



**Health Insurance Services,
Inc**

Group
Medicare Specialists

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Agenda

- **Market Choices for Seniors**
- **What is Premier Senior Health Plan (PSHP)?**
- **PSHP Features**
- **Eligibility & Expectations**
- **PSHP Team**

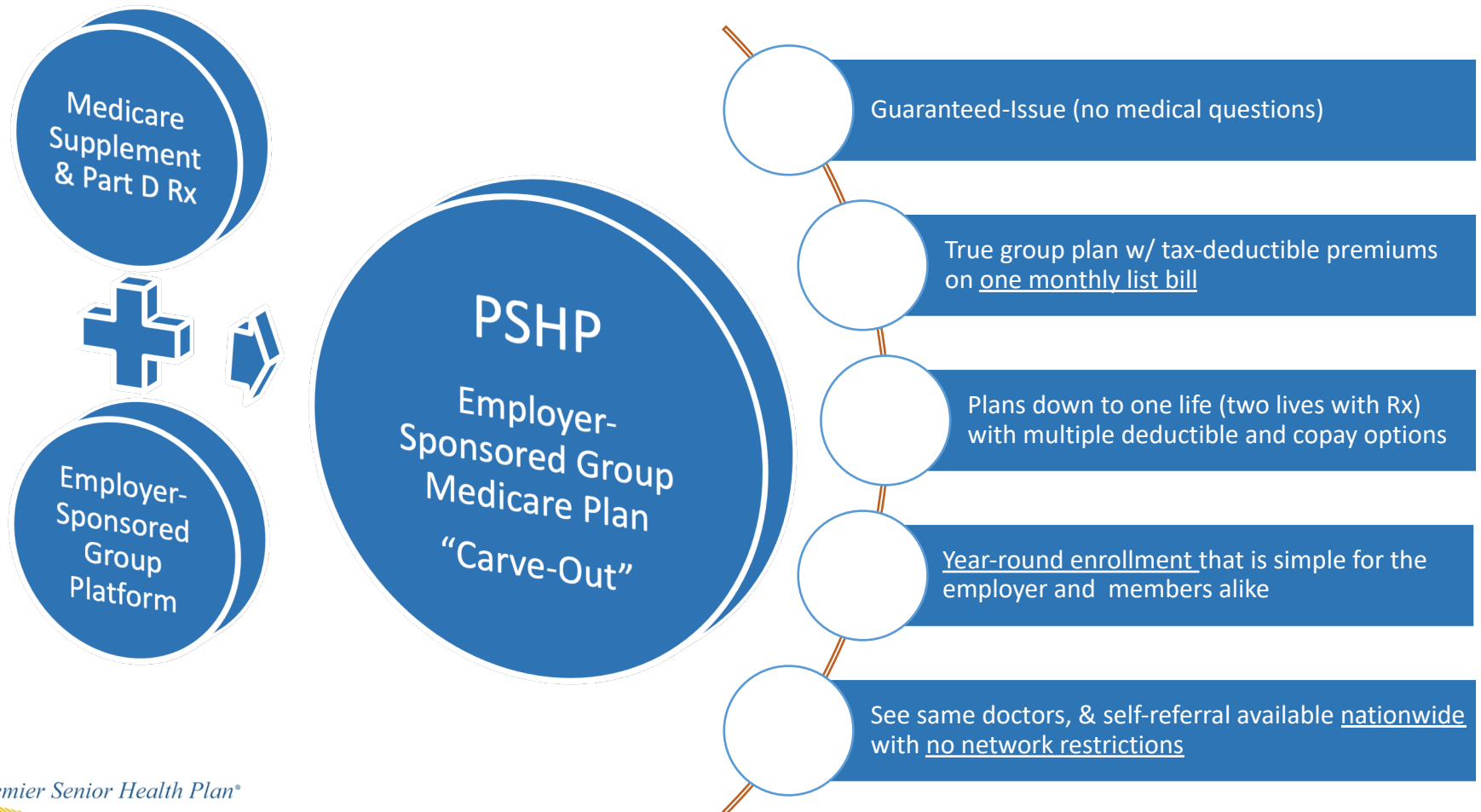


Market Choices for Those 65+

- Staying on the regular group health plan:
 - High premium, deductible, and max out-of-pocket amounts
 - Seniors staying on group can cost under-65's more in premium
 - Network limitations: Higher out-of-pocket costs when leaving a PPO or HMO network, or none outside of an emergency room
- The Individual Medicare market (Medicare Supplements & Advantage Plans)
 - Plans must be paid in after-tax dollars by seniors
 - Part D Rx drug coverage always has a “donut hole” – also known as the “coverage gap” - in which costs can dramatically increase at the pharmacy
 - Fewer drugs are included on individual plan formularies, and non-Part D drugs are not typically covered.
 - Customer support and advocacy are inferior to a group plan's
- A group Medicare Supplement & Part D plan like *Premier Senior Health Plan* has none of the above shortcomings

