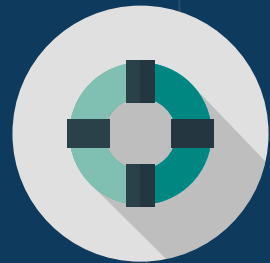


THE GEORGE WASHINGTON UNIVERSITY

Retirement Planning Guide



Benefits

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Introduction

The purpose of this guide is to provide necessary information to benefits eligible faculty and staff who are beginning to consider, or are currently in the process of planning, retirement from the George Washington University.

In this guide, we will delve into a general overview of what happens to benefits at retirement, including information on continuation of coverage through GW, and provide a timeline to help simplify the process of retirement planning.

Specific information on GW retiree benefits – including coverage options and premium rates – may be found in the Retiree Open Enrollment Guide, available at <https://benefits.gwu.edu>.

In addition to reviewing the information in this guide, you should consult directly with insurance carrier representatives, the Social Security

Administration and Medicare, as applicable, for more comprehensive information regarding your benefits. Contact information for benefit carriers and agencies are provided on page 20.

***Please note:** The information in this guide is not intended to advise you on which particular retirement choices are most appropriate for you and your family. Those decisions should be made by you, in consultation with your family and financial advisors.*

Are You Eligible to Retire?

GW faculty and staff are eligible for retirement under the following circumstances:



Reach **age 65**
(no minimum service
requirement)



Reach **age 60**, with a
minimum of **10 years**
of continuous full-time
service



Reach **age 55**, with a
minimum of **20 years**
of continuous full-time
service





Retirement Timeline

Did You Know?

As an active employee, beginning the **year** you turn age 50, you are eligible to make a "catch-up" contribution of \$6,000 to GW's 403(b) Retirement Plan. If you participate in the GW Health Savings Plan (HSP) and have a Health Savings Account (HSA), the **year** you turn age 55, you become eligible to contribute an additional \$1,000 HSA catch-up contribution.

**Age
59 ½**

You are eligible for in-service withdrawals from your 403(b) Retirement Plan account and from any matching contributions in your 401(a) Retirement Plan account.

**Age
62**

You are eligible for in-service withdrawals from any base contributions in your 401(a) Retirement Plan account.

**Age
64 + 8
mos**

You are eligible to apply for Medicare. If you are still working for GW and covered under a GW medical plan, you do not have to enroll in Medicare until you plan to retire.

**Age
70 ½**

If you are no longer working for GW, you must begin taking Required Minimum Distributions (RMDs) from your 403(b) and 401(a) retirement accounts.

**Approx. 90 days
before retirement**

Make an appointment with your retirement investment representative to clarify any questions you may have about your retirement accounts, including current fund allocation, accumulated balances and distribution options.

If you are retiring at age 62 or older: Contact your local Social Security and Medicare offices to arrange for the start of your Social Security Retirement Income. You may call to request an appointment at **1 (800) 772-1213**. Informational booklets and a local office locator may be found on the Social Security Administration website at www.ssa.gov.

Staff members: Inform your supervisor of your approaching retirement.

Faculty members: Contact Faculty Personnel or your Department Chair to discuss your approaching retirement.

What Happens to Benefits at Retirement?

The George Washington University offers a wide variety of benefits and programs to support faculty and staff during their employment at the university. Some of these benefits will be discontinued upon retirement, while others will continue throughout the retirement years.





Important!

Please see the **Retirement Timeline** on page 5 to learn more.



Retirement Plans

GW and employee contributions to the retirement plans ends upon retirement from the university. Prior to your retirement, you should contact your investment provider(s) to request an analysis of the payment options available to you upon retirement, as well as any necessary forms for distribution. Rules regarding the transfer or withdrawal of retirement funds vary. You should consult with your provider(s) for more information.

Investment representatives with Fidelity Investments, TIAA and The Equitable will provide you with the necessary forms that you must complete in order to begin receiving your retirement funds. Upon request, they may also provide you with illustrations of the options available to you at retirement.

