

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



## Frequently Asked Questions


### Plan Design

Medical Carrier:



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 Hearing Aid Allowance - \$1,200 every 36 months
Vision	\$0, Routine exam refraction every 12 months
Fitness Benefit	Included

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	Preferred 30- day Retail You pay up to	Preferred 90- day Retail You pay up to
Annual Deductible: \$0					
Maximum Out of Pocket: \$2,000					
Tier 1 Generic	20%	20%	15%	15%	15%
Tier 2 Preferred Brand	20%	20%	20%	20%	20%
Tier 3 Non- Preferred Brand	30%	30%	30%	30%	30%
Tier 4 Specialty	20%	Limited to one-month	Limited to one-month	20%	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 Industry (NASI) Welfare Plan under the provisions applicable to their coverage.

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

Cards and welcome kits should arrive in the month prior to your start date.

### **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 Industry (NASI) Welfare Fund 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.

## 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® has over 65,000 pharmacies in network. **You do NOT need new prescriptions 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. **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.**

## 19. Is there a mail order pharmacy?

Yes. Aetna® has a dedicated Mail Order pharmacy. Your current prescriptions will not transfer to the new plan. **You will need to obtain new 90-day prescriptions to utilize Mail Order.** The number to contact Aetna® Mail Order Pharmacy is 888.792.3862. Please call RetireeFirst if you need assistance with setting up your new Aetna® 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 \$2000 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 \$2000, 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.

## Other Questions

### **25. What if I Return to Work in Covered Employment?**


The MAPD plan is not available to active participants or other individuals who are employed by an employer who is required to make contributions to the National Automatic Sprinkler Industry (NASI) Welfare Fund. By accepting enrollment in the MAPD plan, you certify that: (1) you and your covered dependents are not actively employed by a contributing employer to the NASI Welfare Fund; and (2) you will notify Labor First or the Fund Office immediately if you or your covered dependents become actively employed by a contributing employer to the NASI Welfare Fund.

### **26. Am I Still Covered Under the NASI Welfare Fund?**

Yes. You are still covered by the NASI Welfare Fund. The Fund Office will remain available to assist you as necessary on other matters. For example, the Fund Office will continue to handle inquiries regarding eligibility, retiree premiums, dental and vision benefits, and all other benefits outside the scope of the MAPD plan.

## Card Sample:

### Front:




Labor First 1-855-433-1675  
 N.A.S.I. Welfare Fund ESA PPO  
 PLAN# XXX-EG00000000X  
**ID 101XXXXXXXXX**  
 NAME SAMPLE SAMPLETON  
 RxBIN 610502 RxPCN MEDDAET  
 RxGRP# RXAETD

**ISSUER (80840)**  
 PCP/Office Name:  
 Dr. Sample  
 999-999-9999      XXXXXXXXX

Printed on: xx/xx/xxxx

**Medicare PPO**



**MedicareRx**  
 Prescription Drug Coverage

PCP	\$xx
ER	\$xx
AS	\$xx
HO	\$xx/A
SP	\$xx

**HXXXX-PBP**

### Back:

**AetnaRetireePlans.com**

Customer Service	<b>1-8XX-XXX-XXXX</b>
Prescription Drug	<b>1-8XX-XXX-XXXX</b>
24 Hour Nurse Line	<b>1-8XX-XXX-XXXX</b>
Provider Services	<b>1-8XX-XXX-XXXX</b>
TDD/TTY	<b>711</b>

Send claims to:  
 Aetna Medicare  
 PO Box 981106  
 El Paso, TX 79998-1106

This card does not guarantee coverage.

Payer ID# 60054

Union Bug

*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 Industry 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.