

A photograph of the Iowa State University campus, featuring a large domed building on the left and a large tree in the foreground. The entire image is overlaid with a semi-transparent red filter. Two thin horizontal lines are visible: one above the text and one below it.

# IOWA STATE UNIVERSITY

**University Human Resources**



# 2025 Retiree Open Enrollment

ISU Plan Benefits for January 1, 2025

*Open Enrollment: October 15 – December 7, 2024*

## Contact Us

**UHR Service Center &  
Benefits Office**  
**3810 Beardshear Hall**

[benefits@iastate.edu](mailto:benefits@iastate.edu)

(515)-294-4800

Benefits Consultant	Retirees Last Name Begins With:
Jill Pretzer	A – D
Dawn Shedarowich	E – K
Teree Hungerford	L – R
Sarah Ford	S – Z

<https://www.hr.iastate.edu/retiree-benefits>

## 2025 Impact to ISU Retirees

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- Beginning January 1, 2025, medical plan premiums will no longer be different for retirees who were formerly Merit employees.
- No medical plan design changes.
- Humana plan design changes due to the Inflation Reduction Act.
  
- Dental plans – Premium increase of approximately 3-5%.
- No dental plan design changes.



## What should you do for 2025?

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- Stay with your current plan(s) - no forms to submit
- Move to the other ISU plan choice or add/remove dependents – submit open enrollment form
- Terminate ISU plan – submit drop form
- Submit forms to indicate plan or terminate coverage by **December 7, 2024**
- **Reminder:** If you move during the year, make sure to call or email the Benefits Office to provide your new address. We will update your address with the insurance vendors.

## Eligible Dependents

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- Legally Married Spouse or Domestic Partner
- Dependent Child(ren)
  - Who have a relationship with the retiree or enrolled spouse/domestic partner
  - Biological, foster, legally adopted/placed for adoption, legal guardianship, court-ordered
  - Through December 31<sup>st</sup> of the year in which they turn age 26
  - Unmarried, full-time students over age 26
  - Totally & permanently disabled child

\* You may add or remove an eligible family member during the year with timely reporting of a qualifying event

## Medical Insurance

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- Administered by Wellmark Blue Cross/Blue Shield
  - BluePPO (the Preferred Provider Organization, a national network of the Blue Cross Blue Shield Association)
  - BlueHMO (the Wellmark Health Plan of Iowa Network)
- If you drop coverage, you cannot re-enroll.

# Wellmark

## BluePPO

- Access to nationwide network of participating providers
- Deductible, coinsurance and out-of-pocket maximums for in-network and out-of-network do not aggregate
- Deductible and out-of-pocket maximums reset every January

## BlueHMO

- Iowa network of participating providers
- Emergency services only outside the state of Iowa
- Must designate a primary care physician (PCP)
  - Female participants may also designate a primary OB/GYN physician
- Referrals are not required for in-network providers
- Out-of-Network Specialist: Wellmark must approve out-of-network referrals before you receive services
- Guest membership: while away from home for 90 days or longer.
  - College students
  - Snowbirds
- Deductible and Out-of-pocket maximum resets every January



# Medical Plan Comparison

Plan Provisions	BluePPO		BlueHMO
	In-Network	Out-of-Network	*PCP designation required
<b>Annual Deductible</b> <ul style="list-style-type: none"> <li>Single</li> <li>Family</li> </ul>	\$400 \$800	<b>*Does not aggregate</b> \$800 \$1,600	\$250 \$500
<b>Coinsurance</b> <ul style="list-style-type: none"> <li>In-patient or out-patient services</li> </ul>	20%	40%	10%
<b>Annual Out-of-Pocket Maximum</b> <ul style="list-style-type: none"> <li>Single</li> <li>Family</li> </ul>	\$2,000 \$4,000	\$4,000 \$8,000	\$1,500 \$3,000
<b>Preventive Services</b>	\$0	40%, after deductible	\$0
<b>Office Visit</b> <ul style="list-style-type: none"> <li>Mental Health Services</li> <li>Physical Therapy</li> <li>Occupational Therapy</li> <li>Speech Therapy</li> </ul> *Non-office setting, coinsurance may apply	\$25 copay per provider per date of service  (a separate copay may apply to lab and x-ray services if billed separately under a different provider)	40%, after deductible	\$15 copay per provider per date of service  (a separate copay may apply to lab and x-ray services if billed separately under a different provider)
<b>Emergency Room</b>	\$125 copay, plus 20% coinsurance *copay waived if admitted	\$125 copay, plus 20% coinsurance *copay waived if admitted	\$125 copay, plus 10% coinsurance *copay waived if admitted