In most cases, your investment provider(s) will be able to complete your distributions without additional authorization from GW Benefits. Please return completed forms to your provider(s) for processing; include the entire form (not just the signature page). If you have questions regarding how to complete the distribution form, please contact the appropriate investment representative. Allow two to three days for processing by the provider.

If you need additional assistance, please contact GW Benefits.



Medical, Dental and Vision Insurance

Coverage under group medical, dental and vision insurance ends on the last day of the month in which you retire. For example, if you retire on May 15, your active medical, dental and/or vision coverage will continue until May 31. At the time of your retirement, you, your spouse/domestic partner and eligible dependents who are currently covered under your active plan(s) will have the option of continuing coverage via GW's retiree medical, dental and vision plan offerings. If you elect not to continue your medical coverage at the time of retirement, you will **not** be eligible to participate in the GW retiree medical coverage offerings in the future. For more information on retiree health plan benefits, please see the Continuation of Medical, Dental and Vision Insurance section on page 13.

***Please note:** You will receive a COBRA notice from PayFlex for your medical, dental and vision plans upon termination of employment with GW. If you are planning to continue medical, dental and/or vision benefits under the GW retiree benefit offerings, you may disregard this COBRA notice.*

Castlight

Complimentary access to the healthcare transparency tool Castlight ends upon retirement from GW.

Health Savings Account

After retirement, you may continue to access your Health Savings Account (HSA) funds, tax-free, to pay for medical expenses and premiums for yourself and eligible dependents. ***Note:** As a GW Retiree Health Savings Plan participant, you may continue to contribute to an HSA as long as you meet certain criteria.*



Flexible Spending Accounts

Participation in Flexible Spending Accounts (FSAs) ends on your last day of employment at GW. If you are retiring this year, claims for eligible expenses incurred prior to your retirement date must be submitted to PayFlex by April 30 of next year.

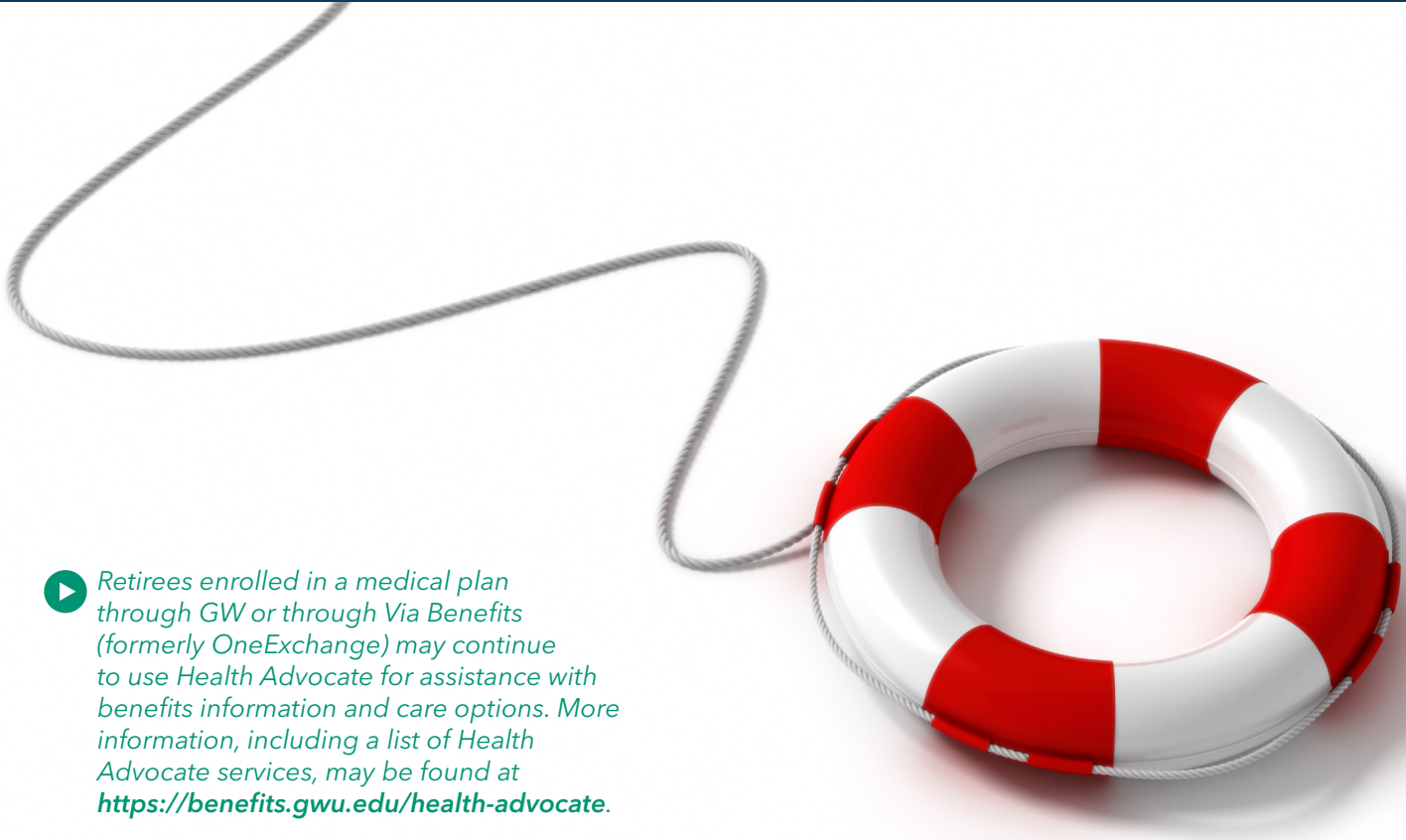
You may continue participation in the **Health Care FSA (HCFSA)** during retirement through COBRA for the remainder of the plan year in which you retire; however, payments (including an administrative fee) will be on an after-tax basis. **Note to COBRA participants who pay HCFSA premiums for the full calendar year:** Funds remaining in the HCFSA as of December 31 will carry over and be available for use until March 15 of the following year (known as the 75-day FSA grace period).


