

Living power

For all who have made a living and now wish to make a life

2009 General Assembly Adjourns: Legislative Wrap-Up

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The General Assembly adjourned on Tuesday, August 11th, ending the 2009 Session that convened on January 28th. The last two weeks of the session were dominated by efforts to balance the proposed state budget with a package of tax increases that could both win approval in the House and Senate and meet the funding needs set out by the Governor.

The Appropriations Act of 2009 that was signed by the Governor on August 7th includes new taxes that will raise more than \$950 million in 2009-10. Barring any unforeseen emergencies that would require a special session, the General Assembly will convene again on May 12, 2010.

Any chance of pay raises for active employees and Cost-of-Living Adjustments for retirees evaporated as the projected state revenue shortfall grew steadily during the session. In the end, no group of state employees or retirees received any increase in salaries or pensions. Still, there were a number of positive actions taken by the General Assembly that will affect the stability of benefits enjoyed by state retirees.

Fixing the State Health Plan

The General Assembly addressed the financial problems of the State Health Plan early in the 2009 Session. However, there still were several issues related to the Plan, specifically the pharmacy benefits, that required attention in the days leading up to adjournment.

The financial problems of the State Health Plan were not the result of the recession, but the economic downturn made it more difficult for the legislature to find the resources needed to restore the stability of the Plan. The General Assembly ultimately approved legislation (Senate Bill 287) that used state appropriations drawn from the state's reserves, increases in monthly premiums for dependent coverage, and higher out-of-pocket costs for Plan members.

The approved legislation provides the State Health Plan with nearly \$920 million in additional financial support for the 2009-11 biennium. These funds include nearly \$512 million from state appropriations, roughly \$105 million generated by

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NCRGEA News & Views

Some more district meetings are right around the corner!

Members living in **Guilford (minus the High Point area) and Rockingham** counties will attend the meeting on **Tuesday, September 29, 2009** at the **Greensboro-High Point Airport Marriott**.

Davie, Forsyth and Stokes county members are invited to attend the

Clemmons district meeting on **Wednesday, September 30** at the **Village Inn Golf and Conference Center**.

The **Best Western High Point Hotel (formerly the Radisson Hotel)** will host members living in **Davidson, Guilford (High Point area) and Randolph** counties on **Thursday, October 1st**.

On **Monday, October 12**, members in **Edgecombe, Martin, Nash and Wilson** counties will be invited to attend their district meeting at the **Edgecombe Community College in Tarboro**.

And finally, NCRGEA members in **Halifax, Hertford, and Northampton** counties will attend a meeting on **Tuesday, October 13** at **Halifax Community College in Weldon**.

Confirmed for our agenda include segments with representatives from the Social Security Administration, NC 401(k), the North Carolina Retirement System, the State Health Plan and others. Medicare questions will be answered by Jeanie

Schepisi and Barry Mowbray with the Seniors' Health Insurance Information Program. We will include a wrap-up of the 2009 legislative session and conduct a workshop on grassroots lobbying.

Remember, the Association staff schedules meeting across the state so each North Carolina member is invited to attend a district meeting every three years. Attendance to this meeting and luncheon is free and is one of your benefits of membership in the Association. Members are welcome to bring a spouse or guest with them.

The vast majority of members surveyed after attending the meetings have consistently rated their attendance as "very worthwhile". Past attendees have enjoyed being able to get one-on-one answers to their questions.

Invitations are in the process of being mailed, so if you would like to attend, please mail your reply card back to us when you receive it to reserve your spot. We look forward to seeing you there!

Newsletter via E-Mail

If you would like to help our environment and save us money on postage and paper by reading your bimonthly issue of *Living Power* online instead of receiving it in the mail, send an email including your full name and city you live in to tinam@ncrgea.com. Another advantage of receiving the newsletter electronically is you will receive it about ten days sooner than members getting it in the mail, since we don't have to wait for the printer and the post office.

Living Power is published to provide current information for NCRGEA's membership. Newsletters are printed bimonthly and mailed to all members of NCRGEA. Your comments are welcome.

