



## PCS PREVIEW

Member Name **DAVID O SAMPLE**  
Member ID **0000000000**  
Job ID **4139599**



Processed Date **12/03/2021**  
Expected Mail Date  
Actual Mail Date

Mail to Address  
**DAVID O SAMPLE**  
**123 Main Street**

**Hartford CT 06103**  
**Single Card Package**

Card Front

Card Back



Issuer (80840): **915-10146-09**  
Member ID: 0000000000

---

Member: **DAVID O SAMPLE** CT TRB


RxBIN: 610097  
RxPCN: 9999  
RxGrp: PDPIND

**MedicareRx**  
Prescription Drug Coverage


Connecticut Teachers Retirement Board

S5820-803-000

X183350094600001



Customer Service Hours: Mon - Fri 8 am - 8 pm Printed: 12/02/2021



**For Members**  
Website: [www.UHCRetiree.com/TRB](http://www.UHCRetiree.com/TRB)  
Customer Service: 1-866-794-3033 TTY 711

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**For Providers** 1-877-889-6481

**Pharmacy Claims**  
Connecticut Teachers Retirement Board  
P.O. Box 650287, Dallas, TX 75265-0287  
For Pharmacists 1-877-889-6510

# 2022 Quick Start Guide

Take advantage of your Prescription Drug plan



An illustration at the top of the page shows two hands, one in blue and one in yellow, reaching towards each other and holding a white heart shape. The hands are stylized with thick, blocky fingers.

# Welcome to your plan

Medicare has approved your enrollment. This guide explains your plan and steps you can take now to be ready when your plan coverage begins.

**Your plan coverage begins January 1, 2022.**

**Your new UnitedHealthcare® member ID card is attached to the front of this guide**

Remove the card so you can start using it when your coverage begins. You'll need to show it each time you fill a prescription.

We look forward to helping you live a happier and healthier life.

 For more plan information, visit  
**[www.UHCRetiree.com/TRB](http://www.UHCRetiree.com/TRB)**

# Get to know your plan

## **What are my costs with this plan?**

You'll get a bill from us or your plan sponsor if you're responsible for some or all of your monthly premium. It will include your costs for the plan.

Please talk with your plan sponsor if you have questions about your premium amount.

## **Questions?**

Call toll-free **1-866-794-3033**, TTY **711**,  
8 a.m. - 8 p.m. local time, Monday - Friday

# What's next

**Manage your account**

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**Your drug benefits**

**Page 14**

**Get some great extras**

**Page 20**

**New to Medicare?**

**Page 24**



## **We'll be in touch soon**

We'll send you mailings throughout the year that will help you stay informed and take advantage of plan benefits, programs and services.

### **Explanation of Benefits (EOB)**

Your EOB summarizes your claims and costs each month you fill a prescription.

### **Annual Notice of Changes**

Your Annual Notice of Changes explains any plan cost or benefit changes for the year.

# A few things before we get started

## Can I get help with my prescription drug costs?

People with limited income may qualify for Medicare's Extra Help program. This program helps pay your prescription drug costs.

### If you qualify:



Medicare could pay for 75% or more of your monthly premiums, annual deductibles and prescription copays or coinsurance.



You won't have a coverage gap or a Late Enrollment Penalty (LEP).



You may change plans once per quarter for the first 9 months of the year.



If you lose Extra Help during the year, you can change plans for up to 3 months after you lose it or after you're notified that you no longer qualify (whichever is later).



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### You may owe an LEP if:



You didn't join a Medicare plan that included prescription drug coverage when you were first eligible for Medicare.

**AND**



You didn't have other prescription drug coverage that met Medicare's minimum standards.

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You had a break in coverage of at least 63 days.

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# Manage your account



## **Verify your contact information**

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## **Share access with someone you trust**

You can name a spouse or someone else you trust to speak with us about your account. Please complete the Authorized Representative form on the Plan Documents and Resources page of your member website or call UnitedHealthcare Customer Service.





## Create your online account

Use your new UnitedHealthcare member ID card to register your account at **[www.UHCRetiree.com/TRB](http://www.UHCRetiree.com/TRB)**.

Once you've registered, you can access plan details including:

### **Search for drug(s) and pharmacies**

Use our online search tools to look up drug(s) and find pharmacies near you.

 Searches are based on your ZIP code.

### **Print your UnitedHealthcare member ID card**

Print a temporary UnitedHealthcare member ID card and request a new one if you need a replacement.

### **Go paperless**

We'll send you an email when documents are ready to view in your secure online account.

# Review your plan documents

Review your plan documents online from a computer, tablet or smartphone at [www.UHCRetiree.com/TRB](http://www.UHCRetiree.com/TRB).



