



RetireeFirst



Retiree Healthcare Made Simple

*Innovative strategies to address
the challenges of retiree
healthcare while improving the
experience for all stakeholders*

About RetireeFirst

Retirees are our sole focus

As the Marketplaces' leading Medicare Benefit Manager (MBM), it is our mission to preserve at-risk retiree healthcare benefits for group plan sponsors and their retiree populations, as well as improve the retirement healthcare experience for every retiree we are privileged to serve.



For over 18 years, our sole focus at Retiree First has been to simplify the healthcare experience for retirees.



Our Retiree Advocates provide plan participants with white glove service and help them navigate their healthcare benefits.



We are committed to quality and compliance; HITRUST & AHIP Certified, URAC Accredited.



We successfully partner with 375+ groups and over 350,000 Medical and Pharmacy lives across all 50 States. Our retention rate is 99.9%.



Our plan participants include teachers, fire fighters, police officers, municipal employees and many others. Our latest participant NPS is 96.



We are proud of RetireeFirst's Best-in-Class carrier integration, educating and engaging retirees in offered wellness programs to improve health outcomes.

What We Do



Who We Serve

We serve hundreds of public sector entities, higher education institutions, and commercial organizations nationwide.

Our Partners

We partner with all major national health carriers, and brokers and consultants, to drive value and improve outcomes for plan sponsors and their retirees.



** Complimentary with existing consultant/broker service and administrative environment*

Retiree Benefits Management

We build a custom Medicare program to meet the needs of each plan sponsor.
We bring in a new strategy for all Group Medicare-eligible enrollees.

PRODUCTS WE OFFER

Medicare Advantage (MA)
& Medicare Advantage
Prescription Drug
(MAPD)

Plans offered by private
companies approved by
Medicare

Part D

Medicare drug coverage that
helps cover the cost of
prescription drugs

Medicare Supplement (Medigap)

Extra insurance to help pay
for a member's share of out-
of-pocket costs in Original
Medicare

20–50%

Immediate bottom-line savings
for groups moving to Medicare
Advantage for the first time

**Reduction in OPEB
Liability**

Plan Partnership and Administration Support

We become an extension of the benefit team, a true partner to provide Medicare subject matter expertise and proven plan administration support customized to meet client needs.

Implementation

- **Manage Centers for Medicare and Medicaid Services (CMS) Filings**
- **Full coordination with selected carrier to ensure plan set up accuracy**
- **Robust communication with retirees throughout implementation process**
- **Onsite, Face-to-Face Orientation Meetings**

Ongoing Administration Support

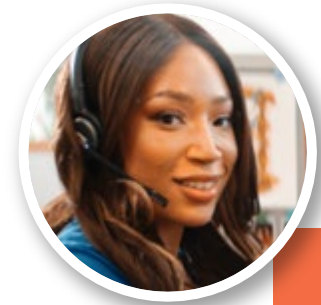
- **Experienced Client Services Team**
- **Billing and premium collection support**
- **Eligibility Maintenance: Medicare Age-Ins, Disenrollment, and Retirees Returning to Work**
- **Ongoing disenrollment/re-enrollment assistance**
- **Ongoing educational meetings as part of Open Enrollment**
- **Reporting and Plan Performance Data**

Retirees Come First

RetireeFirst

Our Retiree Advocacy Services are our true hallmark.

- Our team of 140+ in-house, US-based Retiree Advocates creates a seamless benefits experience and delivers on the promise of improving the health and happiness of the people we serve
- Advocates are available Monday through Friday from 8am–5pm; we have an emergency line available 24 hours a day.
- Members receive a dedicated group phone number—toll free and local; each call routes to the Advocate with case history first, then dedicated team second
- Many Advocates are bi-lingual and can partner with a HIPAA-compliant service offering translation in 300+ languages
- Average speed of answer from a live Advocate is less than 15 seconds; we do not use call menus.



RetireeFirst Advocates

Our Advocates help members navigate Medicare, understand their benefit plan, troubleshoot issues with providers, and connect to programs that improve their health and wellbeing.

