

2026 – Schools Insurance Group Medicare Advantage with Prescription Drug Plan (MAPD)



Your Dedicated Advocacy Phone Number(s)
(530) 948-5004 (TTY 711) or toll free (888) 819-8358 (TTY 711)

Frequently Asked Questions

Plan Design

Medical Carrier:



Alignment Health Plan®

Medical	You pay
Deductible	\$0
Maximum Out of Pocket (MOOP)	\$0
Office Visit: Primary Care	\$0
Office Visit: Specialist	\$0
Inpatient Hospital	\$0
Outpatient Care	\$0
Home Health Care	\$0
Skilled Nursing Facility	\$0, Days 1-100
Emergency Room	\$0
Urgent Care	\$0
Ambulance Service	\$0

Lab Services	\$0
Radiology Services	\$0
Durable Medical Equipment	\$0
Preventative Screenings	\$0
Chiropractic	\$0, 12 Visits per year - combined with Acupuncture
Acupuncture	\$0, 12 Visits per year - combined with Chiropractic
Podiatry	\$0, 12 Visits per year
Foreign Travel (World-wide) Coverage	\$0, Emergency Room & Urgently Needed Care - \$25,000 Coverage Limit per year
Hearing	\$0 for exam/year. \$195.00 - \$1,750.00 copay per hearing aid. 2 hearing aids every year
Vision	\$0 copay for exam/year. \$0 copay for glasses/contacts every year. (\$150 coverage limit)
Dental	Medicare covered services only
Fitness Benefit	One Pass

Prescription Carrier



Prescription	30-day Retail You pay up to	90-day Retail You pay up to	90-day Mail Order You pay up to
Annual Deductible: \$0			
Tier 1 Preferred Generic	\$10	\$20	\$20
Tier 2 Generic	\$10	\$20	\$20
Tier 3 Preferred Brand	\$25	\$50	\$50
Tier 4 Non-Preferred Drug	\$40	\$80	\$80
Tier 5 Specialty	\$40	N/A	N/A
Tier 6 Select Care Tier	\$10	\$20	\$0
Note: CMS caps the 30-day supply cost for Insulin medication at \$35. Costs for a 30-day supply may be less but will not exceed \$35 for 2026.			

Plan Questions

1. Will I be automatically enrolled, or do I need to do anything to enroll?

All Medicare-eligible retirees and/or dependents will be automatically enrolled into the plan. There is nothing you need to do to be enrolled.

2. Can I stay with the current plan?

No, all Medicare-eligible retirees and/or dependents must change over to this plan. Your current plan will no longer be available.

3. Can I opt-out of this plan?

We are required by law to give you the choice of opting out of the new plan. Since you are enrolled in the current medical and prescription drug plan it is unlikely that you would not want to participate in this new robust plan. However,

you have the option to opt-out and decline this medical and prescription coverage. Nevertheless, if you would like to opt-out, please call RetireeFirst at **(530) 948-5004 (TTY 711) or toll free (888) 819-8358 (TTY 711)**, Monday-Friday, 8am-5pm PST.

4. Are there any plan changes?

Schools Insurance Group did their best to match or enhance your current benefits. Below are a few highlights of your new plan:

- Medicare Covered Medical Services are \$0 cost to you.
- This plan has a \$0 deductible.
- Access to One Pass Fitness Benefit.
- \$0 copay for one vision exam per year.
- Foreign Travel covered at \$0 for Emergency Room & Urgently Needed Care. \$25,000 Coverage Limit per year
- \$0 copay for Chiropractic and Acupuncture services (combined) 12 visits per year
- 90-day retail and home delivery prescriptions covered 2x the 30-day copay amount.
- Access to RetireeFirst Advocates for assistance with understanding and using your benefits.

5. When will I receive my ID card and welcome kit?

Cards and welcome kits should arrive prior to your start date. Retirees and Medicare-eligible dependents will each receive their own card. Please note that each enrollee may not receive their plan information on the same day; this is normal.

6. What do I do if I lose my card?

Please call RetireeFirst at **(530) 948-5004 (TTY 711) or toll free (888) 819-8358 (TTY 711)** and we will obtain a new one on your behalf, mail you a temporary card, and call your pharmacy and/or providers if needed.

7. If I leave the plan, will it affect any of my other benefits?

Yes, it may.

8. How much do I have to pay for the plan?

Schools Insurance Group can be reached at (530) 823-9582 ext. 201 to answer any billing questions.

9. Who do I call if I need assistance with the plan?

Please call RetireeFirst at **(530) 948-5004 (TTY 711)** or toll free **(888) 819-8358 (TTY 711)** to reach your dedicated Schools Insurance Group Retiree Advocacy Team, Monday-Friday, 8am-5pm, PST.

Medical Questions

10. Is there a medical deductible?

No, there is no medical deductible.

11. Is there co-insurance or copays?

No, there is no co-insurance or copays for medical services.

12. Does this plan require referrals?

No, this plan does not require referrals.