## **Pharmacy Directory**

See which pharmacies are in the network.



## **Drug List (Formulary)**

Review restrictions and make sure the drugs you take are covered.



## **Evidence of Coverage (EOC)**

This is the legal, detailed description of your plan benefits. It explains your rights and responsibilities as a member and includes information about the quality program and how medical coverage decisions are made. You can also find information about your prescription drug coverage in the **Certificate of Coverage**.



If you want a paper copy of any of these documents, please call the UnitedHealthcare Customer Service number on the back of your UnitedHealthcare member ID card.

# Your drug benefits



## **Make sure your drugs are covered**

Review the Drug List for new restrictions and to make sure your drugs are covered.



## **Fill your prescription in the network**

There are thousands of national and local pharmacies in your plan's network. You'll need to use a network pharmacy or the plan may not pay.

### **Find a pharmacy and review your Drug List at:**

- [www.UHCRetiree.com/TRB](http://www.UHCRetiree.com/TRB)
- Call toll-free **1-866-794-3033**, TTY **711**,  
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## **Always follow your provider's directions when taking your prescriptions**

For your medications to work most effectively, you need to take them as directed by your provider. This is especially true if you're taking drugs to treat diabetes, high blood pressure or high cholesterol. Left untreated, conditions like these could lead to bigger problems. If you're having trouble taking your medications as directed, please talk to your provider or pharmacist.



### **Are generic drugs less expensive?**

A generic drug is a drug that has been approved by the FDA as having the same active ingredient as the brand-name version. In general, generic drugs cost less than brand-name drugs. But it's important to remember that generic drugs aren't always the cheaper option. Some generic drugs are in higher drug tiers, which can make them more expensive than similar drugs in a lower tier.

The best plan is to talk to your provider about your drug choices. You can ask if a brand-name drug has a generic version. If you have questions about what a drug costs, Customer Service is always happy to help.



### **90-day supply at retail pharmacies**

Most retail pharmacies offer 90-day supplies for some of your prescription drugs. To find out if a retail pharmacy offers 90-day supplies, you can check your Pharmacy Directory and look for the pill symbol or go to your plan website, sign in and click on **Locate a Pharmacy**.



### **Ask your provider about trial supplies**

A trial supply allows you to fill a prescription for less than 30 days. This way, you can pay a reduced copay or coinsurance and make sure the medication works for you before getting a full month's supply.



# Your drug coverage stages and costs

## Annual deductible

If your plan has a deductible, you pay the total cost of your drugs until you reach the deductible amount set by your plan. If you don't have a deductible, your coverage begins in the initial coverage stage.

## Initial coverage

If you don't have a deductible, your coverage begins in the initial coverage stage. You pay a copay or coinsurance and the plan pays the rest.

## Coverage gap

After your total drug costs reach a certain dollar amount, you move into the coverage gap stage.

## Catastrophic coverage

After your out-of-pocket costs reach a certain dollar amount, you enter the catastrophic coverage stage. You may pay a copay or coinsurance and you stay in this stage for the rest of the plan year.

## Total drug costs

The amount you pay (or others pay on your behalf) and the plan pays for prescription drugs starting on your effective date. This does not include premiums.

## Out-of-pocket costs

The amount you pay (or others pay on your behalf), including the deductible, for prescription drugs starting on your effective date. This does not include premiums. **When your total Out-of-Pocket costs (what you pay) reach \$3,500 you will not pay any co-pay or co-insurance.**

## **Annual prescription (Part D) deductible**

\$200

## **Initial Coverage Stage**

### **Network Pharmacy (31-day retail supply)**

Tier 1: Preferred Generic	5% coinsurance
Tier 2: Preferred Brand	20% coinsurance
Tier 3: Non-preferred Drug	30% coinsurance
Tier 4: Specialty Tier	30% coinsurance

### **Mail Service Pharmacy (90-day supply)**

Tier 1: Preferred Generic	5% coinsurance
Tier 2: Preferred Brand	20% coinsurance
Tier 3: Non-preferred Drug	30% coinsurance
Tier 4: Specialty Tier	30% coinsurance

For complete prescription drug information, see your Evidence of Coverage.

# Get your prescription drugs delivered to your home

When your coverage begins, sign up for OptumRx® home delivery to help save time and money filling your maintenance medications.<sup>†</sup> Use OptumRx® to get a 3-month supply<sup>§</sup> of your medications mailed right to your home. There's no charge for standard shipping.

You can also use other home delivery pharmacies to fill your prescriptions. Visit [www.UHCRetiree.com/TRB](http://www.UHCRetiree.com/TRB) to find a pharmacy.

