

N.A.R.S.E. Mailing Address:
8700 W. Bryn Mawr, S-800 South
Chicago, IL 60631-3507
Visit Our Web Site for News:
<http://www.narse.org>

National Association of Retired Sears Employees, Inc.

STRAIGHT TALK

Volume 11, Issue 2

November 2007

Representing the interests of all Sears Retirees nationwide. Dedicated to the preservation and protection of their retirement benefits.

Retirees With Sears Medical

YOU MUST ENROLL NOW FOR 2008 SEARS MEDICAL

All Sears retirees who have not cancelled or suspended their Sears medical coverage have already received or will be receiving shortly their 2008 Sears Medical Enrollment Kit. This kit will provide details about the Sears Retiree Health Access (RHA) program for next year, including your benefit options and premiums. It will also provide a new toll-free phone number for retiree assistance.

If you have received your October 12, 2007 letter from Sears Holdings Benefits Department, or attended one of the 18 Sears Holdings & Aetna Medicare Information meetings held around the country, you know that for 2008 and several years beyond, Aetna will be the primary insurance carrier under the RHA program. This applies to both Sears and the 20-plus companies tied in with RHA.

If you attended any of the informational meetings, a question most likely asked was "What are the premiums?" Unfortunately, neither Sears nor Aetna could or would answer that key question. You will not know the 2008 premiums until you receive your Medical Enrollment Kit from Sears.

The location for these medical informational meetings was selected based

upon where there was a higher concentration of retirees enrolled in the RHA program. However, we have been told that at most of these meetings, attendance was much lower than expected.

SPECIAL EDITION

Since the Sears 2008 Medical Enrollment period is upon us, N.A.R.S.E. is publishing a Special Edition of **STRAIGHT TALK** to explain and hopefully assist you in this very important medical decision. As a special benefit, this edition is only being sent to paid N.A.R.S.E. members. In this edition you will find enrollment dates for the Sears Plans and also information about Medicare's on-line tool, the PLAN FINDER that will make it easier for you to navigate through all of the Part D choices for 2008.

We would like to know when you received your enrollment package. Please send an e-mail to N.A.R.S.E. at cro922@comcast.net and tell us the date you received your Sears enrollment package and what state you reside in.

If you have not done so yet, **please renew your N.A.R.S.E. membership now for 2008.** An application form and mailing envelope is enclosed. We need your support—both moral and financial—to continue representing the interests of all Sears retirees nationwide!

ENROLLMENT PERIODS

November 19-30 (also known as Wave One) is your enrollment period if you live in the states of AK, CA, CO, CT, DE, HI, IA, ID, IL, IN, KS, MA, ME, MI, MN, MO, MT, ND, NH, NJ, NY, OH, OR, RI, SD, UT, VT, WA, WI, and WY. Sears has said that the mailings for Wave One will begin on Wednesday, November 14.

Continued on page 2

This issue of **STRAIGHT TALK:**

2008 Sears Enrollment Plans p. 1
Prescription for Medical Part D p. 3
Suspend—Do Not Cancel! p. 4

The Independent National Voice of Local Sears Retiree Clubs and Sears Retirees Everywhere

Enroll Now *Continued from page 1*

November 26–December 7 (also known as Wave Two) is your enrollment period if you live in AL, AR, DC, FL, KY, LA, MD, MS, NC, NE, NM, NV, OK, PA, SC, TN, TX, VA, WV, Puerto Rico, Guam and the U.S. Virgin Islands. Sears has said that the mailings for Wave Two will begin on Thanksgiving, November 22.

Unlike the U.S. Department of Health and Human Services, which permits you to change your Medicare prescription drug coverage for 2008 until December 31, 2007, Sears, and or Aetna, has decided to provide only a two-week enrollment window for each of its medical enrollment “waves.”

During these extremely short periods of time, the first of which covers the Thanksgiving holiday period, you must decide what plan is best for you, are all of your medications on the plan formulary you are considering, will your health care provider agree to bill Aetna, and can you afford the premium!!

PREVIEW OF 2008 RHA

As said above, Aetna will be the primary insurance carrier under RHA for 2008. **According to Sears**, the new Aetna RHA program offers some of the following advantages:

- RHA will offer an **integrated approach to Medicare benefits** through a Medicare Advantage **Private Fee for Service (PFFS)** program that includes Medicare Part A and B as well as additional coverage. By integrating Medicare benefits under Aetna, you will be able to access care through one insurance carrier. This will include claim filing and information, billing, and ID cards.
- You will have the freedom to “build your own” health care plan for

each Medicare-eligible individual. You can choose coverage that best fits each person’s individual needs. Presently, Medicare-eligible individuals within the same family must all elect the same option.

