Enroll in Additional Medicare Coverage for 2019
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Introducing Via Benefits

Trusted advisor to more than a million Medicare-eligible participants

Via Benefits Insurance Services provides support to you as you evaluate and enroll in additional individual Medicare coverage.

Via Benefits is not an insurance company. We are a resource that offers you the country’s largest Medicare marketplace, allowing you to select from a wide variety of Part D Prescription Drug plans from national and regional insurance companies. Our marketplace has Medicare Part D Prescription Drug plans, as well as vision and dental plans.

Finding the right Medicare can be complicated and your health care decisions are important. You’ll get personalized assistance from a benefit advisor, who is a licensed insurance agent, to help you find coverage that fits your medical and financial needs. In addition, our online marketplace makes it simple for you to search, compare, and select plans with a number of helpful tools.

We look forward to helping you make an informed and confident choice.
What to Expect From Us

Via Benefits not only gives you access to the nation’s largest Medicare marketplace but also provides you with personalized assistance from our benefit advisors, all at no cost.

Personalized, step-by-step guidance

Our licensed benefit advisors and easy-to-use online tools will guide you step by step through the Via Benefits marketplace. By the time you’re ready to enroll, you can feel confident that you’re choosing the right coverage to fit your needs.

Unbiased, objective support

Our licensed benefit advisors are objective advocates. They are paid a salary and have no incentive to steer you into signing up for any specific type of plan or insurance company.

Quality plan options

We work with leading national and regional insurance companies to ensure you have quality plans to choose from. Because we offer a range of options, you may find coverage that is better than your current plan at a lower cost.

Efficient, accurate enrollment

Once you have selected a plan, you will work with an application data processor to complete your application. After your application is submitted, you can track its status on our website.

Support after you enroll

Throughout the year, if you have questions about anything relating to your coverage, we are here to help.
Your New Coverage: Getting Started

As you move from your current health plan into individual Medicare coverage, you will need to take a more active role in evaluating your plan options. Via Benefits helps you understand those options and works with you to find plans that meet your needs. Your coverage choices will differ under Medicare. Original Medicare, also known as Medicare Parts A and B, is the health insurance provided by the federal government when you turn 65 (in most cases). Since Original Medicare doesn't cover prescriptions, you’ll want to purchase additional insurance. Part D Prescription drug coverage, offered by private companies, helps to pay for costs that Original Medicare doesn’t cover.

Because Medicare only offers individual coverage, you and your spouse or dependent will be covered under separate individual plans and not under a family plan. This means you and your spouse or dependent can individually enroll in the same or different plans, according to which plan fits each of your needs.

This is because the Via Benefits marketplace offers many plan options to consider. This is where our licensed benefit advisors come in. They help you understand what the choices mean to you and work with you to find plans that meet your medical and financial needs. The plans offered in our marketplace may cost the same or less than your current prescription plan.
Your Enrollment Period

You may be enrolling during a Special Enrollment Period (SEP) or an Initial Enrollment Period (IEP), or you may be enrolling during the annual Open Enrollment Period held every fall from October 15 – December 7. Regardless of when you are enrolling, Via Benefits will work with you, helping you select a plan that fits your financial and medical needs.

If you are 65 or older, you’ll most likely be enrolling during an SEP. An SEP is granted when certain life events occur, such as losing group coverage, moving to another state. These circumstances allow you to enroll, with guaranteed issue, in new Part D Prescription Drug plan outside of the Open Enrollment Period in the fall of each year.

If you’ll soon be turning 65, you’ll most likely be enrolling during an IEP. An IEP is a seven-month period when you’re able to enroll in a new Medicare Part D Prescription Drug plan. Your IEP starts three months before the month of your 65th birthday, includes the month of your birthday and the three months after your birthday.

Coverage requirements

In order to enroll in a Part D plan, you must be enrolled in Medicare Parts A and B. If you need to enroll in Parts A and B, contact your local Social Security office, visit www.ssa.gov/benefits/medicare/, or call +1-800-772-1213 (TTY +1-800-325-0778) between 7:00 a.m. and 7:00 p.m., Monday through Friday.
Three Steps to Enrollment

We recommend following these three steps to help you enroll in new coverage. If you have questions or need help with any of these steps, simply call Via Benefits. We are here to help you prepare for your enrollment.

