Helping You Prepare for Medicare Enrollment

We'll get started at the top of the hour.
WELCOME!

October 21 – 22, 2025

SRMC Medicare Retirees

VIA BENEFITS®

Welcome!

Reminders

- Silence Cell Phones
- Restrooms
- Emergency Exits
- Q&A

Introducing Via Benefits

- **Experience That Counts When You Need it Most**:
- First and largest Medicare marketplace
- Now in our 21 Enrollment Season
- We've helped over 2.4 million retirees
- 98% of retirees felt they chose a cost-effective plan using Via Benefits
- One on One Consultative and Enrollment experience

We are laser-focused on ensuring you have the information, support, and confidence needed for peace of mind when planning for future health coverage.

Via Benefits

- We work for you, not the carriers
- All benefits advisors are licensed health insurance agents, based in the U.S.
- Benefit Advisors are not incentivized to recommend one plan over another
- Curated plans under one roof
- Your Benefits Advisor will be knowledgeable in Medicare plans
- Benefit advisors are trained to help you find the plan that meets your individual needs

How We Help

Consultative Process

- Well-versed on SRMC's plan rules
- Marketplace experts provide comprehensive coverage and financial guidance
- One-on-one consultation

Marketplace Advantages

- Largest Medicare marketplace
- Partnered with Humana to provide a broad selection of Medical plan options
- Curated selection of the top PDP carriers and plans across the country
- Individual profiles capture network preferences and prescription drug needs

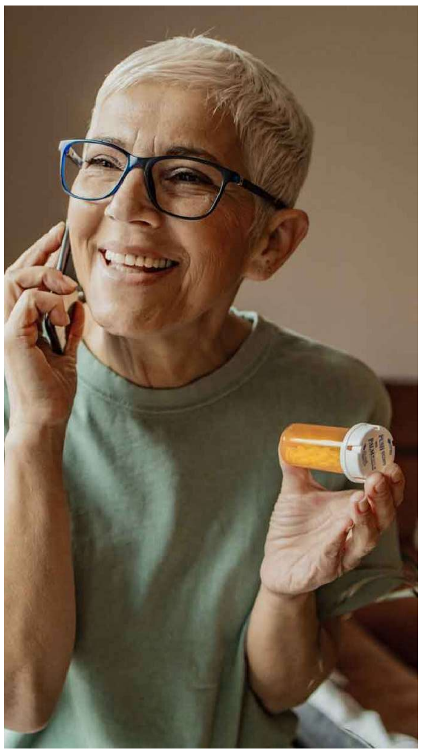
Ongoing Advocacy

- ID Cards and premium payment
- Annual enrollment reminders
- Carrier support
- Understanding legislative changes
- Technical assistance

Medicare Education

How Medicare Works

Original Medicare works with both types of supplemental plans



+

Medicare Advantage with Prescription Drug (Part C)

Takes over provisioning of Medicare Parts A and B

- ✓ Zero or low premiums with higher copays and coinsurance
- ✓ Preferred rates for in-network providers
- ✓ Combined medical and prescription drug coverage
- ✓ Generally excludes coverage outside of the U.S.

OR

Medicare Supplement + Prescription Drug (Part D)

Works with Medicare Part A and B

- ✓ Higher premiums, lower copays and coinsurance
- ✓ See any provider that accepts Medicare
- ✓ Medigap (medical) works with Parts A & B, and Part D (prescription drug) plan is purchased separately
- ✓ Most plans include cover emergency services outside the U.S.

Medicare Advantage with Prescription Drug Plans (Part C)

MAPD

Subsidized by CMS | Use MAPD ID Card | All-in-one bundled benefits | Takes over provisioning of care

HMO Health Maintenance Organization	PPO Preferred Provider Organization
• In-network only • Must choose primary care physician • Referral needed to see a specialist	• In or out-of-network coverage • You do not need to choose a Primary care Physician • No referral needed to see a specialist

Humana Group Medicare Advantage

About Humana:

- Dedicated to communities around the country for more than 30 years
- Over 8.7 million Medicare members just like you, across all 50 states[1]
- Nationwide network of providers
- 2024 Best Overall Medicare Advantage Plan Company and Best Company for Member Experience[2]
- Providing Medicare plans to beneficiaries since 1987

