

**ASRS vs. ADOA Retiree Health Insurance Options: Any Non-Medicare-Eligible Insured**

Feature	ASRS	ADOA
<b>Eligibility</b>	ASRS and ORP retirees; one or more of retiree, spouse, dependents are not Medicare eligible	ASRS and ORP retirees; one or more of retiree, spouse, dependents are not Medicare eligible
<b>Medicare Parts A &amp; B required</b>	Only for combination plans. Retiree will receive notification to enroll in Medicare Advantage plan at age 65.	Only for combination plans. Must notify ADOA within 31 days of becoming Medicare eligible
<b>Interaction with Medicare</b>	Combination plan is Medicare Advantage for eligible + a Choice plan	None
<b>Insurance Companies/Networks</b>	United Healthcare only	United Healthcare, Blue Cross Blue Shield
<b>Plan Types</b>	<ul style="list-style-type: none"> <li>• Medicare Advantage is choice of Arizona-only HMO <b>or</b> nationwide PPO</li> <li>• Combines with 3 Arizona-wide HMOs <b>or</b> nationwide PPO (copay in network; 45% coinsurance out of network)</li> </ul> Global emergency or urgent care	<ul style="list-style-type: none"> <li>• Triple Choice Plan; deductible depends on service provider tier, then copays</li> </ul> Only emergency care worldwide (TPC is identical to employee plans before retirement.)
<b>Additional Services</b>	<ul style="list-style-type: none"> <li>• Silver Sneakers Gym memberships</li> <li>• Doctor on Demand virtual visits at no cost</li> <li>• Hearing aids covered</li> <li>• Annual eye exam</li> </ul>	<ul style="list-style-type: none"> <li>• Hearing aids covered</li> <li>• Doctor on Demand virtual visits for \$20 copay</li> </ul>
<b>Premium Subsidy</b>	Yes, for ASRS retirees with 5+ years of service; amount ranges \$75–\$260/month	Yes, for ASRS retirees with 5+ years of service; amount ranges \$75–\$260/month
<b>Billing</b>	Deducted from ASRS pension or direct bill for ORP retiree	For ASRS retirees, premiums deducted directly from pensions. ORP retirees are directly billed.
<b>Enrollment Windows</b>	Enroll within 31 days of retirement or wait to join during any open enrollment thereafter	One-time opportunity to enroll within 31 days of retirement. Must elect at least dental in order to add medical at future open enrollments
<b>Dental Coverage</b>	Separate premium; choice of Delta Dental PPO (2 levels of coverage) or Cigna Dental HMO	Separate premium; choice Delta Dental PPO or Cigna Dental HMO (identical to employee plans before retirement).
<b>Vision Coverage</b>	Eye exam and corrective lenses covered annually under medical plan	Covers eye exam and corrective lenses annually; separate premium; always direct billed quarterly

## ASRS Medical Plans for Non-Medicare-Eligible Insurance (Monthly Premium)

NO PARTICIPANTS MEDICARE-ELIGIBLE				
Coverage		Annual Deductible	AZ-Only Premium	Nationwide Premium
Individual	Choice Economy HMO	\$5,250 medical/ \$250 pharmacy	\$775	Not Available
	Choice Value HMO	\$4,000 medical/ \$0 pharmacy	\$886	
	Choice Premier HMO	\$500 medical/\$0 pharmacy	\$1,062	
	Choice Plus PPO	\$3,750 medical/ \$250 pharmacy in-network \$5,625 medical/\$250 pharmacy out of -network	Not Available	\$1,361
Single + 1	Choice Economy HMO	\$11,500 medical/ \$500 pharmacy	\$1,550	Not Available
	Choice Value HMO	\$8,000 medical/ \$0 pharmacy	\$1,772	
	Choice Premier HMO	\$1,000 medical/ \$0 pharmacy	\$2,124	
	Choice Plus PPO	\$7,500 medical/ \$500 pharmacy in-network \$11,250 medical/\$500 pharmacy out of-network	Not Available	\$2,722
Single + 2 or More	Choice Value HMO	\$8,000	\$1,923	Not Available
	Choice Premier HMO	\$1,000	\$2,309	
	Choice Plus PPO	\$7,500 medical/\$500 pharmacy in-network \$11,250 medical/\$500 pharmacy out of -network	Not Available	\$3,811