- All Advocates receive extensive Medicare & Geriatric training
- NO call quotas, scripts, or transfers to different departments
- Advocates are EMPOWERED to resolve issues end-to-end
- Advocates proactively close gaps in care and educate members on available ancillary benefits – such as eye exams, dental, and fitness benefits – and how to best access them

Many Advocates previously worked in healthcare and understand the health and Medicare landscape

Examples of How Advocates Assist Members

- Enrollment & Eligibility Support
- Copay Assistance Support
- Plan Design Questions
- Preventive & Wellness Education
- Lower-Cost Generic Options
- Prior Authorization/Pre-Certifications
- House Call Appointment Scheduling
- Appointment transportation assistance
- Provider Network Questions
- Billing Questions
- Formulary Questions
- Three-way calls with third parties

Testimonials

“My Advocate, Ashley, is a skilled professional who always answers my questions and supports me with complex billing issues. Without her support during stressful times, I don't know what me and my husband would do.”

—Karen, Baltimore County

“My Advocate, Julianne, consistently provides excellent service from initial contact through resolving issues. I never had a representative who was so attentive, conscientious, and interested in helping me while being very friendly the whole time. What a pleasure!”

—Renee, Alaska Laborers Local 341 and 942



96

**Net Promoter Score
from Member Surveys,
far above the industry
standard of 60**

Wall of Appreciation at
Offices in Mt. Laurel, NJ



Plan Details & Marketing Results Group Medicare Supplement

Medicare Supplement Comparison

	Current Hartford High/Low Group Medicare Supplement		Proposed United American High/Low Group Medicare Supplement		Proposed Transamerica High/Low Group Medicare Supplement	
Medical Coverage						
	Member Pays		Member Pays		Member Pays	
Part A Deductible	\$0		\$0		\$0	
Part A Coinsurance	\$0		\$0		\$0	
Skilled Nursing Facility Care	\$0, Days 1-100		\$0, Days 1-100		\$0, Days 1-100	
Emergency Room	4% coinsurance	10% coinsurance	4% coinsurance	10% coinsurance	4% coinsurance	10% coinsurance
Part B Deductible	\$0	\$500	\$0	\$500	\$0	\$500
Outpatient Surgery	4% coinsurance	10% coinsurance	4% coinsurance	10% coinsurance	4% coinsurance	10% coinsurance
Primary Care Visit	4% coinsurance	10% coinsurance	4% coinsurance	10% coinsurance	4% coinsurance	10% coinsurance
Specialist Visit	4% coinsurance	10% coinsurance	4% coinsurance	10% coinsurance	4% coinsurance	10% coinsurance
Part B Excess Charges Covered	Yes		Yes		Yes	
Part B Out of Pocket Maximum	\$500	\$1,500	\$500	\$1,000	\$500	\$1,000
Foreign Travel Coverage	\$250 deductible and 20% coinsurance for medically necessary emergency care services beginning during the first 60 days of each trip outside the USA up to a \$50,000 lifetime maximum.		\$250 deductible and 20% coinsurance for medically necessary emergency care services beginning during the first 60 days of each trip outside the USA up to a \$50,000 lifetime maximum.		\$250 deductible and 20% coinsurance for medically necessary emergency care services beginning during the first 60 days of each trip outside the USA up to a \$50,000 lifetime maximum.	



Plan Details & Marketing Results Group Medicare Advantage (MA) + Prescription Drug (PD)

Medical Plan Comparison – Medicare Advantage

	Current Hartford Supplement – High/Low		Proposed BCBS TX MA – Open PPO	Proposed Humana MA – Open PPO
Medical Coverage				
	Member Pays		Member Pays	Member Pays
Part B Deductible	\$0	\$500	\$0	\$0
Medical Maximum Out-of-Pocket	\$500	\$1,500	\$0	\$0
Primary Care Visit	4% coinsurance	10% coinsurance	\$0	\$0
Specialist Visit	4% coinsurance	10% coinsurance	\$0	\$0
Inpatient Hospital Care	\$0		\$0	\$0
Outpatient Surgery	4% coinsurance	10% coinsurance	\$0	\$0
Inpatient Mental Health & Substance Abuse	\$0		\$0	\$0
	190 Days Lifetime Max		190 Days Lifetime Max	190 Days lifetime maximum
Outpatient Mental Health & Substance Abuse	4% coinsurance	10% coinsurance	\$0	\$0
Skilled Nursing Facility	\$0, Days 1-100		\$0, Days 1-100	\$0, Days 1-100
Urgent Care Center	4% coinsurance	10% coinsurance	\$0	\$0
Emergency Room	4% coinsurance	10% coinsurance	\$0	\$0
Ambulance	4% coinsurance	10% coinsurance	\$0	\$0
Durable Medical Equipment	4% coinsurance	10% coinsurance	\$0	\$0