The **Dependent Day Care FSA (DCFSA)** cannot be continued after retirement. However, DCFSA participants may submit claims for eligible expenses incurred prior to December 31 of the year they retire, up to the contributed amount, regardless of retirement date.

Health Advocate

Health Advocate is a GW-paid benefit that provides assistance with resolving healthcare and insurance issues. As a retiree, the service continues to be available to you, your spouse/domestic partner, eligible dependents, parents and parents-in-law, as long as you are covered under a GW retiree healthcare offering. As a current or prospective retiree, Health Advocate can help you:

- Define eligibility for pre- and post-65 retirement situations, including coordination of benefits, plan comparison and information about Medicare, Medicare Advantage and GW healthcare offerings.
 - Clarify insurance plan(s) and help you decide which plan is right for you.
 - Locate care facilities and support resources.
 - Address healthcare concerns, including finding in-network providers, arranging appointments and explaining your doctor's instructions.
-



 *Retirees enrolled in a medical plan through GW or through Via Benefits (formerly OneExchange) may continue to use Health Advocate for assistance with benefits information and care options. More information, including a list of Health Advocate services, may be found at <https://benefits.gwu.edu/health-advocate>.*

Life Insurance

Basic Accidental Death and Dismemberment Insurance

Basic Accidental Death and Dismemberment (AD&D) ends on your last day of employment at GW and is not available after retirement.

Basic Life Insurance

At retirement, your Basic Life Insurance benefit amount will reduce, and continue to reduce annually, until it reduces to \$2,500.

- **On your date of retirement**, life insurance coverage is reduced to **80%** of the life insurance in effect on your last full day of active employment (rounded up to the nearest \$1,000).
- **On July 1 following or coinciding with the anniversary of retirement**, life insurance coverage is reduced to **60%** of the life insurance in effect on your last full day of active employment (not rounded), or \$2,500 if age 70.
- **On July 1 following or coinciding with the second anniversary of retirement**, life insurance coverage is reduced to **40%** of the life insurance in effect on your last full day of active employment (not rounded), or \$2,500 if age 70.
- **On July 1 following or coinciding with the third anniversary of retirement**, life insurance coverage is reduced to **20%** of the life insurance in effect on your last full day of active employment (not rounded), or \$2,500 if age 70.
- **On July 1 following or coinciding with the fourth anniversary of retirement**, life insurance coverage is reduced to **\$2,500**.

