



PO Box 1090
Great Bend, KS 67530
Fax: (620) 793-1199
www.wship.org

Questions? Call 1-800-877-5187
¿Preguntas? Teléfono 1-800-877-5187

October 2023

IMPORTANT NOTICE ABOUT YOUR MEDICAL SUPPLEMENT PLAN COVERAGE

- Re: - Premium Rate Change Effective January 1, 2024**
- Eligibility Verification Form Due December 15, 2023 (*Action Required*)
- There May Be Lower Cost Coverage Options Available For You

Dear Member,

This letter contains important information about your **premium rate change effective January 1, 2024**, and Eligibility Verification Form that must be returned to us by December 15 to renew your WSHIP coverage.

You may also want to explore other coverage options. We have included information about Medicare Advantage plans, which may be a lower cost coverage option for you. New federal law states that enrollees with End Stage Renal Disease (ESRD) can now enroll in a Medicare Advantage plan.

Please read this information carefully and contact us at **1-800-877-5187** if you have any questions.

2024 WSHIP Premium Rates

Your WSHIP monthly premium rate will be changing effective January 1, 2024. By law, we are required to base our rates on what other carriers in the state charge for similar benefits. Please consult the enclosed premium rate chart to find your new rate.

Premium Invoices, Due Dates, and Payments by Third Parties

Invoices for WSHIP premiums are mailed directly to enrollees. Your premiums must be paid on or before the due date or during a 31- day grace period that follows. If your premium is not received before the end of the grace period, your coverage ends at the end of the period for which your premium was paid. Monthly premium payment is available by bank draft only. Other payment options include quarterly, semi-annual, or yearly. If you would like to change your current method of payment, please contact 1-800-877-5187. **If a third party is paying your premium, please be sure to contact them for instructions on how to forward your WSHIP invoice for timely payment.**

Eligibility Verification Form Due December 15, 2023

WSHIP is required to verify continued eligibility of all enrollees. This eligibility verification requirement is combined with our yearly rate notice to simplify the process of returning this important information to us. Please return the enclosed purple form by December 15.

Important Reminder for Enrollees under Age 65

Medicare enrollees under age 65 (e.g., enrollees with kidney disease or a disability) generally have additional options for Medicare Supplement coverage when they turn age 65, and premiums may be much lower than WSHIP's premiums. If you will be turning age 65 this year, we encourage you to explore these options several months prior to turning age 65. You cannot be turned down or charged a higher premium because you have a pre-existing condition as long as you enroll during Medicare's guaranteed issue period. For more information, call 1-800-MEDICARE, visit www.medicare.gov, or call the Insurance Commissioner's SHIBA HelpLine at 1-800-562-6900.

Medicare Advantage plans

You may wish to consider enrolling in a Medicare Advantage plan instead of continuing your WSHIP coverage. Premiums for Medicare Advantage plans may be less than WSHIP's premiums. You cannot be denied coverage due to health status. New federal law allows Medicare-eligible consumers with End Stage Renal Disease (ESRD) to enroll in a Medicare Advantage plan for coverage. Some Medicare Advantage plans include prescription drug coverage, while with others you must enroll separately in a Medicare Prescription Drug Plan (PDP). We encourage you to contact an insurance agent for additional information. Be sure to also check with your doctor and other health care providers to see which Medicare Advantage plans they accept. For more information, call 1-800-MEDICARE, visit www.medicare.gov, or call the Insurance Commissioner's SHIBA HelpLine at 1-800-562-6900. Enrollment for Medicare Advantage plans is October 15 through December 7.

Medicare Part D Prescription Drug Plans

As a reminder, you may enroll or change Medicare Part D Prescription Drug Plans (PDPs) during Medicare's open enrollment period which begins October 15 and ends December 7. For more information, call 1-800-MEDICARE, visit www.medicare.gov, or call the Insurance Commissioner's SHIBA HelpLine at 1-800-562-6900. If you do not wish to enroll, or you wish to keep your current Medicare Part D Plan, you do not need to do anything.

Questions? Need Assistance?

If you have questions or need assistance during this year's WSHIP open enrollment, please call WSHIP Customer Service at **1-800-877-5187**. Information is also available at www.wship.org.

Enclosures:

- **2024 WSHIP Premium Rates**
- **Eligibility Verification Form (Purple Paper) – RETURN by December 15**
- **Summary of Benefits for Medical Supplement Plan**
- **Personalized Schedule of Benefits**
- **Return Envelope**

Important Deadline

December 15 is the deadline to return your WSHIP Eligibility Form to renew your WSHIP coverage.

December 7 is the deadline to enroll in a Medicare Advantage plan for 2024 instead of WSHIP.