## Here's how home delivery works:

- 1 Order up to a 3-month supply of your maintenance medications
- 2 OptumRx fills your order and mails it to you
- 3 Your medication arrives within 5–7 days

## Questions?

Visit [www.UHCRetiree.com/TRB](http://www.UHCRetiree.com/TRB) to learn more about home delivery.

## Get the OptumRx app



Manage your medication(s) easier by downloading the OptumRx app to your smartphone or tablet.



# Get some great extras



## UnitedHealthcare Hearing

Get a hearing exam and access to brand-name and private-labeled hearing aids from any of our 7,000+ UnitedHealthcare Hearing providers nationwide.\*



**[www.uhchearing.com/trb](http://www.uhchearing.com/trb)**  
**1-866-445-2071, TTY 711**



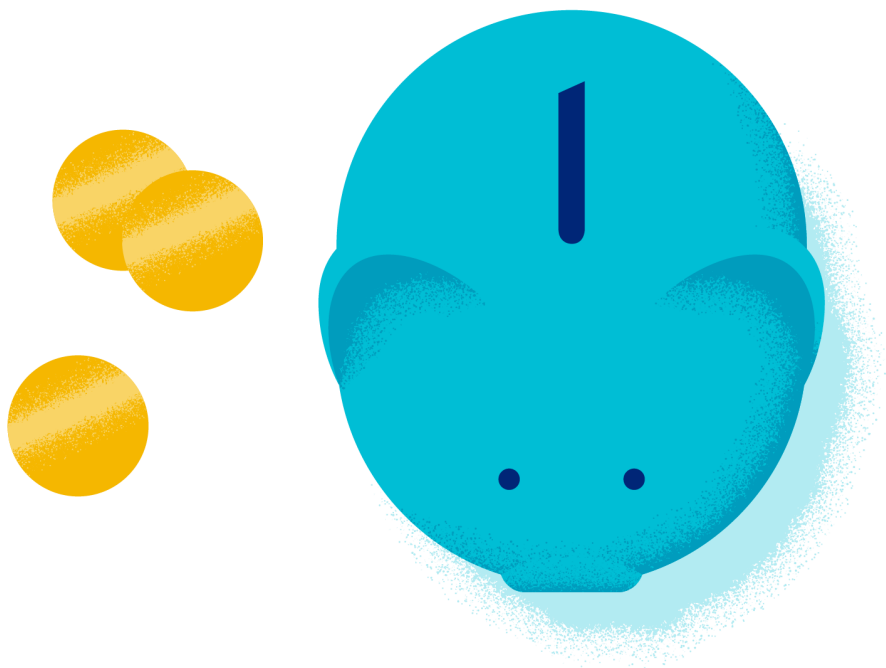
## Discount Program<sup>◇</sup>

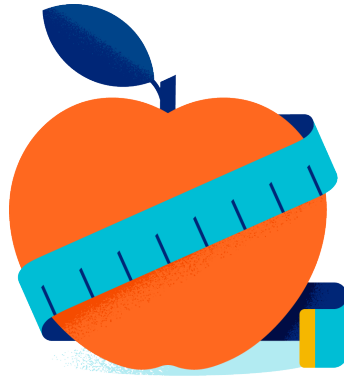
You also have access to discounts on a variety of products and services. This may include discounts on home-delivered meals, in-home personal care, nutrition, fitness, chiropractic, acupuncture, vision services and more. These discounts are available at no cost to you.

Learn more by visiting

**[www.uhcretireediscounts.lifemart.com](http://www.uhcretireediscounts.lifemart.com)** for a list of discounts available in your area.

Acupuncture, chiropractic, natural healing, and physical and occupational therapy discounts are not currently available in California.





## Live healthier with Renew

Renew by UnitedHealthcare<sup>®</sup><sup>Δ</sup> is our health and wellness experience that offers a wide variety of resources and activities designed to help support your health and wellness goals. Renew includes:

- ✓ Brain games
- ✓ Recipes
- ✓ Learning courses
- ✓ Workout videos
- ✓ Health topic library
- ✓ And more!

**i** Visit **[www.UHCRetiree.com/TRB](http://www.UHCRetiree.com/TRB)** to sign in or register and go to **Health & Wellness** to explore all Renew has to offer.

# At UnitedHealthcare, we're here to help



## Phone

Call toll-free at **1-866-794-3033**, TTY **711**,  
8 a.m. - 8 p.m. local time, Monday - Friday.



## Online

Learn more online at  
**[www.UHCRetiree.com/TRB](http://www.UHCRetiree.com/TRB)**.