Example 1: An employee with a life insurance benefit of \$104,000 prior to retirement at age 60.

- On employee's date of retirement, life

insurance benefit reduces to \$84,000.

- On July 1 following the first anniversary of retirement, life insurance benefit reduces to \$62,400.
- On July 1 following the second anniversary of retirement, life insurance benefit reduces to \$41,600.
- On July 1 following the third anniversary of retirement, life insurance benefit reduces to \$20,800.
- On July 1 following the fourth anniversary of retirement, life insurance benefit reduces to \$2,500.

Example 2: An employee with a life insurance benefit of \$104,000 prior to retirement at age 68.

- On employee's date of retirement, life insurance benefit reduces to \$84,000.
- On July 1 following the first anniversary of retirement, life insurance benefit reduces to \$62,400.
- On July 1 following the second anniversary of retirement - when employee is now 70 years old - life insurance benefit reduces to \$2,500.

***Please note:** Age reduction provisions also apply for active employees age 70 and older. Please see the life insurance certificate for details, and review your current benefit confirmation statement available at go.gwu.edu/easyenroll.*

Premiums for retiree Basic Life Insurance are fully-paid by GW. Premiums paid by GW for benefits in excess of \$50,000 are considered imputed income, and are taxable to active employees and retirees; this is reported on the W-2 form each year. Once you are retired, GW will generate and mail to you a special W-2 for purposes of reporting this benefit.

Please note: Upon retirement, you must complete a new life insurance **Beneficiary Designation form**, available at benefits.gwu.edu/benefits-forms. Please submit the completed form to GW Benefits by faxing it to (571) 553-8385 or emailing it to benefits@gwu.edu.





Optional Life and AD&D Insurance

Optional AD&D insurance ends on your last day of employment at GW and is not available after retirement.

If you elected Optional Life Insurance for yourself or for members of your family, you are eligible upon retirement to apply for portability of your coverage up to (but not more than) the amount of life insurance in effect on your date of retirement. You must submit a portability form to Liberty Mutual **within 31 days** of your retirement date; otherwise, your coverage will end on your last day of employment at GW. Forms, which vary depending on state of residence, may be found online at www.mylibertyconnection.com (when registering, please reference company code **GWUEE**).

Disability Insurance

Voluntary Short-Term Disability and GW Paid Short-Term Disability

Coverage for Voluntary Short-Term Disability (VSTD) and GW Paid Short-Term Disability (STD) ends on your last day of employment at GW and is not available after retirement.

Basic Long-Term Disability and Long-Term Disability Buy-Up

Basic Long-Term Disability (LTD) coverage provided by GW to full-time faculty and staff ends on your last day of employment at GW; you will not be covered for any disability that arises after this date. Similarly, if you elected the LTD Buy-Up option, coverage will end on your last day of employment at GW, and any disability that arises after this date will not be covered.

A note to current recipients of LTD benefits: Faculty and staff who are disabled and receiving benefits under the group LTD plans provided by GW may continue to receive payments past retirement age, depending on the date of disability. However, your disability payments may be offset by some portion of your retirement benefits. For more information, please contact GW Benefits at **(571) 553-8382**.



Tuition Benefits

Following retirement from GW, retirees **of any age** with **more than 10 years** of full-time equivalent service retain tuition remission benefits for themselves, spouses/domestic partners and eligible dependent children who were dependents at the time of retirement.*

Following retirement from GW, retirees **age 65 and older** with **less than 10 years** of full-time equivalent service retain tuition remission benefits for themselves, spouses/domestic partners and eligible dependent children who are already using the benefit at the time of retirement.*

Levels of benefit coverage are based on the retiree's initial date of regular employment at the university and their years of service credit. Eligible dependents of retirees may also participate in the Tuition Exchange Program on a space-available basis.

