

AON



Volusia County Schools Retirement Workshop

March 10th, 2023





What is the Florida School Retiree Benefits Consortium (FSRBC)?



What is FSRBC and Who is Eligible?

What is FSRBC?

- Established offering benefits in 2015 with currently 19 Florida School Districts and over 16,000 retirees participating.
- FSRBC gives the Retirees the opportunity to remain connected to the District.
- Provides Medicare-eligible retirees and their dependents from participating school Districts with access to high-quality employer-sponsored Medical Medicare, Dental and Vision benefits with competitive costs.
- Plans available through FSRBC are generally richer than the plans available in the general marketplace
 - Group plans have a much richer drug benefit and a broader network
 - Integrated formulary options giving retirees access to prescriptions
 - MAPD plans start at \$0 monthly premium
 - Variety of plan options to meet Retirees' health and financial needs
- Enhanced concierge services with weekly virtual classroom sessions and one-on-one educational sessions with FSRBC staff
- Enhanced payment options with FRS Pension deductions
 - Health insurance subsidy dollars are not considered taxable income by FRS, since collected through a group platform, so retirees could save as much as \$270 a year in taxes.

Eligibility

Medical Medicare Plans: 65+ year old Medicare-eligible retirees and 65+ year old spouses that are enrolled in Medicare Parts A and B.

Dental and Vision plans: If a retiree is enrolled in FSRBC, their spouse or eligible dependents may enroll in our dental and vision plans.

What Benefits Does FSRBC Offer?

FSRBC offers competitively priced, high-value, employer-sponsored Medicare plans, Dental and Vision benefits:

Plan Type	Carriers Available	No. Plans Available	Monthly Premium Price Range
Medicare Advantage Prescription Drug (MAPD)	UnitedHealthcare	4	\$0 - \$358
	Humana	2	\$0 - \$290
Medicare Supplement	UnitedHealthcare	3	Indiv. Rated
Prescription Drug Plans (PDP)	UnitedHealthcare	4	\$63 - \$311
Dental	Humana Dental	5	Retiree Only: DHMO: \$11 - \$17 PPO: \$34-\$48
Vision	Humana Vision	2	Retiree Only: \$7 - \$8

Annual Enrollment occurs from mid-October through early November each year

- Eligible retirees will receive communications from FSRBC with additional detail in advance as well as a reminder if no action is taken

Educational Website: www.myfsrbc.com
Enrollment Website: www.myfsrbc.bswift.com



Medicare Basics



Original Medicare Enrollment - Retirees should Sign up as soon as possible!

Retirees are eligible to enroll in Medicare Part A and B at age 65, unless they are an Active employee covered by group health insurance.

When they're first eligible for Medicare (turning 65), they have a 7-month Initial Enrollment Period to sign up for Part A and Part B.

- Begins 3 months before the month they turn 65
- Includes the month they turn 65
- Ends 3 months after the month they turn 65

When they retire (65+ years old), they have a 6-month Initial Enrollment Period to sign up for Part A and Part B.

- Begins 3 months before their retirement date
- Includes the month they retire
- Ends 2 months after their retirement date

If you are receiving Social Security, will you be automatically enrolled in Medicare?

- Yes, if the retiree is already receiving their Social Security, they will automatically be enrolled in Medicare at their 65th birthday and do not need to apply.

How do Retirees enroll in Part A?

- If they are not automatically enrolled in Part A and want to sign up, they will need to contact Social Security.


How do Retirees enroll in Part B?

- If Retirees would like to sign up for Part B they will need to complete an application (CMS-40B form). They may find the link at our website, www.myfsrbc.com
- **Retirees should Sign up as soon as possible!** There is a lifetime late enrollment penalty for those who sign up late - the monthly premium can increase by 10% for each 12-month period they could have had Part B, but didn't.

