



**2020 UNM Medicare-Eligible Retiree Open Enrollment Instructions
October 21 – November 8, 2019**

- PLEASE READ CAREFULLY! -

IMPORTANT!

**ALL FORMS AND REQUIRED DOCUMENTS MUST BE RECEIVED
NO LATER THAN 5 p.m. Mountain Time on November 8, 2019**

Late or incomplete forms will NOT be processed.

UNM's 2020 Medicare-Eligible Retiree Open Enrollment is ONLY for Medicare-eligible retirees, eligible employees retiring *and* turning 65 before January 1, 2020, and their legal Medicare-eligible dependents who have enrolled in and are covered by Medicare parts A and B. See page 14 of the 2020 Medicare-Eligible Retiree Open Enrollment Guide for details about widow/widower allowed changes. For Medicare-eligible retirees with dependents under the age of 65, be advised the next Open Enrollment period for Pre-65 Retiree coverage changes will be in April and/or May, 2020. **NOTE: Retirees or dependents who will not be Medicare-eligible as of January 1, 2020 are NOT eligible to make medical or dental coverage changes during the October 21 – November 8, 2019 Open Enrollment period.**

The 2020 UNM Medicare-Eligible Retiree Open Enrollment Change Form **must be completed, signed BY THE RETIREE**, and include the *retiree's* current contact information (address, phone number, and email address).

See UNM HR Service Center address on page 2 of the Form. ***Hand delivery or fax is preferred to ensure delivery prior to the end of 2020 the Medicare-eligible Retiree Open Enrollment period.***

To make changes, follow the instructions below based upon the change(s) you wish to make to your and/or your dependent's coverage.

IF YOU ARE NOT MAKING CHANGES TO YOUR CURRENT MEDICAL OR DENTAL COVERAGE: No action is required. Your (and your dependent's) coverage will continue and will only be updated for changes in premium(s) as outlined on pages 13 -14 of the 2020 UNM Medicare-eligible Retiree Medical and Dental Open Enrollment Guide.

IF CANCELLING MEDICAL OR DENTAL COVERAGE FOR YOURSELF: *

1. Select **CANCEL COVERAGE** and indicate which coverage (medical or dental) you are cancelling.
Note: Additionally, if applicable to you, you must contact UnitedHealthcare directly at 800-545-1797 to cancel your UNM AARP Medicare Supplement Plan and 888-867-5575 to cancel your UNM AARP MedicareRx Prescription Drug Plan (PDP).
2. Sign, date, and submit the salmon-colored *2020 Medicare-Eligible Retiree Medical And Dental Open Enrollment Change Form* to UNM HR Service Center by the **Open Enrollment deadline**.

*** PLEASE NOTE: If you, as the retiree, cancel your UNM-sponsored medical and/or dental coverage and you are also covering a dependent spouse, domestic partner, and/or child, your dependent's coverage will be also be cancelled, regardless of your dependent's age.**



BENEFITS

IF ADDING A MEDICARE-ELIGIBLE DEPENDENT TO YOUR EXISTING MEDICAL OR DENTAL COVERAGE:

1. Select **ADD/DROP DEPENDENT COVERAGE**, then select **ADD DEPENDENT COVERAGE**.
2. Select the desired plan under **MEDICAL PLAN ELECTION AND/OR DENTAL PLAN ELECTION**.
3. Complete **DEPENDENT INFORMATION** on the 2020 UNM Medicare-eligible Retiree Open Enrollment Change Form.
4. If adding a dependent to your **medical coverage**, mail, deliver, or fax a photocopy of your **dependent's Medicare card** showing A & B coverage to the UNM HR Service Center. Request enrollment forms for the medical and/or dental insurance vendor(s) you are selecting.

NOTE: Dependents MUST enroll in the same UNM Medicare Advantage Plan as the RETIREE, unless the dependent is under age 65.

Retirees and dependents may each enroll in a different UNM-sponsored AARP Medicare Supplement plan (F, N, or G) and AARP MedicareRx Prescription Drug plans (Walgreens, Saver Plus, or Preferred). Plan F is only available to eligible applicants with a 65th birthday prior to 1/1/2020 or with a Medicare Part A effective date prior to 1/1/2020.

5. Sign, date, and submit the salmon-colored *2020 Medicare-Eligible Retiree Medical And Dental Open Enrollment Change Form*, signed and dated by the retiree, insurance vendor enrollment form(s) completed by the dependent, and **a copy of the dependent's Medicare A & B card** to the HR Service Center by the **Open Enrollment deadline**.

IF DROPPING A MEDICARE-ELIGIBLE DEPENDENT FROM MEDICAL OR DENTAL COVERAGE:

1. Select **ADD/DROP DEPENDENT COVERAGE**, then select **DROP DEPENDENT COVERAGE**.
2. Select the appropriate plan under **MEDICAL PLAN ELECTION AND/OR DENTAL PLAN ELECTION**.
3. Complete **DEPENDENT INFORMATION**.
4. Sign, date, and submit the salmon-colored *2020 Medicare-Eligible Retiree Medical and Dental Open Enrollment Change Form* to the HR Service Center by the **Open Enrollment deadline**.

