependents. It is designed to combine features of individual Medicare Supplement, Medicare Part D Prescription Drug (PDP) and Medicare Advantage plans with enhanced features compared to plans in the individual marketplace. This plan is also designed to provide access to any Medicare provider that accepts the plan and continued coverage for nearly all Part D medications at your current pharmacy.

## See what's new with the AT&T Group Medicare Advantage (PPO) plan for 2022

- **Renew Active**, a Medicare fitness program for body and mind, at no additional cost
- **Improved Tier 4 drug benefit** to a \$95 copayment (30-day refill)
- **8 hours of free in-home care support** each plan year from a network of pre-screened, professional caregivers
- **Reduced plan premium** for non-subsidized retirees and dependents — subsidized retirees continue to pay no premium



**Important  
reminder**

Go online at [www.att.com/benefitscenter](http://www.att.com/benefitscenter) between October 11–November 5 to:

- Enroll in the AT&T Group Medicare Advantage (PPO) plan
- Review any changes to your life insurance and/or CarePlus benefits

# What this means for you

## Enrolled in an individual Medicare Supplement plan with Part D coverage?

You could save up to \$1,000 or more annually<sup>1</sup> by switching to the AT&T Group Medicare Advantage (PPO) plan.

## Enrolled in an individual Medicare Advantage plan?

You will have broader provider access, richer benefits and you may see annual savings.

Compared with individual Medicare Supplement plans and individual Medicare Advantage plans, the AT&T Group Medicare Advantage (PPO) plan provides a unique combination of features and benefits	Individual Medicare Supplement plan with a stand-alone PDP plan	Individual Medicare Advantage plan	AT&T Group Medicare Advantage (PPO) plan
Lower monthly premiums		✓	
Lower out-of-pocket costs	✓		
See any provider who accepts Medicare and the plan	✓		
Includes prescription drug coverage	✓	✓	
Voluntary clinical and wellness programs		✓	
Worldwide emergency and urgent care coverage		✓	
Value-added benefits not included with Original Medicare		✓	
Custom benefits and dedicated customer service for AT&T retirees			



## 2022 costs of coverage

We are offering this plan to eligible retirees and dependents at the following monthly contribution:

Subsidy eligible		Not subsidy eligible	
Retiree	Dependent	Retiree	Dependent
\$0	\$88.13	\$88.13	\$88.13



## The Medicare plan with more benefits and personalized care

When you choose the AT&T Group Medicare Advantage (PPO) plan, you're selecting a plan you can't get anywhere else. This plan has an exclusive combination of benefits designed to help you get the most from your retirement, including:

- **A \$900 annual out-of-pocket maximum for medical**, which may be lower than your current plan
- In-home wellness visits with UnitedHealthcare® HouseCalls
- Anytime medical advice through Telephonic Nurse Support
- A free gym membership through Renew Active®
- Rewards for certain health care activities through Renew Rewards
- Discounts on hearing aids through UnitedHealthcare® Hearing
- Post-discharge meals, post-discharge transportation and in-home care
- Special programs for chronic conditions like diabetes or heart disease
- Routine chiropractic and acupuncture services
- Virtual doctor and behavioral health visits



## Important information

Medicare requires the following in order for you to be enrolled in the AT&T Group Medicare Advantage (PPO) plan insured by UnitedHealthcare®.

- You must be entitled to Medicare Part A and enrolled in Medicare Part B
- You must continue paying your Medicare Part B premium
- You must have a permanent street address (this cannot be a P.O. Box)
- You must have your Medicare ID number
- You must live within the 50 United States, the District of Columbia or U.S. territories

If you are not enrolled in Medicare Parts A and B, and/or you live outside the 50 United States, the District of Columbia, or U.S. territories, you should contact Social Security at **1-800-772-1213**, TTY **1-800-325-0778**, between 8 a.m.-7 p.m., Monday-Friday, or call your local office.