### More Information

**Enrollment booklets & covered services:** <https://www.azasrs.gov/content/health-care>

**ASRS Phone:** 520-239-3100 (Tucson); 602-240-2000 (Phoenix); 800-621-3778 (Other locations)

## ASRS Medical Plans for Combination of Medicare-Eligible & Non-Eligible Insurance

<b>ONE PERSON WITH MEDICARE</b>		
<i>You, or your dependents), are a combination of Medicare eligible and non-Medicare eligible</i>		
<b>ARIZONA ONLY</b>	<b>1 person with Medicare, 1 without Medicare</b>	<b>1 person with Medicare, 2+ without Medicare</b>
Group Medicare Advantage <b>HMO</b> with <b>Choice Premier</b>	\$1,062 00 per month	\$ 2,124 00 per month
Group Medicare Advantage <b>HMO</b> with <b>Choice Value</b>	\$ 886 00 per month	\$ 1,772 00 per month
Group Medicare Advantage <b>HMO</b> with <b>Choice Economy</b>	\$ 775 00 per month	\$ 1,550 00 per month
Group Medicare Advantage <b>PPO</b> with <b>Choice Premier</b>	\$ 1,129 00 per month	\$ 2,191 00 per month
Group Medicare Advantage <b>PPO</b> with <b>Choice Value</b>	\$ 953 00 per month	\$ 1,839 00 per month
Group Medicare Advantage <b>PPO</b> with <b>Choice Economy</b>	\$ 842 00 per month	\$ 1,617 00 per month
<b>NATIONWIDE</b>	<b>1 person with Medicare, 1 without Medicare</b>	<b>1 person with Medicare, 2+ without Medicare</b>
Group Medicare Advantage <b>PPO</b> with <b>Choice Plus PPO</b>	\$ 1,428 00 PER MONTH	\$ 2,789 00 per month
<b>TWO PEOPLE WITH MEDICARE</b>		
<i>YOU, OR YOUR DEPENDENT(S), ARE A COMBINATION OF MEDICARE ELIGIBLE AND NON-MEDICARE ELIGIBLE</i>		
<b>ARIZONA ONLY</b>	<b>2 people with Medicare, 1 without Medicare</b>	<b>2 people with Medicare, 2+ without Medicare</b>
Group Medicare Advantage <b>HMO</b> with <b>Choice Premier</b>	\$ 1,062 00 per month	\$ 2,124 00 per month
Group Medicare Advantage <b>HMO</b> with <b>Choice Value</b>	\$ 886 00 per month	\$ 1,772 00 per month
Group Medicare Advantage <b>HMO</b> with <b>Choice Economy</b>	\$ 775 00 per month	\$ 1,550 00 per month
Group Medicare Advantage <b>PPO</b> with <b>Choice Premier</b>	\$ 1,196 00 per month	\$ 2,258 00 per month
Group Medicare Advantage <b>PPO</b> with <b>Choice Value</b>	\$ 1,020 00 per month	\$ 1,906 00 per month
Group Medicare Advantage <b>PPO</b> with <b>Choice Economy</b>	\$ 909 00 per month	\$ 1,684 00 per month
<b>NATIONWIDE</b>	<b>2 people with Medicare, 1 without Medicare</b>	<b>2 people with Medicare, 2+ without Medicare</b>
Group Medicare Advantage <b>PPO</b> with <b>Choice Plus PPO</b>	\$ 1,495 00 per month	\$ 2,856 00 per month

\*See previous page for deductibles: Single deductible if 1 without Medicare; Single + 1 if 2 without Medicare

### ASRS Dental Plans (Monthly Premium)

Plan	Retiree Only	Retiree + 1	Retiree + 2 or more
Delta Dental – High Coverage	\$35.75	\$71.35	\$100.97
Delta Dental – Low Coverage	\$16.60	\$35.09	\$64.24
Cigna Dental HMO (n/a in AK, ID, ME, MT, ND, NH, NM, PR, SD, VI, VT, WV, WY)	\$9.75	\$15.99	\$24.71

### Vision Plan

- Annual eye exam and corrective lenses included with medical insurance.

### ADOA Medical Plans for Non-Medicare-Eligible Insurance (Monthly Premium)

<b>NO PARTICIPANTS MEDICARE-ELIGIBLE</b>	
<b>Coverage</b>	<b>Triple Choice Plan (United Healthcare/Blue Cross/Blue Shield)</b>
Retiree Only	\$708.53
Retiree + 1	\$1,657.21
Retiree + Family	\$2,233.12
<b>COMBINATION OF MEDICARE-ELIGIBLE &amp; NON-ELIGIBLE PARTICIPANTS</b>	
Retiree + 1 (1 w/Medicare)	\$1,223.49
Retiree + Family (1 or 2 w/Medicare)	\$1,393.16

### ADOA Dental Plans (Monthly Premium)

<b>Coverage</b>	<b>Delta Dental PPO</b>	<b>Cigna DHMO</b>
Retiree Only	\$35.94	\$8.52
Retiree + Spouse	\$75.63	\$17.04
Retiree + 1 Child	\$60.48	\$16.59
Retiree + Family	\$118.26	\$25.54

### ADOA Vision Plan (QUARTERLY Premium)

<b>Coverage</b>	<b>Avesis Only</b>
Retiree Only	\$11.16
Retiree + Spouse	\$37.08
Retiree + 1 Child	\$36.72
Retiree + Family	\$46.20

#### More Information

Enrollment booklets & covered services: <https://benefitoptions.az.gov/retireesltd/insurance-policies>

ADOA Phone: 602-542-5008 (Phoenix); 800-304-3687 (Other locations)