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New: Spouses Can Join NCRGEA!

We are pleased to announce the NCR-GEA Board of Directors has voted to allow spouses of current members the option to join the Association as an “Associate Member”. So, what does this mean for you (or your spouse)?

Associate Members will be able to access full benefits in the Association as well as be covered by the Association-sponsored \$10,000 Accidental Death and Dismemberment benefit. And if you are one of the thousands of members who includes your spouse in the Association-sponsored dental plan through MetLife or plan to enroll in it or the new Superior Vision insurance plan, if your spouse becomes an Associate Member, he or she would pay the same rate as you. For example, for the MetLife dental plan, instead of paying the Member + Spouse rate of \$77.26 per month for coverage beginning on January 1, 2010, both you and your spouse would pay Member Only rates of \$34.34 each per month, or \$68.68, saving you \$8.58 per month. Similar savings could also be utilized with the new vision insurance plan.

During our last Strategic Planning process, we studied other state retiree associations in the U.S. and learned many were providing this option to their members. In the past, spouses have been allowed to join NCREGA (1) only when the member dies and (2) only if the spouse was going to receive a benefit from the retiree’s pension.

Two differences between Associate

Members and regular members: Associate Members are not eligible for election onto the NCRGEA Board of Directors and Associate Members will not receive his/her own bi-monthly newsletter--rather the spouses will share one newsletter as paper and postage can be saved this way. If the retired member passes away before the Associate Member, the newsletter will then be mailed to the Associate Member.

Dues are \$20 per year for Associate Members. The dues must be paid by check or money order. Pension deduction from the retired member’s retirement check will not be an option for either the Associate Member’s annual membership dues or either of the optional insurance plans. Therefore, if your spouse wants to take advantage of the savings in the dental or vision plans, Associate Members will have to “direct-pay” by paying their insurance premiums either quarterly or annually. Retired Members will still maintain the pension-deduction requirement if electing coverage in the optional insurance plans. If you and your spouse are currently enrolled in the MetLife dental plan and your spouse would like to take advantage of the savings by becoming an Associate Member, please cut out the membership enrollment form attached on page 12 and mail it back to us with the dues payment and then call Susan or Kathy at 919-834-4652 or 800-356-1190 to request the necessary dental change forms.

If your spouse would like to join the NCR-GEA, please cut out the membership enrollment form attached on page 12 and mail it back to us with the dues payment. If you have questions, please call 919-834-4652, 800-356-1190 or email joannt@ncrgea.com.

Legislative Wrap-Up

(Continued from page 1)

an 8.9% increase in monthly premiums in each year of the biennium for family and dependent coverage, and \$301 million derived from higher member co-payments and deductibles.

While Senate Bill 287 accomplished the task of restoring the fiscal stability of the State Health Plan, a number of the issues arose during the passage of the bill that went beyond the short-term aims of the legislation and remain to be addressed. Some of these issues likely will be examined by the State Health Plan Blue Ribbon Task Force that was authorized by Senate Bill 287. The Task Force consists of 15 members. Six will be appointed by the Speaker of the House, six by the President Pro Tempore of the Senate, and one by the Governor. The Commissioner of Insurance and the Chairman of the State Health Plan Board of Trustees are the other members of the Task Force.

The legislation specifically directs the Task Force to study several issues that were described in the May/June edition of *Living Power*. Essentially, the issues before the Task Force involve better oversight and management of the Plan, broadening the membership base of the Plan, generating additional revenue by applying premiums to future employees, and improving coordination with other health benefit programs, including Medicare.

The Task Force also is authorized to study any other matters considered rel-

evant to its purpose. Our Association will ask the Task Force to examine the feasibility of establishing a state-funded Medicare supplement for retirees who are age 65 and older as an alternative to the two current PPO offerings under the Plan. A Medicare supplement might provide better coverage and coordination with Medicare benefits for the retirees while being less costly for the state.