## What's next

Beginning October 1, in preparation for your enrollment period **October 11 through December 7**, contact UnitedHealthcare to learn more about this option. An experienced UnitedHealthcare Customer Service Advocate will conduct a personalized needs consultation to help you:

- Understand the details of the plan
- See how your current providers, medications and pharmacies are covered
- Compare the cost of the plan to your current plan
- Enroll in the plan

Contact:	To:	How:
<b>AT&amp;T Benefits Center</b>	Review changes to your life insurance and CarePlus benefits or for questions about eligibility	<b>1-877-722-0020</b> , Monday–Friday, 7 a.m.–7 p.m. CT <b><a href="http://www.att.com/benefitscenter">www.att.com/benefitscenter</a></b>
<b>UnitedHealthcare</b>	Learn more about the AT&T Group Medicare Advantage (PPO) plan and enroll	<b>1-866-819-3448, TTY 711</b> , 8 a.m.–8 p.m. local time, 7 days a week <b><a href="http://www.UHCRetiree.com/att">www.UHCRetiree.com/att</a></b>

<sup>1</sup>2020 UnitedHealthcare Group member and provider reporting data, member utilization and individual market plan premiums

This letter is a brief and broad summary, and is written for easy readability. In all cases, the official Plan documents govern and are the final authority on Plan terms. If there are any discrepancies between the information in this letter, Plan documents will control. AT&T reserves the right to terminate, modify, or amend any and all benefit plans at any time and for any reason. Nothing in this document should be construed as conferring a lifetime right to benefits or any particular level of benefits.

# Frequently asked questions

## AT&T Group Medicare Advantage (PPO) plan insured by UnitedHealthcare®

### 1. Is this a UnitedHealthcare Medicare Advantage plan that's advertised on TV?

No. This is a custom Group Medicare Advantage (PPO) plan designed exclusively for retirees of AT&T, with additional benefits and features and available on a national basis, including all U.S. territories. This plan is different and should not be confused with individual UnitedHealthcare Medicare Advantage plans that might be available in the area.

## HRA questions

### 2. Can I enroll in dental or vision? If so, can I continue to get an HRA subsidy?

If you wish to enroll in dental or vision coverage, you must enroll through the Aon Retiree Health Exchange (ARHE). Subsidy-eligible retirees and eligible dependents will continue to receive an HRA to purchase dental and vision. To enroll, contact the ARHE at [retiree.aon.com/att](http://retiree.aon.com/att) or call **1-800-928-8027**.

### 3. What happens to my HRA balance if I enroll in the AT&T Group Medicare Advantage (PPO) plan?

Your current HRA balance will not be impacted, and can be used for eligible medical expenses, including out-of-pocket expenses under the AT&T Group Medicare Advantage (PPO) plan. With the AT&T Group Medicare Advantage (PPO) plan, however, you will not be eligible for HRA crediting for your medical coverage.

## Medicare Supplement

### 4. Should I keep my Medicare Supplement plan?

Medicare Supplement plans do not work with Medicare Advantage plans, and you would not be able to use your Medicare Supplement to pay for any health care coverage.

If you choose to enroll in the AT&T Group Medicare Advantage (PPO) plan, you will have to actively disenroll from any Medicare Supplement plan when you receive your Medicare Advantage member ID card, otherwise, you will be paying for two different plans that do not coordinate payment. UnitedHealthcare will assist you with disenrolling from your Medicare Supplement Plan.

If you are currently enrolled in a Medicare Supplement plan and new to Medicare Advantage, you can try the AT&T Group Medicare Advantage (PPO) plan for up to one year and still have the option to go back to your former Medicare Supplement plan and carrier on a guarantee issue basis.<sup>2</sup>

You may receive/have received Medicare Supplement billing materials for the coming year. If you choose to enroll in the AT&T Group Medicare Advantage (PPO) plan you may disregard any billing materials for the upcoming year after you have canceled your Medicare Supplement plan. If you are enrolled in a Medicare Supplement plan with another Insurance Company, you will need to check with them for more details.

