

## MONTHLY UPDATE

pipac.com

800.765.1710

Iowa & South Dakota

November

2022

## Medicare CENTER

### UPDATE!

Wellmark is now showing up in the agents Active selling Permissions. Agents who were unable to register for MedicareCenter.

Personal Agent Websites, found under your Account profile, are URL links unique to you that can be shared with clients who prefer to shop and enroll on their own – and you still get the commission! Share your Personal Agent Website link in emails and other marketing communications for a smart and simple way to give clients the freedom to choose coverage that fits their needs at their convenience.



3.75%

### **SPDA**

Single Premium Deferred Annuity

Rates effective November 1, 2022

- 100% Guaranteed Return of Principal
- Up to 10% withdrawal of account value once each year without Surrender charge
- Minimum premium is \$5,000

3.35%

### **FPDA**

Flexible Premium Deferred Annuity

Rates effective November 1, 2022

- 100% Guaranteed Return of Principal
- Up to 10% withdrawal of account value once each year without Surrender charge
- Minimum premium is \$1,000 and \$25 monthly thereafter

# **2023 Medicare Annual Enrollment**

Dates and deadlines you need to know

October 15, 2022

Start SELLING Medicare Advantage and Prescription Drug Plans for 2023

December 7, 2022

**Annual Enrollment Period Ends for 2023** 

January 1, 2023

Coverage BEGINS for 2023

Note: Certification and Product Training is required for each carrier in order to market and sell. If you have not completed certification - time is running out!

### 2023 Under 65 Open Enrollment

Dates and deadlines you need to know

November 1, 2022

Start SELLING Individual and Family Plans for 2023

January 15, 2023

Open Enrollment Period Ends for 2023

January 1, 2023

Coverage BEGINS for 2023\*

\*Enrollments completed between January 1 and January 15 will have a February 1 effective date.

Note: If your clients don't enroll in a 2023 plan by January 15, 2023, they can't enroll in a health insurance plan for 2023 unless they qualify for a Special Enrollment Period.

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### **November 2022**



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### **PIPAC News/Events**

### **Small Group** 12/1/2022 Effective Dates:

Wellmark and United Healthcare (UHC) new group, renewal and plan change paperwork is due to PIPAC by Tuesday, November 15. Completed paperwork must be submitted by 3:00 pm to ensure processing.

Please visit www.pipac.com for the complete deadline schedule and other company deadlines.



#### **November 11th and 18th** at 9:00 am CT

It's that time of year again! Every week, we will be doing our Live from PIPAC to better serve you, our

Contact Mackenzie at mackenzie@pipac.com to sign up for this webinar or to find out more about upcoming classes and webinars!

800.765.1710



### Real-time leads available through MedicareCENTER!

Timely leads are important to your success as a Medicare agent. That's why we're so excited to share that LeadCENTER now connects with your CRM in MedicareCENTER, allowing you to set up campaigns and have quality leads delivered right to your account - all at the flip of a switch!

All it takes is a few quick steps to get the leads you need — delivered when and how you want. You're in control!

Sign up today at https://www.integrityleadcenter.com/login

Follow prompts in MedicareCENTER to set up campaigns in LeadCENTER

- Check-in with the flip of a switch to start getting leads exactly when you're ready
- · Choose lead types and sources based on your unique
- Get real-time leads delivered right to your MedicareCENTER account



### Offer Your Clients One of the Highest Rates in the Industry

- Additional premiums allowed
- 5 Year guaranteed for 5.00%
- 3 Year guaranteed for 4.20%
- Free withdrawals available

If you have any questions or want to find out more call 800.765.1710 and connect with the **Life Department Today!** 

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National General is now Allstate Health Solutions! Allstate Health Solutions is not the only carrier to offer MedSupp insurance, but you can't miss our exclusive savings package, MultiDiscount. Give your customers the kind of plans they can rely on for financial peace of mind, with discounts created just for them.

## **UHC Level Funded Plan Grids Released**

You will see a plan type change on the plan grids of PPO to POS. By Changing to POS it allows UHC to continue to provide open access, national in- and out-of-network coverage and does not require referrals for PCP and Specialists.

Note that nothing has changed regarding how the product operates with the change from PPO to POS, but the change allows UHC the ability on the new platform to provide our members with GAP exceptions when a network provider is not available in the member's area.

Please refer to the footnote on the grid (#13) POS – Open Access, National In and Out of Network Coverage, No PCP or Specialist referral required.

### UHC Level Funded is a great option to look at for your small groups!

- Underwritten for maximum savings
- Fixed monthly payments no risk for groups
- No additional costs for Virtual Visits (except on HSA plans)
- Potential Surplus at the end of the plan year
- 10+ Employees can be underwritten via GRx
- Additional 4% discount through FUSE DSM for New Groups

Please utilize the All Savers Quote Request Checklist when requesting UHC Level Funded Quotes

If you have any questions or want to find out more call 800.765.1710 and connect with the Group Health Department Today!