Medicare Basics

There are 5 components and 4 Parts to Medicare, which each provide different coverage levels:

- 1. Part A – Original Medicare (Hospital coverage)
- 2. Part B – Original Medicare (Medical coverage)
- 3. Part C – Medicare Advantage/Medicare Advantage Prescription Drug (MAPD)
- 4. Part D – Prescription Drug Plans (PDP)
- 5. Medicare Supplement/Medigap plans

	Employer	Original Medicare		FSRBC Plans		
Medical Benefit	Traditional Employer PPO	Part A	Part B	MAPD	MED SUPP	PDP
Office Visits	X		X	X	X	
Inpatient Hospital Care	X	X		X	X	
Skilled Nursing Facility	X	X		X	X	
Hospice Care	X	X		X	X	
Home Health Care	X	X	X	X	X	
Outpatient Care	X		X	X	X	
Durable Medical Equipment	X		X	X	X	
Preventative Services	X		X	X	X	
Labs & Imaging	X		X	X	X	
Prescription Drugs 	X			X		X

Medicare Basics: Original Medicare

Original Medicare is solely comprised of Part A and Part B

- Must be enrolled in both to participate in FSRBC
- Part A (Hospital)
 - Helps cover hospital stays, skilled nursing, hospice, and home health care
 - 2023 Deductible: \$1,600 per admission
 - 2023 Coinsurance: dollar amount varies based on service; length of hospital stay
- Part B (Medical)
 - Helps cover outpatient care, home health care, DME, preventive services
 - 2023 Monthly Premium: \$164.90, increases based on income
 - 2023 Deductible: \$226
 - 2023 Coinsurance: 20% of Medicare-allowed amount with no cap

Original Medicare Eligibility – Age 65 or Older:

Retirees qualify for full Original Medicare benefits <u>AT</u> age 65 or older if:		
They are a U.S. citizen or a permanent legal resident who has lived in the United States for at least five years	AND	They or their spouse has worked long enough to be eligible for Social Security or railroad retirement benefits (usually having earned 40 credits from about 10 years of work), even if they are not yet receiving these benefits
OR		
They or their spouse is a government employee or retiree who has not paid into Social Security but has paid Medicare payroll taxes while working.		



FSRBC Medicare Plans



Medicare Basics: Medicare Advantage Prescription Drug (MAPD)

Medicare Advantage Prescription Drug (MAPD)

- Medicare Advantage plans combine Parts A and B (Original Medicare) into one comprehensive plan (Part C)
- All FSRBC Advantage plans include prescription drug coverage (MAPD)
 - Drug tiers can vary based on plan, which can impact cost – know which drug tier prescription drugs fall into (more details on the next page)
- Advantage plans function similarly to an employer HMO or PPO plan
 - Like with an employer plan, the MAPD plan provides you with comprehensive coverage. When you present your insurance card, you'll show them your MAPD card instead of your Medicare “red, white, and blue” card
 - Spouses can be covered under the Retiree's account selecting their own separate plan
 - Policies are provided by private insurance companies
- Some carriers have plans with national coverage

Prescription Drugs: Know Your Tier!

Drug tiers can vary based on plan, which can impact your cost – know which drug tier your prescription drugs fall into!

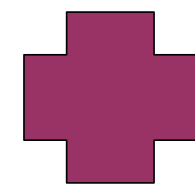
Drug*	FSRBC - Group United Health Care MAPD Plans			
	Premier	Comprehensive	Low	Zero
Flomax	3	3	3	Substitute (2-3)
Albuterol Sulfate	1	1	1	3
Amlodipine-Olmesartan	1	1	1	2
Azor	3	3	3	Substitute 2
Dexamethasone	1	1	1	2
Dexilant	3	3	3	Substitute (2-5)
Digoxin	1	1	1	4
Dupixent	4	4	4	Substitute (5)
Eliquis	2	2	2	3
Hydroxychloroquine	1	1	1	2
Ivermectin	1	1	1	2
Levothyroxine	1	1	1	1
Lexapro	3	3	3	Substitute (1-5)
Linzess	2	2	2	3
Lipitor	3	3	3	Substitute (2-3)
Lisinopril	1	1	1	1
Metformin	1	1	1	1
Metoprolol	1	1	1	2
Nexium	2	2	2	3
Novolog	3	3	3	Substitute (1-5)
Omeprazole	1	1	1	2
Ozempic	2	2	2	3
Pravastatin	1	1	1	1
Rybelsus	2	2	2	3
Synthroid	2	2	2	3
Tremfya	4	4	4	5
Warfrin	1	1	1	1
Xarelto	2	2	2	3
Zoloft	3	3	3	Substitute (1-5)

*Sample drug list, examples as of February 2022. Tiers can change year to year.

