



## FedEx Pilots Post-Medicare Retiree Premium Reimbursement Plan (PRP)



### GENERAL PLAN INFORMATION

Pursuant to the Collective Bargaining Agreement between Federal Express Corporation (FedEx) and the Air Line Pilots Association, International (ALPA) - ALPA sponsors the PRP. The PRP reimburses you and/or your eligible spouse, eligible domestic partner and eligible disabled dependent child each for premium payments you make during the year for Qualifying Health Coverage that supplements Medicare. The maximum premium reimbursement amount **will be \$116 per month for 2017**.

**Effective for those with a retirement date from FedEx on or after November 3, 2015** your maximum benefit, and your spouse's, domestic partner's and disabled dependent's maximum benefit, will be pro-rated 4% per year of pilot service at FedEx (up to 25 years of service). For example, if you have 15 years of pilot service at FedEx, your maximum benefit will be 60% of the monthly maximum benefit for the year in which you are claiming. For 2017, such individual would be reimbursed for premiums paid for Qualifying Health Coverage up to the maximum of \$69.60 per month ( $\$116 \times 60\% = \$69.60$ ).

#### QUALIFYING HEALTH COVERAGE PREMIUM REIMBURSEMENTS:

The PRP will reimburse eligible retired pilots and/or eligible spouses, eligible domestic partners and eligible disabled children premium payments up to the maximum monthly benefit for any of the following:

- Medicare Part B Premium.
- Medicare Supplement Policies (also known as Medigap policies) – These are federally standardized plans and are labeled Plan A through Plan N and offered by various insurance carriers.
- Medicare Advantage Plans (also known as Medicare Part C Plans). These plans typically are PPOs, HMOs, and Private Fee-for-Service Plans.
- Medicare Part D (Prescription Drug Coverage).
- Tricare for Life – In the event the government begins charging premium or enrollment fees.

#### ITEMS NOT REIMBURSABLE UNDER THE PRP:

- Premium payments a participant pays for employer-sponsored health coverage (including premium for retiree health).
- No double dipping. For example, if you have the Health Reimbursement Account (HRA) for Retired Pilots through FedEx, or any other HRA, and you receive a premium reimbursement from that HRA, you cannot claim a premium reimbursement for the same amount under the PRP.
- Long-Term Care premium.
- Premiums for any individually purchased health insurance policy that is not Qualifying Health Coverage listed in the section directly above.
- Premiums for separate dental or vision plans. However, if your Qualifying Health Coverage also provides dental or vision coverage, and the premium is paid directly to the acceptable health plan, such premium is reimbursable.
- Deductibles, co-pays and out-of-pocket expenses.
- COBRA premiums.
- Medicare Part B Premiums incurred prior to January 1, 2016.

**NOTE:** The Collective Bargaining Agreement signed on November 2, 2015 changed eligibility requirements:

**If you retired prior to November 3, 2015** – you must maintain coverage under a FedEx group health plan until immediately prior to participating as an active or inactive participant in the PRP.

**If you retired on or after November 3, 2015** – Participation in a FedEx group health plan is not required for participation in the PRP. You will activate your status simply by filing your first claim for reimbursement any time after the attainment of age of 65.

**ENROLLMENT:** Effective January 1, 2017, enrollment is automatic! You will receive a welcome kit including Participant Verification Form around the end of the month *following* the month in which you retire. This is your indication that you are enrolled in the PRP. Review the form carefully and if there is any missing or incorrect information - correct the form, sign it and return as soon as possible, but no later than with your first claim.

**FILE A CLAIM:** When you enroll in Qualifying Health Coverage and have a premium to claim, simply go to <https://hrbenefitsdirect.com/med-pay> to print, complete and return a claim form along with required documentation to activate coverage and make your claim. Also, be sure to notify us of any address change.

### **OBTAINING COVERAGE IN A MEDICARE SUPPLEMENTAL PLAN:**

Choosing health coverage that supplements Medicare is an important decision. You can receive personalized, unbiased information and comparisons of Medicare Advantage Plans, Medicare Supplement Policies and Medicare Part D (Prescription Drug Plans) available in your local area through these resources:

- [www.medicare.gov](http://www.medicare.gov) provides information about enrolling in Medicare Part B and provides tools to compare and research plans available to you in your area that supplement Medicare. Or dial - 1/800-MEDICARE. Say "Agent" to speak to a customer service representative. TTY users call 1-877-486-2048.
- <https://www.medicare.gov/Contacts/> provides links to each State Health Insurance Assistance Program (referred to as SHIP in most states). SHIP offers information on plans that supplement Medicare, Medicare rights and protections, and free counseling for questions about buying insurance.
- <https://www.ssa.gov/> provides information on Social Security, Medicare, Medicaid and more. Additionally, you can use this site to request a benefits letter to provide proof of your Medicare Part B premium when filing a claim for Medicare Part B.
- <http://www.tricare.mil> provides information on TRICARE, the health care program for active duty and retired uniformed services members and their families.