[1]Humana Inc. 2024 Annual Report, February 2025

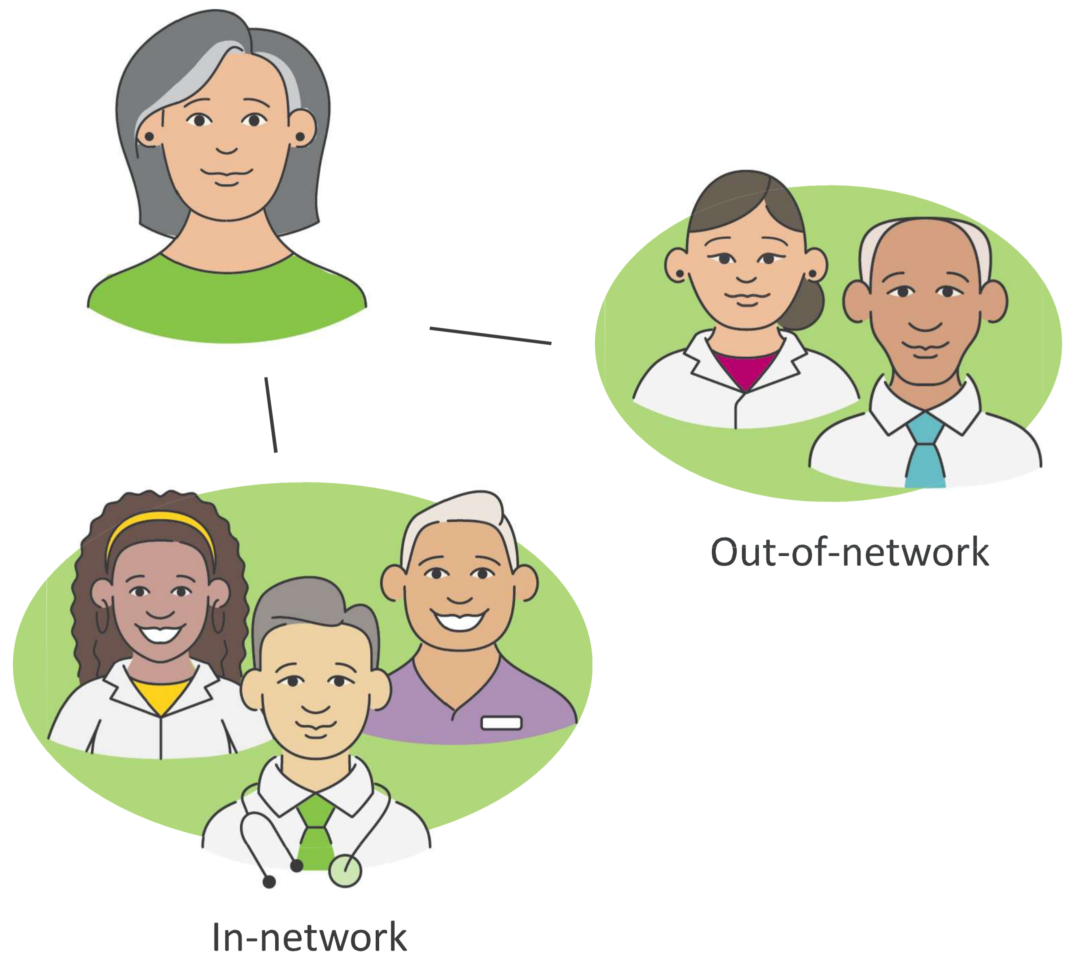
[2]U.S. News Announces the 2024 Best Insurance Companies for Medicare Advantage, Press Room, U.S. News (usnews.com)

Medicare Part C

Medicare Advantage plan

Preferred Provider Organization

- Your choice of an in-network primary care physician (PCP)
- No referrals required
- Most preventative care is covered at 100%
- Nationwide emergency coverage
- **Cost share is the same** for care from both in- and out-of-network providers



Humana.

