

Hawaii Employer-Union Health Benefits Trust Fund (EUTF)

Applying for Your Retiree Health Insurance Benefits

PRE-RETIREMENT CHECKLIST

Congratulations on your retirement! This checklist includes a list of documents you will need to enroll in your EUTF retiree health and life insurance benefits. Forms may be found on the EUTF website at <u>eutf.hawaii.gov/eutf-forms</u>.

After filing your retirement application with the Employees' Retirement System (ERS), please submit the following to the EUTF:

- Page(s) of the ERS Retirement Estimate Letter* that reflect ERS Membership Date and Total Years of Service Please only submit the page(s) requested above which pertains to the EUTF, all other pages will be destroyed.
- EUTF EC-2 Enrollment Form*

If you are Medicare eligible (age 65+ or qualified disabled), you must also submit:

- Copy of your and/or your dependent's Medicare card* indicating enrollment in Medicare Part B
- Medicare Part B Reimbursement Direct Deposit Agreement Form (and voided check if designating a checking account)
- Social Security Administration letter for you and/or your dependent indicating the Medicare Part B Premium amount

If you are adding a dependent(s), you must also submit:

- □ Marriage Certificate*
- Birth Certificate*
- □ Full-time Student Registrar Letter or National Student Clearinghouse Certificate*

If you will be paying all or a portion of your health benefit premium you must enroll in one of the automatic premium deduction options below:

- ERS Pension Deduction*
- ACH Deduction* from your bank account

*All required forms listed above must be submitted within 60 days of your Retirement and before EUTF can process your and/or your dependent's enrollment into any health benefit plan.

If you have questions regarding claims or benefits, please contact the insurance carriers listed in the EUTF Retiree Reference Guide. If you have questions on eligibility or enrollment, please call our Customer Service Call Center at (808) 586-7390 (Oahu) or toll-free at 1-800-295-0089.

1. EUTF EC-2 Enrollment Form

Complete the EUTF <u>EC-2 Enrollment Form</u> and submit it to the EUTF. Social Security numbers (or Individual Tax Identification Number) must be completed for the retiree and all enrolled dependents. Do not submit the EC-2 form until you are certain that you are going to retire. If you are currently working prior to your retirement date, your Department Personnel Office will complete an EC-1 form to terminate your active employee plans upon your retirement. State of Hawaii Executive Branch or UH employee terminations will be reported to EUTF via the Hawaii Information Portal (HIP) file.

2. ERS Retirement Estimate Letter

The ERS Retirement estimate letter is used to determine the maximum amount your employer will contribute towards your retiree health coverage. The letter certifies your employment membership date and length of service to help determine the percentage of the Base Monthly Contribution (BMC) that will be available to cover your retiree health plan premiums. Retiree plan premium amounts may be found in the EUTF Retiree Reference Guide or at <u>eutf.hawaii.gov/retirees/eutf-retiree/premiums-contributions/</u>.

Years of Credited Service (excluding sick leave)	Employer's Contribution Percentage of the Base Monthly Contribution* If Your (ERS) Membership Date was:		
	On or Before 06/30/96	On or Between 07/01/96 - 06/30/01	On or After 07/01/01**
Less than 10 years	50%	0%	0%
10 yrs less than 15	100%	50%	50%
15 yrs less than 25	100%	75%	75%
25 yrs or more	100%	100%	100%
*The Employer's percentage of the E employer contribution and total pre	-	e maximum employer contribution paya paid by the retiree.	able. Any difference between the

**If your ERS Membership Date was on or after 07/01/01, the monthly employer sponsored contribution will be applied to the self only BMC.

3. Mandatory Requirement to Enroll in Medicare Part B (age 65+ or qualified disabled):

When you and/or your dependent(s) (spouse, qualified disabled child) become eligible to enroll in Medicare Part B, you must provide a copy of the Medicare card showing enrollment in Medicare Part B in order to be enrolled in the EUTF retiree medical and/or prescription drug plan. If you do not provide proof of Medicare Part B enrollment, you and/or your dependent(s) medical and/or prescription drug plans will be cancelled.