## **Prescription Drug Coverage**

### **5. Will my current medications continue to be covered at my local pharmacy?**

The AT&T Group Medicare Advantage (PPO) plan has a large formulary (drug list) uniquely designed for AT&T retirees to cover nearly all eligible Part D medications. The majority, if not all your current medications would continue to be covered.

Additionally, this plan includes an expanded pharmacy network with thousands of national chain, regional and independent local retail pharmacies across the 50 United States, the District of Columbia and U.S. territories. This pharmacy network is substantially larger than many offered on the individual market, which may result in your current pharmacy continuing to be in-network.

### **6. Will I need to change my prescriptions?**

In most cases, you will not need to change your prescriptions. This plan covers all Part D eligible drugs except some medications considered high risk for a Medicare population. You or your physician may request an exception for coverage.

### **7. Will the cost of my prescriptions change with the plan?**

Your cost for prescriptions may change. What you pay will depend on what drug cost tier your prescription falls into. Your cost may also change during the year based on the total cost of the prescriptions you have filled. To find out how your current prescriptions may be covered, call UnitedHealthcare Customer Service.

### **8. Will my current prescriptions be covered under this plan?**

Your member materials will provide information on your formulary (drug list) and plan design. We also recommend calling UnitedHealthcare Customer Service to review all your prescription medications.

### **9. Will my home delivery prescriptions transfer?**

We are not able to transfer your prescriptions from your current mail order pharmacy. We encourage you to have your doctor write you a new prescription to be filled at OptumRx home delivery.

Beginning January 1, 2022, your Preferred Mail Order Provider will be OptumRx®, a UnitedHealth Group company. Once you are enrolled, the UnitedHealthcare Quick Start Guide you receive will include OptumRx contact information.

## Network and service area

### 10. Can I continue to see my current provider?

The AT&T Group Medicare Advantage (PPO) plan is a unique Preferred Provider Organization (PPO) plan that allows you to see any Medicare-willing provider (in-network or out-of-network) at the same cost share, as long as the provider accepts the plan. More than 99.9% of members continue to have access to their chosen providers.<sup>1</sup>

### 11. What is the difference between in-network and out-of-network providers?

Network providers have a contract with UnitedHealthcare. Out-of-network providers do not have a contract. With this PPO plan, you can see any provider (in-network or out-of-network) at the same cost share. Members of the AT&T Group Medicare Advantage (PPO) plan have access to over 830,000 in-network providers and to any other Medicare provider accepting the plan. Over 99.9% of members continue to have access to their chosen providers.<sup>1</sup>

### 12. How are out-of-network claims processed?

Whether your provider is in-network or out-of-network, your provider can submit claims to UnitedHealthcare online. If needed, the UnitedHealthcare claim address information is provided on your UnitedHealthcare member ID card and in your Welcome Packet. UnitedHealthcare processes claims payments for out-of-network providers in compliance with all federal regulations.

## Additional programs and features

### 13. What is the Renew Active program?

Renew Active<sup>®</sup> is a Medicare fitness program for body and mind, available at no additional cost. You'll receive a free gym membership with access to the largest Medicare fitness network of gyms and fitness locations. This includes access to many premium gyms, on-demand digital workout videos and live streaming classes, social activities and access to an online Fitbit<sup>®</sup> Community for Renew Active and access to an online brain health program from AARP<sup>®</sup> Staying Sharp<sup>®</sup> (no Fitbit device is needed).

### 14. What is the UnitedHealthcare<sup>®</sup> HouseCalls program?

UnitedHealthcare<sup>®</sup> HouseCalls is an annual preventive care visit designed to complement your doctor's care and offered to you for no extra cost. The program sends a licensed health care practitioner to visit you at home. During the visit, they will review your medical history and current medications, perform a health screening, identify health risks and provide health education. It's also a chance to ask any health questions you may have. Once completed, HouseCalls will send a summary of your visit to your primary care provider so that they have this additional information regarding your health.