Group Medicare Advantage Low PPO Plan Benefits

Your PPO plan	
Annual deductible	$0
Annual maximum out-of-pocket	$2,000
Hospital care	
Outpatient hospital visits	$0 to $75 copay
Inpatient hospital	$150 per admit
Physician and facility services	
Primary care provider	$0 copay
Specialist	$20 copay
Durable medical equipment	$0 copay
Emergency services	
Emergency room care	$75 copay for Medicare-covered emergency room visit(s)
Urgent care	$0 to $20 copay

Group Medicare Advantage High PPO Plan Benefits

Your PPO plan	
Annual deductible	$0
Annual maximum out-of-pocket	$400
Hospital care	
Outpatient hospital visits	$0 to $25 copay
Inpatient hospital	$100 per admit
Physician and facility services	
Primary care provider	$0 copay
Specialist	$0 copay
Durable medical equipment	$0 copay
Emergency services	
Emergency room care	$50 copay for Medicare-covered emergency room visit(s)
Urgent care	$0 copay

Additional benefits included in your Low and High PPO plans*

Hearing

Vision

Dental

Transportation

Over-the-counter medications (OTC)

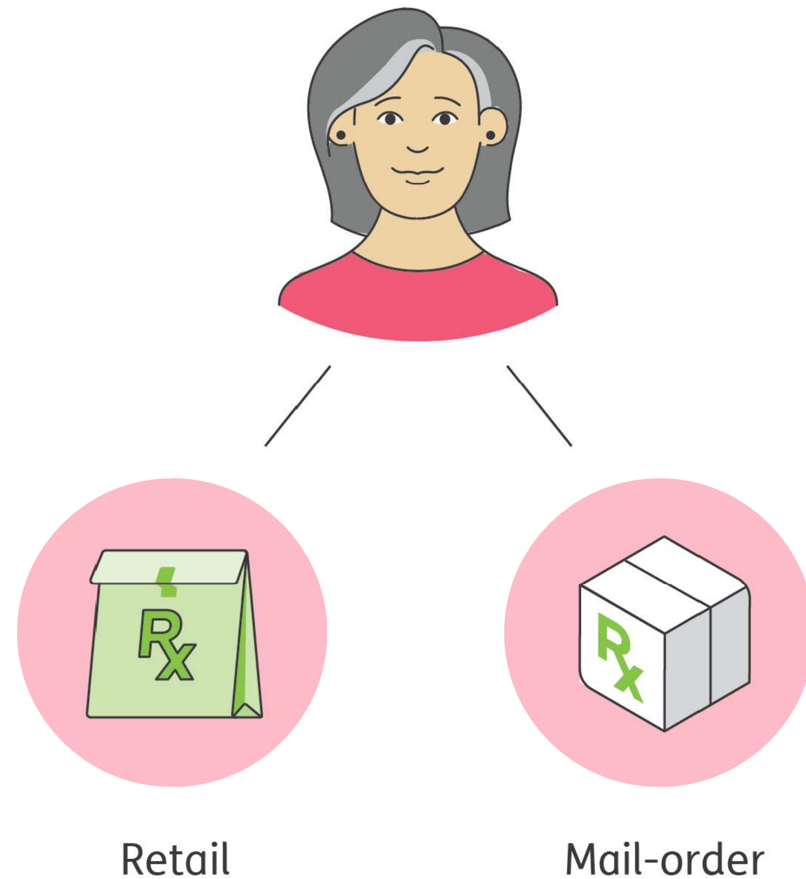
Personal Emergency Response System

*Included, cost share may apply. Please refer to the Summary of Benefits for additional details.

Medicare Part D

Prescription Drug Plan

- Prescription drug coverage is available as a part of your Medicare Advantage plan with prescription drug coverage (MAPD)
- Generic, brand and specialty drug coverage
- List of covered drugs may vary by plan
- Access to mail-order pharmacies



Humana

Your Part D benefits

Humana's Part D coverage is spread among five groupings based on the drug type—also called "tiers".

Annual deductible	**$0**
Annual maximum out-of-pocket	**$2,100**

Tiers	Standard retail (30-day supply)	Standard mail order (90-day supply)
Tier 1 Preferred generic	**$0** copay	**$0** copay
Tier 2 Generic	**$5** copay	**$10** copay
Tier 3 Preferred drug	**$30** copay	**$60** copay
Tier 4 Nonpreferred drug	**$60** copay	**$120** copay
Tier 5 Specialty	**33%** of the cost	**N/A**

The Humana Difference

Medicare Advantage provides additional support, included in your plan

Clinical support

- In-home wellness assessments
- Education and resource support
- Care management for eligible members
- Primary care