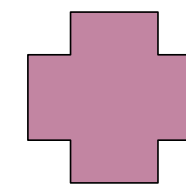
Medicare Basics: Medicare Supplement/Medigap and Prescription Drug Plans

Medicare Supplement (MedSupp/Medigap)

- Medicare Supplement plans (MedSupp/Medigap) offer more complete medical coverage and help pay some of the health care costs that Original Medicare doesn't cover, like:
 - Copayments
 - Coinsurance
 - Deductibles
- Prescription Drugs are not covered
- Retirees must have Medicare Part A and B to enroll in a MedSupp plan
- Policies only cover one person. Retirees and spouses would have to buy separate policies.
- Policies are provided by private insurance companies
- Policies are individually rated (*Gender, Zip, Health Status (smoker/nonsmoker)*)



**Combine a Medicare Supplement and
Prescription Drug Plan for full coverage**



Prescription Drug Plan (PDP)

- Prescription Drug Plans (PDP) are a separate plan that provide additional drug coverage
 - Sits on top of Original Medicare
 - “Donut hole” refers to coverage gap that occurs after member and plan have paid a certain amount on prescription drugs
- Medical coverage is not included in a Prescription Drug Plan
- Retirees must have Medicare Part A and B to enroll in a Prescription Drug Plan

FSRBC Medicare Supplement/Medigap Plans: United Healthcare

Below is a high-level overview of Medicare Supplement Plans.
It is important to note that all Medicare Supplement plans are individually rated.

Benefit	A	G	N
Part A coinsurance and hospital costs up to an additional 365 days after Medicare benefits are used up	Yes	Yes	Yes
Part B coinsurance or copayment	Yes	Yes	Yes
Blood (first 3 pints)	Yes	Yes	Yes
Part A hospice care coinsurance or copayment	Yes	Yes	Yes
Skilled nursing facility care coinsurance	No	Yes	Yes
Part A deductible	No	Yes	Yes
Part B deductible	No	No	No
Part B excess charge	No	Yes	No
Foreign travel exchange (up to plan limits)	No	80%	80%

Enrollment – UnitedHealthcare requires Retirees to contact them directly to enroll in a Medicare Supplement Plan. When they call the FSRBC Customer Service they transfer the Retiree directly to UnitedHealthcare. If the Retiree is enrolling online a phone number is provided for them to call and enroll.

Disenrollment – If at anytime a Retiree chooses to disenroll from a Medicare Supplement plan they MUST contact the carrier directly to disenroll.



Plan F is no longer accepting new enrollments from those with a Medicare eligibility date later than 1/1/2020.



FSRBC Medicare Plans: How Do I Choose a Plan?

No single plan is “best” for everybody - Medicare and benefit choices need to reflect Retiree’s personal health care needs. A good place to start is to think about answers to these questions:

1. What is your risk tolerance? Would you rather...
 - a) Pay a lower monthly premium, but...
 - Pay **more** out of pocket when you use your benefits
 - **Limit** your network
 - **Increase** your out-of-pocket drug costs
 - b) Pay a higher monthly premium, but...
 - Pay **less** out of pocket when you use your benefits
 - Have access to a **larger** network of providers
 - **Reduce** your out-of-pocket drug costs
2. What prescription medications do you take regularly and how much do you pay for them? Do you have a particular doctor, hospital or pharmacy that you use?
3. Do you have a chronic condition such as diabetes or congestive heart failure?
4. Do you have a summer/winter home in another state?