## Toy Drive

PIPAC invites you to help us collect toys to donate to Mercy One Waterloo's Pediatric Unit. Gifts to the Children's Hospital help the youngest and most vulnerable patients have the best chance at life. Your commitment to our Toy Drive success and PIPAC Gives Back is greatly appreciated. All donations will be delivered to Mercy One Waterloo's Pediatric Unit during the week of November 21st. Please bring or mail donations to: PIPAC Office, 1304 Technology Pkwy Ste 200 Cedar Falls, IA 50613 or contact Dave at dave@pipac.com with any questions.

# Wellmark to offer individual and family plans in South Dakota. Plans available for purchase November 1st.

South Dakotans who buy individual health insurance will have new coverage options this fall when Wellmark Blue Cross and Blue Shield of South Dakota will, for the first time, offer plans on the state's Health Insurance Marketplace.

Wellmark individual plans will be available for residents of Bennett, Butte, Custer, Fall River, Haakon, Harding, Jackson, Jones, Lawrence, Meade, Mellette, Oglala Lakota, Pennington, Perkins, Todd and Ziebach counties.

Shoppers in these counties will be able to compare Wellmark health plans on Healthcare.gov starting Nov. 1 and enroll in a plan for 2023 coverage until Jan. 15, 2023, as well as buy directly from a local Wellmark agent. The Marketplace provides subsidies for people to help pay for premiums and health plan costs. The site will estimate costs for each plan including subsidies, so individuals can compare benefits, network coverage and out-of-pocket expenses.

- Access to health care providers, hospitals and specialists in Wellmark's extensive provider network in South Dakota.
- Several health plan types, including traditional and standard plans (plans that use copays and deductibles to share the cost of care) and high-deductible plans, which can be paired with a health savings account to cover cost shares.
- Coverage for preventive care with no cost sharing, and low copays for primary care visits to both medical and behavioral health providers to encourage individuals to get the care they need.
- \$0 virtual care via Doctor On Demand®, including 24/7 chat and text health coaching.
- Free support tools and resources for pregnancy, as well as high-risk or complex conditions.

More information on Wellmark's new line up of individual health plans is available Wellmark.com.

If you have any questions, please reach out to the Individual Health Department at 800.765.1710

## 2023 Medicare A & B Summary and Part B & D Indexed Premiums

On September 27, 2022, the Centers for Medicare & Medicaid Services (CMS) released the 2023 premiums, deductibles, and coinsurance amounts for the Medicare Part A and Part B programs, and the 2023 Medicare Part D income-related monthly adjustment amounts.

#### Medicare Part A Premium and Deductible

Part A is Hospital Insurance can cover costs associated with confinement in a Hospital or Skilled Nursing Facility.

When you are Hospitalized for	Medicare Covers	You Pay
1 - 60 Days	Most confinement costs AFTER the required Medicare Deductible.	\$1,600 Deductible
61 – 90 Days	All eligible expenses, AFTER the patient pays a per-day copayment.	\$400 per day Copayment as much as \$12,000
91 - 150 days	All eligible expenses, <u>AFTER</u> patient pays a per-day copayment. (These are lifetime reserve days which may never be used again.)	\$800 per day Copayment as much as \$48,000
151 days & more	NOTHING	YOU PAY ALL COSTS
At least 3 days, & enter a Medicare approved Skilled Nursing Facility within 30 days of discharge.	All eligible expense for the first 20 days; then all eligible expenses for days 21 – 100, after patient pays a per-day copayment	AFTER 20 days \$200 per day Copayment as much as \$16,000

#### **Medicare Part B Premium and Deductible**

Part B is Medical Insurance and covers physician services, outpatient care, tests & supplies

On Expenses Incurred for	Medicare Covers	You Pay
<ul> <li>Doctor Office Visits</li> <li>Lab Tests Outside         Hospital</li> <li>Surgeon's Fee</li> <li>Anesthesiologist's Fee</li> <li>Doctor Visits - In         Hospital</li> <li>Doctor Visits - Nursing         Facility</li> <li>Ambulance</li> <li>Speech Therapy</li> </ul>	80% of all "approved" charges AFTER the required Medicare Deductible	\$226 Deductible PLUS 20% of all "Approved Charges Plus 100%" of any charges above the amount "approved" by Medicare
Preventative Services	100%	NOTHING

\*On all Medicare-covered expenses, a doctor or health care provider may agree to accept Medicare "assignment." This means the patient will not be required to pay any expenses in excess of Medicare's "approved" charge. The patient pays only 20% of the "approved" charge not paid by Medicare.

Physicians who do not accept "assignment" of a Medicare claim are limited as to the amount they can charge for covered services. In 2023, the most a physician can charge for services covered by Medicare is 115% of the fee schedule amount for non-participating physicians. Medicare Part B Premium for 2023 enrollees is \$164.90 each month.