In the course of debating Senate Bill 287, the House passed a floor amendment that was intended to assure that Plan members are not overcharged for prescription drugs. The amendment required that members only be charged the market price of the prescription if it was less than the State Health Plan co-payment for the particular drug.

Ambiguity in the wording of the amendment prompted groups representing pharmacists to seek a repeal of the amendment. This effort was opposed by our Association as well as the North Carolina Retired School Personnel group and the NC Association of Educators.

The Senate responded by amending House Bill 1274 to clarify the requirement that State Health Plan members cannot be charged more than the cash price paid by the general public for the same prescription medication. Pharmacies that show a pattern of violating this requirement may be removed from the Plan pharmacy network.

Restoring the Retirement Systems

The General Assembly made a signifi-

cant first step toward restoring the proper level of funding to the Teachers' and State Employees' Retirement System (TSERS) this year. While it is customary for the General Assembly to include retirement systems funding in the first year of the biennial budget, the state budget for 2009-11 includes at least partial funding for both years.

The final budget contains a \$21 million General Fund appropriation in 2009-10 to offset a deficit TSERS. The budget also provides \$160 million in 2010-11 to partially restore the funding for the state retirement system. This is estimated to be half of the amount that will be needed in 2010-11 to fully fund TSERS. The second-year appropriation moves the state's employer contribution rate from the current 3.57% of payroll to 4.93%. Full funding will require a contribution rate to TSERS in the range of 6.6%.

More precise figures on the contributions that will be needed to restore the financial health of the state and local retirement systems will be available in October. The state's actuary will present the results of the audits of the TSERS and Local Governmental Employees' Retirement System (LGERS) for the year ending December 31, 2008 to the Board of Trustees of the Retirement Systems at the fall meeting.

The financial status of LGERS is slightly better than that of the state system. Although the General Assembly opted not to authorize a 1.0% COLA for local retir-

ees from gains available in LGERS, the Board of Trustees was compelled to provide a COLA to local retirees equal to the rate of inflation during 2008 (one tenth of one percent). This was the result of a recent informal legal opinion stating that the Board cannot grant COLAs that are higher or lower than the rate of inflation if there are sufficient gains available to fund the increase.

When the Board meets in January of 2010, it will have to adopt a new normal contribution rate for LGERS. Preliminary estimates suggest the local employer rate will need to rise from the current 4.8% of payroll to a rate in the 5.8% to 6.3% range.

The Challenge Ahead

There are some signs that we are at the beginning of an economic recovery.

Clearly, everyone hopes that the state's financial condition will be much improved by the time the General Assembly reconvenes in May. However, the needs and interests of retirees will be just one among many concerns that the General Assembly will face in 2010. Even with a healthy recovery, it is unlikely that there will be enough money to address all of the pent-up demands. Our challenge between now and May is to inform members of the House and the Senate of what needs to be done in the next year to assure the continuation of strong retirement benefits that serve to attract qualified and dedicated public employees.

- Ed Regan

Association Launches Open Enrollment for Dental and Vision Plans

It is once again time for open enrollment in NCRGEA's optional insurance plans. We are pleased to again offer an optional group dental insurance plan through MetLife. MetLife has been our carrier since 2002. And, we are especially excited to announce the addition of optional group vision insurance coverage through Superior Vision. Enrollment packages are in the process of being mailed to you so watch your mail. Please read below for more details on both of these programs.

MetLife Dental Insurance

When you consider how important good oral health is to your general health, your need for good dental benefits should not be ignored. MetLife has offered dental insurance coverage for over 40 years and is the single largest dental plan administrator among single commercial carriers in the U.S., currently serving over 21 million people. MetLife's Preferred Dentist Program (PDP) network is one of the largest in the industry, exceeding 100,000 participating dentist locations and over 22,000 specialist locations nationwide.

