

Retiree Benefits Newsletter

Welcome...

Welcome to the first edition of the Marine Corps NAF Civilian Retiree Newsletter. This is a semi-annual newsletter just for retirees. In this newsletter you will find helpful information on topics such as life insurance claims processing, Aetna Navigator, Medicare and various articles geared toward retiree life. This newsletter will also contain important contact information for retirement annuities and group insurance.

This newsletter is designed to respond to questions you may have

concerning your Marine Corps NAF Benefits. Retirees are encouraged to give comments/suggestions on the Retirees Newsletter to ensure we respond to the issues on which you may have questions.

To view this newsletter electronically, visit us online at www.usmc-mccs.org/retiree_newsletter.com. In the future all newsletters will be stored here for reference purposes.



Life Claims Processing

Losing a loved one has a way of making anyone feel unprepared. Suddenly, there are a hundred things to do and remember. At first it may seem odd or even morbid to prepare for your death. But let's face it, however young you are now, or however healthy you think you are now, the only certainty in life is death—so a little preparation is sensible.

A few basic arrangements could make all the difference to your family and friends in the event of your death, while also giving you piece of mind.

As a Marine Corps NAF Civilian Retiree, you may have continued Life Insurance into retirement. If so, make sure your beneficiaries are up to date and that they know who to contact in the event of your death. Please periodically review the insurance letter you received at the time of retirement. All death claims are processed through Headquarters, Marine Corps, 703-432-0421, Morale, Welfare, Recreation and Business Operations Division (MRG) 3044 Catlin Avenue, Quantico, VA 22134-5099.

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FACTS OF LIFE:

- Routine wellness exams can detect serious health problems early, enabling you to seek treatment early.
- Generic drugs are just as effective as name brand drugs and much less expensive. (ask your doctor)
- Even a simple exercise program can mitigate health issues.

In the Next Issue:

- ⇒ HMO Members turning age 65
- ⇒ Aetna plan changes for 2012
- ⇒ Generic Rx vs. Name Brand Rx

IMPORTANT: Please note that not all benefits will pertain to all retirees. If you were not eligible for, declined to continue, or have cancelled participation in a benefit, some articles may not apply.

Aetna Navigator ®

Aetna Navigator is a great online tool for *Aetna Health Plan Members* that gives you secure access to your personalized health and financial information, 24-hours a day, 7 days a week.

Who can register?

You can activate your account if you are an Aetna member or a participating dependent of a member.

Items needed for registration

You will need your member ID which is located on your Aetna ID card or your social security number. If you are a dependent you will have to provide the Subscriber's Member ID Number or Social Security Number, the Subscriber's First and Last Name, the Subscriber's date of birth and zip code.

Access

Next you will simply provide some basic information which helps Aetna validate who you are. It also helps us personalize your secure website to your needs and with your information.

User Name and Password Setup

To help safeguard your information you will create a user name and password that you will use each time you enter your secure website. Be sure to read the requirements stated in the help text when selecting a user name and password.

Security Questions

If you ever forget your user name and password, the security question and answer you select when you register will help you quickly and easily retrieve your user name and reset your password online 24/7. The security question and answer also help prevent unauthorized access to your account.

Help along the way

If you have questions at anytime along the activation process, read the helpful tips along side the requested information. If you still have questions, email Aetna whenever it's convenient for you or call the Aetna toll free telephone number between 7 am and 9 pm Eastern Standard Time to have a customer service representative personally guide you through the process step by step.

AVAILABLE NAVIGATOR TOOLS: Health Risk Assessments, Claims monitoring, EOB review, Simple Steps, etc.....

We want you to know®

Aetna®



*"Retire from work,
but not from life."
M.K. Soni*

NEW HEALTH INCENTIVE CREDIT!

Effective January 1, 2011, all **Aetna** participants and their covered family members can earn Health Incentive Credits (HIC) as a reward for taking steps to improve their health! Simply fill out the health Risk Assessment on Aetna navigator and/or get your routine wellness checkup at your participating provider's office. The credits are used toward annual deductible and coinsurance for taking one of the following actions:

Routine Wellness exams are covered at 100% for Aetna Participants.

Activity	Health Incentive Credits Earned	Credit Posted to Account within 3-10 days:
Complete or update Health Risk Assessment on www.aetna.com	\$100 each - 1 per year	After completing or updating Health Risk Assessment
Have preventive Care Exam*	\$100 each - 1 per year	After the preventive care claim is paid

You and your dependents can complete the wellness activities described above to earn Health Incentive Credits. These credits will be placed in an account and applied towards the first family member's claim where the deductible and/or coinsurance would be applied. **You can earn a maximum of \$100 per year per person, up to \$300 per family per year.**

Health Incentive Credit features:

- Applied to your medical deductible and/or coinsurance as claims are processed.
- Credits are displayed on Explanation of Benefits and in Aetna Navigator.
 - *Preventive exams eligible for the incentive: annual routine physical, Well-woman exam or Well-child exam.
- Note: The Health Incentive Credit cannot be applied to copayments such as PCP, Specialist, Emergency Room, Urgent Care co-pays etc, Hospital confinement fees, or pharmacy co-pays.
- The credit will roll over every year until you use it, for up to 3 years.
 - There is no cash value to the HIC.



Emergency Room (ER) Usage

Despite the changes to the emergency room (ER) benefit in 2010 (90% coinsurance; \$200 copayment) ER usage among Aetna members continues to increase. **There was a 9.4% increase in ER usage between 2009 and 2010.** We continue to work with the other DoD NAF Services and Aetna on communication materials that stress the opportunities and cost efficiencies of using urgent care clinics (\$35 copayment) and/or walk in clinics (\$20 copayment) instead of the ER.