If Retirees have questions on choosing a plan? Remember they can sign up for a virtual education session or one-on-one session at www.myfsrbc.com.



FSRBC Medicare Plans Offered to Volusia County Schools



Medicare Plans Offered

Medicare Advantage

- UnitedHealthcare (UHC)
 - Group National
 - Low Premium National PPO
 - Comprehensive National PPO
 - Premier National PPO
- Humana
 - Zero Premium HMO
 - Comprehensive PPO

Medicare Supplement

- UnitedHealthcare (UHC/AARP)
 - A
 - F
 - G
 - N

Prescription Drug Plan

- UnitedHealthcare (UHC)
 - AARP Medicare Rx Saver Plus
 - AARP Medicare Rx Preferred
 - Comprehensive Plan
 - Premier Plan

Medicare Supplement plans are individually rated; please contact carriers for rates.
Some rates may not be available until November.

Plan F no longer accepting new enrollments from those with Medicare effective date later than 1/1/20. Plan G is most similar.

Medicare Advantage - UHC



	United Healthcare Group PPO Plus
	In Network*
Calendar Year Deductible CYD	\$0
Medical OOP max	\$4,500
Coinsurance	20%
Physician Office visits	
PCP	\$5
Specialist	\$30
Hospital Services	
ER copay	\$90
Urgent care copay	\$35
Outpatient Services	
Hospital	20%
Surgery	20%
Rx Copays	67,000 Pharmacies Participating
Deductible	\$0
Part D Initial Coverage Level Limit \$4,660	30-day
Tier 1	\$15
Tier 2	\$15
Tier 3	\$47
Tier 4	\$100
Tier 5	\$100
Part D Coverage Gap Total-out-of-pocket \$7,400	
Tier 1	25%
Tier 2	25%
Tier 3	25%
Tier 4	25%
Tier 5	25%
Part D Coverage Catastrophic (>\$7,400)	
Tier 1	Greater of \$4.15 or 5%
Tier 2	Greater of \$10.35 or 5%
Tier 3	Greater of \$10.35 or 5%
Tier 4	Greater of \$10.35 or 5%
Tier 5	Greater of \$10.35 or 5%
2023 Monthly Premium	
Retiree Only	\$0.00

Medicare Advantage - UHC



	United Healthcare Premier National PPO	United Healthcare Comprehensive National PPO	United Healthcare Low National PPO
	In Network	In Network	In Network
Calendar Year Deductible CYD	\$0	\$0	\$400
Medical OOP max	\$2,500	\$3,000	\$6,700
Coinsurance	20%	20%	20%
Physician Office visits			
PCP	\$5	\$20	\$25
Specialist	\$15	\$30	\$45
Hospital Services			
ER copay	\$65	\$65	\$65
Urgent care copay	\$35	\$35	\$35
Outpatient Services			
Hospital	\$15	20%	20%
Surgery	\$15	20%	20%
Rx Copays	67,000 Pharmacies Participating		
Deductible	\$0	\$0	\$505
Part D Initial Coverage Level Limit \$4,660	30-day	30-day	30-day
Tier 1	\$5	\$7	\$10
Tier 2	\$30	\$40	\$30
Tier 3	\$60	\$90	\$45
Tier 4	\$80	\$90	\$60
Part D Coverage Gap Total-out-of-pocket \$7,400			
Tier 1	\$5	\$7	25%
Tier 2	\$30	\$40	25%
Tier 3	\$60	\$90	25%
Tier 4	\$80	\$90	25%
Part D Coverage Catastrophic (>\$7,400)			
Tier 1	\$0	\$0	Greater of \$4.15 or 5%
Tier 2	\$0	\$0	Greater of \$10.35 or 5%
Tier 3	\$0	\$0	Greater of \$10.35 or 5%
Tier 4	\$0	\$0	Greater of \$10.35 or 5%
2023 Monthly Premium			
Retiree Only	\$357.58	\$238.10	\$76.98