Being enrolled in the MetLife PDP plan means lower out-of-pocket expenses when you visit a PDP dentist. Whether or not the service is covered by your plan, you will always receive the MetLife PDP negotiated fee. The negotiated fee is typically 10-35% less than the average fees charged by a dentist in your same commu-

nity. Of course, as always, you have the freedom of choice to visit any dentist, in- or out-of-network.

In North Carolina there are nearly 1,000 General Dentists and almost 200 Specialists in the MetLife PDP Network. Those members living or traveling outside the state of North Carolina will be able to visit any participating dentist in the MetLife PDP nationwide network.

NCRGEA members currently enrolled in the MetLife dental plan do not need to reenroll for the 2010-2011 guaranteed rate period. There will be an increase in rates. No action on your part is necessary unless you wish to make a change in your coverage or cancel your coverage. If so, please use the change form enclosed in the enrollment package and return it to us by November 10, 2009.

NCRGEA members not currently enrolled in the MetLife Dental Plan have been mailed an enrollment package offering you the option to join. If you wish to enroll in the MetLife plan fill out the enrollment form and mail it back to our office by November 10, 2009.

If you are currently enrolled in the United Healthcare Dental Plan through the North Carolina Retirement System and want to change plans and enroll in the MetLife Plan, you will need to cancel the United plan by the end of their open enrollment period by writing to State Insurance Services, 3700 National Drive, Suite 217, Raleigh, NC 27612. Their telephone number is 1-800-462-7864. If you do not cancel the United dental plan, there will be two dental premium deductions

monthly beginning December 2009. As the sponsor of the MetLife plan, NCRGEA receives no money from MetLife. We sponsor this plan strictly as a benefit to our members so we will be happy to discuss the differences between the two plans with you. However, only you can decide which is the better plan for your needs.

Superior Vision Discount Card and Vision Insurance

Last month, we mailed members information about our new Superior Vision Discount Card. This discount card replaces the NC Vision Health Plan 150 program that we have utilized for the past several years. The NCRGEA Board of Directors voted to change discount card programs because our previous plan was valid only in North Carolina and there were many areas of the state where finding a provider who accepted the discount card was difficult. All members of the Association are covered by the Superior Vision discount card program. There is not a premium or charge for this program.

After reviewing several proposals, the ad hoc board committee for vision care recommended the Superior Vision discount card and an optional insurance program and the Executive Committee approved this recommendation. The Committee particularly liked that Superior Vision was providing a no-cost discount card for savings on routine eye exams, frames, lenses and contacts, as well as a vision insurance option for NCRGEA members.

(continued on next page)