- Medicare eligible retirees minimally impacted due to Medicare being primary payer
- Copays, deductible & coinsurance apply to yearly out-of-pocket maximum

## 2025 Medical Premiums for Retirees of the ISU Plan

<b>Plan Tier</b> (price includes appropriate prescription coverage)	<b>BluePPO &amp; RX</b>	<b>BlueHMO &amp; RX</b>
<b>Retiree Only</b>		
Not Medicare eligible	\$823.00	\$804.00
Medicare eligible	\$393.00	\$375.00
<b>Retiree &amp; Spouse/Partner</b>		
Two not Medicare eligible	\$1,874.00	\$1,838.00
One with Medicare/one without Medicare	\$1,210.00	\$1,173.00
Two Medicare eligible	\$780.00	\$744.00
<b>Retiree &amp; Child(ren) only</b>		
Retiree is not Medicare eligible	\$1,464.00	\$1,438.00
Retiree is Medicare eligible	\$1,034.00	\$1,009.00
<b>Family – Retiree, Spouse/Partner and child(ren)</b>		
None are Medicare eligible	\$2,401.00	\$2,337.00
One with Medicare & others without Medicare	\$1,737.00	\$1,672.00
Two Medicare eligible & others without Medicare	\$1,307.00	\$1,243.00

## Wellmark Information

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- <http://www.wellmark.com/>
- 800-494-4478
- Register to receive electronic explanation of benefits & claims information
- Locate participating providers
- Setting up automatic withdrawal with Wellmark is encouraged

## Wellmark Member Services

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- For those enrolled in the ISU Wellmark PPO or HMO plans
  - Identity Protection Services
    - Credit monitoring, cyber monitoring, fraud detection, complete identity recovery, reimbursement insurance
    - <https://www.hr.iastate.edu/vendor-discounts>
  - Blue365 Member Discounts & Services
    - Discounts & services related to diet, family care, financial, fitness, hearing, vision and travel
    - <https://www.blue365deals.com/WellmarkBCBS/>

## ISU Plan as Medicare Secondary Plan

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- Keep original Medicare (A & B). Medicare is required and must be the primary insurance for those eligible for Medicare when retired.
- The ISU Wellmark plans is secondary insurance
- Patient liability is a rare occurrence but can happen. If you have an amount to pay at a clinic or hospital, you may want to follow up on why.
  
- ISU Benefits Office will mail information to upcoming newly Medicare eligible members 3 months before Medicare eligibility.
- **If you become Medicare eligible early due to disability, End-Stage Renal Disease (ESRD), or ALS, you must notify the Benefits Office in order to update your benefits and enroll in our Medicare Part D prescription plan (Humana).**

## Medicare Part B Premiums

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- Each year, Part B premiums are based on income from 2 years earlier. 2023 income will determine your 2025 Medicare Part B premium
- Pay attention each year to gross income and possible capital gains.
- Required minimum distributions from retirement plans can trigger higher Medicare premiums a couple of years later.
- 2025 Medicare Part B Premiums
  - <https://www.medicare.gov/basics/get-started-with-medicare/medicare-basics/what-does-medicare-cost>



