

AT&T Ameritech /SBC Retirees - We are AASBCR®

Blue Bulletin

VOL 016 NO 006

September, 2021

Bulletins and the website are paid for by AASBCR® members. Please do not share with non-members. Instead encourage retiree friends to join and support AASBCR®.

INFORMATION FOR MEDICARE RETIREES CONSIDERING THE AT&T MAPD (MEDICARE ADVANTAGE) PLAN

Q. What happens to my \$2700 HRA if I sign up for the AT&T MAPD Plan?

If you are currently receiving a \$2700 HRA, choosing the AT&T MAPD plan will eliminate that HRA. **You cannot have both the \$2700 HRA and the AT&T MAPD.**

Q. What about my dependents, will they also lose their \$1500 HRA if I sign up for the AT&T MAPD?

You and your dependent can choose differently. If you choose the AT&T MAPD and your dependent chooses to stay with Aon, you will not be eligible for the \$2700 HRA but your dependent would be eligible for \$1500 HRA.

Q. What if my dependent also wants to sign up for the AT&T MAPD?

If your dependent is currently receiving a \$1500 HRA your dependent choosing the AT&T MAPD will eliminate that HRA. It will cost about \$88 per month for the dependent.

Q. What happens if I want to stay with my current plan through Aon but my spouse wants to choose the AT&T MAPD?

If you choose to stay with Aon and your spouse (or dependent) chooses the AT&T MAPD, you would continue to be eligible for the \$2700 HRA but your dependent would **not** be eligible for the \$1500 HRA.

Q. If I sign up for the AT&T MAPD, do I still have to pay the monthly Medicare Part B premium?

As with all Medicare Advantage Plans, you are required to pay the monthly fee for Medicare Part B. You are no longer covered under Medicare Part B but your payment goes to the insurance company providing the Medicare Advantage Plan. In the case of the AT&T Medicare Advantage Plan, that would be UnitedHealthcare.

PO Box 110355 Cleveland OH 44111-0355 Phone/FAX (312) 962-2770 <http://aasbcr.org/>

This communication is Private and Confidential. It is intended only for viewing by AASBCR® Members. Copying or forwarding of this communication is not authorized by AASBCR®.

Q. What happens if I change my mind and want to return to original Medicare?

Unlike other Medicare Advantage Plans, the AT&T MAPD requires that participants stay in the plan for a full year. After the 1 year, if you choose to return to original Medicare **you can do so but you might be underwritten.** This means that **you would be required to provide a medical history, which could include all previous medical conditions and all prescription drugs that you take. This could result in a higher cost, limited coverage for a pre-existing condition or a refusal by the insurance carrier to accept you.**

Q. What if my dependent and I choose the AT&T MAPD but we still want to get vision or dental through Aon?

If you choose dental and/or vision coverage through Aon, you would be eligible for up to a \$300 HRA. If your dependent also chooses dental and or vision coverage through Aon, the dependent would also be eligible for up to a \$200 HRA. Maximum HRA would be \$500.

Q. I am a Medicare retiree but I'm not entitled to healthcare benefits or an HRA. Am I eligible to buy into this AT&T Group MA Plan?

If you are a Medicare retiree (not grandfathered) and not receiving an HRA, you are what is termed as "unsubsidized". However you can still choose this new plan, but you would pay about \$88 per month for yourself and about \$88 per month for your dependent should your dependent also choose this plan.

Q. Today I get reimbursed for my Medicare Part B premiums through my HRA. If I sign up for the AT&T MAPD can I still get reimbursed?

No, if you choose the AT&T MAPD, you would not be eligible to have the Medicare Part B premiums reimbursed because you would no longer have an HRA.

Proudly working on behalf of retirees of the Bell System and successor companies of the New AT&T, located worldwide

PO Box 110355 Cleveland OH 44111-0355 Phone/FAX (312) 962-2770 <http://aasbcr.org/>

This communication is Private and Confidential. It is intended only for viewing by AASBCR® Members. Copying or forwarding of this communication is not authorized by AASBCR®.