MetLife Dental Program Benefit Summary		
ANNUAL DEDUCTIBLE:	INDIVIDUAL	\$ 0.00
TOTAL ANNUAL MAXIMUM	INDIVIDUAL	\$1,000.00
MAJOR SERVICES ANNUAL MAXIMUM	INDIVIDUAL	\$ 750.00
<u>PREVENTIVE - ALL PROCEDURES COVERED AT 100%*</u>		
ORAL EXAMS - 2 PER CALENDAR YEAR		
CLEANINGS - 2 PER CALENDAR YEAR		
TOPICAL FLUORIDE APPLICATION - 1 PER CALENDAR YEAR (CHILD & ADULT)		
BITEWING X-RAYS - 1 SET PER CALENDAR YEAR		
FULL MOUTH X-RAYS - 1 PER 60 MONTHS		
PALLIATIVE (EMERGENCY) TREATMENT		
SPACE MAINTAINERS - 1 PER LIFETIME PER AREA UP TO AGE 19		
SEALANTS - ONCE PER 60 MONTHS UP TO AGE 19		
ORAL CANCER SCREENING		
<u>MINOR RESTORATIVE - ALL PROCEDURES COVERED AT 60%*</u>		
AMALGAM RESTORATIONS (FILLINGS)		
RESIN RESTORATIONS (FILLINGS)		
CROWN AND BRIDGE REPAIRS		
PERIO SCALING/ROOT PLANING - 1 PER 24 MONTHS PER QUADRANT		
PERIO MAINTENANCE THERAPY - 4 PER CALENDAR YEAR, INCLUDE 1110		
PERIO SURGERY - ONCE PER QUADRANT EVERY 36 MONTHS		
SIMPLE AND SURGICAL EXTRACTIONS		
ORAL SURGERY - SOME LIMITS APPLY (SEE CERTIFICATE)		
ENDODONTICS/ROOT CANALS - ONCE PER TOOTH PER 24 MONTHS		
GENERAL ANESTHESIA - WHEN DENTICALLY NECESSARY OR IN CONNECTION WITH COMPLEX SURGERY, MAX UP TO 2 HOURS		
CONSULTATIONS - 1 PER 12 MONTHS		
<u>MAJOR RESTORATIVE/DENTURES - ALL PROCEDURES COVERED AT 50%*</u>		
BRIDGES - REPLACE ONCE EVERY 5 YEARS		
DENTURES - REPLACE ONCE EVERY 5 YEARS**		
DENTURE REPAIRS		
ADJUSTMENTS TO DENTURES**		
DENTURE RELINING AND REBASING**		
TISSUE CONDITIONING		
CROWNS - 1 PER TOOTH EVERY 5 YEARS		
IMPLANTS - ONCE EVERY 5 YEARS PER TOOTH		
<small>* PERCENTAGES OF USUAL & CUSTOMARY FEES</small>		
<small>** RELINING OR REBASING OF EXISTING REMOVABLE DENTURES WILL BE A COVERED DENTAL EXPENSE NOT MORE FREQUENTLY THAN ONCE EVERY 36 MONTHS (COVERED ONLY AFTER A MINIMUM OF SIX MONTHS AFTER THE INITIAL INSTALLATION OF THE DEVICE.)</small>		
NCRGEA MEMBERS CAN VIEW CLAIMS INFORMATION AND FIND A PARTICIPATING DENTIST VIA THE METLIFE MYBENEFITS		

Vision and Dental Enrollment

(Continued from page 7)

Members now will have the option of enrolling in the voluntary Superior Vision insurance plan if their eye care needs are more complex or expensive to be able to take care of.

Superior Vision is the choice provider for the NC Flex Plan and 90 school sys-

Superior Vision Insurance Monthly Rates:

Retiree Only	\$ 7.32
Retiree and Family	\$16.74

tems, 40 municipalities, and all public universities in North Carolina, with over 160,000 participants in the program.

The vision insurance program carries a monthly premium, but provides more coverage. Members have the choice to go to In-Network or Out-of-Network providers. Most of the major retail chains, such as Sears, Wal-Mart, LensCrafters, Optometric Eye Care Centers, and Sam's Club, are considered "In-Network".

Monthly costs for the Member Only will be \$7.32 and \$16.74 for the Member and Family. These rates are guaranteed for the next five years.

It should be noted that like the MetLife Dental plan, the NCRGEA does not make any money from offering the Superior Vision Insurance Plan or discount card to our members. We sponsor these plans strictly as a benefit for our members.

Also, like the dental insurance, if you

currently have vision insurance coverage through the North Carolina Retirement System and want to switch over to the Superior Vision plan, you have to cancel your coverage with State Insurance Services AS WELL AS fill out the enrollment form with NCRGEA. It does not automatically switch over nor does enrolling in one plan automatically cancel out the other plan. If you have vision insurance with another provider and want to switch to Superior Vision, please call your provider to inquire about how to cancel.

If you opt for the vision insurance plan, you will still be able to utilize the discount card for any extra purchases incurred after you use the full benefit coverage.

Coverage with the Superior Insurance Plan will begin on January 1, 2010. Remember, the Superior Vision Discount Card became effective September 1, 2009 so you can go ahead and start taking advantage of those savings today.

End Note

If you read the article on page 3 regarding allowing spouses to join as Associate Members, you may want to consider this option if you plan to cover your spouse in either the dental or vision insurance plans, as it will save on premiums.