## Customer Service is happy to help you:

- Find out if a drug is covered
- Locate network pharmacies near you
- Request a printed version of your Drug List (Formulary), Evidence of Coverage (EOC) or Pharmacy Directory
- Understand your drug plan benefits
- Replace your UnitedHealthcare member ID card



# New to Medicare?

Medicare works differently from other types of health coverage you may have received from your plan sponsor. As you transition from your former coverage to Medicare, here is some information that may help make the change easier.

## **Income Related Monthly Adjusted Amount (IRMAA)**

IRMAA is an amount you may need to pay in addition to your monthly plan premium if your modified adjusted gross income on your IRS tax return from 2 years ago is above a certain limit. This extra amount is paid directly to Social Security, not to your plan. Social Security will contact you if you have to pay IRMAA.

## **Late Enrollment Penalty (LEP)**

You may pay a late enrollment penalty if, at any time after you first become eligible for Part D, there's a period of at least 63 days in a row when you don't have Part D or other creditable prescription drug coverage. Creditable coverage means that the prescription drug coverage you have had is at least as good as or better than what Medicare provides. The late enrollment penalty is an amount added to your monthly Medicare premium, which you may have to pay. When you become a member, your plan sponsor will be asked to attest or validate that you have had continuous Part D plan coverage.

If your plan sponsor asks for information about your prescription drug coverage history, please respond as quickly as possible to avoid the risk of paying a penalty in error. More information will be available in your Evidence of Coverage (EOC).

## **Medicare Part B Monthly Premium**

If you have Part B, you must continue to pay your Part B monthly premium to Social Security. If you do not pay your monthly Part B premium, you may be disenrolled from your plan, losing important coverage.

## **Medicare Part B versus Medicare Part D**

Medicare covers certain drugs in different ways depending on where and by whom the drug is administered. Medicare Parts A and B have limited drug coverage. Medicare Part A only covers drugs received as part of your hospital stay. Medicare Part B covers medical services and supplies like diabetic screenings and supplies such as blood sugar monitors, test strips and lancets. It also covers drugs administered in the physician's office and in an outpatient setting, such as chemotherapy and dialysis drugs.

A Medicare Part D plan covers drugs that are listed on your Drug List (Formulary). Most of these drugs are typically ordered by your doctor and received through a pharmacy. There are a few exceptions, so give us a call if you have questions. Certain medications, such as vaccines and immunizations, can be covered under either Medicare Part B or Part D depending on how they are used. The process to figure out if the drug is covered under Part B or Part D is called a Coverage Determination. Drugs that require this process are identified on your Drug List by B/D in the Coverage Rules or Limits On Use column. Talk with your doctor about medications that may require a Coverage Determination to ensure that your prescription is filled without delay.

## Required information

§Your plan sponsor may provide coverage beyond 3 months. Please refer to the Benefit Highlights or Summary of Benefits for more information.

†Maintenance medications are typically those drugs you take on a regular basis for a chronic or long-term condition.

This information is not a complete description of benefits. Limitations and restrictions may apply.

△Renew by UnitedHealthcare® is not available in all plans. Resources may vary.

\*Please refer to your Evidence of Coverage for details on your benefit coverage.

◇The products and services described in this guide are neither offered nor guaranteed under our contract with the Medicare program. In addition, they are not subject to the Medicare appeals process. Any disputes regarding these products and services may be subject to the UnitedHealthcare grievance process.

OptumRx is an affiliate of UnitedHealthcare Insurance Company. You are not required to use OptumRx home delivery for a 3-month 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. Prescriptions from OptumRx should arrive within 5 business days after we receive the complete order. Contact OptumRx anytime at 1-888-279-1828, TTY 711.

The company does not discriminate on the basis of race, color, national origin, sex, age or disability in health programs and activities. We provide free services to help you communicate with us such as letters in other languages, Braille, large print, audio, or you can ask for an interpreter. Please contact Customer Service at the number located on the back of your member ID card for additional information.

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UnitedHealthcare  
P.O. Box 30770  
Salt Lake City, UT 84130-0770

DAVID O SAMPLE  
123 Main Street  
Hartford CT 06103

**Welcome to your new plan**  
We can help you get started

**Important plan information. Do not discard.**

Y0066\_SPRJ62424\_25419-001\_C



## PCS PREVIEW

Member Name **MARTIN SAMPLE**  
Member ID **0000000000**  
Job ID **4136171**



Processed Date **12/02/2021**  
Expected Mail Date  
Actual Mail Date

Mail to Address  
**MARTIN SAMPLE**  
**123 Main Street**

**Hartford CT 06103**  
**Single Card Package**

Card Front

Card Back



Health Plan (80840): **911-87726-04**  
Member ID: 0000000000 Group Number: **06802**


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Member:  
**MARTIN SAMPLE** CT TRB


Payer ID:  
87726

Connecticut Teachers Retirement Board  
SRSUP-907-000

x209679784400001



In an emergency go to the nearest emergency room or call 911. Printed: 12/01/2021



Visit [www.UHCRetiree.com/TRB](http://www.UHCRetiree.com/TRB) for plan information or call Customer Service  
Monday - Friday 8:00 a.m. to 8:00 p.m. Providers: This plan pays after Medicare.  
Please submit claims to Medicare first.