- Under all of the Aetna medical plan options, preventive care—such as routine exams and cancer screenings—will be covered at 100% with no deductibles or co pays required. PPO and HMO plan members must visit in-network providers for 100% preventive care coverage.
- All Aetna medical options will cover routine eye and hearing exams.
- You will have special rates on vision care, alternative healthcare, fitness memberships and equipment.
- The Aetna PFFS plan options do not have a lifetime maximum benefit. This means there is no dollar limit on the benefits the plan pays over a covered person’s lifetime.
- Aetna’s network of doctors, hospitals and other health care providers has more than 462,000 primary care doctors and specialists and 4,700 hospitals. This, according to Sears, means you can find network providers close to where you live, and when you need care away from home.
- Aetna also has a large network of more than 57,000 retail pharmacies, including most national pharmacy chains and many local pharmacies.

AARP IS OUT FOR SEARS

The AARP Medical Supplement plans will not be a part of RHA for 2008. Thus, no Sears subsidy will be provided for an AARP plan. If you currently receive a subsidy payment from Sears Holdings in the form of a credit, and the credit is applied toward your AARP premium,

you will need to enroll in a different option under the RHA in order to continue receiving your subsidy for 2008. This is all more fully explained in your enrollment kit.

We have been told that if you decide not to continue your coverage in AARP, you must contact AARP to disenroll for 2008. Otherwise, you will continue to receive a bill from AARP.

WHAT DO I DO?!

First, review the materials in your Sears enrollment kit. If you need help, ask a family member or trusted friend to walk you through all of your options. But remember, Sears has given you only a short two-week period of time to make your 2008 medical plan decision.

If you want to review the non-Sears RHA options, then please read the article beginning on page 3 in this issue entitled “PRESCRIPTION FOR MEDICARE PART D.” Among other things, it reviews the history of Medicare Part D and walks you through Medicare’s online tool called the “PLAN FINDER” at www.Medicare.gov web site. It is about the only reasonable sane way to figure out what any particular plan will cost a participant for his/her specific drugs and dosages.

WE ASKED SEARS!

When we learned of the two-week enrollment periods, we contacted Sears and asked them the following question: “If the U.S. Department of Health and Human Services permits seniors to change their Medicare prescription drug coverage for 2008 until DECEMBER 31, 2007, why can’t Sears allow a longer enrollment period for their retirees? We have to believe that Sears and Aetna are more ef-

Continued on page 4

—STRAIGHT TALK—November 2007—

PRESCRIPTION FOR MEDICARE PART D

By Terry Savage

Editor's Note: *The following article appeared in the Monday edition, November 5, 2007, of the Chicago Sun-Times. It should assist in reducing the confusion in enrolling in Medicare Part D for 2008. Terry Savage is a registered investment advisor. Distributed by Creators Syndicate.*

“Attention seniors—and those who love them. Medicare Part D—the prescription drug program—is back again. From Nov. 15 through Dec. 31, there is a new “open enrollment” period for 2008 Part D coverage.

“So, here’s a reminder of how Medicare Part D works, along with a quick lesson in how to use the **Medicare.gov** “Plan Finder” tool to choose the plan that’s best for you.

“Medicare Part D is the federal government program started in 2006 to make sure that all seniors can get access to prescription drugs through a national insurance program, provided by private insurers. Since it is an insurance program, every senior must sign up, even if he is not currently taking prescription drugs, unless he is covered by a ‘creditable’ plan such as a workplace health insurance program or corporate retiree plan.

“Many seniors take no prescription drugs. Still, they need to sign up for the least expensive monthly plan, or face steep penalties when they do sign up in the future as they start taking necessary medications.

“Last year, Washington created the standards for what must be covered in Part D, but it allowed private insurance companies to compete on the structure of their plans as well as the prices and co-payments they

would charge. The result was a complicated challenge of comparing many variables, including the inexplicable ‘donut hole’ that eliminates coverage after a certain level, then reinstates it after the ‘catastrophic’ level of costs is reached.

“To make choices even more confusing, Washington also subsidizes Medicare ‘HMOs’ to include prescription drugs in their coverage. So, seniors could choose a ‘stand-alone’ Part D plan along with tradi-

tional Medicare Part A and B. Or they could choose an HMO, simpler and typically less expensive, but perhaps limited in the choice of physicians and services they might need in the future.