Post-hospitalization support

- Post-discharge personal home care
  - Up to 8 hrs of support with clinical care
- Post-discharge transportation
  - 12 one-way trips, up to 50 miles per trip
- Post-discharge meal program
  - 2 per day for 14 days

The Humana Difference

Medicare Advantage provides additional support, included in your plan

Go365 by Humana®

Your wellness program that rewards you for making healthier choices

Go365.com

SilverSneakers®

A fitness program to improve your health, gain confidence and connect with your community

SilverSneakers.com

What to expect after you enroll

- **Enrollment confirmation**
  Review enrollment information in kit.
- **Humana member ID card**
  Once you receive your ID card, create a MyHumana profile.
- **Access to Evidence of Coverage (EOC)**
  Read this document to learn about the plan’s coverage and services.
- **Health and Well-being Assessment (HWA)**
  An annual detailed health review conducted in your home.

Medicare Supplement Insurance (Medigap)

Single-Lettered Plans in 47 States (different in MA / MN / WI)

	Medicare Supplement Insurance (Medigap) Policies								Medicare-Eligible Before 2020 ONLY	
Benefits	**A**	**B**	**D**	**G**	**K**	**L**	**M**	**N**	**C**	**F**
Medicare Part A coinsurance and hospital costs	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Medicare Part B coinsurance or copayment	100%	100%	100%	100%	50%	75%	100%	100%	100%	100%
Blood (first 3 pints)	100%	100%	100%	100%	50%	75%	100%	100%	100%	100%
Part A hospice care coinsurance or copayment	100%	100%	100%	100%	50%	75%	100%	100%	100%	100%
Skilled nursing facility care coinsurance			100%	100%	50%	75%	100%	100%	100%	100%
Part A deductible		100%	100%	100%	50%	75%	50%	100%	100%	100%
Part B deductible									100%	100%
Part B excess charges*				100%						100%
Foreign travel emergency (up to plan limits)			80%	80%			80%	80%	80%	80%
					Out-of-Pocket Limit in 2025					
					$7,220	$3,610				

Source: CMS

** No Excess Charges States*
- CT, MA, MN, NY, OH, PA, RI, VT.

Medicare Prescription Drug Coverage 2026

Phases	Deductible	Initial Coverage	Catastrophic Coverage
Participant Pays	Full retail until deductible is met	Copays for your plan coverage (25%)	$0
Total Cost	$0 – $615	Maximum $2100 out-of-pocket for the year	Part D plans and drug manufacturers pay a larger share than Medicare

Prescription Drugs — 5 Tiers of Copays

3/3
drugs

$576.00
estimated
annual

Name	Drug Information	Cost
	Tier 1 – Preferred Generic	
	Tier 2 – Non-preferred Generic	
	Tier 3 – Preferred Brand	
	Tier 4 – Non-preferred Brand	
	Tier 5 - Specialty	

Drug Name	Drug Information	Deductible Cost	Initial Coverage Cost	Catastrophic Coverage Cost
Lisinopril TAB 2.5MG	Tier 1 - Preferred Generic	$0.00	$0.00	$0.00
Nitroglycerin PTCH 0.4MG/24HR	Tier 2 - Generic	$0.72	$0.72	$0.00
Synthroid TAB 25MCG	Tier 4 - Non-preferred Drug	$47.16	$18.86	$0.00

Get Ready

The Groove Newsletter

- Review your current enrollment
- Update your profile
- Schedule an appointment

Call Via Benefits

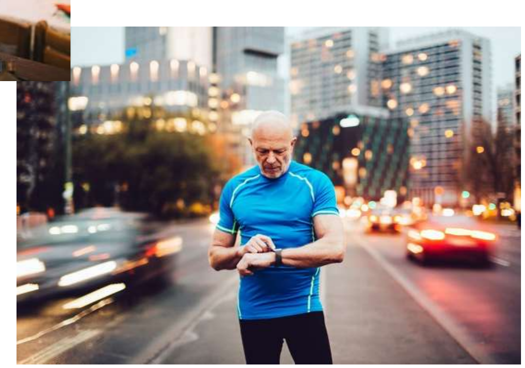
Verify your profile by providing first & last name and two of the following:

- Phone number
- Last 4 of SSN
- Date of Birth
- Zip Code

Evaluate medical plan types

Provide a plan recommendation

Enroll by Phone or Online



The Enrollment Process

Ready to Enroll –Your Choice

Enroll Online

- Enroll anytime within your enrollment period
- Compare plans side-by-side, select a plan, and enroll using the website
- Identity is verified when you sign into Via Benefits
- You read the disclaimers and confirm on the site
- Shop and Enroll with help from a friend or family member at my.viabenefits.com/SRMC

Enroll By Phone

- Call at your appointment time during the enrollment window
- A member of the team will help you review and enroll in a plan
- Identity is voice-verified
- Disclaimers are read to you
- With your permission, a friend or family member may join the call

Granting Caregivers Permission

“Your rep was excellent. She helped to set up my account so I could speak on my husband's behalf’

-Maria M

Trusted Friend

Family Member

Authorization to Release Personal Information (ARPI)

Allows a representative to get information and take limited action on your behalf

Power of Attorney (POA)

Allows a representative to take action on your behalf and make decisions

Post Enrollment Communications

Selection Confirmation Letter

Confirms your plan choices

Communications from Your New Insurance plan(s)

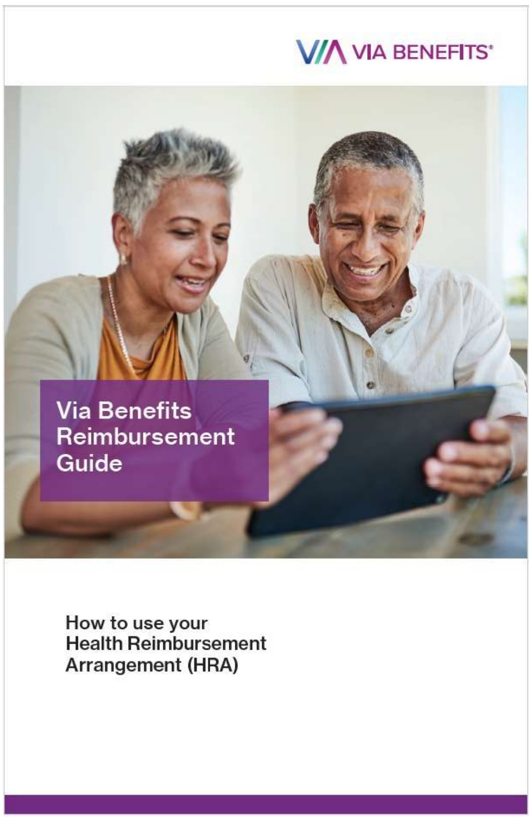
Packet that contain your new insurance cards, and information about your new benefits

Watch our videos
my.viabenefits.com/SRMC

SRMC Health Reimbursement Arrangement (HRA)

SRMC Health Reimbursement Arrangement (HRA)

Via Benefits Reimbursement Guide



Tax-Free Account
Used to reimburse you for eligible post-tax health care costs

If You Are Eligible
SRMC will make an annual contribution to your HRA

Get Reimbursed
For eligible premiums and OOP expenses

Unused Funds WILL Rollover
It is not a use it or lose it account

Ongoing Flexibility
You may enroll outside Via Benefits after your first year and keep your HRA