Customer Service: 1-866-794-3033 TTY 711  
TeleNurse: 1-877-365-7949 TTY 711

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**For Providers** 1-877-842-3210  
Medical Claim Address: P.O. Box 30995, Salt Lake City, UT 84130-0995



P.O. Box 30770  
Salt Lake City, UT 84130-0770

MARTIN SAMPLE  
123 Main Street  
  
Hartford CT 06103

## **Thank you for being a member.**

This is your new health plan member ID card. It has information about you and your coverage so you'll want to bring it with you wherever you go.

Please review your personal information and make sure it's correct. If you see anything that isn't right, call the toll-free Customer Service phone number on the back of the card. We'll make any changes needed and mail you a new card right away.

### **Questions? We're here to help.**

Call the toll-free Customer Service number on the back of your member ID card.

**Keep this card in your wallet or purse.**

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

The company does not discriminate on the basis of race, color, national origin, sex, age, or disability in health programs and activities.

We provide free services to help you communicate with us. Such as, letters in other languages or large print. Or, you can ask for an interpreter. To ask for help, please call the member toll-free phone number listed on your ID card.

**ATENCIÓN:** Si habla español (Spanish), hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al número de teléfono gratuito que aparece en su tarjeta de identificación.

請注意：如果您說中文(Chinese), 我們免費為您提供語言協助服務。請撥打會員卡所列的免付費會員電話號碼。





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Member ID **0000000000**  
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RxPCN: 9999  
RxGrp: PDPIND

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Prescription Drug Coverage


Connecticut Teachers Retirement Board

S5805-813-000

X183326246800001



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**Pharmacy Claims**  
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P.O. Box 650287, Dallas, TX 75265-0287  
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## Create your online account

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Once you've registered, you can access plan details including:

### **Search for drug(s) and pharmacies**

Use our online search tools to look up drug(s) and find pharmacies near you.

 Searches are based on your ZIP code.

### **Print your UnitedHealthcare member ID card**

Print a temporary UnitedHealthcare member ID card and request a new one if you need a replacement.

### **Go paperless**

We'll send you an email when documents are ready to view in your secure online account.

# Review your plan documents

Review your plan documents online from a computer, tablet or smartphone at **[www.uhcretiree.com/trb](http://www.uhcretiree.com/trb)**.



## **Pharmacy Directory**

See which pharmacies are in the network.



## **Drug List (Formulary)**

Review restrictions and make sure the drugs you take are covered.



## **Evidence of Coverage (EOC)**

This is the legal, detailed description of your plan benefits. It explains your rights and responsibilities as a member and includes information about the quality program and how medical coverage decisions are made. You can also find information about your prescription drug coverage in the **Certificate of Coverage**.



If you want a paper copy of any of these documents, please call the UnitedHealthcare Customer Service number on the back of your UnitedHealthcare member ID card.

# Your drug benefits



## **Make sure your drugs are covered**

Review the Drug List for new restrictions and to make sure your drugs are covered.



## **Fill your prescription in the network**

There are thousands of national and local pharmacies in your plan's network. You'll need to use a network pharmacy or the plan may not pay.

### **Find a pharmacy and review your Drug List at:**

- [www.uhcretiree.com/trb](http://www.uhcretiree.com/trb)
- Call toll-free **1-866-794-3033**, TTY **711**,  
8 a.m. - 8 p.m. local time, Monday - Friday



## **Always follow your provider's directions when taking your prescriptions**

For your medications to work most effectively, you need to take them as directed by your provider. This is especially true if you're taking drugs to treat diabetes, high blood pressure or high cholesterol. Left untreated, conditions like these could lead to bigger problems. If you're having trouble taking your medications as directed, please talk to your provider or pharmacist.



### **Are generic drugs less expensive?**

A generic drug is a drug that has been approved by the FDA as having the same active ingredient as the brand-name version. In general, generic drugs cost less than brand-name drugs. But it's important to remember that generic drugs aren't always the cheaper option. Some generic drugs are in higher drug tiers, which can make them more expensive than similar drugs in a lower tier.

The best plan is to talk to your provider about your drug choices. You can ask if a brand-name drug has a generic version. If you have questions about what a drug costs, Customer Service is always happy to help.



