OBERLIN COLLEGE & CONSERVATORY

Department of Human Resources

DEAR OBERLIN COLLEGE RETIREE (AGES 65 +),

Oberlin College and Conservatory’s open enrollment period began on October 15th and will continue through Monday, December 7, 2020 at 5:00 PM. This is your annual opportunity to review and make changes to your benefits. Any changes made to your benefits will be effective January 1, 2021.

Open enrollment is important because it may be the only time you can make changes to your benefits. Once December 7, 2020 has passed, your choices are binding until the next open enrollment period.

Please submit your paperwork to HR by December 7th at 5:00 P.M.

- Email is preferred: human.resources@oberlin.edu (no need to send original copy)
- Fax is available: (440) 775-8683
- Office Hours: Monday – Friday 8:00 AM to 5:00PM
- Mail: Oberlin College HR 173 W Lorain St. Suite 205 Oberlin, OH 44074
- A lock box is provided after hours.

All retirees and employees are responsible for notifying HR of any changes in personal status or contact information on a timely basis. Relevant changes include name change, address, phone number, marital status, emergency contact information, change in life insurance beneficiary, dependents, tax withholding. History of dependents that were enrolled in your plan(s) cannot be deleted. To update your records, send an email to Human.Resources@oberlin.edu or complete our Employee Change Form.

During open enrollment you may:

- Change your health plan option by completing a Retiree Benefits Enrollment Form.
- Add Vision and/or Dental by completing a Retiree Benefits Enrollment Form.
- Cancel Dental, and/or Vision coverage by completing a Cancellation Form.
- Decline Medicare Advantage Plan coverage by completing a Retiree Benefits Enrollment Form.
• Check the “Decline Coverage” section of the form, sign and date.
• Send your signed form to Oberlin College HR Department
• Contact MedMutual at 1-800-801-4823 (TTY: 711 for hearing impaired) to confirm your decision to opt-out of coverage.
• Contact SilverScript at 1-866-235-5660 (TTY: 711 for hearing impaired) to confirm your decision to opt-out of coverage.

**HEALTH OPTIONS FOR 2021:** You will continue to have the option to remain on our Group Medicare Advantage Plan with MedMutual and SilverScript for prescription coverage **OR** elect an Oberlin College Health Reimbursement Account (HRA) healthcare stipend in lieu of healthcare insurance.

**MedMutual Medicare Advantage 2021 Plan**

There have been no plan design changes to our Medicare Advantage Plan. Information will be mailed to your home from Medical Mutual regarding Provider Directories and Evidence of Coverage and Annual Notice of Changes for 2021.

**Monthly Premium (including prescription coverage) for retirees who retired at age 62 or older:** Effective January 1, 2021 rates have been increased by 10%

<table>
<thead>
<tr>
<th></th>
<th>2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single (over age 65)</td>
<td>$176</td>
</tr>
<tr>
<td>Family (Retiree <strong>OR</strong> Spouse/DP over age 65, no dependent(s))</td>
<td>$409</td>
</tr>
<tr>
<td>Family (Retiree <strong>AND</strong> Spouse/DP over age 65, no dependent(s))</td>
<td>$333</td>
</tr>
</tbody>
</table>

If you retired between the age 52 – 61 and you/or your covered spouse/domestic partner are now age 65 or older, the RAMP premium schedule below applies to you. These rates have been increased by 10%
**SilverScript** will continue to administer our Medicare Prescription Drug Plan (Part D). The national network includes more than 68,000 pharmacies including retail chains. Plan participants are **not** required to manage prescription drug needs at a CVS pharmacy.

Information will be mailed to your home from SilverScript regarding the **Annual Notice of Changes for 2021** and **Evidence of Coverage** and **Formulary**.

Effective January 1, 2021 a 4th tier for Specialty with a $100 copay has been added.