### **15. What is the post-discharge meal program?**

The post-discharge meal delivery program provides freshly-made meals to your home after you have been discharged from the hospital or skilled nursing facility, at no additional cost. The program provides up to 84 meals immediately following an inpatient hospital discharge or skilled nursing facility stay when referred by a UnitedHealthcare clinical advocate.

### **16. What is the post-discharge transportation program?**

The transportation program gives you a lift to and from medically-related visits such as doctors' appointments following inpatient hospital discharges or skilled nursing facility stays. The program offers unlimited rides up to 30 days upon referral from a UnitedHealthcare clinical advocate.

## **Member ID card**

### **17. Do I still need to use my red, white and blue Medicare card if I enroll in the AT&T Group Medicare Advantage (PPO) Plan?**

No, you will only use your UnitedHealthcare member ID card for all covered medical and prescription drug services. Make sure to put your Medicare card somewhere for safe keeping. It is important that you use your UnitedHealthcare member ID card each time you receive medical services or fill a prescription. Because UnitedHealthcare pays all claims directly, the claims no longer go to Medicare first. By always showing your UnitedHealthcare member ID card, you can help make sure that your claims get processed correctly, timely and accurately.

### **18. When will I get my UnitedHealthcare member ID card?**

If you enroll in the AT&T Group Medicare Advantage (PPO) plan, a Quick Start Guide will be mailed to you 7-10 days after your enrollment is approved, along with your UnitedHealthcare member ID card. **Please note, your member ID card will be attached to the front cover of the Quick Start Guide.**



<sup>1</sup>2020 UnitedHealthcare Group member and provider reporting data, member utilization and individual market plan premiums

<sup>2</sup>2021 Medicare.gov, <https://www.medicare.gov/supplements-other-insurance/when-can-i-buy-medigap/guaranteed-issue-rights>

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OptumRx<sup>®</sup> is an affiliate of UnitedHealthcare Insurance Company. You are not required to use OptumRx home delivery for a 90-day supply of your maintenance medication. If you have not used OptumRx home delivery, you must approve the first prescription order sent directly from your doctor to OptumRx before it can be filled. New prescriptions from OptumRx should arrive within seven business days from the date the completed order is received, and refill orders should arrive in about seven business days. Contact OptumRx anytime at **1-888-279-1828**, TTY **711**.

The Formulary, pharmacy network, and/or provider network may change at any time. You will receive notice when necessary.

Participation in the Renew Active<sup>®</sup> program is voluntary. Consult your doctor prior to beginning an exercise program or making changes to your lifestyle or health care routine. Renew Active includes standard fitness membership and other offerings. Fitness membership equipment, classes, personalized fitness plans, caregiver access and events may vary by location. Certain services, discounts, classes, events and online fitness offerings are provided by affiliates of UnitedHealthcare Insurance Company or other third parties not affiliated with UnitedHealthcare. Participation in these third-party services are subject to your acceptance of their respective terms and policies. AARP Staying Sharp is the registered trademark of AARP. The largest gym network of all Medicare fitness programs is based upon comparison of competitors' website data as of March 2021. UnitedHealthcare is not responsible for the services or information provided by third parties. The information provided through these services is for informational purposes only and is not a substitute for the advice of a doctor. The Renew Active program varies by plan/area. Access to gym and fitness location network may vary by location and plan. Renew Active premium gym and fitness location network only available with certain plans.

This information is not a complete description of benefits. Call **1-866-819-3448**, TTY **711** for more information. Limitations, copayments, and restrictions may apply. Benefits, premiums and/or copayments/co-insurance may change on January 1 of each year.

Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract. Enrollment in the plan depends on the plan's contract renewal with Medicare.