RetireeFirst, LLC | MAPD01\_2025\_FAQ\_NASMT\_SG

### **RetireeFirst**

2025 – National Automatic Sprinkler Metal Trades Welfare Fund Medicare Advantage with Prescription Drug Plan (MAPD)

## **Frequently Asked Questions**

**Plan Design** 

Medical Carrier:

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| 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   |
| Acupuncture                          | \$0   |
| Podiatry                             | \$0   |
| Foreign Travel (World-wide) Coverage | \$0 Emergency and Urgent Care services  |
| Hearing                              | Routine Hearing Exam - \$0, every 12 months<br>Hearing Aid Allowance - \$1,200 every 36<br>months |
| Vision                               | \$0, Routine exam refraction every 12 months  |
| Fitness Benefit                      | Included  |

### Prescription Carrier

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| Prescriptio<br>n             | 30-day Retail<br>You pay up to | 90-day Retail<br>You pay up to | 90-day<br>Mail Order<br>You pay up to | Preferred 30-<br>day Retail<br>You pay up to | Preferred 90-<br>day Retail<br>You pay up to |
|------------------------------|--------------------------------|--------------------------------|---------------------------------------|--|--|
| Annual Deductible: \$0       |                                |                                |                                       |  |  |
| Maximum Out of Pocket: \$500 |                                |                                |                                       |  |  |
| Tier 1<br>Generic            | \$5                            | \$15                           | \$8                                   | \$4  | \$8  |

| Tier 2<br>Preferred<br>Brand      | \$10 | \$30                 | \$20                 | \$10 | \$20                 |
|-----------------------------------|------|----------------------|----------------------|------|----------------------|
| Tier 3 Non-<br>Preferred<br>Brand | \$20 | \$60                 | \$40                 | \$20 | \$40                 |
| Tier 4<br>Specialty               | \$10 | Limited to one-month | Limited to one-month | \$10 | Limited to one-month |

### **Plan Questions**

### 1. Do I need to do anything to enroll?

Yes. Please contact RetireeFirst Toll Free at **855.433.1675 (TTY 711)** to provide your Medicare Beneficiary ID (MBI) Number so we can complete your Aetna® enrollment.

2. What if my spouse or dependent is not Medicare Eligible?

They will remain covered under the National Automatic Sprinkler Metal Trades Welfare Plan under the provisions applicable to their coverage.

### 3. When will I receive my card/ Welcome Kit?

You will receive your ID card and Welcome Kit about two weeks after your enrollment Form is submitted.

#### 4. What do I do if I lose my Aetna® card?

Please call RetireeFirst Toll Free at **855.433.1675 (TTY 711)** and we will obtain a new one on your behalf, mail/email/fax you a temporary card, and call your pharmacy and/or providers if needed.

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

Please call RetireeFirst Toll Free at **855.433.1675 (TTY 711)** to reach your dedicated National Automatic Sprinkler Metal Trades Welfare support team.

6. What cards should I carry for Medical and Prescription needs? You only need to present your new Aetna® MAPD ID card for all medical and prescription needs.

### **Medical Questions**

- 7. Is there a medical deductible? No, there is no deductible.
- 8. Is there co-insurance or copays? No, there is no co-insurance or co-payments.
- **9.** Does this plan require referrals? No, this plan does not require referrals.
- 10. Does this plan require pre-certifications?

Some services may require pre-certification.

#### 11. Does this plan have a network?

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

### 12. Can I go to my current providers?

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

#### 13. 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 Aetna® ID Card for medical and prescriptions.

### 14. 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 Toll Free at **855.433.1675 (TTY 711** to assist; we can reach out to your provider to explain.

### **Prescription Questions**

#### 15. Is there a prescription deductible?

No, there is no prescription deductible.

#### 16. Are my prescriptions covered?

Most likely yes, the prescription list is a comprehensive formulary just as before. Please call RetireeFirst Toll Free at **855.433.1675 (TTY 711)** if you need help looking up your prescriptions.

#### 17. Can I go to the same retail pharmacy?

Most likely, yes. There should be little to no pharmacy disruption. Aetna<sup>®</sup> has over 65,000 pharmacies in network. <u>You do NOT need new prescriptions</u> for retail pharmacy refills.

#### 18. What are Aetna's Preferred pharmacies?

Aetna® has many preferred pharmacies that you can utilize such as CVS, Costco, Osco, Wegmans, Publix and many more. <u>The great news is that you can get a 90-day retail supply at these preferred pharmacies for the same price as a preferred Mail Order fill.</u>

### 19. Is there a mail order pharmacy?

Yes. Aetna<sup>®</sup> has a dedicated Mail Order pharmacy. Your current prescriptions will not transfer to the new plan. <u>You will need to obtain new 90-day</u> <u>prescriptions to utilize Mail Order</u>. The number to contact Aetna<sup>®</sup> Mail Order Pharmacy is 888.792.3862. Please call RetireeFirst if you need assistance with setting up your new Aetna<sup>®</sup> Mail Order Pharmacy Benefit.

### 20. 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.

# 21. 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.

# 22. Do I need prior authorizations for certain prescription medicines?

Some prescriptions may require prior authorization. Please contact RetireeFirst Toll Free at **855.433.1675 (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.

#### 23. 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 \$500 for prescription drugs. Keep in mind, lifestyle and non-part D prescription drugs do not count toward your out-of-pocket total.

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

Once your out-of-pocket costs for prescription drugs reaches \$500, 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.

### **Card Sample:**

| Front:   |  | Back:   |  |
|--|--|---|--|
| PLAN SPONSOR NAME<br>HRP Plan Name<br>PLAN XXX-EG00000000X                               | Medicare PPO   | Au<br>Customer Service<br>Prescription Drug<br>24 Hour Nurse Line<br>Provider Services  | etnaRetireePlans.com<br>1-8xx-xxx-xxxx<br>1-8xx-xxx-xxxx<br>1-8xx-xxxxxx<br>1-8xx-xxxxxx |
| ID 101XXXXXXXXXX<br>NAME SAMPLE SAMPLETON<br>RxBIN 610502 RxPCN MEDDAET<br>RxGRP# RXAETD | MedicareR<br>Prescription Drug Coverage                | TDD/TTY<br>Send claims to:<br>Aetna Medicare<br>PO Box 381106<br>EI Paso, TX 79986-1106 | 711  |
| ISSUER (80840)<br>PCP/Office Name:   | PCP \$xx<br>ER \$xx<br>AS \$xx<br>HO \$xx/A<br>SP \$xx |   | ard does not guarantee coverage.   |
| Printed on: xx/xx/xxxx   | нхххх-рвр  |   |  |

While this notice is intended to address frequently asked questions regarding a modification to your benefits, in the event there is any discrepancy between this notice and the official plan documents, the official plan documents shall apply. The Trustees reserve the right to amend the National Automatic Sprinkler Metal Trades Welfare Plan at any time. The terms of the separate, standalone, retiree-only Aetna® MAPD plan are determined by Aetna®.

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.