13. Does this plan require pre-certifications?

Some services may require pre-certifications.

14. Does this plan have a network?

Yes, but you can go to any willing Medicare provider, hospital, or facility that is willing to bill Alignment Health. This plan's in and out of network benefits are the same.

15. Can I go to my current providers?

Yes, you can see any provider that accepts Medicare and is willing to bill Alignment.

16. Do I still use my Medicare card?

No, put your Medicare card in a safe place in case you need it later. You will only use your Alignment ID Card for medical and prescriptions.

17. What if my provider says they do not accept this plan?

If your provider accepts Medicare, the portion you are responsible for will remain the same whether they are considered in or out of network. You can go to any willing Medicare provider, hospital, or facility. Please call RetireeFirst at **(530)**

948-5004 (TTY 711) or toll free (888) 819-8358 (TTY 711) to assist; we can reach out to your provider to explain.

Prescription Questions

18. Is there a prescription deductible?

No, there is no prescription deductible.

19. Is there co-insurance or copays?

Yes, there is a cost share associated with this plan for prescriptions drugs.

Please refer to the prescription benefit chart on page 3 of this document to better understand the prescription co-pays.

20. Are my prescriptions covered?

Most likely yes, the prescription list is a comprehensive formulary just as before.

Please call RetireeFirst at **(530) 948-5004 (TTY 711) or toll free (888) 819-8358 (TTY 711)** if you need help looking up your prescriptions.

21. Can I go to the same retail pharmacy?

Most likely, yes. There should be little to no pharmacy disruption. Alignment has over 67,000 pharmacies in network. You do NOT need new prescriptions for retail pharmacy refills.

22. Is there a mail order pharmacy?

There is a mail order pharmacy called Walgreens Mail Service which can be reached at (800) 345- 1985 (PST). You can also call RetireeFirst at **(530) 948-5004 (TTY 711) or toll free (888) 819-8358 (TTY 711)** with questions about mail order prescriptions.

23. Is there a specialty mail order pharmacy?

Alignment has a specialty pharmacy called Alliance Rx Specialty Mail Order which can be reached at (800) 345-1985 (PST). You can also call RetireeFirst at **(530) 948-5004(TTY 711) or toll free (888) 819-8358(TTY 711)** with questions about specialty prescriptions.

24. Will my prescriptions transfer from the old plan?

If you use the retail pharmacy, and have refills remaining, you do NOT need to obtain new prescriptions. If you use mail order, you WILL need to obtain new prescriptions from your provider.

25. Can I still go to the Veterans Affairs (VA) for my prescriptions?

Yes, if you obtain some prescriptions from the VA, you may continue to do so.

26. Do I need prior authorizations for certain prescription medicines?

Some prescriptions may require a prior authorization. Please contact RetireeFirst at **(530) 948-5004 (TTY 711) or toll free (888) 819-8358 (TTY 711)** if you have questions or need assistance with prior authorizations as well as any other requirements such as step therapy, quantity limit, or formulary exceptions.

27. What is the catastrophic phase and is there coverage?

The catastrophic phase is a phase of coverage designed to protect you from having to pay very high out-of-pocket costs for prescription drugs. It is the final phase in your prescription drug plan and your copays will be \$0. You will remain in this phase for the rest of the plan year. This coverage phase kicks in when you reach a true out of pocket total of \$2,100 for prescription drugs.

28. What is the annual maximum out-of-pocket (MOOP) and how does it work?

Once your out-of-pocket costs for prescription drugs reaches \$2,100, your copays will be \$0. You will remain in this phase of coverage for the rest of the plan year. Keep in mind, lifestyle and non-part D prescription drugs do not count toward your out-of-pocket total.

Alignment Health Retiree Options (PPO) Card Sample:

Front:

 Alignment Health Plan **PPO**

ALIGNMENT HEALTH RETIREE OPTIONS (PPO)
A Medicare Health Plan with Prescription Drug Coverage

JOHN SMITH
Member ID: 0000000000
Plan Code: 801-002
RxGRP: H4961G
RxBIN: 610455
RxPCN: AHPPARTDG
RxID: 00000238603
Effective Date: 01/01/2023

In-Network	Out-of-Network
Office Visit: \$0	Office Visit: \$0
Specialist: \$0	Specialist: \$0
Emergency: \$0	Emergency: \$0

MedicareRx
Prescription Drug Coverage

Back:

 **ALL CLAIMS MUST BE MAILED TO:**
[Alignment Health Plan
PO. Box 14010, Orange, CA 92863]

 **Member Services:** 1-866-634-2247 (TTY 711)
Pharmacy Technical Help Desk: (844) 227-7615
Member Pharmacy Help: (844) 227-7616
Provider Services: (888) 517-2247

Medicare limiting charges apply. For more information on benefit cost shares please call member services or visit our website.

WWW.ALIGNMENTHEALTHPLAN.COM

Disclaimer: For complete benefit details please refer to the carrier issued materials. This document includes a simplified summary of benefits and does not create any contractual rights.