



Frequently Asked Questions

These FAQs apply to Non-Grandfathered Medicare-eligible retirees.

General Questions

Q1: Where can I find more information about the AT&T Group Medicare Advantage Plan?

Please contact UnitedHealthcare. You can visit the website at retiree.uhc.com/att or call 1-866-819-3448, 8am-8pm Monday-Friday.

Q2: Why is AT&T making changes to the AT&T Group Medicare Advantage Plan in 2025?

Most of the changes to the AT&T Group Medicare Advantage Plan in 2025 are required changes by the government, but if you have specific questions about a change, you'll need to contact UnitedHealthcare at 1-866-819-3448, 8am-8pm Monday-Friday. For more information about the AT&T MAPD Plans, you can also visit the AT&T MAPD website retiree.uhc.com/att. There is a summary of the plans for 2025 as well as the ability to register for a webinar to hear more about the plans and ask questions.

Q3: I would like to drop my AT&T Group Medicare Advantage Plan in 2025 and enroll in an individual plan. Can you help me do that?

The first step for moving away from the AT&T Group Medicare Advantage Plan is to call UnitedHealthcare. They can answer any questions about the AT&T MAPD Plan, disenroll you from the AT&T MAPD Plan and can assist with any needed information on how you might need to enroll in an individual plan.

Q4: Will I receive a HRA credit if I enroll in the AT&T Group Medicare Advantage (PPO) Plan?

No. The company's HRA contribution ended December 31, 2023, however the AT&T Group Medicare Advantage Plan will be available in 2025 to any eligible retiree, spouse or dependent at no monthly contribution. If you still have unused HRA funds, you may visit the AT&T Benefits Center to submit a claim for eligible reimbursements.

Q5: Where can I check my HRA balance?

Please visit the AT&T Benefits Center at att.com/benefitscenter. And remember – any remaining HRA balance can be used for eligible medical expenses, including Medicare Part B premiums and out-of-pocket expenses under the AT&T MAPD Plans.

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Q6: If I enroll in the AT&T Group Medicare Advantage (PPO) Plan and then move to an individual Medicare Supplement plan in subsequent years, can I change my enrollment options (and vice versa)?

Yes. Based on current Medicare enrollment and AT&T Group Medicare Advantage Plan rules, you can change your elections annually, but please remember we now offer the AT&T MAPD Plan with no monthly costs to all Medicare eligible retirees and dependents.

Q7: If I enroll in the AT&T Group Medicare Advantage (PPO) Plan, will I receive a reimbursement for my Medicare Part B premium?

No. There is no change related to Part B premium reimbursements, so you will not receive a reimbursement directly from AT&T for this cost. That said, if you have remaining funds in your HRA, you may continue to reimburse yourself for Medicare Part B premiums from your HRA funds.

Q8: Will AT&T continue to offer CarePlus to retirees?

CarePlus will still be available to Medicare-eligible retirees in 2025. If you have questions about what is covered in CarePlus today, you can visit careplus.att.com.

Q9: Do I still have to enroll in order for my family members to remain eligible for AT&T coverage?

No. If there is a Medicare-eligible member in a retiree family, there will no longer be a requirement that the retiree be enrolled in AT&T-sponsored coverage in order for dependents to be eligible for AT&T coverage.

Q10: If I'm Medicare-eligible and have coverage as an active employee or as a dependent of an active employee from another employer (not retiree coverage), can I enroll in the AT&T Group Medicare Advantage (PPO) Plan?

No. Because you are employed or have coverage as an active employee or as a dependent of an active employee through another employer, Medicare is not your primary coverage. However, if you dis-enroll in your coverage from another employer and timely enroll in Medicare Parts A and B, you will be eligible to enroll in the AT&T Group Medicare Advantage (PPO) Plans.

Q11: I (or my spouse/partner) am turning 65 soon. What do I need to do?

You or your spouse/partner should receive information from Social Security well in advance of your 65th birthday. Take action as instructed to ensure you are enrolled in Medicare Parts A and B, and for AT&T post-employment coverage for the remainder of the current plan year. You must be enrolled in Medicare Parts A and B to be eligible for the AT&T Group Medicare Advantage (PPO) Plans.

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Q12: I am a pre-Medicare retiree, and my spouse is turning Medicare eligible. What do I need to do?

If you are a pre-Medicare retiree (e.g. not yet eligible for Medicare) and your spouse or dependent is Medicare-eligible, you will be in different plans. In 2025, the pre-Medicare retiree would need to enroll in a non-Medicare AT&T-sponsored plan, and then the Medicare-eligible spouse would be eligible to enroll in one of the AT&T MAPD Plans.

Group Medicare Advantage (PPO) Plan Questions

Billing Questions

Q13: When will I receive our bill?

Your bill is created on the 9th of each month and mailed from the AT&T Benefits Center on the 10th. You should allow an additional 1 to 5 business days for postal delivery. If you are set up to use Automatic Payments, you will not receive a bill in the mail.

Please note: If you enroll into a MAPD Plan before 12/7/24 you will receive a bill in December 2024. If you change your elections or enroll into the MAPD Plan after 12/7/24 you may receive your 1st bill in January which will include January and February premiums.

Q14: What if I am new to billing?

Your first bill will be mailed from the AT&T Benefits Center and will be accompanied with an informational letter outlining the billing process, due dates, payment options, and how you can have your contributions automatically withdrawn from your checking or savings account.

Q15: When is my payment due?

Typically, your bill payment is due on the 1st of the month. Payment due dates may vary in the following situations:

- You're receiving your first bill.
- Your bill shows a payment delinquency.
- If one of these situations applies to you, make sure that you check your bill to determine when your payment is due.

Q16: Why is the amount of my first bill larger than I expected?

The amount of your first bill may be larger because it may include more than one month of coverage and is retroactive to the date that your employer-provided coverage ended, or the last day for which your benefits were paid through payroll deductions.

Q17: How will I pay my premiums?

You can pay your premiums through check, money order, or automatic enrollment. Members on Pension with Fidelity may have any deductions taken through their pension check. You have the right to opt out of automatic pension deductions and elect to be billed.

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Network and Service Area Questions

Q18: What major hospitals are in the AT&T Group Medicare Advantage (PPO) Plans UnitedHealthcare network?

While there are many hospitals in the UnitedHealthcare network, all hospitals accept Medicare and are eligible on an out-of-network basis under this plan. To determine if your hospital is in-network or out-of-network and willing to accept the plan, please call UnitedHealthcare. The UnitedHealthcare Customer Service Advocates will be able to confirm if a hospital (or provider) is in-network or, if out-of-network, they are willing to accept the plan.

AT&T Group Medicare Advantage (PPO) Plan Changes

Q19: Are there changes to the AT&T MAPD Plans in 2025?

UnitedHealthcare generally does not know the full impact of CMS funding on the AT&T MAPD Plan for each plan year until closer to open enrollment for that plan year (e.g. in the fall of 2024 for plan year 2025). Any annual adjustments, if needed, will be communicated at that time. This process is very similar to the annual changes to Medicare Advantage plans on the individual market.

In addition, as a result of the [Inflation Reduction Act \(IRA\)](#) passed by Congress in 2022, additional mandated changes will be made to all Medicare Advantage plans in 2025 - the AT&T MAPD Plan as well as all Medicare Advantage and Part D Prescription Drug plans on the individual market. This includes a yearly cap of \$2,000 on out-of-pocket prescription drug costs. The exact effect of this and other IRA changes to the AT&T MAPD Plan in 2025 are unknown at this time but will be communicated closer to open enrollment in 2024, as more information from CMS is released.

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