*Dependents acquired after retirement are not eligible for tuition remission benefits.

Legal Plan

Participation in the Legal Resources plan ends on the last day of the month following your retirement date. Legal Resources will send you information for continuing coverage **within 45 days** of your retirement date. If you choose to continue coverage, please send your completed election form with payment directly to Legal Resources.

Accrued Leave

For staff, all accrued but unused annual leave will be included in your final paycheck. Faculty will not receive payment for unused leave.

Accrued sick leave is not paid out upon retirement for faculty or staff.

Continuation of Medical, Dental and Vision Insurance

While coverage under GW's active group medical, dental and vision plans end on the last day of the month in which you retire, you may be eligible to continue coverage of these benefits through the university retiree benefits program. Available retiree benefit options are dependent upon age at retirement.

Please note: You must be enrolled in an active group medical plan at the time of retirement in order to be eligible for the retiree medical plan offerings. If you do not elect to continue GW medical coverage at the time of retirement, you will not be able to enroll in any GW healthcare offering in the future.



For Retirees and Dependents Under Age 65



Medical Benefits

Retirees (and eligible dependents) who are under age 65 and enrolled in a GW medical plan at the time of retirement are eligible to enroll in group medical coverage through the GW Retiree Health Savings Plan (HSP), offered through UnitedHealthcare (UHC).

The GW Retiree HSP has the same features as the GW HSP (for active employees), and is designed to give you freedom and flexibility. The plan covers in- and out-of-network services, and is bundled with prescription drug coverage through CVS Caremark.

If you enroll in the GW Retiree HSP, you are also eligible to open a Health Savings Account (HSA) at any institution you choose. An HSA allows you to make tax-deductible contributions to an account that may be used to pay for eligible medical expenses, such as premiums, copayments, deductibles and other out-of-pocket costs.

Note: If you reach age 65, become permanently disabled or pass away, the funds in your HSA can be withdrawn for any reason without penalty, but normal income taxes will apply.



Find a Physician or Facility

UHC has one of the largest networks in the nation, with 843,000 doctors and health professionals; 133,000+ UnitedHealth Premium® Care Physicians; 5,640 hospitals; 2,220+ Convenience Care Centers and 965 Centers of Excellence. The UHC network is available in 96 percent of all U.S. counties and is designed to help meet your unique healthcare needs. Almost anywhere you are in the country, you will be able to find a network provider or facility and receive the same benefit coverage level that you would find at home.

To locate a physician or facility, visit www.myuhc.com and select "Find a Doctor." If you are asked to select a plan, please select "UnitedHealthcare Choice Plus."



Dental and Vision Plans

In order to be eligible to continue dental and/or vision plans through GW at the time of retirement, you must already be enrolled in the plan(s) through the university. If a retiree was not enrolled in dental/vision at the time of retirement, but later wishes to enroll, he/she must wait until the next Open Enrollment period to do so. Retirees who elect to continue GW group dental and/or vision coverage will be billed monthly by PayFlex, a contracted university service provider.



Changing Plan Options

Retirees may reduce their coverage option (for example, change from family to two-party coverage, or from two-party to individual coverage) at any time. However, changes to increase coverage may only be made during Open Enrollment, or within 30 calendar days of a Qualified Life Event (QLE). Examples of QLEs include change in marital status, change in spouse/domestic partner work status or coverage, etc.



Open Enrollment

Retirees will be notified of changes in benefit plans offered by the university – including changes in rates, coverage or services – in advance of scheduled Open Enrollment periods. Open Enrollment generally takes place in October or November, and most changes made during Open Enrollment go into effect on January 1 of the following year. Remember, during Open Enrollment, you may increase coverage to a two-party or family plan.

For Retirees and Dependents Over Age 65



Medical Benefits

Retirees (and eligible dependents) who are over age 65 and covered under a GW medical plan at the time of retirement are eligible to enroll in the individual medical and pharmacy plans offered through Via Benefits (formerly OneExchange), a private Medicare Exchange. If you or your dependents turn 65 and are eligible, Via Benefits will contact you directly, provide medical plan options and plan details/premiums and assist you with the enrollment process.

