

Medicare Made for Your Business

2025 Employer Group Medicare Plans



(877) 420-6672 (TTY 711)
[FirstCarolinaCare.com/Groups](https://www.FirstCarolinaCare.com/Groups)
FCCMedicareGroup@FirstCarolinaCare.com

First Medicare Direct
FIRSTCAROLINACARE INSURANCE COMPANY

Plans for Your Medicare-Primary Eligible Employees and Retirees

Support your Medicare-primary retirees and eligible employees by offering Medicare group plan options.

Medicare group plans can be a win-win for both your business and your retirees/eligible employees. By integrating Original Medicare Part A and Part B benefits into an inclusive Medicare group plan, there's savings potential for all involved.

The Next Step in Benefit Offerings

The baby-boom generation makes up about 25% of the workforce, so you probably have a group of employees nearing retirement. Navigating retirement healthcare options can be confusing, but we help make it easy with group Medicare plans.

These plans can be offered at no cost to employers and can even help you save money.

How It Works

Employer Contribution Toward Premium

You can contribute anything from \$0 to the full amount for enrollee premiums. If Medicare-primary eligible members within the organization qualify for different levels of employer contribution, you can establish those levels.

Billing Options

We can do a group bill or bill members individually.

Dedicated Employer Group Client Consultant

You have a single point of contact for all questions about group Medicare benefits.

This representative can help with every aspect of your plan.

Low-Income Subsidy

Members may qualify for the Extra Help program from the federal government for help paying their monthly premium and prescription drug copayments. If members qualify for assistance, the premium billed for those members will be reduced by the amount of assistance they receive. This can vary from member to member, and you must pass the subsidy to the member's portion of the premium. State help may also be available for certain people who qualify.

Eligibility

Employers determine eligibility for their Medicare-primary eligible members. Members must have enrollment in Medicare Parts A and B on or before the effective date of their Medicare Group plan option. Underwriting is not required.

Plans made for ease.

Plans That Fit

We work with you to find the plan made to fit your needs and to give your retirees access to the care they need, when they need it. We can custom-make a plan for groups of 25 or more Medicare-eligible employees or retirees. We also have plan options for employers with retirees who live outside the state where your business is headquartered. And all our plans help reduce Financial Accounting Standards Board and Government Accounting Standards Board liabilities and expenditures.*

**Not intended to be tax advice. Please reach out to a tax professional with questions.*

Less Paperwork

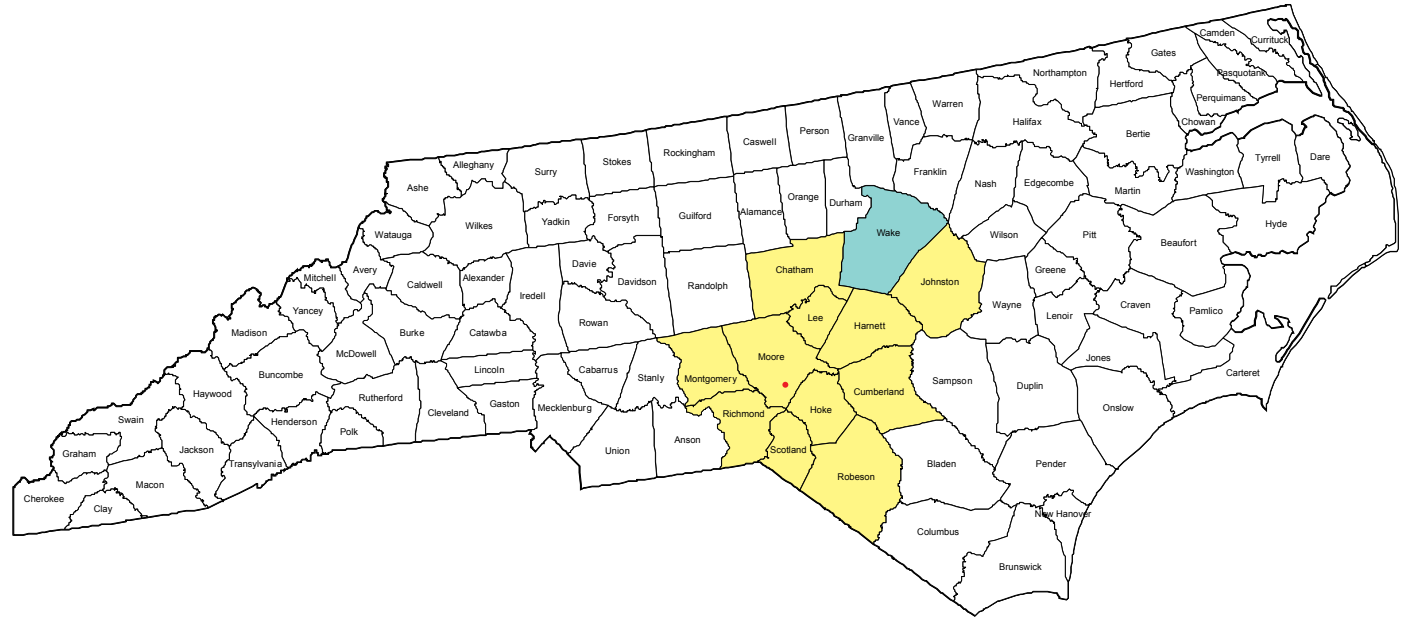
We administer the plan, which means less paperwork for you.

