## **DENNIS-YARMOUTH REGIONAL SCHOOL DISTRICT**

## OPEN ENROLLMENT NOTICE FOR JANUARY 1, 2024 MEDICARE SUPPLEMENT PLANS

The Open Enrollment for the Medicare Supplement plans (BCBS Medex, HPHC Medicare Enhance, Tufts Medicare Preferred HMO and Tufts Medicare Preferred Supplement is taking place now for an effective date of January 1, 2024. *If you are not making any changes, you do not need to do anything and you will continue on your current plan. If you wish to transfer to a different plan, a new enrollment form and a termination form will need to be completed. These forms should be received at the Benefits Office by December 8, 2023.* I will notify your retirement plan of the new deduction. Deductions prepay for the next month, so this deduction for the January premium will occur in your December 30<sup>st</sup> pension payment.

## New Medicare Supplement Premium Rates for January 2024

	RETIREE SHARE	DISTRICT SHARE	TOTAL PREMIUM
MEDICARE SUPPLEMENTS			
BCBS MEDEX 2	\$161.60	\$242.40	\$404.00
HPHC MEDICARE ENHANCE	\$158.40	\$237.60	\$396.00
TUFTS MEDICARE PREFERRED HMO	\$150.80	\$226.20	\$377.00
TUFTS MEDICARE PREFERRED SUPPLEMENT	\$190.40	\$285.60	\$476.00

The attached benefits comparison details the benefits by plan. For more detailed summaries and relevant information for Medical and Part D prescription drug plans, login to CCMHG.com and check the tab Employees and Retirees.

For additional information or to request enrollment forms, please contact me at (508)398-7612 or by email at kiserp@dy-regional.k12.ma.us.

Paula Kiser Employee Benefits

**Attachments**