How Reimbursement Works

Step 1

You enroll into a qualified plan with Via Benefits

Step 2

SRMC makes an annual contribution to your account

Step 3

You **pay** for your eligible premiums & expenses first

Step 4

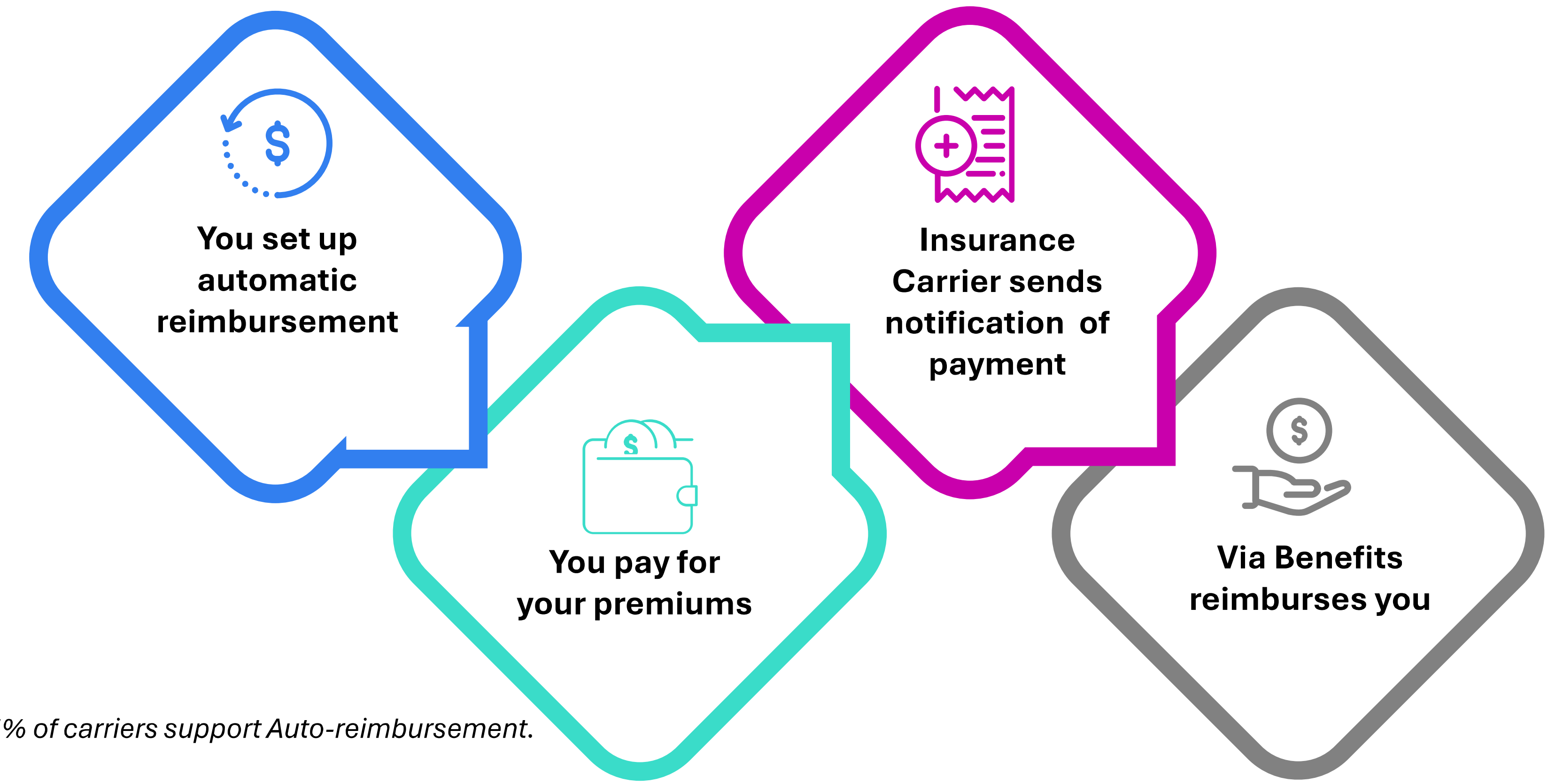
You request **reimbursement**

Step 5

Via Benefits approves your request and reimburses you

Automatic Reimbursement

Requires Enrollment through Via Benefits

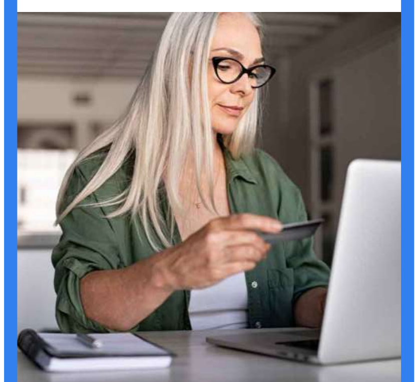


95% of carriers support Auto-reimbursement.