Medicare Member Materials

We send plan materials, including an ID card and policy (also called Evidence of Coverage), to all new members and upon renewal. Members receive a monthly Explanation of Benefits detailing monthly and year-to-date medical expenses. Members with pharmacy coverage receive a monthly Explanation of Benefits detailing monthly and year-to-date drug expenses.

No Yearly Enrollment Period

Eligible members can enroll in a group Medicare plan at any time during the year. They aren't limited to the Annual Enrollment Period for individual Medicare plans, and there are no participation plan requirements.



Map Legend



FirstMedicare Direct
HMO-POS and PPO



FirstMedicare
Direct HMO-POS



FirstMedicare Direct Local Office
1930 N. Poplar St., Suite 21
Southern Pines, NC



Your Trusted Partner

If you've worked with us before, you know our plans are made with member satisfaction in mind. Members get access to doctors they trust, perks they deserve and customer service reps always ready to help.

Helpful, Personal Customer Service

Connect your eligible employees and retirees with help from friendly, knowledgeable representatives. They can answer questions weekdays from 8 a.m. to 8 p.m. local time.

Provider Network

Give your eligible employees and retirees access to trusted care from respected doctors, hospitals and other healthcare professionals. Members can call us to request a provider directory or go to [FirstCarolinaCare.com/Find-Care](https://www.FirstCarolinaCare.com/Find-Care) for a full provider list.

Pharmacy Coverage

Help your eligible employees and retirees get the prescription medication they need. Our Medicare Part D (drug coverage) formulary lists the drugs we cover. You can find it at [FirstCarolinaCare.com](https://www.FirstCarolinaCare.com). (Generally, we only cover drugs that are listed.)

Plenty of Perks

Connect your eligible employees and retirees to extras to help them be their healthiest – with wellness and fitness benefits, virtual health coverage, and a whole lot more. See the Perks section for more information.

Perks made for your eligible employees and retirees.

Our plans are made with plenty of perks and programs to help your eligible employees and retirees with their health goals.

Be Fit

Get the most out of fitness activities with Be Fit. Members get to choose how they want to work out, and their \$360-per-year benefit will cover the costs.

Activities include the following and more:

- Fitness class fees.
- Golf.
- Gym memberships.
- Bowling.
- Online fitness subscriptions.
- Tennis.
- Weight-loss subscriptions.
- Pickleball.
- Rowing.
- Pool exercise classes.
- Fitness trackers.

If their fees are more than \$360 a year, they pay the difference. Be Fit doesn't cover league fees, personal equipment, fitness foods like protein bars and shakes, or Medicare-covered services like physical therapy, chiropractic care, etc.

Care Coordination

Whether a member would like to speak to a dietitian, wants to quit smoking or needs help understanding a recent diagnosis, we have teams to help them achieve their goals or get them back on track.

Members can connect to a team of providers – like nurse practitioners, social workers, health coaches, dietitians, pharmacists and more – who work with their doctor to make sure they have the resources they need to stay healthy or work through their medical issues.

The care coordination team reaches out to offer these services, but members can also request them if they'd like this personalized help. They can send a secure message to our care coordination team through their Hally account on the MyChart app or call the number on the back of their ID card. For more information, visit hally.com/care.

Preventive Services

Members can focus on preventing sickness and catching problems before they get worse with these covered services and more:

- Yearly wellness visit.
- Routine screenings, like mammograms or colorectal cancer screenings.
- Flu shot.