Medicare Advantage – Humana

Humana®

	Humana Standard LPPO	Humana HMO 076-178 Rx 252 <i>No out-of-network benefits</i>	
	In Network	In Network	
Calendar Year Deductible CYD	\$0	\$0	
Medical OOP max	\$2,500	\$1,850	
Coinsurance	20%	20%	
Physician Office visits			
PCP	\$5	\$0	
Specialist	\$15	\$5	
Hospital Services			
ER copay	\$65	\$100	
Urgent care copay	\$15	\$0	
Outpatient Services			
Hospital	\$50	\$20	
Surgery	\$50	\$20	
Rx Copays	67,000 Pharmacies Participating		
Deductible	\$0	\$0	
Part D Initial Coverage Level Limit \$4,660	30-day	30-day	
Tier 1	\$5	\$0	
Tier 2	\$30	\$35	
Tier 3	\$60	\$80	
Tier 4	33%	33%	
Part D Coverage Gap Total-out-of-pocket \$7,400			
Tier 1	\$5	\$0	
Tier 2	25%	25%	
Tier 3	25%	25%	
Tier 4	25%	25%	
Part D Coverage Catastrophic (>\$7,400)			
Tier 1	Greater of \$4.15 or 5%	Greater of \$4.15 or 5%	
Tier 2	Greater of \$10.35 or 5%	Greater of \$10.35 or 5%	
Tier 3	Greater of 10.35 or 5%	Greater of \$10.35 or 5%	
Tier 4	Greater of \$10.35 or 5%	Greater of \$10.35 or 5%	
2023 Monthly Premium			
Retiree Only Non-Tobacco	\$288.85	\$0.00	

Medicare Supplement & PDP - UHC



	UHC Plan G	UHC Plan G	UHC Plan G	UHC Plan G
	AARP Rx Preferred	AARP Rx Saver Plus	Comprehensive Rx	Premier Rx
	In Network	In Network	In Network	In Network
2023 Part B Deductible	\$226	\$226	\$226	\$226
Medical OOP max	\$0	\$0	\$0	\$0
Coinsurance	0%	0%	0%	0%
Physician Office visits				
PCP	\$0	\$0	\$0	\$0
Specialist	\$0	\$0	\$0	\$0
Hospital Services				
ER copay	\$0	\$0	\$0	\$0
Urgent care copay	\$0	\$0	\$0	\$0
Outpatient Services				
Hospital	\$0	\$0	\$0	\$0
Surgery	\$0	\$0	\$0	\$0
Rx Copays	Standard Network		67,000 Pharmacies Participate	
Deductible	\$0	\$505	\$0	\$0
Part D Initial Coverage Level Limit \$4,660	30-day	30-day	30-day	30-day
Tier 1	\$7	\$1	\$10	\$7
Tier 2	\$12	\$9	\$45	\$30
Tier 3	\$47	18%	\$75	\$60
Tier 4	40%	42%	33%	\$75
Tier 5	33%	25%		
Part D Coverage Gap Total-out-of-pocket \$7,400				
Tier 1	25%	25%	\$10	\$7
Tier 2	25%	25%	25%	\$30
Tier 3	25%	25%	25%	\$60
Tier 4	25%	25%	25%	\$75
Tier 5	25%	25%		
Part D Coverage Catastrophic (>\$7,400)				
Tier 1	Greater of \$4.15 or 5%	Greater of \$4.15 or 5%	Greater of \$4.15 or 5%	Greater of \$4.15 or 5%
Tier 2	Greater of \$10.35 or 5%	Greater of \$10.35 or 5%	Greater of \$10.35 or 5%	Greater of \$10.35 or 5%
Tier 3	Greater of \$10.35 or 5%	Greater of \$10.35 or 5%	Greater of \$10.35 or 5%	Greater of \$10.35 or 5%
Tier 4	Greater of \$10.35 or 5%	Greater of \$10.35 or 5%	Greater of \$10.35 or 5%	Greater of \$10.35 or 5%
Tier 5	Greater of \$10.35 or 5%	Greater of \$10.35 or 5%		
2023 Monthly Premiums— UHC Plan G (based on 65 year old nonsmoking female, zip code 32720)	\$172.88	\$172.88	\$172.88	\$172.88
2023 Monthly Premiums— Rx Plan	\$109.60	\$64.40	\$125.58	\$310.94
Total Monthly Premiums	\$282.48	\$237.28	\$298.46	\$483.82

FSRBC Medicare Medical Plans Enrollment Options

How to Enroll

Enrollment in a FSRBC Medicare Medical Plans can be completed independently online or telephonically.