STEP 1 COMPLETE YOUR PERSONAL PROFILE

To help you find plans that meet your medical and financial needs, we will need to collect information about you, your prescription drugs, and the doctors you want to continue to see. After gathering all this information, we recommend entering it into your online personal profile. Doing this will help give us a better sense of your coverage options from the start.

If you don’t have access to a computer or choose not to complete your online profile, a Via Benefits representative can complete it for you during your call to enroll. We recommend writing your collected information on a separate sheet of paper and keeping it with this guide, so you can refer to it during your call.
Collect your information

Your personal and Medicare information

We’ll need the following personal information to complete your enrollment. Please note that we collect these pieces of information so we can securely match your online profile to the information provided to Via Benefits by your former employer.

✓ Your legal name
✓ Phone number
✓ Address
✓ Social Security number

You’ll also need to provide the following information from your Medicare ID card. We suggest having your card available at the time of your call and/or profile creation.

✓ Your name as it appears on your card
✓ Your Medicare number
✓ Your Part A and Part B coverage start dates

Please note the government began issuing new Medicare cards in April 2018 and will continue through 2019. The new design removes Social Security numbers to prevent fraud and identity theft.
Your prescription drug information

We can help you find drug plans that cover your medications while minimizing your out-of-pocket expenses.

You will need to have the following information about each prescription medication you take.

- **Drug name**
- **Form (tablet, liquid, gel capsule, etc.)**
- **Dosage**
- **Quantity per 30-day period**

You can find this information on the medication label. Remember to include medications you order by mail.
Other considerations

Before your call to enroll, think about the answers to the following questions, which will help identify plans that meet your needs:

❓ Do you use mail order for prescriptions?

❓ Do you have a preferred pharmacy?

Create your personal profile

After you’ve collected your information, you’re ready to create your online personal profile. To do so, you’ll need to create an online account. By completing your personal profile, you can simplify the enrollment process and speed up your call.

If you don’t use a computer or prefer to set up your online personal profile by phone, you are welcome to call us.
Create an online account
Creating an online account is simple to do. To start, go to the Via Benefits website (see the web address at the bottom of this page) and select the My Account tab. Next, select the Create an account button under the First-time Visitor? section. You will be asked to provide an email address and create an account username and password. (Once you’ve created these, please write them down for future reference.) We will also need your Social Security Number, but strictly for the purpose of authenticating your identity based on information we received from your former employer.

Complete your online personal profile
Your online personal profile contains information about you, your doctors, and your prescription drugs.

When you first look at your personal profile, you may see that some information has already been filled in. ClientName has shared this information with us. You may change or edit the information in your personal profile by clicking the Edit Profile link on the My Account section of our website.

In addition to confirming information, you can enter the information you collected about your doctors, prescription drugs, and other topics. Our website will guide you through the process of completing your online personal profile.

Online security and privacy
Our website is secure, and we guard your privacy. Via Benefits is meticulous in all matters regarding information security and the protection of data. We constantly monitor our systems to safeguard your information. All information on our site is secure and is subject to HIPAA (federal data privacy) regulations.
You can schedule your call to enroll either by going online or calling us. We recommend scheduling as soon as possible in order to secure a date that gives you enough time to consider your options by CoverageEndDate.

During your call, a licensed benefit advisor will walk you through your coverage options, help you determine which plans meet your medical and financial needs, and have you work with an application data processor to complete your enrollment application. The call will take about 90 minutes per person to complete. If you are also enrolling a Medicare-eligible spouse or dependent, you are both welcome to enroll at the same time, or make a separate appointment to enroll.