Please note: *You must contact the Social Security Administration regarding your eligibility for Medicare benefits. Via Benefits cannot assist you with enrolling in a medical plan until you are enrolled in Medicare Parts A and B (please see page 17 for more information on Medicare benefits).*

Via Benefits will guide your transition to individual Medicare supplemental medical/pharmacy coverage. Via Benefits has been specifically chosen by GW to help retirees based on its expertise in helping Medicare-eligible retirees find and enroll in supplemental coverage in the Medicare individual market.



Finding a Physician or Facility

Via Benefits will assist you with finding a supplemental plan that your current providers participate in. You should also check with your providers to make sure that they accept Medicare.



Dental and Vision Plans

In order to be eligible to continue dental and/or vision plans through GW at the time of retirement, you must already be enrolled in the plan(s) through the university. Retirees who elect to continue GW group dental and/or vision coverage will be billed monthly by PayFlex, a contracted university service provider. If a retiree was not enrolled in dental/vision offered by GW at the time of retirement, but wishes to enroll, he/she must wait until the next Open Enrollment period to do so or he/she may enroll in coverage through Via Benefits.

Retirees are eligible to enroll in dental and/or vision plans through the Via Benefits exchange, regardless of whether or not they were covered at the time of retirement. Retirees who elect dental and/or vision coverage through Via Benefits will be billed directly by their selected provider.



Open Enrollment

For retirees enrolled through Via Benefits, Open Enrollment takes place every year from **October 15 to December 7**. During this period, retirees on the exchange may investigate other Medicare supplemental plans and enroll in a different plan, if they wish. However, after initial enrollment, a retiree's health status may limit the plans available to him/her. Retirees are able to enroll in a Medicare Advantage plan without having to worry about pre-existing conditions, but may be subject to medical underwriting when switching to a Medigap plan at a later date. For more information on Medicare Advantage and Medigap, please see page 19.



COBRA Coverage

Federal Regulations (COBRA) requires that GW notify you of your right to continue group health coverage through the university upon termination. Therefore, you will receive a COBRA notification from PayFlex via mail at the time of retirement. If you elected to continue your coverage through the university retiree benefits program, you may ignore the COBRA notice.

In the event that your spouse/domestic partner or dependent child becomes ineligible to participate in the university group health plan due to divorce, legal separation, age or student status (in the case of dependents), they may continue participation in the university group health plan under COBRA. If one of these events occurs, you must notify GW Benefits **within 60 days** of the event in order to maintain COBRA eligibility.

COBRA provides continuation of coverage rights for spouses/domestic partners and dependents for a **maximum of 36 months**. During the period of COBRA coverage, participants are responsible for paying the entire cost of the insurance premium, as well as an administrative fee. GW's COBRA program is administered through PayFlex. More information is available from GW Benefits.

Continued Coverage Upon a Retiree's Death

In the unfortunate event that a retiree dies, group health coverage may be continued for the spouse/ domestic partner and dependents. The spouse/domestic partner may continue coverage on the plan indefinitely, while the dependents may continue coverage as long as they meet the requirements of a dependent (after which they would be eligible for COBRA coverage).



Medicare Benefits

The Medicare Program is comprised of three parts: **Part A**, **Part B** and **Part D**. You become eligible for Medicare at the beginning of the month in which you turn 65, regardless of whether you are retired or still working. If you are still working and are covered under a GW group medical plan as an active employee, you may defer enrollment in Medicare Parts A, B and D until retirement.

The Social Security Administration will notify persons who are approaching age 65 of eligibility for benefits.

What is Covered

Medicare Part A - Pays part of the cost of hospitalization, certain related inpatient care, skilled nursing facility or psychiatric hospital care, home health services, hospice care and some durable medical equipment.

Medicare Part B - Pays for physician services,

physical therapy, diagnostic x-ray, laboratory fees, most outpatient services and certain related services.