During 2011 you will see new communication materials regarding this benefit that will attempt to steer employees to urgent care and/or walk in clinics instead of the ER. If your situation is not life threatening, you can call the nurse line to get treatment alternatives. If your situation is a true emergency, call 911 and/or proceed to your nearest ER.

Applying for Social Security Retirement Benefits

1.) First, find out if you are eligible for Social Security benefits.

2.) You can apply online at www.socialsecurity.gov, by phone at 1-800-772-1213 (deaf or hearing impaired call TTY 1-800-325-0778) or in person at your local Social Security Office (call for an appointment first). If you do not live in the U.S. or one of its territories - contact the nearest U.S. Social Security office, U.S. Embassy or consulate.

Reminders:

- You must be at least 61 years and 9 months old to apply for retirement benefits.
- You should apply for benefits no more than four months before the date you want your benefits to start.
- If you are already age 62, you may be able to start your benefits in the month you apply.
- If you are not getting Social Security and

you are not ready to retire, you should still sign up for Medicare four months before your 65th birthday.

3). When you apply:

Please be ready to supply the information needed to approve your application.

You may be asked to provide certain documents to show that you are eligible and to determine your benefit amount. If you do not have a birth certificate, you may request one from the state where you were born.

Also, bring along your bank information so you can sign up for Direct Deposit. If you do not have a bank account you can sign up for the Direct Express card program. With Direct Express, deposits from federal payments are made directly to the card.



Enrolling in Medicare

The Social Security Administration handles Medicare eligibility and enrollment. You can contact Social Security at 1-800-772-1213 to enroll, or to find out if you are eligible. You can also visit their website at: www.SocialSecurity.gov.

Even if you plan to continue working past age 65, if you will be 65 soon, and are **not** receiving benefits from Social Security - Apply for Medicare 3 months before your 65th birthday, even if you plan to continue working past age 65. Medicare Part A (Hospital Insurance) and Part B (Medical Insurance) will start the first day of the month you turn age 65. (Note: Because you must pay a premium for Part B coverage, you will have the option to turn it down, however you may have to pay

a penalty if you enroll at a date later than your original eligibility date.) You will receive a Medicare card about two months before age 65.

To apply for Medicare only, call 1-800-772-1213. Social Security representatives can make an appointment for you at a convenient Social Security office and advise you what to bring with you.

If you are enrolled in Aetna medical, enrollment in Medicare part A & B is **mandatory**. Enrollment in Medicare part D (prescription) is **not** necessary because the Aetna Rx plan meets requirements as defined by law. If you are Medicare eligible, due to age or disability, you cannot be enrolled in an HMO.

IMPORTANT CONTACT INFORMATION:

Morale, Welfare, Recreation and Business
Operations Division (MRG)
Headquarters, U.S. Marine Corps
3044 Catlin Avenue
Quantico, VA 22134-5099

Annuities - Phone: 703-432-0425
E-mail: gabriele.neuner@usmc-mccs.org

401(k) - Phone 703-432-0420
E-mail: zidekc@usmc-mccs.org

Insurance - Phone: 703-432-0421
E-mail: edentonlr@usmc-mccs.org
Fax: 703-432-0436



Visit us on the Web at:

[www.usmc-mccs.org/
benefits](http://www.usmc-mccs.org/benefits)

Retirement:

- **Direct Deposit** - If you are not currently taking advantage of this safe and convenient way to receive your monthly annuity, contact us at the number or email indicated.
- **Address Changes** - Make sure to keep your address updated at all times. Even if you have direct deposit, you need to ensure you receive any information that is mailed to you.
- **Taxes** - Taxes are not automatically deducted from your annuity. If you have not made a tax election and would like to start, contact us at the number or email indicated.

Coordination of Benefits with Medicare

If you are a retiree that is eligible for Medicare (either because you are at least age 65 or if you are disabled as defined by Medicare) your Marine Corps group health benefits are processed as secondary (after Medicare is considered). According to the provisions of the group health plan, enrollment in Medicare Part A and Part B is MANDATORY if you are Medicare eligible. You are NOT required to enroll in Medicare Part D because the Aetna prescription plan is considered to meet the minimum requirements.

If you continue medical into retirement, and are in an HMO, you must change your coverage to the Aetna plan when you become Medicare eligible. When you are retired and Medicare eligible, your group plan is secondary if you have two forms of insurance (to include Medicare). Processing of claims requires "coordination of benefits". Under the Department of Defense health plan with Aetna, the COB method is the "Government Exclusion" approach. The procedures for this approach are:

- All benefits with your Aetna plan are reduced by any Medicare benefits available for those expenses. This is done first.
- Charges used to satisfy your Medicare Part

B deductible under Medicare will be applied to your Aetna plan in the order they are received.

- Medicare benefits will be assumed for anyone eligible for Medicare – regardless if they are enrolled or not. So, in other words if you don't enroll in Medicare the Aetna plan will consider what would have been paid and you will receive reduced benefits.

There is no coordination of benefits with prescription coverage, so if you do enroll in Medicare Part D you will not be entitled to benefits from both plans. Prescription benefits are only available from one plan, the Aetna group plan or Medicare, not from both.

NOTE: when the retiree and all eligible family members are Medicare eligible, the Aetna plan will be the Traditional Choice Indemnity plan. If the retiree or the family member are not yet age 65 and not eligible for Medicare, coverage may be provided under the Preferred Provider Organization (PPO) until all of covered members become Medicare eligible.

HQ UNITED STATES MARINE CORPS

MORALE WELFARE RECREATION AND BUSINESS OPERATIONS DIVISION (MRG)

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