You can have a family member, caregiver, or friend with you during your call. Some people like to have someone on hand to help with taking notes or looking at information on a computer screen. Additionally, your licensed benefit advisor can teleconference your helper who may be calling from a different phone number. Your helper can also act on your behalf to choose your coverage, if you wish.*

**Legal housekeeping**

When you call Via Benefits to schedule your call to enroll, you will be asked to confirm that you agree to discuss Medicare plan options with us. This is a required statement by the Center for Medicare & Medicaid Services created for your protection as a consumer.
Your licensed benefit advisor will ask that you give recorded permission for your helper to assist during your call. If you are unable to be on the call or unable to listen to required recorded legal information, your helper will need to provide your legal Power of Attorney documentation authorizing him or her to act on your behalf.
The following information about your Medicare plan options will help you make an informed and confident choice during your call to enroll. Before your call, we encourage you to go to the Via Benefits website to review the plans available to you in your area. Don’t worry if you’re unsure about which plans are right for you — your benefit advisor will help you understand your options and select coverage that meets your medical and financial needs.

**Original Medicare**

In most cases, when you turn 65, the federal government provides you with Original Medicare, also known as Medicare Parts A and B. Broadly speaking, Part A covers hospital stays and Part B covers doctor visits (for more information see “Medicare Parts” in the Glossary). Although Original Medicare pays for most of your health care expenses, it does not pay for prescription drugs. To reduce your out-of-pocket costs, you’ll need to purchase a Part D prescription drug plan.

**Understanding Part D**

You must replace the coverage previously provided by your employer with individual prescription drug coverage. These prescription drug plans are available to everyone who is Medicare-eligible.
What are Part D plans?
Part D plans help pay for your prescription drug expenses. These stand-alone plans add prescription drug coverage to Original Medicare, some Medicare Advantage plans, and Medigap plans. Part D plans are offered by insurance companies approved by Medicare. For more information on Part D plans, visit www.Medicare.gov.

Rate increases
Nearly every plan will increase its premiums each year, primarily due to the rising cost of medical care. We advise you to go online and use the Shop and Compare feature to compare other plans to compare your options.

IMPORTANT!
Most people enroll in Medicare Part D prescription drug coverage when they become eligible. If you didn’t, you may be asked to prove that you have creditable prescription drug coverage through another plan (i.e., your current plan). If you don’t enroll in a Medicare Part D plan when eligible and don’t have creditable coverage, you may have to pay a penalty. The penalty will be calculated for the length of time you did not have any prescription drug coverage. This will be added to your Part D premium every month for as long as you have Part D coverage.
Review Plans With Our Online Tools

Now that you have an understanding of your Medicare coverage options, you’re ready to start reviewing the plans available in your area. You’ll be able to search the plans in our online marketplace once you complete your online personal profile. Our online tools are easy to use and can direct you to plans that meet your medical and financial needs.

If you don’t have access to a computer, don’t worry—we will review your plan options with you during your call to enroll.

Finding information about specific plans

Because we offer thousands of plans from insurance companies across the United States, we are unable to include specific information in this guide. However, on our website you will find extensive information about plans available in your area, including cost.
Shop & Compare

The Shop & Compare section of our website allows you to search for plans available in your area and sort them by price, plan type, insurance company, and other factors. With just a few clicks, you can compare plans side by side and review the details of plans that interest you.

When shopping for additional medical and prescription drug coverage, you can take advantage of our Prescription Profiler tool. This tool ask you to enter more details about your the prescriptions you are currently taking to produce a suggested list of plans based on the information you entered.

Prescription Profiler

Prescription Profiler is a powerful tool that provides the estimated annual out-of-pocket cost of plans that cover your prescriptions. Simply enter your current medications into your online personal profile.

Plan summaries

If you’d like to review the summary of benefits for a plan, select View Details in the plan description that appears in your search results.
Enroll online
If you see a plan you want to purchase, place it in your shopping cart and begin the checkout procedure. You will be able to select and enroll in many plans online — although some plans require you to call Via Benefits to complete the enrollment.

If you’re not sure which plan is right for you and you’ve not yet had your enrollment call, just place the plans you like in your shopping cart and your licensed benefit advisor will be able to discuss them with you over the phone.

Answers to popular questions
Selecting the Help & Support tab takes you to our searchable database of frequently asked questions. You can use this database to read about topics such as how to enroll in coverage, shop for plans, get reimbursed for medical expenses, and much more.