OTC Benefit

Members save money with the over-the-counter supplemental benefit from FirstMedicare Direct. This program gives them an allowance of up to \$140/year (\$35 every three months, with no rollover) for commonly used OTC products. Find out more today at FirstMedicareDirect.NationsBenefits.com.

Nurse Advice Line

Members get 24/7 answers to their health questions, like whether they need to set up an appointment or see a doctor right away.

Virtual Health Coverage

Members can get care when and where they need it with virtual health coverage. If they need to interact with their primary care provider (PCP) or specialist over the phone or online, they're covered through the telehealth benefit. They don't even need to leave the comfort of their home.

Members can also get care for common conditions like allergies, cold, flu and pink eye 24/7 with the virtual urgent care visit benefit. With two convenient options, care is never out of reach:

- FirstHealth On the Go is available to those in North Carolina from 6 a.m. to midnight (EST).
- Other virtual urgent care visits are available through Hally health 24/7, anywhere you have phone or internet connection in the U.S.

Go to hally.com to log in and get started.

Vision

Members get access to vision services beyond what Original Medicare covers, including a routine vision exam with an in-network provider. Plus, they get a \$200 allowance for eyewear. (PPO Plus has a \$130 allowance.)

May not be available on custom plans.

Pharmacy Coverage

(For All Members with Drug Coverage)

Plans with pharmacy coverage help your eligible employees and retirees save with special programs and discounts made for them.

90-Day Supply Options

Limit trips to the pharmacy with our convenient mail-order benefit. With this benefit, members can get a 90-day supply of their drugs delivered directly to them.

If they prefer to get their drugs at a retail pharmacy, they can visit any in-network pharmacy and get a 90-day supply of drugs on Tiers 1 – 2 for three copays or they can get a 90-day supply of drugs on Tiers 3 – 4 for a coinsurance.

For more information or to sign up to order prescriptions 24/7 and have them delivered by mail, members can visit [FirstCarolinaCare.com/Medicare/Pharmacy](https://www.FirstCarolinaCare.com/Medicare/Pharmacy).

Medication Therapy Management

If a member takes eight or more medications and has certain conditions, this program can help them use their medications safely and effectively.



No More “Coverage Gap”

Starting January 1, 2025, there is no longer a “Coverage Gap,” also called the “Donut Hole” Phase, in the member’s prescription drug plan and out-of-pocket costs are capped at \$2,000. This means that once members’ out-of-pocket drug costs reach \$2,000, they’ll reach the end of their Initial Coverage Phase, they’ll move directly to the Catastrophic Coverage Phase, where they pay nothing for their covered prescriptions.

Medicare Prescription Payment Plan (M3P)



An Exciting New Option to Help Members Pay for Their Medicare Part D

If a member experiences hardship from high cost-sharing for prescription drugs as part of their Medicare Part D plan, there’s a great new option: Medicare Prescription Payment Plan (M3P).

Starting January 1, 2025, people enrolled in Medicare Part D will have the option of spreading out their out-of-pocket Part D drug costs through monthly payments over the duration of the plan year (January-December) – instead of paying their copay/coinsurance at the pharmacy. They can opt into the program at the beginning of the plan year or in any month that follows – and can opt out of the program at any time.

If they enroll, their Medicare Advantage plan will pay the pharmacy the amount they would’ve paid for their out-of-pocket cost, which is capped at \$2,000 for 2025. They’ll then be billed monthly, not to exceed their maximum cap. This means they would pay \$0 at the pharmacy for a covered Part D drug.

Plan offerings differ depending on your service area. Please refer to the plan inserts included with this brochure for specific plan information. Or reach out to your agent or our experts at FCCMedicareGroup@FirstCarolinaCare.com.

FirstCarolinaCare Group Medicare

Comprehensive Medicare
Advantage Plans

Preferred Provider Organization (PPO)

Employers can choose this if they're based in North Carolina and at least 51% of their eligible members reside in Medicare Advantage-licensed counties.

Point of Service (HMO-POS)

Employers can choose this if they're based in North Carolina and at least 51% of their eligible members reside in Medicare Advantage-licensed counties. These plans combine some aspects of both HMO and PPO plans.