We know insurance can be confusing at best, so please do not hesitate to call the numbers or visit the websites in the enrollment packets if you have questions. The enrollment period is from September 15 - November 10, 2009. We offer these programs to try to HELP, not overwhelm or confuse you.

A Note from Our President

- Willis P. Whichard, NCRGEA President

The North Carolina Supreme Court, on which I was privileged to serve for over twelve years, usually labors in relative obscurity. Its decisions are of keen interest to the litigants in the particular case, but generally not to a broad segment of the greater public. The language in the Court's opinions is carefully scrutinized by lawyers representing clients with problems similar to those litigated, but it is hardly the quotidian focus of the average reader.

A rare exception occurred in the spring of 1998 when the Court released its opinion in *Bailey v. State of North Carolina*. Everyone living who had worked for the State or one of its local governments, or who planned to do so sufficiently long to vest retirement benefits, had eagerly awaited the decision. It was greeted with cheers, figuratively if not literally, from all corners of the state and—as to retired state and local government employees who had moved elsewhere—even beyond.

The suit was a class action. The class of plaintiffs was state and local government retirees and beneficiaries with claims for certain tax years who had complied with North Carolina requirements for refund claims. The issue was whether the 1989 legislation which partially subjected state and local government retirement benefits to the state income tax was both an unconstitutional impairment of contract under the United States Constitution and a taking of property without just compensation in violation of both the federal and state constitutions.

From the inception of the several state and local government retirement systems until August 12, 1989, the benefits paid to retirees from those systems were exempted from state income taxation. The retirement statutes themselves contained the exemptions. Evidence at trial established that the exemption was often communicated to prospective employees with the intent of inducing individuals either to begin or to continue public employment. These communications included many unequivocal written statements in official publications and employee handbooks. The plaintiffs argued that they relied on such statutes and communications as assuring compensation—in the form of such exemption—in exchange for public service, and that the State's partial removal of the exemption operated unconstitutionally to deprive them of benefits to which they had a vested right.

Fortunately for all of us who receive state and local government retirement benefits, the Supreme Court found these contentions meritorious. It held that the legislation violated Article I, Section 10 of the U.S. Constitution, which provides in pertinent part, “No State shall pass any...Law impairing the Obligation of Contracts.” The Court emphasized the importance of the State's being bound to its contractual obligations by drawing a comparison to the issuance of municipal bonds. The State induces investors to purchase these bonds by agreeing to forgo taxation of the income or gain on them. If it were allowed then to tax them, obvi

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A Note from Our President

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ously investors would lose confidence, cease to rely on the State's promises, and no longer purchase the bonds. Likewise, if the State's employees could no longer rely on the promises the State made to induce and continue their employment, this would be a considerable disincentive to those contemplating assuming or continuing state employment.

The Court also held that the taxation was a taking of private property without just compensation in violation of both the federal and state constitutions. It stated: "This is in derogation of plaintiffs' rights established through the retirement benefits contracts and thus constitutes a taking of their private property. The State fails to compensate them for such taking through the Act as such, and the Act is unconstitutional under the state and federal Constitutions."

Thus, the State, like the rest of us, must keep its legally binding promises. The decision should comfort all of us who depend on the benefits secured from our years of service to the State. If, for example, the General Assembly should repeal the health insurance benefits of state and local government retirees, would *Bailey* apply and preserve those benefits? As Yogi Berra reportedly said, "Prediction is difficult, especially when it's about the future." But the State would find it difficult to distinguish *Bailey*. I think it would apply.

All of us are indebted to Judge Pou

Bailey and the other plaintiffs in that case for insuring that we will get what we bargained for when we devoted many of the most productive years of our lives to the service of the State of North Carolina or its local governments.

Local Government Retirees Active in Meck.

Charlotte-Mecklenburg Governmental Retirees Association's (CMGRA), chartered in 1984, objective and purpose is "...to form a body of retired employees to unite in a close bond of mutual interest, promote social activities and an interest in the welfare and well-being of retirees, to promote civic pride and assist local official and legislators as it relates to enactment of legislation for retirees..."