Why can’t I see all the plans available in my area?
Via Benefits contracts with each insurance company that has plans listed on our website. A few of the reasons you may not see a plan in our marketplace include:

- Some insurance companies have chosen not to participate in our marketplace.
- Some insurance companies will offer one type of plan on the marketplace – Medicare Supplement Insurance, for example – but not others.
- Other insurance companies may not have the technical capabilities required to offer their plans through an online marketplace.
Regulations to protect you during your call

For your protection, the federal government heavily regulates the sale of individual Medicare plans. For your enrollment application to be legally compliant, we’ll need you to do the following during your enrollment call.

- **Repeat your personal information**: Nobody likes repeating themselves, but we are required to record your personal information for each plan that you enroll in. This could mean you have to repeat your personal information several times as you complete your applications. We know it seems redundant, but the purpose is to protect you and make sure your application is correct. It’s not so different from applying on paper — if you were filling out application forms for each plan, you would write down the same information on each one.

- **Listen to recorded messages**: You’ll need to listen to recorded messages for the plans that you enroll in. Although these messages can be frustrating to listen to, they are the “fine print” — the terms of the policy you’re applying for. They are for your protection and required by the insurance company and/or your state’s Department of Insurance and/or Medicare.
After Your Call

You’ll begin receiving communications about your new coverage after your call to enroll. You can contact Via Benefits any time to get help with questions or issues that may arise with your coverage. If your circumstances change or you want to make changes to your coverage, we are here to help you.

Communications

After you enroll, be sure to look for these communications:

Selection Confirmation letter

We will mail you a Selection Confirmation letter after your enrollment confirming that you have applied for coverage under the policies listed in the letter.

Communications from your new insurer

In addition to your Selection Confirmation letter, you may also receive mailings, phone calls, or emails directly from your new insurer before you receive ID cards or confirmation of your new coverage. Please pay special attention to your mail and phone in the weeks following your enrollment call as additional information may be needed by the insurance company to fully process your enrollment.

IMPORTANT!

Please note that the Selection Confirmation letter does not guarantee that the insurance company will issue you a policy. Your doctor, pharmacy or other health providers will not accept this letter as “proof” that you have coverage. Proof of coverage will come directly from your insurer.
Insurance cards
Once your application is accepted, your insurance company will mail you identification cards. These cards will arrive typically within four weeks, but can take up to eight weeks after you have enrolled.

If you need to visit your doctor before your cards arrive, speak with your doctor’s office about what they will accept as proof of insurance until your cards arrive. You may be able to get your cards on your insurer’s member website. If you don’t have a computer or don’t know how to access the member section of your insurance company’s site, please contact us for assistance.

Your coverage begins on your policy’s effective date, not the date your insurance card(s) arrive. If you have any medical care between your policy’s effective date and the time your card arrives, your plan’s coverage is not delayed because your insurance card has not been received.

IMPORTANT!
Please respond to communications from your new insurer as soon as possible. Your response may be required before they can issue your new policy.

Online updates
After your enrollment call, you can go to the My Account section of our website to track your application’s status.
Frequently Asked Questions

Via Benefits has helped more than a million people enroll in Medicare coverage. Based on our experience, we’ve developed answers to these frequently asked questions.

What is the prescription drug coverage gap?

Medicare drug plans have a “coverage gap,” sometimes called the “donut hole.” This means that when you and your plan have paid a total yearly drug cost of $3,820, you get a 63% discount on generic drugs and a 75% discount on brand name drugs until your total cost (before discounts) reaches $5,100. Some plans offer generic drug coverage in the gap.

How much do Part D plans cost?

The cost of Part D plans vary. There is a wide range of out-of-pocket costs associated with each individual plan. We recommend estimating what you may spend out-of-pocket by using our PrescriptionProfiler or speaking with a Via Benefits benefit advisor.

Who is eligible for Part D coverage?

Prescription drug coverage is available to everyone who is Medicare-eligible, regardless of income. You, your Medicare eligible spouse, and Medicare-eligible dependents each must make a separate election.