“But Medicare did one good thing that kept these choices from being incomprehensible. It created the online ‘Plan Finder’ tool at the **www.Medicare.gov** Web site. It is the only reasonably sane way to figure out what a plan will cost a participant for his specific drugs and dosages.

“Since all competing private plans offered by insurers must register their monthly premiums, individual drug costs, co-payments and approaches to dealing with that coverage gap, the Plan Finder tool miraculously allows users to instantly compare and choose the best coverage. To make best use of this tool, you’ll need to get your Medicare card. Then line up all your prescription bottles and dosages.

THE PLAN FINDER

STEP 1. Go to, **www.Medicare.gov**, and then click on the line that reads ‘Medicare Drug Plans 2008 Plan Data.’ On the next page, click on ‘Begin Personalized Search.’

STEP 2. On the next page you’ll have the task of entering your prescriptions, one by one. Since there are many versions of some drugs, be sure you enter the name exactly. Or search the drug list alphabetically. The plan finder will suggest a lower-cost generic drug if available.

Then be sure you have entered the correct dosage amount, and the

Continued on page 4

3 TIPS TO MAKE PLAN D PLANNING PAY OFF

“**DON’T WAIT** until the last minute to compare Part D plans. If you don’t have computer access or skills, call 1-800 MEDICARE now, before the phone lines get crowded. If the least-expensive plan is too expensive for you, contact the nearest Social Security office about the federal ‘Extra Help’ program.

“**MANY LOCAL** senior citizens centers offer help in the process of choosing the best plan. Even your nearby chain drugstore might offer useful advice, since it participates in most major Part D plans, and has access to your list of drugs.

“**FINALLY**, said Deane Beebe of **www.MedicareRights.org**, a Web site that also offers significant help in answering questions about Medicare Part D, when you do enroll, double check and get confirmation in writing that the plan does cover your drugs at the dosage levels you take, and find out if there are any restrictions.”

Enroll Now *Continued from page 2*

ficient than the government so can't the enrollment period be extended? If not, what is the company's rationale for the two-week periods?"

We have had no response from Sears as of our publication date. If a Sears response is forthcoming, it will appear on our web site at www.narse.org.

Prescription *Continued from page 3*

number of pills per day. Continue until you have entered all your drugs. (You can save your list of prescriptions at the site, to make it easier next time.)

STEP 3. On the next page, you can choose pharmacies in your ZIP code to make sure the plan you ultimately choose based on price is also convenient. Click once more, and you'll be amazed to see a list of all of the plans available in your area starting with the one that has the lowest total estimated annual cost based on your prescriptions.

If you're not taking any prescriptions now, then just choose the plan with the lowest monthly premium. But if you are planning to take medications all year long, you might care less about the monthly premium or annual deductible than about your total cost for the year.

The tool allows you to compare up to three plans, so you can see the differences. Then click on the name of the plan you choose to learn more details, including how to enroll.

It always amazes me that we ask seniors to do the most sophisticated decisions. But with a little help, seniors have proved they can do it. And that's the Savage Truth."

**National Association
Of Retired Sears Employees, Inc.**
8700 W. Bryn Mawr, S-800 South
Chicago, IL 60631-3507

Return Service Requested

PRESORTED
FIRST-CLASS MAIL
U.S. POSTAGE
PAID
Chicago, IL
Permit No. 227

SUSPEND—DO NOT CANCEL!

If after carefully reviewing all of your medical options for 2008 you decide to switch from a RHA plan to a non-Sears medical plan, what don't you do? **YOU DO NOT CANCEL YOUR SEARS COVERAGE! YOU SUSPEND YOUR SEARS COVERAGE!!**

Sears retirees were first allowed to suspend their participation in retiree medical benefits beginning in 1993. This suspension option allows retirees who have other medical benefits through another employer, or through their spouse's employer, to take advantage of the employer's lower cost medical coverage without losing their option for retiree medical through Sears.

Retirees may suspend their coverage at any time for this reason without any proof of other coverage. However, when the retiree

wishes to come back into the retiree medical through Sears they are required to provide proof that they had continuous coverage under a medical plan from the time they suspended their coverage to the time they are requesting enrollment in the retiree coverage. Additionally, the retiree must confirm that they are losing eligibility for their other coverage. The most common reason is that the retiree or their spouse no longer works for the company providing the coverage so they can no longer participate in their coverage.

Once the retiree suspends their participation in the retiree Sears medical coverage no additional action is required unless the retiree wants to resume Sears retiree coverage. They do not receive any election information each year and are not required to confirm their suspension status.