Option 1 To enroll telephonically:

- Call the FSRBC Medicare Customer Service Enrollment Center (833) 686-0983 Monday – Friday from 9:00am – 5:00pm EST

Option 2 To enroll online:

- Visit www.myfsrbc.bswift.com enter either login with your credentials or choose “First time visiting, register now”
- Non-Registered Users will select choose “First time visiting, register now” and enter you Name, Zip Code and Date of Birth. You will then be promoted to enter a username and password.
- Registered Users—if you have previously logged into the system, you can login with your user ID and password.

Billing and Payment Options – FSRBC Medicare

- Insurance premiums are due monthly to FSRBC—payment options include ACH/bank draft, FRS, and check.
- Invoices with elections are available online or, if paying by check, retirees will be mailed an invoice.
- Retirees can access billing support through the Customer Service Center at **1-833-686-0983**
- Retirees new to the program who want to begin making payments through FRS must attest by completing a form on the enrollment site or via phone through Customer Service.
- To avoid lapse in payment, retirees will be prompted to elect a substitute payment option, if required.

Medicare Payment Timing

Payment Type	Payment Timing	Billing Cycle
FRS/Pension	Payment deducted on last business day of the month for following month (i.e. 12/31 for January coverage)	Payment preference due by 3 rd of each month for preference to be reflected for that billing cycle. Billing team sends file to FRS o/a 7 th of each month.
ACH/Bank Draft	Payment deducted on the 5th of the billing month (i.e. 1/5 for January coverage)	Payment preference due by 1st of each month for upcoming billing cycle (i.e. 2/1 for 2/1 coverage).
Check	Posted when check received	N/A

FSRBC Medicare Contact Information

Informational Website

www.myfsrbc.com contains important information on all Medicare, Dental, and Vision plans available through FSRBC.
Also contains recorded version of this presentation.

FSRBC Medicare/Medical

Customer Service Phone Number

1-833-686-0983

Enrollment Website

www.myfsrbc.bswift.com to enroll; also contains recorded version of this presentation

REMINDER: Please be sure your contact information is up to date. Please contact 1-833-686-0963 to make changes.



Humana Dental and Vision



Humana Dental

Humana®

Humana Dental PPOs			
Benefits (Based on In-Network)	Low Plan	Medium Plan	High Plan
Network Name	HDPPO/TRPREF		
Calendar Year Deductible	\$50	\$25	\$50
Calendar Year Annual Maximum	\$800	\$1,250	\$2,000
Preventive Coinsurance (Plan Paid)	100% after deductible	100%	100%
Basic Coinsurance (Plan Paid) <i>Fillings, Emergency Visit</i>	70%	80%	80%
Major Coinsurance (Plan Paid) <i>Extractions (Surgical), Crowns, Dentures</i>	50%	50%	50%
2023 MONTHLY PREMIUMS			
Retiree Only	\$34.30	\$40.39	\$47.87
Retiree + 1	\$68.27	\$69.36	\$95.32
Retiree + Family	\$88.96	\$99.20	\$123.77

Humana Dental DHMOs		
Benefits	Low Plan	High Plan
Network Name	HD205/DHMO	HS195/DHMO
Preventive	\$0	\$0
Emergency Visit	\$20	\$10
Extractions (Surgical)	\$40	\$30
Root Canal	\$110-\$250	\$100-\$210
Dentures	\$375	\$325
2023 MONTHLY PREMIUMS		
Retiree Only	\$10.53	\$17.10
Retiree + 1	\$20.85	\$33.85
Retiree + Family	\$37.07	\$60.17