Medicare Part D - Helps with the cost of prescription drugs.

Enrollment

Medicare Part A - Once you have applied (and your eligibility has been confirmed) for Social Security, you are automatically enrolled in Part A.

Medicare Part B - Enrollment in Part B is optional, and you are not automatically enrolled in Part B when you become entitled to Part A. You must contact Medicare to enroll in Part B. If you are still employed at age 65, Medicare will allow you to defer enrollment in Part B until you terminate employment or waive plan coverage through GW.

A **penalty** equal to 10 percent of the premium applies for each 12-month period after you are

first eligible for, but not enrolled in, Part B. The penalty amount will be added to subsequent premiums. You may defer enrollment past age 65 without penalty if you are still employed and participating in GW's group health plan, or if your spouse is an active employee and you are covered under his/her group plan. Upon retirement, persons who wish to enroll in Part B must notify the Social Security Administration. You should notify Social Security **at least 90 days** prior to your retirement in order to allow sufficient time to process coverage by the effective date of your retirement (to avoid the 10 percent penalty to future premiums).

Medicare Part D - Enrollment in Part D is optional. If you are covered under the GW Retiree HSP, which includes prescription coverage, you may delay your enrollment in Part D until you terminate employment at or waive your coverage through GW, without incurring any penalty.

Cost

Medicare Part A - Provided at no additional cost to you.

Medicare Part B - Financed by monthly premiums from program enrollees and general revenue from the federal government. These premiums are ordinarily deducted from any Social Security benefits you receive.

If you choose not to enroll in Part B when first eligible, you may have to pay a higher premium once you do enroll. You will pay 10 percent more for each full 12-month period that you did not participate due to reasons given above. The 10 percent penalty begins on your 65th birthday (unless you are covered under an active medical plan), and is cumulative. Those who have waived enrollment in Part B by virtue of enrollment in another health plan will not be subject to the 10 percent penalty.

Medicare Part D - Financed by monthly premiums from program enrollees and general revenue from the federal government. These premiums are ordinarily deducted from any Social Security benefits you receive.

Premiums for Part B and Part D are calculated based on the recipient's income from the two years prior. Therefore, if you sign up in 2018, your premiums for 2018 will depend on your income from 2016 to 2018. For more information about

premiums, please visit www.medicare.gov.

Limitations in Coverage

Medicare does not provide complete health protection, and coinsurance and deductibles apply to many covered services. In some cases, the cost of deductibles and coinsurance payments may be substantial. For example, Medicare generally does not cover charges for expenses that occur outside of the U.S. or its territories.

Medigap Insurance

Medigap policies are only available for Medicare participants. These voluntary contributory private insurance plans are available to cover the cost of deductibles, coinsurance payments and other charges not covered under Medicare. Medigap insurance plans are regulated by federal and state law and must be clearly identified as Medicare supplemental insurance.

Retirees generally enroll in Medigap policies when Medicare serves as the sole provider of medical services and there is no secondary insurance policy to cover unpaid medical expenses. Federal law prohibits issuing duplicate coverage to Medicare beneficiaries, even if a combination of policies would pay full benefits.

There are 10 different types of Medigap plans, each with a letter designation ranging from the basic plan, "A," to the most comprehensive plan, "F." The plans are standardized to ensure that insurance carriers provide the same combination of benefits for each lettered plan, regardless of which plans are made available. All Medigap insurance carriers are required to offer at least the basic plan, "A."

If you are age 65 or older, state and federal laws guarantee that for a period of six months from the date you first enroll in Medicare Part B, you have a right to buy the Medigap policy of your choice. You cannot be denied Medigap insurance within this time period.

Medicare Advantage vs. Medigap

A Medicare Advantage plan is a Medicare Part C plan. There are several types of Medicare Advantage plans available, including: Health Maintenance Organization (HMO), Preferred Provider Organization (PPO), Private Fee-for Service (PFFS) and Special Needs Plan (SNP).

A Medigap plan, also called a Medicare Supplement plan, helps pay the difference between what original Medicare (Medicare Parts A and B) pays and what you pay out-of-pocket. There are 10 different Medigap coverage options to choose from. Plans are labeled A, B, C, D, F, G, K, L, M and N.