Do Part D plans cover me when I travel?

Part D plans provide nationwide coverage from participating pharmacies.
Can I continue to use the same insurance company? 
In many cases, yes, you can. However, group plans usually work differently than individual plans, and your current insurance company may not offer a plan tailored to your specific needs. We’ll help you compare your options to see how each plan specifically fits your needs. Your current insurance company may provide the right plan, or you may discover that another insurer offers a plan that is a better fit for you.

Will I have to pay for my new health plan when I enroll? 
When you enroll in your new plan, you will need to begin making monthly premium payments to the insurance company to maintain your coverage. You may need to pay your first month’s premium(s) during your enrollment call or shortly after enrolling in new coverage. To speed up your call to enroll, have your payment information ready when you contact us.

Will I need to get new prescriptions from my doctor for my new coverage through Via Benefits? 
This will depend on the plan you select and how you receive your current prescriptions. In general, for 30-day prescriptions refilled at a retail location, you will not need to ask your doctor for a new prescription. Those prescriptions will be carried forward to the new coverage you elect through Via Benefits. For mail-order 90-day supply prescriptions, you will need to ask your doctor for a new prescription. Your licensed benefit advisor will help you select prescription drug coverage and discuss any steps you need to take to continue receiving your medications without interruption. Also, you may want to refill your prescriptions as close as possible to the your current coverage, so you aren’t in immediate need.
Will Via Benefits be available to assist me next year?
Yes. Unlike group insurance, you don’t have to reenroll every year. If you like your plan, you can keep it, and the plan will automatically renew. We recommend comparing your current coverage to new plans annually to ensure you are receiving the best plan value for your specific needs.

If I don’t like the plan I enrolled in, when can I change?
Every year, the Open Enrollment Period allows you to change your Medicare Part D Prescription Drug plan.

If I like the licensed benefit advisor I speak to, can I request that same person again?
The person you enjoyed dealing with before may not be available due to other scheduled appointments or high call volume. Every licensed benefit advisor must, by law, be licensed, certified, and appointed to talk with you about the plans in your specific geographic area. You can feel confident that if you can’t reach the person you request, all of your information is online in our secure system. Another member of our team will be happy to assist you.
If I need assistance, can someone else speak with a licensed benefit advisor on my behalf?
Yes, but we must have your verbal permission or, if you can’t provide your verbal permission, someone with your Power of Attorney can complete the enrollment on your behalf. You may provide your Power of Attorney information to us online in advance of your call to speed up your enrollment.

Do you offer dental insurance?
Via Benefits offers dental insurance plans by from several different providers. These plans include a wide range of services. Learn more about dental plan features on our website, or ask about them during your enrollment call.

Do you offer vision insurance?
Via Benefits offers a vision insurance options that provide immediate access to premium vision coverage—including annual eye exams, prescription eyewear, personalized care and more—from VSP® Vision Care. VSP® Vision Care is the nation’s largest eye care provider, providing access to a nationwide network of 22,000 community-based independent eye doctors.
Extend Insurance Services, LLC* is Extend Health, Inc.’s licensed insurance agency. Extend Insurance Services, LLC is a Utah resident insurance agency (Utah License No. 104741) and licensed as a nonresident insurance agency or otherwise authorized to transact business as an insurance agency in all states and the District of Columbia. Extend Insurance Services, LLC represents, and receives payment of commissions from the insurance companies for which Extend Insurance Services, LLC is an agent and sells insurance products and services, and may receive other performance-based compensation for its sale of the insurance products and services provided to you. Insurance rates for the insurance products and services offered by Extend Insurance Services, LLC are subject to change. All insurance products and services offered by Extend Insurance Services, LLC may not be available in all states. It is your responsibility to enroll for coverage during the annual Medicare Open Enrollment period.

*Extend Insurance Services, LLC is changing its d/b/a from Towers Watson’s OneExchange to Via Benefits Insurance Services
IMPORTANT!
TIME-SENSITIVE INFORMATION REGARDING YOUR 2019 HEALTH BENEFITS ENCLOSED.