

Retiree Frequently Asked Questions

- 1. Do I have to meet with a representative from Human Resources when I plan to retire? Yes, you must contact Norma Gonzalez, Benefit Specialist, at 915-521-7580 to make an appointment to discuss your retiree benefits. You will receive enrollment instructions on how you can continue your benefit plans.
- 2. What are the eligibility requirements for continuing health insurance/prescription drug coverage in retirement?
 - 20 years of service at either (UMC hospital/clinics), El Paso First Plans or UMC Foundation and retired after January 1, 2017.
 - Eligible to retire according to TCDRS rules.
 - Full time or part-time associates who retiree while covered under UMC medical benefit plan for 5
 continuous years and currently participating on Preferred Administrators health benefit plan at
 time of retirement.
- **3. Will my current benefits and network change?** No, your current benefits will not change up to the current fiscal year. Your network will remain the same.
- **4. Will I be able to add my spouse and dependents on the retiree plan?** Yes, you will be able to add your spouse and dependents up to when the associate turns 65 or receives Medicare. Spouse and dependents will then be offered COBRA.
- **5. Will my dental and vision care benefits continue in retirement?** Yes, if you elect to continue to pay the dental and vision premiums.
- 6. Will I receive a new health insurance identification card after I retire? Yes, you will receive a new ID card.
- 7. How will I pay for my retiree health insurance/prescription drug coverage? You will pay your premiums directly to Preferred Administrators and your payment will need to be done by an authorization agreement for direct payments (ACH). Your payments will no longer be withdrawn from your pay check and cannot be withdrawn from your retiree payment.
- 8. If I were to pass away, can my covered spouse continue to receive retiree health insurance coverage under my plan? No, the retiree coverage will terminate, however your spouse and dependents will be offered COBRA.
- 9. Can I change my health insurance plan after retirement? You can terminate your retiree coverage at any time, however it will not be offered again in the near future. You can make changes on your health insurance plan during open enrollment or when you have a qualifying event.
- 10. Does my retiree health insurance coverage change when I, or my covered dependent, reaches age 65? Yes, when you and/or your covered dependent reach age 65, you must apply for Medicare B. Approximately three months before you and/or your covered dependent reach age 65 or, within 3 months of your retirement date at age 65 or older, contact your local Social Security Administration. Retiree benefit will be terminate once retiree receives Medicare.