Medicare Exchanges such as AON Navigators: <https://retiree.aon.com/> and Extend Health: <https://medicare.oneexchange.com/> are two of the largest Medicare Exchanges. You can log on or call them for free advice on what plans best suit your needs. Both have impressive lists of carriers contracted with their exchange. It may be helpful to work through one or both of these, but understand they will only advise you on what plan within *their exchange* that works best for you and your individual needs. For example, if they are not contracted as a specific carrier, they will not give you any information on that carrier's plans. These are not endorsed by ALPA or the PRP but are sources you may wish to consider. The choice of what plan to enroll in is yours. Neither ALPA, Med-Pay, nor FedEx can assist you with this very personal decision. We encourage you to use the resources listed above, among others.

### **HOW TO SUBMIT A CLAIM FOR PREMIUM REIMBURSEMENT THROUGH THE PRP:**

The PRP is a premium reimbursement plan, not an insurance plan. The PRP reimburses you for premium payments you make to a Medicare supplemental plan that you obtain on your own. You must provide Med-Pay, the PRP's claim administrator, a completed Claim for Reimbursement Form along with proof you are covered in a Qualifying Health Coverage in order to start receiving your reimbursements. Once you file your first claim, a recurring transaction will be created for each month for the remainder of the calendar year. If you complete a Direct Deposit Form and provide your bank account information, a direct deposit will be made into your account for the reimbursement. You will not receive notification of the deposit. Please verify the deposit has been made shortly after the dates posted on the schedule. If you provide your email address, communication about your claim and reimbursement may be emailed to you. If you prefer to receive a check in the mail instead, you do not need to submit a Direct Deposit Form.

Information about where to file the claim is located at the bottom of the claim form. The claim form may be found on-line at <https://hrbenefitsdirect.com/med-pay>.

This PRP will make your maximum monthly benefit available to you each month. While it is preferred that you file your claim as early in the year as possible and take advantage of the monthly direct deposit, it is your choice when to file your claim; however, you must file all claims before the claim filing deadline of March 31<sup>st</sup> of the year following the end of the calendar year in which you incurred the claim. For example, claims for premium reimbursement of premiums paid for coverage in 2016 must be filed by March 31<sup>st</sup> of 2017.

## **OTHER CONSIDERATIONS:**

### **Dental Benefits:**

MetLife will contact you directly with group rates and options for dental coverage. These benefits are offered without endorsement by ALPA and the dental benefits are not part of the PRP. If the Medicare Supplement Policy or Medicare Advantage Plan you choose does not cover dental benefits, you may want to consider the MetLife Dental Program when considering your dental coverage options. These dental benefits are not endorsed by ALPA but are offered to you by MetLife at group rates. **The cost of the MetLife Dental Plan is NOT reimbursable under the PRP.** You will also receive a mailing from ALPA National outlining the Delta Dental plan that they offer.

### **Prescription Drug Benefits:**

Typically, Medicare Supplement plans do not cover prescription drugs, while Medicare Advantage Plans often do include prescription drugs. Pay close attention to whether you need Medicare Part D. If you choose a Medicare Part D plan, the premiums you pay to that plan up to your monthly maximum benefit are reimbursable to you from the PRP

### **Switching Plans:**

Plans supplemental to Medicare have rules on switching plans. The PRP will reimburse premium payments, for Part B Premium or any eligible plan supplemental to Medicare for which you provide proof of coverage. Once you file your confirmation of coverage and first claim with the claim form, the claim will remain active (become a recurring claim so there is no need to file a new claim each month) for the rest of the calendar year, unless your premium decreases, or you switch plans during the calendar year. If you change your plan that supplements Medicare, you must file a new claim.

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Other information is available on the ALPA site:

[veba.alpa.org](http://veba.alpa.org)

Questions can be addressed to [fedex-veba@alpa.org](mailto:fedex-veba@alpa.org).

For questions about your eligibility, claims and reimbursements: Med-Pay Customer Service  
Monday – Friday 8:00 AM – 5:00 PM CST (800) 777-9087

**Claim for Reimbursement Forms** and other documents may be downloaded from  
<https://hrbenefitsdirect.com/med-pay>

<p><b>Please note:</b> The premium reimbursement amount may change in subsequent years for current and future plan participants.</p>
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