## Prescription Coverage

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- The ISU Wellmark Plan premiums includes the Express Scripts / Humana Part D Prescription Drug Plan (PDP)
- There is not a choice of prescription plans.
- Express Scripts is coverage for pre-Medicare members
- The ISU Humana PDP is required for retirees/any family members that are Medicare eligible on the ISU Wellmark medical plan.
- The ISU Humana plan is a unique group Medicare Part D PDP

# Express Scripts Plan Design

Annual Out-of-Pocket Maximum	Single \$2,000 Family \$4,000
<p>30-day supply – retail pharmacy</p> <p>*If you're on a maintenance medication, you may qualify for Smart90 where you will be required to move to a 90-day supply at retail or mail order.</p>	<ul style="list-style-type: none"> <li>• \$15 copay for generic</li> <li>• 30% coinsurance for preferred brand name (\$125 maximum copay/prescription)</li> <li>• 50% coinsurance for non-preferred brand name (\$250 maximum copay/prescription)</li> </ul>
<p>90-day supply – retail pharmacy</p>	<ul style="list-style-type: none"> <li>• \$0 copay for generic</li> <li>• 25% coinsurance for preferred brand name (\$300 maximum copay/prescription)</li> <li>• 33% coinsurance for non-preferred brand name (\$600 maximum copay/prescription)</li> </ul>
<p>90-day supply – Express Scripts Home Delivery Pharmacy</p>	<ul style="list-style-type: none"> <li>• \$0 copay for generic</li> <li>• 25% coinsurance for preferred brand name (\$300 maximum copay/prescription)</li> <li>• 33% coinsurance for non-preferred brand name (\$600 maximum copay/prescription)</li> </ul>

## Medicare Part D Standard “Framework”

	2024	2025
<b>Deductible</b>	\$545 – eliminated for ISU members	\$590 – eliminated for ISU members
<b>Initial Coverage Limit (ICL)</b>	\$5,030	Not Applicable
<b>Out-of-Pocket Threshold</b>	\$8,000 – ISU members OOP was \$2,500	\$2,000 (required by IRA for all Part D Plans)

- All Part D plans will have required changes in 2025.
  - Initial coverage limit will no longer be applicable
  - Out-of-pocket threshold will decrease from \$8,000 to \$2,000

# Humana Plan Design

	Retail Pharmacy: 30-day supply (90-day supply)	Mail Order: 90-day supply (CenterWell Pharmacy)
<b>Deductible</b>	\$0	
<b>Tier 1:</b> <i>Generic or Preferred Generic</i>	\$10.00 (\$30.00)	\$0
<b>Tier 2:</b> <i>Preferred Brand</i>	30% up to \$50.00 maximum out-of-pocket per prescription (30% up for \$150.00)	20% up to a \$100.00 maximum out-of-pocket per prescription
<b>Tier 3:</b> <i>Non-Preferred Brand</i>	50% up to \$50.00 maximum out-of-pocket per prescription (50% up for \$150.00)	33% up to a \$100.00 maximum out-of-pocket per prescription
<b>Tier 4:</b> <i>Specialty</i>	50% up to \$50.00 maximum out-of-pocket per prescription (N/A)	N/A – limited to a 30-day supply
	Coverage Gap eliminated with the Inflation Reduction Act (IRA) Effective January 1, 2025	
<b>Annual Maximum Out-of-Pocket (MOOP)</b>	\$2,000 – After your out-of-pocket drug costs reach this total, Humana pays 100% of your total drug costs for the remainder of the plan year.	

## Humana Part D Smart Summary

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- Center for Medicare (CMS) rules require reporting to participants at least quarterly. There is an option to view these online if you set up a Humana online account.
- The summary includes the drug purchases, the OOP cost and the TROOP, updates contact, patient rights.
- Does not include are any non-Part D purchases.