Recurring Reimbursement

1

You pay your premiums



2

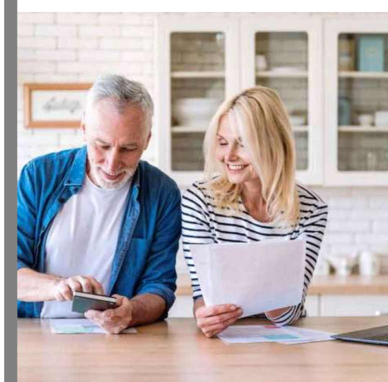
Complete once per year

Required Documentation:

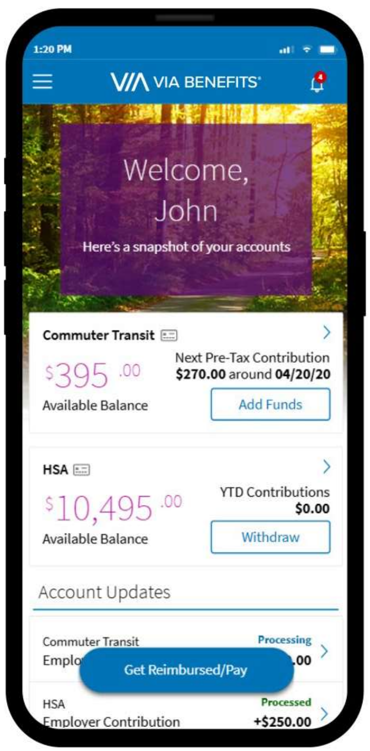
- Premium Coverage Period
- Premium Type
- Carrier
- Individual Serviced
- Monthly Amount

3

Via Benefits reimburses you



Via Benefits Mobile App

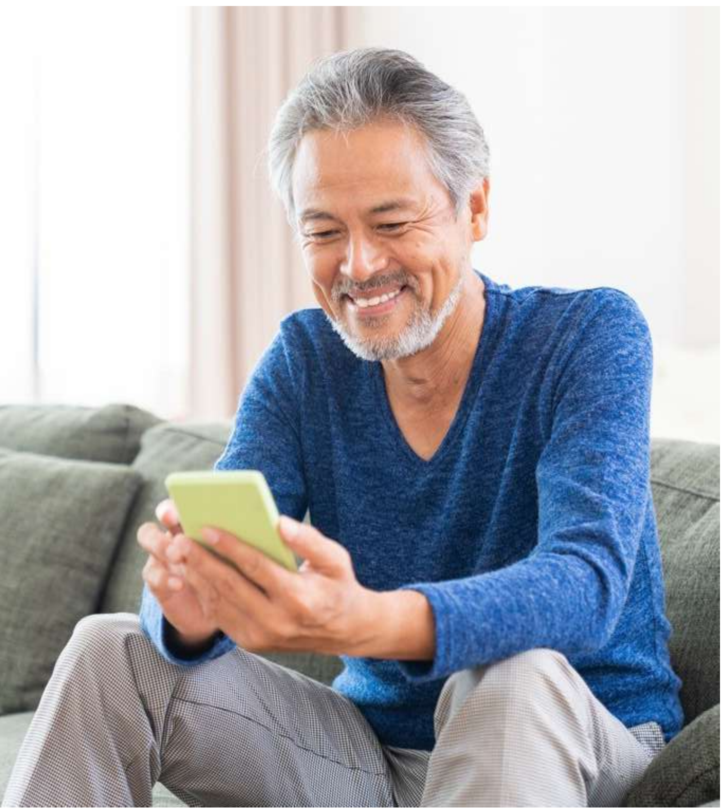


- Download and install
- *Same username / password as your online account*
- Take a snapshot of your proof of payment – Easy!
- *Set up push notifications to keep informed on the go*

Note: ONLY available once your account is active

Next Steps

Ready? Let's Go!



Pre-Enrollment
- Create a Via Benefits Profile
- Gather your information
  - Medicare Card
  - Prescriptions
  - Physicians and Facilities
- Call Via Benefits

Enrollment
- Call us at your scheduled appointment time
- Enroll using the Via Benefits website any time during your enrollment period or by phone

Post-Enrollment
- Watch for communications about your new coverage

Reminder:
Open Enrollment ends Dec. 7th

1-800-848-1831
www.my.viabenefits.com/SRMC

Helpful Resources

Videos

Helpful Resources

Via Benefits has produced a collection of videos to assist you in finding the answers you need. View our full video library to access this additional guidance and information.

Start Watching

Start Today!

We’re here to help you!

- Gather your information and go online now to set up your profile and complete your pre-enrollment assessment!
- **my.viabenefits.com/SRMC**
- **1-800-848-1831** (TTY:711)
- Monday – Friday
  8:00 a.m. – 7:00 p.m. ET