#### **Part B Monthly Premium**

Based on Modified Adjusted Gross Income from 2021

If you filed an individual tax return and your income in 2021 was:	If you were married but filed a separate tax return and your income in 2021 was:	If you filed a joint tax return and your income in 2021 was:	Part B Premium:
\$97,000 or less	\$97,000 or less	\$194,000 or less	\$164.90
\$97,001 - \$123,000	Not Applicable	\$194,001 - \$246,000	\$230.80
\$123,001 - \$153,000	Not Applicable	\$246,001 - \$306,000	\$329.70
\$153,001 - \$183,000	Not Applicable	\$306,001 - \$366,000	\$428.60
\$183,001 - \$500,000	\$97,001 - \$403,000	\$366,001 - \$750,000	\$527.50
Above \$500,000	Above \$403,000	Above \$750,000	\$560.50

#### **Part D Monthly Premium**

Based on Modified Adjusted Gross Income from 2021

If you filed an individual tax return and your income in 2021 was:	If you were married but filed a separate tax return and your income in 2021 was:	If you filed a joint tax return and your income in 2021 was:	You Pay (per month):
	\$97,000 or less	\$194,000 or less	Your Plan Premium
\$97,001 -	Not Applicable	\$194,001 -	Your Plan Premium
\$123,000		\$246,000	PLUS \$12.20
\$123,001 -	Not Applicable	\$246,001 -	Your Plan Premium
\$153,000		\$306,000	PLUS \$31.50
\$153,001 -	Not Applicable	\$306,001 -	Your Plan Premium
\$183,000		\$366,000	PLUS \$50.70
\$183,001 -	\$97,001 -	\$366,001 -	Your Plan Premium
\$500,000	\$403,000	\$750,000	PLUS \$70.00
Above	Above	Above	Your Plan Premium
\$500,000	\$403,000	\$750,000	PLUS \$76.40

## PIPAC's 2023 Retirement Healthcare Cost Estimator

Plans F and G are available in City and Country themes for Iowa and South Dakota.

#### **GET YOURS ORDERED AND CUSTOMIZED TODAY!**

To order, please call Brianna at 800-765-1710 or email her at brianna@pipac.com

**FOLLOW US** 







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# Current Administration Proposes rule to fix marketplace "Family Glitch"

On October 11, 2022, the Internal Revenue Service released a final rule that changes the way health insurance affordability is determined for members of an employee's family, beginning with Plan Year (PY) 2023 coverage. Beginning in 2023, if a consumer has an offer of employer-sponsored coverage that extends to the employee's family members, the affordability of that offer of coverage for the family members (of the employee) will be based on the family premium amount, not the amount the employee must pay for self-only coverage.

The final rule is effective for PY2023. The change will be reflected in the online application through the HealthCare.gov enrollment platform and Enhanced Direct Enrollment certified partner applications during the PY2023 Open Enrollment period beginning November 1, 2022. State-based Marketplaces not using the HealthCare.gov enrollment platform are also working to implement this change, but may have different implementation timelines.



# Medicare AEP Submission Reminders!

We have now entered the start of Annual Enrollment (AEP), which runs from October 15 through December 7th. We want to pass along some application submission reminders.

Aetna - 1-866-756-5514

Aetna: PDP-SilverScript - 1-866-552-6205

HealthPartners UnityPoint Health - 1-952-853-8746

Wellmark MAPD - 1-855-213-5184

Wellmark PDP - 1-855-874-4702

UnitedHealthcare MAPD/PDP - 1-888-950-1170

Wellcare PDP - 1-866-388-1521

If you have any questions, please reach out to the Individual Health Department at 800.765.1710

### TAKEOVER YOUR LOCAL MARKET >20UND

## Digital Marketing for targeting the Iowa High School Sports Communities you want to take over.

Market your business to the High School sports community you love.

Get new business and create brand loyalty using the #1 High School sports website and app.

### Get a Digital Takeover!

Step 1 - Contact Us

Step 2 - Pick Your Favorite Schools

Step 3 - Takeover your Local Market!

- In-app marketing to fans of schools in your market
- 500,000 Mobile users
- 300 Million views

Contact Casey to get started! casey@pipac.com | 319-268-7116

# **UHC Level Funded available to groups size 2-4 in select states**

Finding an affordable health care solution for small groups may be challenging. UnitedHealthcare Level Funded is designed to help meet the challenges of rising health care costs while providing freedom and stability with a Level Funded health plan. UnitedHealthcare Level Funded can give your clients more options, including access to the large proprietary UnitedHealthcare network and the Optum Rx® network of pharmacies.

#### Participation Requirements

- 2 eligible 2 must enroll
- 3 eligible 3 must enroll
- 4 eligible Minimum of 3 must enroll
- 5 to 8 eligible Minimum of 4 must enroll
- 9+ eligible 50% participation required

Groups with only 2 enrolled employees must include at least 1 common law employee who is not the owner's spouse.

If you have any questions or want to find out more call 800.765.1710 and connect with the Group Health Department Today!