CMGRA meets the fourth Tuesday of February, April, June, August and October at Sugaw Creek Presbyterian Church in Charlotte, and in December for a holiday luncheon. The annual \$25.00 membership dues provide scholarships, publishes a newsletter and funds programs for the Association.

CMGRA is led by Co-Chairs Jim Farell and Barbara Rainey. All City and County retirees are invited and encouraged to join.

Subscribe to State Health Plan Member E-Newsletter

On August 18th, the State Health Plan launched a monthly electronic publication for their members. *Member Focus* provides timely information about pharmacy and health benefits, nutrition and fitness – recipes and more.

The newsletter will be issued electronically on the third Tuesday of each month. Subscribe to *Member Focus* on the State Health Plan's Home Page, www.shpnc.org.

The Importance of Medicare Part B for North Carolina State Health Plan Members

Reprinted in part from Living Power, March/April 2008

As State Health Plan members approach age 65, it is important to understand how Medicare Part B coordinates with the State Health Plan.

Medicare Part A, provided at no charge when the member becomes eligible for Medicare, pays inpatient hospital bills and skilled nursing facility bills.

Medicare Part B is optional and in 2008 costs approximately \$100 per month for most people. Medicare Part B pays outpatient hospital, doctor, and other professional bills.

Often, State Health Plan members are unsure whether it is necessary to enroll in Part B coverage. With over 4,000 Medicare primary State Health Plan members not enrolled in Medicare Part B, there appears to be confusion regarding the importance of purchasing Part B to provide full coverage. This article strives to resolve that confusion.

When a State Health Plan member remains actively employed and is eligible for Medicare, the State Health Plan is the primary payer and Medicare is secondary for both the subscriber and dependents*. This means that **as long as the Medicare-eligible member is actively employed (in a position that qualifies for employer health benefits), it is not necessary to enroll in the optional Medicare Part B**

coverage. The State Health Plan will pay both outpatient hospital and doctor bills as the primary health insurance.

However, if and when the State Health Plan member retires and is eligible for Medicare, the State Health Plan becomes secondary for both the retiree and any dependents who are also Medicare-eligible. This means that **for all retired STATE HEALTH PLAN members 65 and older, Medicare becomes the primary health insurance. Therefore, electing Medicare Part B coverage becomes necessary.**

If a member is covered under the State Health Plan and is eligible for Medicare Part B, **the member's benefits under the State Health Plan will be paid as if the member is enrolled for coverage under Medicare Part B, regardless of whether the member actually enrolled for such coverage.** If the retired member chooses not to enroll in Medicare Part B, he or she will be responsible for all charges that Medicare Part B would cover. After the claim is reduced by those charges, the State Health Plan would pay as secondary insurance, which would be subject to the terms and conditions of the State Health Plan. This includes the benefit period deductible, coinsurance, copayment and certification requirements.

For members who rely on State Health Plan coverage post-retirement, it is essential to purchase Medicare Part B in order to have full coverage.

If you have further questions about Medicare, please call the NC Seniors' Health Insurance Information Program (SHIIP) at 1-800-443-9354.



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**Make NCRGEA your
 choice today!**

Mr. Mrs./Ms. Date of Birth _____

Full Name _____

Address _____ City _____

State _____ Zip Code _____ Telephone Number _____

Full Name of your Spouse:

Are you currently enrolled in NCRGEA's MetLife Dental Plan through your spouse?
 Yes _____ No _____

Membership Dues Amount	Yearly Dues	Monthly Deduction
Associate Member - Spouse of Current Member	\$20.00	N/A

Signature _____ Date _____

Please cut out the enrollment card and mail it with your \$20 check or money order made payable to NCRGEA, PO Box 10561, Raleigh, NC 27605.

The payroll deduction option is not available to Associate Members of NCRGEA.

Upon receipt of your payment, we will mail a membership card and new member packet to you.

Questions? Call 919-834-4652 or 1-800-356-1190 or email joannt@ncrgea.com.