Humana Vision

Humana®

Humana Vision		
In-Network Benefits	Low Plan	High Plan
Network Name	Humana Insight Network	
Exam Copay	\$10	\$5
Lens/Frames Copay	\$15	\$15
Frequency (Exam / Frames / Lenses)	12/ 24 /12	12/12/12
Lenses Single / Bifocal / Trifocal / Lenticular	All Included (In Network)	All Included (In Network)
Frame Allowance	Up to \$130 (20% off balance over \$130)	Up to \$130 (20% off balance over \$130)
Contact Lenses Allowance	Up to \$130 (15% off balance over \$130)	Up to \$130 (15% off balance over \$130)
2023 MONTHLY PREMIUMS		
Retiree Only	\$6.24	\$7.25
Retiree + 1	\$12.48	\$14.50
Retiree + Family	\$20.33	\$23.33

Dental and Vision Enrollment Options

How to Enroll

Enrollment in a FSRBC Humana Dental or Vision Plan can be completed independently online, telephonically or by sending an enrollment form to Humana for processing.

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Option 1 To enroll telephonically:

- Call the Humana Customer Service Enrollment Center (877) 589-4051 Monday – Friday from 8:00am – 8:00pm EST

Option 2 To enroll online:

- Visit <https://slservices.humana.com/enrollmentregistration/slflogin.aspx>; enter either login credentials applicable below
- Non-Registered Users will securely authenticate your enrollment with your SSN, date of birth, and zip code
- Registered Users—if already enrolled with Humana and previously registered at MyHumana.com, you can login with your user ID and password.

Option 3 To enroll via enrollment form:

- Download the Enrollment form
- Complete the form
- Send to Humana through email at: NFLOpenEnrollment@humana.com

Billing and Payment Options – Dental & Vision

- Insurance premiums are mailed monthly by Humana for Dental and Vision—payment options include FRS, ACH/bank draft and check.
- Premiums can be paid on a monthly, semi-annual, or annual basis.
- If Retiree want to make payments through FRS, they must complete the FRS deduction form, available online.
- Access billing support through Humana’s Billing Customer Service Center at 1-877-829-5037
- There is a link to Humana’s Dental and Vision enrollment portal at <https://www.myfsrbc.com>

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Payment Timing

Payment Type	Payment Timing
FRS/Pension	Payment deducted on last business day of the month for following month (i.e. 12/31 for January coverage)
ACH/Bank Draft	Payment deducted between the 1 st and the 10 th of each month – retirees can choose the specific day (i.e. 1/5 for January coverage)
Check	Posted when check received

Dental and Vision Customer Service

Informational Website

www.myfsrbc.com contains important information on all Medicare, Dental, and Vision plans available through FSRBC. Also contains recorded version of this presentation.

<p><u>Pre-Enrollment Hotline</u> 1-877-589-4051 NEW ENROLLMENTS ONLY</p> <p>Please note: This number should be used when cancelling coverage or for Annual Enrollment Changes (typically in mid-October)</p>	<p><u>Customer Service Phone Number</u> <i>(Currently Enrolled)</i> Dental: 1-800-233-4013 Vision: 1-877-398-2980 Billing(Dental & Vision): 1-877-829-5037</p>
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REMINDER: Please be sure your contact information is up to date. When updating your contact information for Humana Dental or Vision plans you **MUST** contact Humana directly via their Customer Service Center, this information **CANNOT** be updated online.

Humana Dental Customer Service Center 1-800-233-4013

Humana Vision Customer Service Center 1-877-398-2980

When calling Humana please be sure to have your member ID number available, which can be found on your Humana ID card. Additionally, when calling please state you are calling from Florida School Retiree Benefits Consortium.

Need Additional Assistance?

Visit www.myfsrbc.com

- Sign up page to join Virtual Classroom
- Contact information
- Plan details
- FAQs

Email benefits@myfsrbc.com to setup a one-on-one meeting