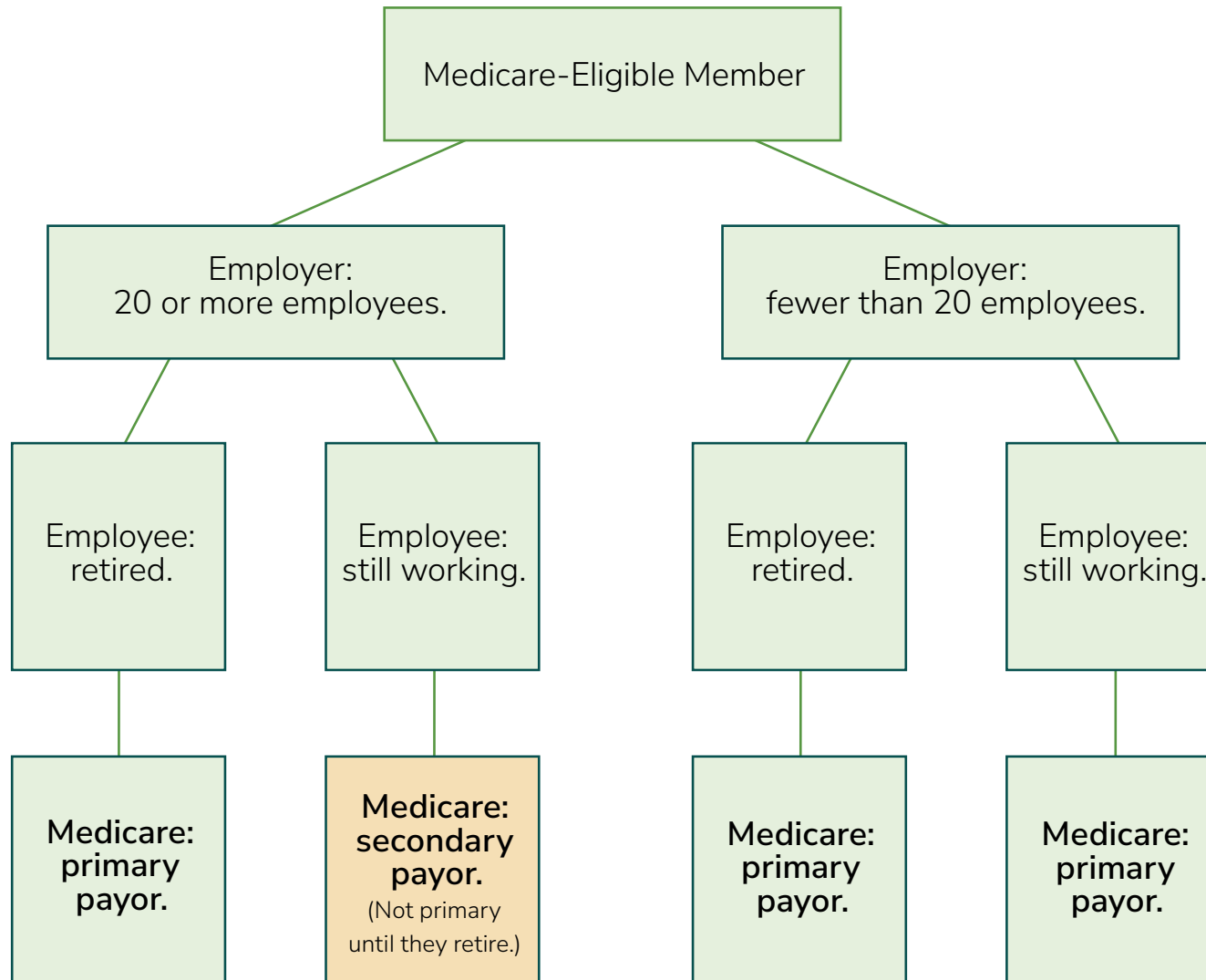
All Plan Options

- Access to urgent and emergency care worldwide.
- Health and savings perks included.
- A primary care provider to guide a member's care.



Medicare Group Solutions Eligibility

Employees are eligible for a Group Medicare plan if they are eligible for the employer-sponsored plan option offered, they are Medicare-primary, and they are enrolled in Medicare Part A and Part B. By using the chart below, you can determine if your Medicare-eligible employees are Medicare-primary.



Centers for Medicare & Medicaid Services primary payor rules apply.

Medicare is primary for people under 65 who are eligible for Medicare because of disabilities and who work for an employer with fewer than 100 employees (not part of a multiple-employer or multiple-employee group health plan).

Medicare is primary for people 65 and older with COBRA benefits.

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