Ancillary Benefit Coverage

	Current Coverage	Proposed BCBS TX MAPD	Proposed Humana MAPD Plan
Foreign Travel Coverage	\$250 deductible and 20% coinsurance for medically necessary emergency care services beginning during the first 60 days of each trip outside the USA up to a \$50,000 lifetime maximum.	\$0 for Emergency or Urgently Needed Care	20% coinsurance Limited to emergency Medicare-covered services. \$100 deductible per year, \$25,000 Maximum Benefit per year Or 60 consecutive days, whichever is reached first
Hearing	Medicare Covered Services only	\$0, Routine Hearing Exam - 1 per year. \$500 Allowance every 3 years, both ears combined	\$0, Routine Hearing Exam - 1 per year \$500 Allowance every 3 years, both ears combined Through TruHearing
Vision	Medicare Covered Services only	\$0, Routine Eye Exam - 1 per year \$100 Materials Allowance every 24 months Through EyeMed	\$0, Routine Eye Exam – 1 per year \$100 Materials Allowance per year Through EyeMed
Dental	Medicare Covered Services only	Medicare Covered Services	Medicare Covered Services
Chiropractic	Medicare Covered Services only	\$0 – 20 visits per year	\$0 – 20 visits per year
Acupuncture	Medicare Covered Services only	Medicare Covered Services	\$0 – 20 visits per year
Fitness Benefit	None	Included	Included

Pharmacy Comparison

	Current ESI Part D	Proposed BCBS TX Part D	Proposed Humana Part D (Illustrative)
	Member Pays	Member Pays	Member Pays
Rx Deductible	\$0	\$0	\$0
Retail 30 Day Supply			
Tier 1-A (Preferred Generics)			
Tier 1 (Generics)	\$15 Preferred/\$20 Standard	\$15 Preferred/\$20 Standard	\$15
Tier 2 (Brands)	\$30 Preferred/\$35 Standard	\$30 Preferred/\$35 Standard	\$30
Tier 3 (NP Brands)	\$50 Preferred/\$55 Standard	\$50 Preferred/\$55 Standard	\$50
Tier 4 (Specialty)	\$50 Preferred/\$55 Standard	\$50 Preferred/\$55 Standard	\$50
Retail 90 Day Supply			
Tier 1-A (Preferred Generics)			
Tier 1 (Generics)	\$45 Preferred/\$50 Standard	\$45 Preferred/\$50 Standard	\$45
Tier 2 (Brands)	\$90 Preferred/\$95 Standard	\$90 Preferred/\$95 Standard	\$90
Tier 3 (NP Brands)	\$150 Preferred/\$155 Standard	\$150 Preferred/\$155 Standard	\$150
Tier 4 (Specialty)	Limited to a one-month supply	Limited to a one-month supply	Limited to a one-month supply
Mail-Order 90 Day Supply			
Tier 1-A (Preferred Generics)			
Tier 1 (Generics)	\$30	\$30	\$30
Tier 2 (Brands)	\$60	\$60	\$60
Tier 3 (NP Brands)	\$100	\$100	\$100
Tier 4 (Specialty)	Limited to a one-month supply	Limited to a one-month supply	Limited to a one-month supply
Part D Coverage Specifications			
Rx Maximum Out-of-Pocket	N/A	\$2,000 (New Part D Requirement)	\$2,000 (New Part D requirement)
Rx Tiers	4 Tier	4 Tier	4 Tier
Drug Formulary	Most Comprehensive (Open)	Most Comprehensive (Open)	Most Comprehensive (Open)
Lifestyle Drugs Covered	No	Yes	Yes
All Non-Part D Drugs Covered	Yes	Yes	Yes
Utilization Management	Prior Authorizations, Quantity Limits, and Step Therapy	Prior Authorizations, Quantity Limits, and Step Therapy	Prior Authorizations, Quantity Limits, and Step Therapy
Coverage Gap	Full-Coverage	N/A for 2025	N/A for 2025
Catastrophic Coverage	Members Pay \$0	Members Pay \$0	Members pay \$0