A comparison chart is provided below.

	Medicare Advantage	Medigap/Medicare Supplement
Eligibility	Must have original Medicare, Parts A and B, and live within the plan's service area.	Must have original Medicare, Parts A and B.
Costs (premiums, copayments, coinsurance, out-of-pocket maximums)	Costs vary by state. Typically, you will pay a copayment for most medical services. Plans have an out-of-pocket annual maximum. You will also still need to pay your Part B premium.	Premiums can vary with gender and health, and may increase with age. Premiums for the same plan may differ from company to company. Generally, there are no copayment costs for Medicare-covered services at the time of service, and no out-of-pocket maximum.
Provider choice and availability	HMOs and PPOs maintain provider networks. They must have available Medicare-assigned providers in order to accept new members. HMOs generally cover in-network providers only, and referrals may be required for specialist visits. PPOs cover out-of-network providers, but costs may be higher. In a PPO, referrals are usually not required when you need to see a specialist. PFFS plans have no provider network, and it may be difficult to find providers that accept them in some areas.	You may go to any doctor or healthcare provider that accepts Medicare. Referrals by your primary care doctor are usually not required to see a specialist. It may be difficult to find providers accepting Medicare Parts A and B in some areas.
Prescription drug coverage	These plans generally include prescription coverage.	Not included. If you want drug coverage, you will need to enroll in a Medicare Part D prescription drug plan.
Extras	Some Medicare Advantage plans include routine dental and vision coverage.	Plans typically cover the "gap" in what Medicare Parts A and B cover, such as copayments and deductibles. Some plans cover medical care when traveling outside the U.S.

Contact Information

Who to Call	Contact Information	Plan Information (if applicable)
Medical		
UnitedHealthcare	Customer Service: 1 (877) 706-1739 • www.myuhc.com Nurseline: 1 (800) 846-4678	Group #730193
Via Benefits (formerly OneExchange)	1 (855) 232-5748	
Dental		
Aetna	1 (877) 238-6200 • www.aetna.com	Group #622758
Via Benefits (formerly OneExchange)	1 (855) 232-5748	
Prescription Drug		
CVS Caremark	1 (877) 357-4032 • www.caremark.com FastStart for maintenance prescriptions: 1 (800) 875-0867	Group #RX6475
Via Benefits (formerly OneExchange)	1 (855) 232-5748	
Vision		
UnitedHealthcare Vision	Customer Service: 1 (800) 638-3120 Provider Location: 1 (800) 839-3242 www.myuhcvision.com	
Via Benefits (formerly OneExchange)	1 (855) 232-5748	
Enrollment Process, Premiums and Billing		
PayFlex	1 (800) 359-3291 • www.payflex.com	
Via Benefits (formerly OneExchange)	1 (855) 232-5748	
Flexible Spending Accounts (FSAs)		
PayFlex	1 (800) 284-4885 • www.payflex.com	
PayFlex (for COBRA)	1 (800) 359-3921 • www.payflex.com	
Health Savings Account (HSA)		
PayFlex	1 (800) 284-4885 • www.payflex.com	

Contact Information

Who to Call	Contact Information	Plan Information (if applicable)
Retirement Plans		
Fidelity Investments	https://benefits.gwu.edu/retirement-savings	
TIAA	1 (800) 343-0860 • www.netbenefits.com/gw	
The Equitable	1 (800) 842-2776 • www.tiaa.org/gwu	
	1 (800) 248-2138 • www.equitable.com	
Legal		
Legal Resources	1 (800) 728-5768 • www.legalresources.com	
Basic and Optional Life and Accidental Death and Dismemberment (AD&D) Insurance		
Liberty Mutual	1 (888) 787-2129	
Other		
Health Advocate	1 (866) 695-8622 • healthadvocate.com/gwu	
Tuition Programs	(571) 553-8382	
Social Security Administration	www.ssa.gov	
Medicare	www.medicare.gov	





Benefits