



**DEPARTMENT OF FINANCE**  
**CITY OF CHICAGO**

Date: December 30, 2015

From: Chicago Benefits Office

To: Annuitants in the Retiree Health Plan who were covered on December 1, 2015

Re: Amendment to Retiree Health Plan regarding Proof of Good Health.

Normally, if you voluntarily terminate coverage under the City of Chicago Non-Medicare Eligible Retiree Healthcare Plan or the City of Chicago Medicare Supplement Retiree Healthcare Plan ("the Plans"), you cannot return to the plan at a later date unless you provide Proof of Good Health and meet all other eligibility requirements. However, the City recently amended the Plans to provide for a temporary suspension of the Proof of Good Health requirement. A copy of the Amendment is attached.

You are eligible for this special provision if you were covered by one of the Plans on December 1, 2015. Your spouse or dependent(s) are also eligible to return to the Plans under this special provision, but your spouse or dependent(s) can only return to the Plans if you are returning and you were covered by one of the Plans on December 1, 2015.

**Deadlines and Special Rules**

If after September 14, 2015, you already elected or now wish to elect to terminate coverage under the Plans for the 2016 Plan Year to try another source of healthcare coverage or for any other reason, you may do so as long as you notify your pension fund in writing, postmarked no later than January 15, 2016. You may select an effective date for the termination of coverage that is later than January 15, 2016, but the notice of your intent to terminate coverage must be postmarked by January 15, 2016.

If you later decide that you would prefer to reinstate coverage under the Plans during the special reinstatement period of April 1, 2016 through September 30, 2016, you may return to coverage during the 2016 plan year as long as:

- You apply in writing to your pension fund with your application postmarked no later than September 30, 2016.
- You pay the required premium.
- Only those people who were covered on December 1, 2015 and who are otherwise eligible for coverage may be reinstated. Examples: an over-age dependent may not be returned to coverage; a former spouse may not be returned to coverage.
- Your coverage is effective prospectively. Coverage cannot be reinstated retrospectively.
- You will not be asked to provide Proof of Good Health and will not be subject to any pre-existing condition limitations.
- If you apply for reinstatement by the 15th day of any month, your coverage will be effective the first day of the following month. If you apply for reinstatement after the 15th day of any month, your coverage will be reinstated on the first day of the second following month. See the Frequently Asked Questions included with this notice for a schedule of reinstatement dates.

**Questions**

We have included a list of Frequently Asked Questions with this mailing. If you have other questions or need additional information, please call the Benefit Service Center at 1-877-299-5111.

## Frequently Asked Questions about the Retiree Health Plan Change

- During the annual enrollment that began September 15, 2015, I already elected to terminate my enrollment in the City retiree plan effective December 31, 2015 and signed up for other insurance. What does this change mean for me?**

It means that if you do not like your new plan, or if you do not currently have a health plan, you can re-enroll in a City retiree healthcare plan without providing Proof of Good Health anytime between April 1, 2016 and September 30, 2016.

- How do I terminate my enrollment in a Health Insurance Exchange Plan?**

Contact the customer service number for the Health Insurance Exchange Plan you chose and let them know when you want to discontinue your coverage. Look at the chart directly below to see when your coverage with the City's plan would be reinstated to insure that you don't have a gap in coverage.

- How do I apply to re-enroll in a City retiree health plan?**

Call your pension fund to request an application form. Complete the form and return it to your pension fund.\* The chart below shows how long it takes for the application to be processed:

If you apply:	Your City coverage during the 2016 plan year will begin on:
Before April 15, 2016	May 1, 2016
April 16 – April 30, 2016	June 1, 2016
May 1 – May 15, 2016	June 1, 2016
May 16 – May 31, 2016	July 1, 2016
June 1 – June 15, 2016	July 1, 2016
June 16 – June 30, 2016	August 1, 2016
July 1 – July 15, 2016	August 1, 2016
July 16 – July 31, 2016	September 1, 2016
August 1 – August 15, 2016	September 1, 2016
August 16 – August 31, 2016	October 1, 2016
September 1 – September 15, 2016	October 1, 2016
September 16 – September 30, 2016*	November 1, 2016

**\*Applications must be postmarked by September 30, 2016.**

- Can I enroll in an Exchange plan?**

Open enrollment for Exchange plans closes on January 31, 2016 and re-opens in the fall for 2017 coverage. Visit [www.getcoveredillinois.gov](http://www.getcoveredillinois.gov) or call 1-866-311-1119 to get more information, including information about special enrollment periods during the year.

- I have Medicare and I decided to drop my City Medicare supplement plan (the Green Plan) and signed up for other coverage that supplements Medicare coverage (for example: A Medicare Advantage Plan that includes a prescription drug plan or a Medicare Supplement product with a separate Part D Medicare Prescription Drug Plan). How can I switch back to the City's Medicare supplement plan?**

Call the insurance company(ies) and let them know you are dropping your new plan(s) and find out when you need to pay the last premium. You will need to continue to pay for Medicare Part B. Next, see 3. above. Look at the chart directly above to see when your coverage with the City's plan would be reinstated to insure that you don't have a gap in coverage.

# Plan Amendment

Effective September 15, 2015

To the

City of Chicago Non-Medicare Eligible Retiree  
Healthcare Plan and the City of Chicago Medicare Supplement  
Retiree Healthcare Plan

## Special Disenrollment and Reinstatement Periods

Effective September 15, 2015, an annuitant who as of December 1, 2015 is participating in the City of Chicago Non-Medicare Eligible Retiree Healthcare Plan and Medicare Supplement Retiree Healthcare Plan (an “annuitant” and the “Plan”, respectively) may elect to terminate coverage from the Plan during the period September 15, 2015 through January 15, 2016 (the “special disenrollment period”).

An annuitant who elects to terminate coverage during this special disenrollment period may return to coverage during a special reinstatement period beginning on April 1, 2016 and ending on September 30, 2016 without having to provide proof of good health if all of the following conditions are met:

1. The annuitant terminates coverage for the annuitant and any covered spouse and/or dependent child(ren).
2. The annuitant applies in writing to reinstate coverage, in accordance with procedures established by the City.
3. The annuitant may reinstate coverage for any person who was covered on December 1, 2015 with the following exceptions:
  - a. If during the time of absence from the Plan, the annuitant’s dependent reaches the plan’s limiting age, the dependent is not eligible for reinstatement.
  - b. If during the time of absence from the Plan, the annuitant divorces his/her spouse, the former spouse is not eligible for reinstatement.
4. Reinstatement coverage shall only be effective from the first day of any month in accordance with the following:
  - a. For applications for coverage received during the first 15 calendar days of any month, coverage shall be effective on the first day of the following month. (Example: Coverage application received on April 10, 2016; coverage shall be effective on May 1, 2016.)
  - b. For applications received after the 15th day of any month, coverage shall be effective the first day of the second following month. (Example: Coverage application received on April 20, 2016; coverage shall be effective on June 1, 2016.)
5. Applications for reinstatement must be postmarked by September 30, 2016. Any applications postmarked after September 30, 2016 will be denied. Applications shall be in accordance with procedures established by the City.