Medicare Part B premium is only reimbursable to the retiree and their eligible spouse/partner, provided you are paying for your Medicare Part B premium and it is not being paid by another entity such as the Medicare Savings Program or Medicaid. Medicare Part B premium reimbursements shall be effective the date the Medicare Part B is effective or the first day of the month that the fund receives appropriate proof of enrollment in Medicare Part B, a valid direct deposit agreement and proof of payment to the Social Security Administration or Centers for Medicare & Medicaid Services, whichever is later.

4. Mandatory Requirement to Enroll in Recurring Electronic Premium Deductions:

If you are responsible to pay for a portion of your monthly health benefits premium, you are required to enroll in one of the recurring electronic premium deductions listed on the checklist above (Act 62, SLH2020).

As detailed in <u>EUTF Administrative Rule 4.14(c)</u>, if your premium deduction is rejected for any reason (i.e. bank account on file is closed, insufficient funds, etc.), you will be given 30 days to re-establish your recurring electronic premium deductions. If we do not receive a new ACH or ERS pension deduction authorization form within 30 days, your EUTF health benefit plans will be terminated retroactive to the last paid-in-full period.

5. EUTF Rules

EUTF rules specify that if both you and your spouse or partner are employees and/or retirees of the State or counties, you may enroll in one family/two-party plan or two self plans.

Do I need to be enrolled in EUTF health plans as an active employee in order to qualify for EUTF plans as a retiree?

No, you do not need to be covered under EUTF active employee plans at the time of retirement to be eligible to enroll in EUTF retiree plans.

Who can be covered under my EUTF retiree health plans?

Those eligible to be enrolled under retiree health plans include a spouse (civil union or domestic partner), and children by birth, adoption, legal guardianship or foster child. Children may be covered until age 19 for medical, prescription drug, dental and vision plans, and covered until age 24 if they are unmarried, a full-time student and living with the retiree (unless boarding at college or as required under a Qualified Medical Child Support Order). Legal guardianship or foster children will terminate upon the age of 18, regardless of whether the child is a full-time student or not. Coverage can be continued for an unmarried child incapable of self-support due to mental/physical incapacity that existed prior to age 19.

If I pass away after I retire, does my spouse (civil union or domestic partner) get to keep my EUTF retiree health plans?

Yes, your spouse (civil union or domestic partner) is eligible to keep health plans through EUTF provided they do not remarry or enter into another domestic or civil union partnership. In addition, depending on the employer contribution percentage that the retiree was enrolled in, your spouse (civil union or domestic partner) may need to contribute a portion of the retiree health premiums.

Does my spouse (civil union or domestic partner) or qualified disabled child need to enroll in Medicare Part B to be covered under my EUTF retiree health plans?

Covered dependents eligible for Medicare Part B must enroll in Medicare Part B in order to be covered under the EUTF retiree medical and/or prescription drug plan. Please submit a copy of your dependent's Medicare card (indicating enrollment into Medicare Part B) to the EUTF within 60 days of them becoming eligible.

Does my spouse (civil union or domestic partner) need to enroll in Medicare Part B if they are still actively working?

Yes, your spouse (civil union or domestic partner) must be enrolled in Medicare Part B in order to be covered under the EUTF retiree medical and/or prescription drug plan regardless of whether they are retired or actively working.

Can I make changes to my plans in the future?

You can make changes to your EUTF retiree plans if you experience a qualifying live event or during the EUTF retiree open enrollment period. For a list of qualifying events please visit the EUTF website at <u>eutf.hawaii.gov</u>. Open enrollment for retirees usually occurs in October and plan changes become effective January 1st. Please complete the EC-2 Enrollment form if you wish to make changes during these events.