



Quick Facts

Making UMP Classic Medicare
More Affordable

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At the 2023 retiree listening sessions, PEBB retirees expressed the importance of preserving UMP Classic Medicare as a plan option for PEBB Medicare retirees. They also shared concerns that the premium is becoming too costly. In response, the Health Care Authority (HCA) has explored ways to make the plan more affordable while maintaining high quality benefits and coverage. An option to help reduce 2025 premiums is being discussed with the PEB Board with a decision needed by the PEB Board in April; if the Board does not act by April, UMP Classic Medicare enrollees are likely to experience premium increases similar to those occurring in the past two years. The purpose of the February Town hall meetings is to hear from retirees about their thoughts on transitioning UMP Classic Medicare current creditable drug coverage to a Part D plan, as described in the [video presentation](#).

Pharmacy Transition to Part D Plan

Advantages

- ✓ Offers greatest premium savings for members
- ✓ Takes advantage of federal subsidies and Medicare drug price negotiations
- ✓ Provides pharmacy coverage very similar to the UMP's current coverage
- ✓ Part D is regulated by Medicare
- ✓ Moda would continue to be plan administrator
- ✓ Plan would be embedded in the single UMP Classic Medicare offering
- ✓ Medical coverage would not change
- ✓ Member experience would be virtually the same

Cost Share Structure Comparison – Key Points

- Part D deductible is the same as current UMP deductible (\$100 deductible)
- Part D out-of-pocket maximum (\$2,000) is the same as current UMP
- The vast majority of prescriptions filled through Part D would have the same or lower cost share (paid when filling a prescription) compared to the current UMP
- Over 90% of total prescriptions for UMP Medicare retirees were generics. Most of these would be covered at \$0 under the Part D plan, representing the elimination of a cost Medicare retirees currently pay when filling a generic prescription.
- Members would save on preferred brand medications under the Part D plan
- Members who use high-cost specialty medication (~1-2% of total UMP Medicare retiree prescriptions) may have a \$15/month higher cost share
- Many non-preferred drugs that are *not* covered by UMP today would be covered by the Part D plan (~1% of total UMP Medicare retiree prescriptions)

Specific Frequently Prescribed Drug Coverage Questions

Based on an analysis completed in October 2023, 98.2% of prescriptions filled by UMP retirees would have been covered if the plan coverage had been a Part D formulary. Remember, formularies can change at any time including for the current UMP Classic Medicare.

All the following frequently prescribed drugs for UMP retirees would continue to be covered and the current cost share a retiree pays when filling the prescription would be reduced to \$0:

- Levothyroxine, Lisinopril, Amlodipine, Losartan, Metoprolol, Eliquis, Gabapentin, Hydrochlorothiazide, Tamsulosin, Metformin, Furosemide, Trazadone, Carvedilol, Latanoprost, Allopurinol, Alendronate, & Escitalopram

The following frequently prescribed drugs for UMP retirees would continue to be covered *and* there would be no copay just like a retiree experiences today:

- Atorvastatin, Rosuvastatin, Simvastatin, and Pravastatin

Examples of preferred brand (non-specialty) drugs, which many UMP Classic Medicare retirees take today, that would continue to be covered *and* would drop by up to \$35 for 30 days:

- Eliquis, Ozempic, Jardiance, Xarelto, Farxiga, Entresto, Trelegy Ellipta, and Tradjenta

There are a few differences under a Part D formulary among the most frequently prescribed drugs for UMP Medicare retirees. The biggest difference, with the largest impact identified by HCA would be a required switch from Basaglar (insulin glargine) to Lantus (insulin glargine) for insulin coverage. These drugs have the same active ingredient, delivery method and dosage, and many members who use insulin have used both at some point in their lives, so the impact of this switch could be minimal.

Who can I contact with questions?

Send questions to UMPQuestions2024@hca.wa.gov

How can I share my thoughts on the option if I can't attend a town hall?

Send a letter to: Health Care Authority
PEBB UMP Medicare Feedback
P.O. Box 42684
Olympia, WA 98504

Send an email to: PEBBBoard@hca.wa.gov

HCA will provide letters and emails directly to the PEB Board for their review and consideration. HCA will not respond individually to letters and emails but will review them to guide future communications. **To ensure timely review for the next Board meeting, please mail your letter by March 8, 2024.**