<table>
<thead>
<tr>
<th>Network Retail Pharmacy (30-day) Supply</th>
<th>Copay</th>
</tr>
</thead>
<tbody>
<tr>
<td>Generic (tier 1)</td>
<td>$10</td>
</tr>
<tr>
<td>Preferred Brand (tier 2)</td>
<td>$50</td>
</tr>
<tr>
<td>Non-Preferred Brand (tier 3)</td>
<td>$75</td>
</tr>
<tr>
<td>Specialty Drugs (tier 4)</td>
<td>$100</td>
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</tbody>
</table>

**Health Option #2**

The **Health Reimbursement Account (HRA)** option provides you with a healthcare stipend *in lieu of healthcare insurance*. The HRA stipend may be used to purchase any other Retiree healthcare coverage of your choice. If the Medical Mutual plan does not meet your needs, you may use these funds to purchase a different healthcare plan from any other healthcare provider. You may also utilize the HRA to pay for qualified healthcare expenses.

More details regarding the **Retiree Stipend** are enclosed in your packet.

A **Medical Mutual HRA debit card** will be mailed to you, allowing you to access the amount set aside.

To access your HRA account information:

2. Log in or register for a My Health Plan account.
3. Click My Spending Accounts under the Claims & Balances tab.
4. Accept the Terms and click Submit.

**PLEASE NOTE:** If you choose the HRA Healthcare stipend option, you are required to opt-out of our Medicare Advantage Plan by calling MedMutual and SilverScript. You will also be required to submit a new Retiree Enrollment Form for 2021.
To participate in the Healthcare Stipend Choice, you must meet the following eligibility criteria:

1. You are age 62 – 64; AND
2. You are not eligible for OR enrolled in other employer-sponsored health coverage.
3. You are current on your Oberlin College health insurance premium payments.

**Voluntary Dental Superior Dental Care (SDC)** will continue to administer our dental options in 2021. No changes have been made to the plan options, plan design, or rates.

Three plan options are available. For coverage information, please review the Superior Dental Plan options (enclosed). SDC’s general Evidence of Coverage (enclosed) Schedule of Benefits for our Network Only plan, Core plan, and Enhanced plan (enclosed).

SDC’s network offers over half a million access points throughout the US! To locate a participating dentist, go to: [https://www.superiordental.com/find-a-dentist](https://www.superiordental.com/find-a-dentist)

SDC provides you with the ability to securely access plan information, view claims, print ID cards, and more. Go online to Superior Direct Connect or download the mobile app, which is available through the Apple App Store or Google Play Store.

**ID cards:** If you enroll in new coverage or change your plan option for 2021, you will receive a new ID card from Superior Dental Care (SDC). If you do not make any changes to your existing coverage, you will not receive a new ID card.

**Monthly Premium - No changes.**

<table>
<thead>
<tr>
<th>Plan</th>
<th>Network Only</th>
<th>Core Plan</th>
<th>Enhanced Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single</td>
<td>$22.18</td>
<td>$25.99</td>
<td>$33.33</td>
</tr>
<tr>
<td>Single + 1</td>
<td>$44.37</td>
<td>$52.09</td>
<td>$66.56</td>
</tr>
<tr>
<td>Family</td>
<td>$79.85</td>
<td>$95.05</td>
<td>$121.46</td>
</tr>
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</table>
Voluntary Vision will continue to be administered by Medical Mutual using the EyeMed national vision care network. No changes have been made to the plan design, or rates.

For coverage information, please review the Vision Plan Highlights (enclosed)

The provider network is called Access.

Go online to locate an EyeMed Provider: https://www.eyemedvisioncare.com

ID cards: If you enroll in new coverage you will receive an ID card from Medical Mutual prior to January 1, 2021. If you do not make any changes you will not receive a new ID card.

Monthly Premium - No changes.

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<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Single</td>
<td>$6.92</td>
</tr>
<tr>
<td>Single + 1</td>
<td>$13.84</td>
</tr>
<tr>
<td>Family</td>
<td>$19.04</td>
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</table>

Annual Notices and Summary Annual Reports

HIPAA Privacy Practices This notice describes how medical information about you may be used and disclosed.

Summary Annual Report This gives notice of the annual report summarizing each benefit plan subject to ERISA.

Women's Health and Cancer Rights Act The notice describes your rights after a mastectomy.

Creditable Coverage Disclosure Notice This notice is about your prescription drug coverage and Medicare.

If you have questions or would like to have an electronic version of this letter, please contact Human Resources or visit The Human Resources Open Enrollment page online.

Thank you,  
Tom Schiltz     Marion B. Burnworth
Director of Compensation and Benefits     Benefits Representative