### **90-day supply at retail pharmacies**

Most retail pharmacies offer 90-day supplies for some of your prescription drugs. To find out if a retail pharmacy offers 90-day supplies, you can check your Pharmacy Directory and look for the pill symbol or go to your plan website, sign in and click on **Locate a Pharmacy**.



### **Ask your provider about trial supplies**

A trial supply allows you to fill a prescription for less than 30 days. This way, you can pay a reduced copay or coinsurance and make sure the medication works for you before getting a full month's supply.



# Your drug coverage stages and costs

## Annual deductible

If your plan has a deductible, you pay the total cost of your drugs until you reach the deductible amount set by your plan. If you don't have a deductible, your coverage begins in the initial coverage stage.

## Initial coverage

If you don't have a deductible, your coverage begins in the initial coverage stage. You pay a copay or coinsurance and the plan pays the rest.

## Coverage gap

After your total drug costs reach a certain dollar amount, you move into the coverage gap stage.

## Catastrophic coverage

After your out-of-pocket costs reach a certain dollar amount, you enter the catastrophic coverage stage. You may pay a copay or coinsurance and you stay in this stage for the rest of the plan year.

## Total drug costs

The amount you pay (or others pay on your behalf) and the plan pays for prescription drugs starting on your effective date. This does not include premiums.

## Out-of-pocket costs

The amount you pay (or others pay on your behalf), including the deductible, for prescription drugs starting on your effective date. This does not include premiums. **When your total Out-of-Pocket costs (what you pay) reach \$3,500 you will not pay any co-pay or co-insurance.**

## **Annual prescription (Part D) deductible**

\$200

## **Initial Coverage Stage**

### **Network Pharmacy (31-day retail supply)**

Tier 1: Preferred Generic	5% coinsurance
Tier 2: Preferred Brand	20% coinsurance
Tier 3: Non-preferred Drug	30% coinsurance
Tier 4: Specialty Tier	30% coinsurance

### **Mail Service Pharmacy (90-day supply)**

Tier 1: Preferred Generic	5% coinsurance
Tier 2: Preferred Brand	20% coinsurance
Tier 3: Non-preferred Drug	30% coinsurance
Tier 4: Specialty Tier	30% coinsurance

For complete prescription drug information, see your Evidence of Coverage.

# Get your prescription drugs delivered to your home

When your coverage begins, sign up for OptumRx® home delivery to help save time and money filling your maintenance medications.<sup>†</sup> Use OptumRx® to get a 3-month supply<sup>§</sup> of your medications mailed right to your home. There's no charge for standard shipping.

You can also use other home delivery pharmacies to fill your prescriptions. Visit [www.UHCRetiree.com/TRB](http://www.UHCRetiree.com/TRB) to find a pharmacy.

## Here's how home delivery works:

- 1 Order up to a 3-month supply of your maintenance medications
- 2 OptumRx fills your order and mails it to you
- 3 Your medication arrives within 5–7 days

## Questions?

Visit [www.UHCRetiree.com/TRB](http://www.UHCRetiree.com/TRB) to learn more about home delivery.

## Get the OptumRx app



Manage your medication(s) easier by downloading the OptumRx app to your smartphone or tablet.



# Get some great extras



## **UnitedHealthcare Hearing**

Get a hearing exam and access to brand-name and private-labeled hearing aids from any of our 7,000+ UnitedHealthcare Hearing providers nationwide.\*