IF CHANGING EXISTING MEDICAL OR DENTAL COVERAGE TO A DIFFERENT UNM RETIREE MEDICARE PLAN OR DENTAL PLAN:

1. Select **CHANGE PLAN-MEDICAL and/or CHANGE PLAN-DENTAL**, then indicate which **NEW coverage** you are enrolling in under the **MEDICAL PLAN ELECTION and/or DENTAL PLAN ELECTION** section(s) of the change form.
2. If changing **MEDICAL coverage**, mail, deliver or fax to 505-277-2278 a photocopy of **your and/or your dependent's Medicare card showing part A & B coverage** to the UNM HR Service Center. Next, request vendor enrollment form(s) for each insured. If changing to AARP plans, follow the UnitedHealthcare Enrollment instructions on pages 83 - 84 of the enclosed UNM Medicare-Eligible Retiree Open Enrollment Guide, and complete the 2020 UNM UnitedHealthcare Authorization Form on pages 85 - 86 of the Guide.
3. Sign, date, and submit the salmon-colored *2020 Medicare-Eligible Retiree Medical And Dental Open Enrollment Change Form* along with completed and signed vendor enrollment form(s) (available from the UNM HR Service Center), and, if changing to AARP plans, the 2020 UnitedHealthcare Authorization form, to the UNM HR Service Center by the **November 8th Open Enrollment deadline**.



BENEFITS

2020 UNM Medicare-Eligible RETIREE MEDICAL & DENTAL OPEN ENROLLMENT CHANGE FORM

IF YOU DO NOT WISH TO CHANGE YOUR CURRENT MEDICAL AND/OR DENTAL COVERAGE, YOU DO NOT NEED TO COMPLETE THIS FORM OR TAKE ANY ACTION

UNM Retiree Information
UNM Retiree Name (Last, First, Middle Initial)
Date of Birth
Banner ID or SSN
Medicare Part A & B ID #
Street Address, City, State, and Zip Code
Primary Phone (With Area Code)
Secondary Phone (With Area Code)
Email address:
Type of Action
CHANGE PLAN MEDICAL
CHANGE PLAN DENTAL
CANCEL COVERAGE
ADD/DROP DEPENDENT COVERAGE
MEDICAL PLAN ELECTION
DENTAL PLAN ELECTION**

UNM Retiree Must Sign and Date Page 2 of this Form or benefit changes will not be processed.



BENEFITS

DEPENDENT INFORMATION

Dependents	Name (Last, First, MI)	Medicare Part A&B ID Number	DOB	Gender M / F	Add or Remove	Coverage dependent is being added to or removed from
Spouse or Domestic Partner					<input type="checkbox"/> Add <input type="checkbox"/> Remove	<input type="checkbox"/> Medical <input type="checkbox"/> Dental
Eligible Child(ren)					<input type="checkbox"/> Add <input type="checkbox"/> Remove	<input type="checkbox"/> Medical <input type="checkbox"/> Dental

RETIREE Certification – Must be signed by the UNM Retiree

I understand my signature authorizes the University of New Mexico to make the above changes, effective January 1, 2020.

I understand and accept that if I fail to pay my account the University may refer my delinquent account to a collection agency. I further understand that I am responsible for paying the collection agency fee which may be based on percentage, at a maximum of 40% of my delinquent account, together with all costs and expenses, including reasonable attorney’s fees, necessary of the collection of my delinquent account. Finally, I understand that my delinquent account may be reported to one or more of the national credit reporting bureaus.

Signature _____ Date _____

ALL FORMS AND DOCUMENTATION MUST BE RECEIVED NO LATER THAN 5 P.M. MOUNTAIN TIME ON NOVEMBER 8, 2019

Drop off, fax, or mail this form to:

**UNM HR Service Center
Attention: Benefits Department
MSC 01 1220, Suite 1400
1700 Lomas Blvd. NE, Albuquerque, NM 87131
505-277-MyHR (6947)
FAX 505-277-2278**

UNM HR Service Center is located in the John & June Perovich Business Center at 1700 Lomas Blvd NE, Suite 1400 on the corner of Lomas and University Boulevard in Albuquerque, New Mexico, 87131.

IMPORTANT: If changing to AARP plans, *both* the AARP 2019 Medicare Supplement and AARP MedicareRx PDP enrollment kits must be received by UnitedHealthcare **no later than 3 p.m. Eastern Time on December 7, 2019.**

UNM Retirees and dependents who fail to meet this deadline will permanently lose UNM’s contribution to premiums and the ability to participate in UNM’s Medicare-eligible Open Enrollment in future.

Note: Plan F is only available to eligible applicants with a 65th birthday prior to 1/1/2020 or with a Medicare Part A effective date prior to 1/1/2020.