Saint Paul Public Schools Retirees Health Insurance

Frequently Asked Questions

Who will be the new insurance carrier?

All retirees ages 65 and older will now be covered under the Medicare Advantage plan with United Health Care Group (UHC) beginning January 1, 2022. The current plan with HealthPartners will cease on December 31, 2021.

Will I be able to see my same doctor?

Yes! UHC’s network is nationwide and very broad. If your doctor currently accepts Medicare, your UHC plan will be accepted.

Will I be able to use my same pharmacy?

Yes! UHC also has a broad network for pharmacy coverage that is nationwide. The District has also negotiated prescription coverage with UHC; if using their preferred pharmacy (Walgreens), you can receive your generic prescriptions for $7 and preferred prescriptions for $19. Non-Walgreens pharmacies are still in-network, and you can fill generics for $12, and preferred for $24.

What am I going to be paying for my coverage?

For those receiving the District’s contribution you will still receive the District’s contribution towards your medical premium. The cost will be under $150 per member, per month.

Whom can I talk to about these changes?

We are in the beginning stages of implementation for this change in carriers. We will be hosting in-person and virtual retiree meetings this fall.

There will also be a pre-enrollment phone number and a variety of communications, including mailings for open enrollment with all details, as well as UHC’s customer service team dedicated to serving retirees, with extended hours, located in the US.

Are we also changing dental coverage?

No. Dental coverage will remain through HealthPartners.

Will my spouse/dependent still have coverage?

Yes. If your spouse is age 65+, they will also move to the UHC plan. If your spouse/dependent is under age 65, they will stay on the HealthPartners/PEIP plan (as determined by your bargaining group at the time of retirement) until they turn age 65 or age off the plan.
Will I still be given the Journey or Retiree National Choice plan?

No. UHC offers one nationwide plan, meaning you are covered on the same plan no matter your state of residence.

What if I live out of state part of the year?

UHC offers one nationwide plan, meaning you are covered on the same plan, no matter your state of residence. If you reside part of the year in another state outside of Minnesota, you are able to see any physician that takes Medicare. You may also use any pharmacy of your choosing; Walgreens is the preferred pharmacy with lower copays.

How much am I going to pay for services?

UHC was able to match, and in some cases improve, your current coverage. You will not see an increase in your co-pays or charges for specific services.

What changes are happening with my current coverage?

Overall, you will not see changes with your current coverage; you’ll be able to see your same doctor and go to the same clinic. You will want to provide your new insurance ID cards when you receive them at your first visit in 2022. Additionally, new benefits include:

- Improved diabetic supply coverage ($0 copay)
- Provided lower prescription drug copays for members utilizing UHC’s preferred pharmacy, Walgreens: $7/generic, $19/preferred. Non-Walgreens are $12 generic/$24 preferred.
- Matching copays for Part D drugs; 5% co-insurance for Part B.
- Members not subject to price difference when receiving brand name Rx when generic is available
- $1500 allowance on hearing aids every 3 years (not currently in HP plans)
- $150 allowance on eyewear (not currently in HP plans)
- Emergency Room services outside the US have $50 copay.
- $20 copay for chiropractic

I have an active treatment plan. How will the transition work?

We will be working through official details during our implementation phase, You should not see any disruption and we will communicate additional information as we near open enrollment.

Why is the District switching carriers?

The District recently completed an RFP (Request for Proposals) for Post-65 insurance vendors. RFP’s are conducted every few years in order to comply with all city, state, and federal laws and regulations. The RFP 9-step process is completed to ensure the maximum benefit and value for the taxpayer’s dollar for the requested services. Upon completion of the most recent RFP, United Health Care Group, Inc. (UHC), was selected as the best vendor to meet the needs for the District. UHC offered a much better rate, and did not have any coverage disruptions.
I’m not familiar with United Health Care, Inc. (UHC). Who are they?
United Health Care Group, Inc. is based in Minnetonka, Minnesota, and is the second largest healthcare company. They have extensive experience with group Medicare Advantage plans, and have the largest Medicare membership at over 1,500,000 enrolled. They also had the largest number of public-sector clients of all bidders, and have a CMS rating of 4.5 (out of 5).

What paperwork do I need to complete to change my coverage?
None! UHC has offered the District a streamlined enrollment process, and you will not need to complete any paperwork to keep the coverage you currently hold. During Open Enrollment this fall, you will be able to change any dependent coverage, as well as drop your plan if desired, but will not need to complete anything, and your coverage will roll over.

Will I get new insurance cards?
Yes. New cards will be issued and mailed to your home address on file with the District. You can update your address by sending an email to benefits@spps.org.

I’m turning 65 later this year, what do I need to do?
When turning 65, you will receive a packet in the mail 3 months prior to your 65th birthday. For those turning 65 in 2021 you would move to the Health Partners Medicare plan and transition to the UHC plan effective January 1, 2022.