**[www.uhchearing.com/trb](http://www.uhchearing.com/trb)  
1-866-445-2071, TTY 711**



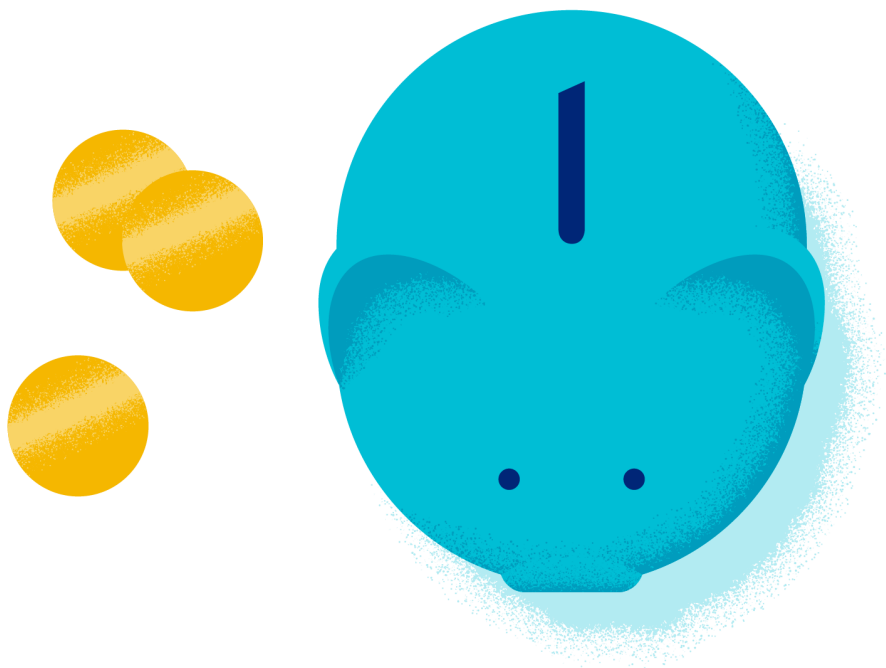
## **Discount Program<sup>◇</sup>**

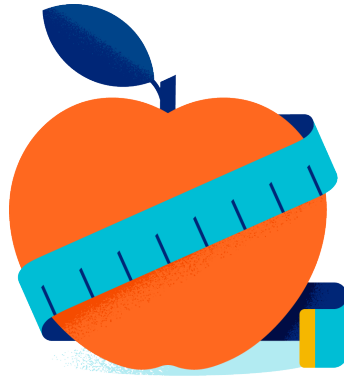
You also have access to discounts on a variety of products and services. This may include discounts on home-delivered meals, in-home personal care, nutrition, fitness, chiropractic, acupuncture, vision services and more. These discounts are available at no cost to you.

Learn more by visiting

**[www.uhcretireediscounts.lifemart.com](http://www.uhcretireediscounts.lifemart.com)** for a list of discounts available in your area.

Acupuncture, chiropractic, natural healing, and physical and occupational therapy discounts are not currently available in California.





## Live healthier with Renew

Renew by UnitedHealthcare<sup>®</sup><sup>Δ</sup> is our health and wellness experience that offers a wide variety of resources and activities designed to help support your health and wellness goals. Renew includes:

- ✓ Brain games
- ✓ Recipes
- ✓ Learning courses
- ✓ Workout videos
- ✓ Health topic library
- ✓ And more!

**i** Visit **[www.uhcretiree.com/trb](https://www.uhcretiree.com/trb)** to sign in or register and go to **Health & Wellness** to explore all Renew has to offer.

# At UnitedHealthcare, we're here to help



## Phone

Call toll-free at **1-866-794-3033**, TTY **711**,  
8 a.m. - 8 p.m. local time, Monday - Friday.



## Online

Learn more online at  
**[www.uhcretiree.com/trb](http://www.uhcretiree.com/trb)**.

## Customer Service is happy to help you:

- Find out if a drug is covered
- Locate network pharmacies near you
- Request a printed version of your Drug List (Formulary), Evidence of Coverage (EOC) or Pharmacy Directory
- Understand your drug plan benefits
- Replace your UnitedHealthcare member ID card



# New to Medicare?

Medicare works differently from other types of health coverage you may have received from your plan sponsor. As you transition from your former coverage to Medicare, here is some information that may help make the change easier.

## **Income Related Monthly Adjusted Amount (IRMAA)**

IRMAA is an amount you may need to pay in addition to your monthly plan premium if your modified adjusted gross income on your IRS tax return from 2 years ago is above a certain limit. This extra amount is paid directly to Social Security, not to your plan. Social Security will contact you if you have to pay IRMAA.

## **Late Enrollment Penalty (LEP)**

You may pay a late enrollment penalty if, at any time after you first become eligible for Part D, there's a period of at least 63 days in a row when you don't have Part D or other creditable prescription drug coverage. Creditable coverage means that the prescription drug coverage you have had is at least as good as or better than what Medicare provides. The late enrollment penalty is an amount added to your monthly Medicare premium, which you may have to pay. When you become a member, your plan sponsor will be asked to attest or validate that you have had continuous Part D plan coverage.

If your plan sponsor asks for information about your prescription drug coverage history, please respond as quickly as possible to avoid the risk of paying a penalty in error. More information will be available in your Evidence of Coverage (EOC).

## **Medicare Part B Monthly Premium**

If you have Part B, you must continue to pay your Part B monthly premium to Social Security. If you do not pay your monthly Part B premium, you may be disenrolled from your plan, losing important coverage.

## **Medicare Part B versus Medicare Part D**

Medicare covers certain drugs in different ways depending on where and by whom the drug is administered. Medicare Parts A and B have limited drug coverage. Medicare Part A only covers drugs received as part of your hospital stay. Medicare Part B covers medical services and supplies like diabetic screenings and supplies such as blood sugar monitors, test strips and lancets. It also covers drugs administered in the physician's office and in an outpatient setting, such as chemotherapy and dialysis drugs.