## Humana Discounts

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- **Dental Discount:** HumanaDental and Florida GoldPlus
- **Dental Health:** Truthbrush discounts
- **Hearing Discount:** Hearing aid discount through TruHearing Hearing Center
- **Vision Discount:** EyeMed
- **IMG Travel Medical/Evacuation Protection:** discounted travel insurance
- **Complementary and Alternative medicine and Weight Management:** Specialists, Nutrisystem, The Vitamin Shoppe, Fitbit
- **Personal Emergency Response System:** Lifeline Medical Alert System
- **Meal Delivery Discount:** Mom's Meals
- **Petzey Pet Telehealth:** on-demand mobile pet telehealth and wellness app

\* All offers are subject to change



## Medicare Part D & High Income

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- Income-Related Monthly Adjustment Amount (IRMAA) is determined by Center for Medicare and Medicaid Services (CMS) and will be reported to you, if you must pay.
- The amount will be deducted from the Social Security Income (SSI) each month in addition to the premium you pay to Wellmark.
- If you decline the deduction for IRMAA, CMS will disenroll you from the ISU Humana Group PDP. This may create issues for regaining the coverage.
- 2025 Medicare Part D Premiums
  - <https://www.medicare.gov/basics/get-started-with-medicare/medicare-basics/what-does-medicare-cost>

## Medicare Part D & Low Income Subsidy

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- Participants with low income may qualify for extra help from Medicare and the Part D cost may be reduced.
- Humana is informed by CMS and alerts ISU to adjust the Part D premium.
- ISU alerts Wellmark to reduce your premium for the subsidy amount reported to us by Humana.

## Dental Insurance

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- Administered by Delta Dental of Iowa
- Two plan choices:
  - Basic Plan
  - Comprehensive Plan – 3-year lock in
- PPO plus Premier Network
  
- If you drop coverage, you cannot re-enroll.

# Dental Plan Comparison

Delta Dental Premier Plus PPO	Basic	Comprehensive 3-year lock in
Maximum Per Person/Year	\$750 (applied to restorative services only)	\$1,500
Annual Deductible – <b>applied to first restorative visit</b>	\$25	\$50
Check Ups & Cleaning	100%	100%
<b>BASIC RESTORATIVE</b>		
Cavity Repair & Extractions	50%	80%
Root Canals	50%	80%
Gum & Bone Disease	50%	80%
<b>MAJOR RESTORATIVE</b>		
High Cost Restorations	50%	50%
Bridges, Dentures, Implants	Not Covered	50%
Orthodontics	Not Covered	50% after deductible up to lifetime maximum of \$2,000 (no age limit)

## 2025 Dental Insurance Premiums

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Tier of Coverage	Basic Plan	Comprehensive Plan
Retiree or Surviving Spouse	\$25	\$44
Retiree & Spouse/Partner	\$60	\$113
Retiree & Child(ren)	\$67	\$119
Retiree & Family	\$77	\$135

## Delta Dental Information

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- [www.deltadentalia.com](http://www.deltadentalia.com)
- 800-544-0718
- Register as a subscriber to access coverage details
- Register to receive electronic explanations of benefits
- Setting up automatic withdrawal with Delta Dental is encouraged
- Locate participating providers
- Order replacement ID cards
- **Vision discount service through DeltaVision**
  - <https://www.deltadentalia.com/webres/File/Member/vision-discount.pdf>
- Mobile app for Smart phones



## Retiree Life Insurance

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- If you had ISU life insurance for 10 consecutive years at the time you retired (by June 30, 2021)
  - \$4,000 to designated beneficiary
- Update Principal Beneficiary Designation
  - <https://www.hr.iastate.edu/retiree-life-insurance>

# ISU Retiree Association

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## Benefits of Membership:

- Representation with University
- Wellness & Health Education
- Memorial Day Ceremony
- Own Personal ISU Alumni Gmail Account
- Programs
- Newsletter
- Volunteering
- Social Activities
- No dues

## Contact:

- [alumni@iastate.edu](mailto:alumni@iastate.edu)
- 515-294-6525

## Questions:

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Contact ISU Benefits Office

- [benefits@iastate.edu](mailto:benefits@iastate.edu)
- 515-294-4800

Questions specific to medical & dental services/prescriptions – call customer service phone number on your ID card(s)

**Open enrollment closes December 7, 2024!**