

## 2024 – Excavators Union Local 731 Medicare Supplement with Prescription Drug Plan



## Frequently Asked Questions

### Plan Design

Medical Carrier:



Medical	You pay
Deductible	\$0
Office Visit: Primary Care	\$0
Office Visit: Specialist	\$0
Inpatient Hospital	\$0
Outpatient Care	\$0
Home Health Care	Medicare covered services only
Skilled Nursing Facility	\$0, Days 1-100
Emergency Room	\$0
Urgent Care	\$0
Ambulance Service	\$0
Clinical Lab Services	\$0
Radiology Services	\$0
Durable Medical Equipment	\$0
Preventative Screenings	Medicare covered services only

Chiropractic	Medicare covered services only
Acupuncture	Medicare covered services only
Podiatry	Medicare covered services only
Foreign Travel (World-wide) Coverage	\$250 deductible, 20% coinsurance and amounts over the \$50,000 lifetime maximum for medically necessary emergency care services beginning during the first 60 days of each trip outside the USA
Hearing	Medicare covered services only
Vision	Medicare covered services only
Dental	Medicare covered services only

## Prescription Carrier



EXPRESS SCRIPTS®

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 Generics	\$5	\$15	\$10
Tier 2 Brands	\$10	\$30	\$20
Tier 3 Non-Preferred Brands	\$20	\$60	\$40
Tier 4 Specialty	\$20	N/A	N/A

## Plan Questions

**1. Will I be automatically enrolled in the new plan, 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 be able 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 **718.215.4192 (TTY 711)**, Monday-Friday, 8am-5pm EST.

**4. Are there any plan changes?**

Excavators Local 731 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.
- \$0 Medical and Prescription Deductible
- \$0 copays in the catastrophic phase
- Continued access to dedicated Excavators Local 731 RetireeFirst Advocates for assistance with understanding and using your benefits at **718.215.4192 (TTY 711)**.

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

Cards and welcome kits should arrive in the month 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 **718.215.4192 (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. Who do I call if I need assistance with the plan?**

Please call RetireeFirst at **718.215.4192 (TTY 711)** to reach your dedicated Excavators Local 731 Retiree Advocacy Team, Monday-Friday, 8am-5pm, EST.

## Medical Questions

### **8. Is there a medical deductible?**

No, there isn't a Medical deductible except \$250 deductible for foreign travel.

### **9. Is there co-insurance or copays?**

No, there are no Medical copays or co-insurance except Foreign travel with 20% coinsurance.

### **10. Does this plan require referrals?**

No, this plan does not require referrals.

### **11. Does this plan require pre-certifications?**

No, this plan doesn't require pre-certifications.

### **12. Does this plan have a network?**

No, you can go to any willing Medicare provider, hospital, or facility.

### **13. Can I go to my current providers?**

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

### **14. Do I still use my Medicare card?**

Yes, you will use both your Medicare card and your United American ID Card at your provider's office.

## Prescription Questions

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

No, there isn't a deductible with the new plan.

### **16. Is there co-insurance or copays?**

No, there is no co-insurance or copays with the Express Scripts prescription plan

## **17. Are my prescriptions covered?**

Most likely yes, the prescription list is a comprehensive formulary just as before. Please call RetireeFirst at **718.215.4192 (TTY 711)** if you need help looking up your prescriptions.

## **18. Can I go to the same retail pharmacy?**

Most likely, yes. There should be little to no pharmacy disruption. Express Scripts has over 68,000 pharmacies in network. You do NOT need new prescriptions for retail pharmacy refills. You will need to show both your Medicare and your new Express Scripts prescription card.

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

Express Scripts offers a mail order pharmacy. Please call your dedicated RetireeFirst Advocates at **718.215.4192 (TTY 711)** with questions about mail order prescriptions.

## **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 a prior authorization. Please contact RetireeFirst at **718.215.4192 (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 donut hole and is there donut hole coverage?**

The coverage gap/donut hole begins after the total yearly prescription cost (including what our plan has paid and what you have paid) reaches a certain dollar amount. While most Medicare Part D plans have a gap/donut hole, you have full donut hole coverage with this plan. This means you will never pay more than the plan copays shown in the table above.

## 24. 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. You may have cost sharing for excluded prescriptions that are covered under this plan.

## United American Medicare Supplement Plan Card Sample:

Front:



**UA** United American Insurance Company  
Since 1947

P.O. BOX 8080 MCKINNEY, TX 75070 1-800-730-4648

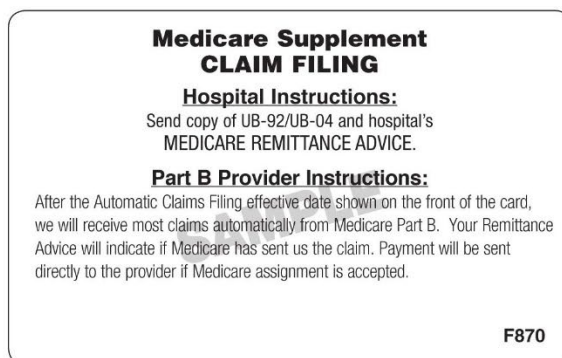
Certificate Number: 123456789 Certificate Effective:  
Name: **John Doe** 5-1-2012

Retiree of: Group Name

Medicare Supplement: **Plan F**

Automatic Claims Effective After 5-1-2012

Back:



**Medicare Supplement  
CLAIM FILING**

**Hospital Instructions:**  
Send copy of UB-92/UB-04 and hospital's  
MEDICARE REMITTANCE ADVICE.

**Part B Provider Instructions:**  
After the Automatic Claims Filing effective date shown on the front of the card,  
we will receive most claims automatically from Medicare Part B. Your Remittance  
Advice will indicate if Medicare has sent us the claim. Payment will be sent  
directly to the provider if Medicare assignment is accepted.

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