A Medicare Part D plan covers drugs that are listed on your Drug List (Formulary). Most of these drugs are typically ordered by your doctor and received through a pharmacy. There are a few exceptions, so give us a call if you have questions. Certain medications, such as vaccines and immunizations, can be covered under either Medicare Part B or Part D depending on how they are used. The process to figure out if the drug is covered under Part B or Part D is called a Coverage Determination. Drugs that require this process are identified on your Drug List by B/D in the Coverage Rules or Limits On Use column. Talk with your doctor about medications that may require a Coverage Determination to ensure that your prescription is filled without delay.

## Required information

§Your plan sponsor may provide coverage beyond 3 months. Please refer to the Benefit Highlights or Summary of Benefits for more information.

†Maintenance medications are typically those drugs you take on a regular basis for a chronic or long-term condition.

This information is not a complete description of benefits. Limitations and restrictions may apply.

△Renew by UnitedHealthcare® is not available in all plans. Resources may vary.

\*Please refer to your Evidence of Coverage for details on your benefit coverage.

◇The products and services described in this guide are neither offered nor guaranteed under our contract with the Medicare program. In addition, they are not subject to the Medicare appeals process. Any disputes regarding these products and services may be subject to the UnitedHealthcare grievance process.

OptumRx is an affiliate of UnitedHealthcare Insurance Company. You are not required to use OptumRx home delivery for a 3-month 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. Prescriptions from OptumRx should arrive within 5 business days after we receive the complete order. Contact OptumRx anytime at 1-888-279-1828, TTY 711.

The company does not discriminate on the basis of race, color, national origin, sex, age or disability in health programs and activities. We provide free services to help you communicate with us such as letters in other languages, Braille, large print, audio, or you can ask for an interpreter. Please contact Customer Service at the number located on the back of your member ID card for additional information.

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This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.



UnitedHealthcare  
P.O. Box 30770  
Salt Lake City, UT 84130-0770

MARTHA E SAMPLE  
123 Main Street  
Hartford CT 06103

**Welcome to your new plan**  
We can help you get started

**Important plan information. Do not discard.**

Y0066\_SPRJ62424\_25419-002\_C



## PCS PREVIEW

Member Name **ELIZABETH S SAMPLE**  
Member ID **0000000000**  
Job ID **4136171**



Processed Date **12/02/2021**  
Expected Mail Date  
Actual Mail Date

Mail to Address  
**ELIZABETH S SAMPLE**  
**123 Main Street**

**Hartford CT 06103**  
**Single Card Package**

Card Front

Card Back



Health Plan (80840): **911-87726-04**  
Member ID: 0000000000 Group Number: **06803**

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Member:  
**ELIZABETH S SAMPLE** CT TRB

Payer ID:  
87726

Connecticut Teachers Retirement Board  
SRSUP-907-000

x209679269700001

In an emergency go to the nearest emergency room or call 911. Printed: 12/01/2021



Visit [www.UHCRetiree.com/TRB](http://www.UHCRetiree.com/TRB) for plan information or call Customer Service  
Monday - Friday 8:00 a.m. to 8:00 p.m. Providers: This plan pays after Medicare.  
Please submit claims to Medicare first.

Customer Service: 1-866-794-3033 TTY 711  
TeleNurse: 1-877-365-7949 TTY 711

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**For Providers** 1-877-842-3210  
Medical Claim Address: P.O. Box 30995, Salt Lake City, UT 84130-0995



P.O. Box 30770  
Salt Lake City, UT 84130-0770

ELIZABETH S SAMPLE  
123 Main Street  
  
Hartford CT 06103

## **Thank you for being a member.**

This is your new health plan member ID card. It has information about you and your coverage so you'll want to bring it with you wherever you go.

Please review your personal information and make sure it's correct. If you see anything that isn't right, call the toll-free Customer Service phone number on the back of the card. We'll make any changes needed and mail you a new card right away.

### **Questions? We're here to help.**

Call the toll-free Customer Service number on the back of your member ID card.

**Keep this card in your wallet or purse.**

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

The company does not discriminate on the basis of race, color, national origin, sex, age, or disability in health programs and activities.

We provide free services to help you communicate with us. Such as, letters in other languages or large print. Or, you can ask for an interpreter. To ask for help, please call the member toll-free phone number listed on your ID card.

**ATENCIÓN:** Si habla español (Spanish), hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al número de teléfono gratuito que aparece en su tarjeta de identificación.

請注意：如果您說中文(Chinese), 我們免費為您提供語言協助服務。請撥打會員卡所列的免付費會員電話號碼。