Financial Analysis – Supplement + Part D

	Hartford Supplement & Express Scripts Rx*	Proposed United American Supplement & BCBS TX Rx	Proposed United American Supplement & Humana Rx	Proposed Transamerica Supplement & BCBS TX Rx	Proposed Transamerica Supplement & Humana Rx
Plan Year	2024	2025	2025	2025	2025
Medical PMPM – Low Option	\$179.03	\$155.00	\$155.00	\$179.00	\$179.00
Medical PMPM – High Option	\$247.00	\$239.00	\$239.00	\$242.00	\$242.00
Pharmacy only PMPM	\$248.38	\$223.00	\$259.58	\$223.00	\$259.58
Combined PMPM – Low Option	\$427.41	\$378.00	\$414.58	\$402.00	\$438.58
Combined PMPM – High Option	\$495.38	\$462.00	\$498.58	\$465.00	\$501.58
Annualized Cost – Low Option Supplement	\$36,522.12	\$31,620.00	\$31,620.00	\$36,516.00	\$36,516.00
Annualized Cost – High Option Supplement	\$877,344.00	\$848,928.00	\$848,928.00	\$859,584.00	\$859,584.00
Annualized – Pharmacy only	\$780,906.72	\$701,112.00	\$816,119.52	\$701,112.00	\$816,119.52
Total Annualized Cost	\$1,694,772.84	\$1,581,660.00	\$1,696,667.52	\$1,597,212.00	\$1,712,219.52
Total Annual Savings		\$113,112.84	+\$1,894.68	\$97,560.84	+\$17,446.68

*In-force rates do not include trend for 2025.

**Low Option and High Option Supplement pricing is based upon estimated 17 and 296 participants respectively for the 2025 plan year. Pharmacy only is based on 262 participants currently enrolled.

- RetireeFirst’s full suite of plan administration and retiree advocacy services are included in the above rates.
- Transamerica did not “map” the populations and requires all lives into a single supplement plan.

Financial Analysis - MAPD

	Hartford Supplement & Express Scripts Rx*	Proposed BCBS TX MAPD	Proposed Humana MAPD (Illustrative)
Plan Year	2024	2025	2025
Medical PMPM – Low Option	\$179.03		
Medical PMPM – High Option	\$247.00		
Pharmacy only PMPM	\$248.38		
Combined PMPM – Low Option	\$427.41		
Combined PMPM – High Option	\$495.38	\$432.00**	\$457.85**
Annualized – Low Option Supplement	\$36,522.12		
Annualized – High Option Supplement	\$877,344.00		
Annualized – Pharmacy only	\$780,906.72		
Annualized - MAPD		\$1,622,592.00	\$1,708,696.20
Total Annualized Cost	\$1,694,772.84	\$1,622,592.00	\$1,708,696.20
Total Annualized Savings		(\$72,180.84)	+\$13,923.36

*In-force rates do not include renewal trend for 2025.

MAPD Pricing is based upon full replacement of 313 participants for the 2025 plan year. Proposed MAPD plans offer 100% medical coverage w/ Open (Passive) PPO network, mirrors/improves current PDP plan, and includes additional ancillary benefits. **BCBS TX agreed to a 2nd year rate cap of 5%.

- RetireeFirst’s full suite of plan administration and retiree advocacy services are included in the above rates.
- Total Cost for MAPD is higher due to low supplement members being “upgraded” to higher cost plan, and 50 current supplement members who are not currently enrolled in County’s Part D plan through ESI.

A Win-Win Solution

Plan Sponsors Win!

- Potential to reduce short- and long-term financial liabilities while maintaining or improving in-force plan design
- A designated day-to-day client service team
- Reduction of incoming retiree calls to the benefit department.
- Improved member satisfaction
- Administrative support that reduces benefit staff workload and gives staff back valuable hours in their day
- Premium stabilization

Retirees Win!

- Easily accessed, live 1-on-1 support from a licensed and trained Retiree Healthcare Advocate
- Benefit education, guidance and enrollment support
- Outbound calls made on retiree's behalf
- Complete issue resolution with closed loop process
- Health & Wellness program engagement
- Navigation to lower costing drug or benefit alternatives
- Preservation or enhancement of healthcare benefits and peace of mind

Questions?

RetireeFirst

Colby Heiner

Vice President, Central Region

P: 480-319-4364

E: cheiner@RetireeFirst.com