

# **Frequently Asked Questions (FAQ)**

# **PLAN DESIGN**



MEDICAL	You Pay	
Medical Deductible	\$0	
Medical Maximum Out of Pocket	N/A	
Primary Care Office Visit	\$0	
Specialist Office Visit	\$0	
Inpatient Hospital Care	\$0 per admission	
Outpatient Surgery	\$0	
Inpatient Mental Health & Substance Abuse	\$0 per admission	
Outpatient Mental Health & Substance Abuse	\$0	
Skilled Nursing Facility	\$0, days 1-100	
Urgent Care	\$0	
Emergency Care	\$0	
Ambulance	\$0	
Durable Medical Equipment	\$0	

ANCILLARY BENEFIT COVERAGE	
Foreign Travel Coverage	\$0 Emergency and Urgently needed care
Hearing Benefit	\$0, Routine Hearing Exam - 1 per 12 months \$1,500 per device - \$3,000 max – every 3 years
Vision Benefit	\$0, Routine Eye Exam - 1 per 12 months \$150 Glasses/Contacts Allowance every year
Podiatry	\$0, 12 visits per year
Chiropractic	\$0, Unlimited Visits – Prior Authorization Required
Acupuncture	\$0, Unlimited Visits – In lieu of anesthesia and for treatment of chronic pain
Fitness Benefit	Silver Sneakers

# MEDICAL QUESTIONS

## 1. Can I stay on the current plan?

No. All Medicare-eligible retirees and/or dependents currently enrolled in the Medicare Supplement Plan must change to the new Aetna Medicare Advantage (MA) Plan or opt out of coverage through the U.A. Local No. 393 Health & Welfare Plan. Your current plan will no longer be available for use on March 1, 2023.

#### 2. Are there any plan changes?

The Plan did its best to match the plan design to your current plan design and mitigate any disruption. There are some plan improvements:

- 100% Medical Plan with \$0 Deductible
- Includes improved Podiatry, Chiropractic, and Acupuncture benefits
- Hearing and Vision Benefits included to match and replace current benefits
- Improved Foreign Travel benefit
- Includes Fitness Benefit Silver Sneakers

## 3. Is there a Part A and/or Part B Deductible?

No, there is no Part A or Part B Deductible on the new Aetna Medicare Advantage (MA) Plan.

#### 4. Is there Coinsurance or Copays?

No, there are no copays on the Aetna Medicare Advantage Plan.

## 5. Does this plan require referrals?

No, this plan does not require referrals.

6. Does this plan require Pre-certifications?

No, this plan does not require Pre-certification.

7. 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 <u>same</u>.

# 8. Can I continue to utilize my current providers?

Yes, you can see any willing Medicare provider.

## 9. Do I still use my Medicare Card?

Prior to March 1, 2023, you will receive a welcome kit and an Aetna card for your Medicare Advantage Plan. This is the ID card you will bring with you to the doctor. You will need this new ID card to ensure that claims will be filed correctly by your providers. Make sure you keep your Medicare card somewhere safe, but you will not need to show it to your doctors.

## 10. What if my Provider says they do not accept this plan?

If your provider accepts Medicare, you will <u>pay the same</u> whether they are considered in or out of network. Please all Labor First at 408-215-1207 (TTY 711) or Toll-Free at 855-460-7487 (TTY 711) to assist. We can reach out to your provider to explain.

# **PLAN QUESTIONS**

## 11. What is an opt-out?

While you are going to automatically be enrolled, you can choose to opt-out of the plan. However, if you do opt-out you will have no medical coverage through the U.A. Local No. 393 Health & Welfare Plan and will need to obtain your own coverage. Please keep in mind that if you opt-out you may no longer be able to participate in the drug coverage or other benefits. Please call Labor First at 408-215-1207 (TTY 711) or Toll-Free at 855-460-7487 (TTY 711)

# 12. Will I be automatically enrolled in the new Medicare Advantage Plan? Do I need to do anything to enroll?

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

#### 13. Can I stay on the current plan?

No. All Medicare eligible retirees and/or dependents must change to the new plan. Your current plan will no longer be available 3/1/2023.

#### 14. When will I receive my ID Card/Welcome Kit?

Cards and Welcome Kits should be received in the middle to end of February. Members 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. <u>This is normal</u>.

#### 15. What do I do if I lose my card?

Please call Labor First at 408-215-1207 (TTY 711) or Toll-Free at 855-460-7487 (TTY 711) and we will obtain a new one on your behalf, mail you a temporary card, and call your providers if needed.

#### 16. Can I leave the plan and come back?

Yes, if you are covered under another group health plan. Specific rules apply. Please call the Plan's Administrative office at 408-588-3751 to discuss further.

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

Please reach out to the U.A. Local 393 Health & Welfare Plan Administrative office at 408-588-3751 to answer any questions you may have regarding premium payments.

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

Please call your dedicated Labor First Advocacy Team at 408-215-1207 (TTY 711) or Toll-Free at 855-460-7487 (TTY 711) between the hours of 8:00 am to 5:00 pm PST.

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Medicare PPO ) aetna aetnaretireeplans.com **Customer Service** 1-8xx-xxx-xxxx 24 Hour Nurse Line 1-8xx-xxx-xxxx LABOR FIRST 1-855-460-7487 Provider Services 1-8xx-xxx-xxxx UA LOCAL 393 HEALTH & WELFARE PLAN# XXX-EG0000000X TDD/TTY 711 ID 101XXXXXXXXX NAME SAMPLE SAMPLETON Send claims to: BIN 610502 PCN PARTBAET Aetna Medicare PO Box 981106 El Paso, TX 79998-1106 \$XX \$XX \$XX This card does not guarantee coverage. **ISSUER (80840)** ER AS HO PCP/Office Name: Dr. Sample Payer ID# 60054 Medicare limiting charges apply. 999-999-9999 XXXXXXXXX HXXXX-PBP Printed on: xx/xx/xxxx