What is Premier Senior Health Plan (PSHP)?

PSHP is an employer-sponsored group Medicare Supplement & Part D Rx plan offered to eligible members and spouses age 65 and older.



PSHP Features for Enrollees and Groups

- **Access:** True Medicare Supplement, so you can see your same providers and self-refer to the approximately 94% of providers and 97% facilities nationwide that take Medicare. Just ask your provider – “Do you accept Original Medicare?” The answer will be “yes.”
- **Flexible:** Various deductible and copay options that can be employer-paid, member-paid (billed at home), or split-billed. It’s fully portable into retirement too, with year-round effective dates and member enrollment. Also, a “Plan F” is still available to seniors turning 65 in 2020 and beyond.
- **Broad Coverage:** Like a Plan F or G Medigap plans, PSHP pays Medicare-approved Part B excess charges and is accepted in all 50 states. Plus there’s a rider that reimburses the cost of foreign travel emergency medical care.
- **Exclusive Group Rx Features:** Rx Plans have full coverage through the Rx “gap” or “donut hole”, including a broad formulary with superior support & advocacy to members for any questions or concerns. You also have access to the largest pharmacy benefits network in the country.



Retiree Class Benefit Customization

- While not permitted for active employees, retiree group health plans sponsored by an employer may have different classes based on ownership / C-suite status, years worked at the company, salary vs hourly compensation, and other criteria.
- The type of retiree health benefits offered to each class may vary to encompass overall eligibility for the plan(s), % of monthly premium paid by the employer vs member, and richness of the medical and / or Rx benefits.
- While most companies at minimum provide group retiree health benefits for retired owners, C-suite executives and their spouses, there are still many that sponsor voluntary or partially employer-paid plan options to former employees and spouses who do not fall under the owner or executive category.
- Even if no employer premium contribution is in place, having a voluntary group health plan for retirees and spouses age 65 and older is a great recruitment and retention tool for a sponsor to differentiate itself from competition and to add value for future retirees without taking on any added administrative or financial burden.



Eligibility, Expectations & Enrollment

- ✓ Retirees and semi-retirees are always eligible regardless of group size, including active employees in sponsoring entities with less than 20 full and part-time people of all ages
- ✓ Must be age 65 or older and enrolled in Medicare A & B
- ✓ Sponsorship of the medical plan is not available to entities domiciled in the states of Florida, New York, Maryland, and Washington. But members can reside and be covered in those states under PSHP's \$0 deductible / \$0 copay plan option.
- ✓ For members not yet enrolled in Medicare Part B, and / or if a group wishes to enroll in the Rx plan, a minimum 50-day lead time is needed between enrollment paperwork receipt and the effective date of coverage.
- ✓ Only one medical plan choice and one Rx plan choice permitted for all enrollees. Choice of medical + Rx, medical-only, or Rx-only must be uniform across all enrolling members within the sponsoring entity.

PSHP Team

- **United American:** A+ rated medical carrier with expertise in group Medicare Supplements since 1976, and has been in business since 1947
- **Express Scripts:** The nation's largest pharmacy benefits manager (with over 72,000 participating pharmacies)
- **Health Insurance Services (HIS)** is based in Detroit and Milwaukee, and is a general agency of unique group health solutions to brokers nationwide, and the exclusive distributor and customer service provider of PSHP. PSHP is sponsored by hundreds of public and private sector employers nationwide
 - HIS has 35 years of experience in helping members by providing members with just one number to call for any of your medical, Rx, coverage and billing needs.
 - Benistar, based in Avon, CT, is the third-party biller for PSHP.





Questions?

Also, please be sure to watch the 2-minute PSHP promo video at this link:

<https://www.hismi.com/forms-and-resources.html>