



**DISTRICT COUNCIL 16**  
**Northern California Health and Welfare Trust Fund**  
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[www.dci6trustfund.org](http://www.dci6trustfund.org)



**Date:** January 24, 2023

**To:** All Medicare Eligible Retirees, including COBRA beneficiaries participating in the Indemnity Medical Plan or Kaiser Senior Advantage offered by District Council No. 16 Northern California Health & Welfare Trust Fund

**From:** Board of Trustees

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This Participant Notice will advise you of certain information you need to be aware of in order to receive the highest level of benefits from District Council No. 16 Northern California Health & Welfare Trust Fund. **This information is VERY IMPORTANT to you and your Dependents. Please take the time to read it carefully.**

**Anthem Medicare Preferred PPO with Senior Rx Plus (MAPD) Plan**  
**effective March 1, 2023**

We are pleased to inform you that effective **March 1, 2023**, the Indemnity Medical Plan for Medicare eligible Retirees is being replaced with the Anthem Medicare Preferred PPO with Senior Rx Plus (MAPD) Plan. This means that if you are eligible for Medicare and currently covered under the Indemnity Medical Plan, your coverage will automatically transfer to Anthem Medicare Preferred PPO with Senior Rx Plus (MAPD) Plan effective March 1, 2023. If you are currently covered under the Kaiser Senior Advantage Plan and would like to transfer your coverage to the Anthem Medicare Preferred PPO with Senior Rx Plus (MAPD) Plan, you will be able to do so during the next Open Enrollment Period.

While the Trustees understand change can be difficult, every attempt has been made to mitigate the disruption to you. The District Council 16 Health & Welfare Fund has retained Labor First, an organization that specializes in the implementation and ongoing member service of retiree health and drug programs, to help you with this change. Labor First has a team of dedicated Retiree Advocates specifically assigned to assist participants of the District Council 16 Health & Welfare Fund with any issues or concerns you may have during implementation, as well as on an ongoing basis. **You can reach the Retiree Advocate Team for the District Council 16 Health & Welfare Fund at 855.460.7477 (TTY 711).**

**Effective March 1, 2023**  
your medical and prescription benefits will be provided by  
**Anthem Medicare Preferred PPO with Senior Rx Plus (MAPD) Plan**

**Plan Improvements**




- Lower Monthly Premiums: Coverage for a single Medicare member will drop \$100 per month, from \$370 to \$270, for the same or better coverage;
- Enhanced Hearing Aid Allowance;
  - You will still have access to the new District Council 16 Hearing Benefit allowance of \$1,500 per ear Every 3 years, regardless of provider
  - In addition, you will now also have available an additional \$1000 Hearing Aid Allowance per Hearing Aid- Every 3 years- \$2,000 maximum, if you decide to go through the Anthem MAPD plan. More information can be found in the enclosed Frequently Asked Questions Sheet.
- Enhanced Frames/Lens Benefit;
  - You will still have access to your current District Council 16 vision benefit. In addition, you will now also have available an additional \$150 eyewear allowance- Every 2 years, if you decide to go through the Anthem MAPD plan.
  - More information can be found in the enclosed Frequently Asked Questions Sheet.
- \$0 Routine Podiatry Visits, 12 per year;
- SilverSneakers Fitness Benefit included: and
- Dedicated District Council 16 Retiree Advocacy Team at Labor First to assist members with medical or prescription plan needs.

**Medical Card:**

You previously received a new card in December 2022. You will only use that card during January and February of 2023. You will receive another card in February 2023. This new card will be the one you will use starting March 1st, 2023.




- From January 1<sup>st</sup>, 2023, to February 28, 2023, you should use the Anthem card you received in December 2022.
- Starting March 1<sup>st</sup>, 2023, you should start using your Anthem Medicare Preferred PPO card which you will receive in February 2023.

**Continue Using This Care Through February 28<sup>th</sup>, 2023**

<b>Anthem</b> 		 District Council 16 Northern California Health and Welfare Trust Fund	
First and Last Name			
Member ID:			
Group No:	280624M001	IND/FAM IN NET DED	\$1000/\$1000
Plan Code:	040	IND OOP Limit	\$3500
RxBIN:	020099	FAM OOP Limit	\$7000
RxPCN:	WG	For detailed benefit information	
RxGRP:	WLHA	including Deductible and Out of Pocket	
Coverage(s):		maximums, please visit <a href="http://anthem.com/ca">anthem.com/ca</a>	
Medical			
PRUDENT BUYER PLAN®			

<b>Anthem</b> 		<a href="http://anthem.com/ca">anthem.com/ca</a>	
MEMBERS: When submitting inquiries always include your member number from the face of this card. Possession or use of this card does not guarantee eligibility of benefits.		DC16 No CA Cust. Svc.* <b>1-800-922-9902</b>	
PROVIDERS: Please submit claims to your local Blue Cross and/or Blue Shield Plan. To ensure prompt claims processing, include the 3-digit prefix that precedes the patient's identification number listed on the front of this card.		Provider Only Claims Inquiries <b>1-800-688-3828</b>	
For Eligibility, Inquiries & Customer Service contact: District Council 16 Northern CA Health & Welfare Trust Fund* 4160 Dublin Blvd. #400 Dublin, CA 94568		Help for Pharmacists <b>1-833-296-5039</b>	
Anthem Providers submit claims at: <a href="http://www.availity.com">www.availity.com</a> Payor ID: 47198		Pharmacy Member Services <b>1-833-923-0115</b>	
Send BEAT IT* Claims to: P.O. Box 20896 San Jose, CA 95160		Inpatient Preauthorization <b>1-800-274-7767</b>	
		Mental and Chem Dependency <b>1-800-828-3939</b>	
		Pre-Authorization - Beat IT* <b>1-800-999-1999</b>	
		Maternity Support -Med Expert* <b>1-800-999-1999</b>	
*Contracts directly with group Anthem Blue Cross Life and Health Insurance Company provides administrative services only and does not assume any financial risk or obligation with respect to claims. Blue Cross of California, using the trade name Anthem Blue Cross, administers claims on behalf of Anthem Blue Cross Life and Health Insurance Company and is not liable for benefits payable. Independent licensees of the Blue Cross Association.			
12/12/22			

## Begin Using This Card March 1<sup>st</sup>, 2023

<b>Anthem</b> 		Anthem Medicare Preferred (PPO) 
<FormattedMemberName>		District Council 16 Northern CA Health and Welfare Trust Fund
Member ID:		Senior Rx Plus
Group:	CA052GRS	Office Visit Copay: \$0
Issuer ID (80840):	9101000302	Specialist Visit Copay: \$0
RxBIN:	020115	Emergency Room Copay: \$0
RxPCN:	IS	Preventive Copay: \$0
RxGRP:	WM2A	
RxID:		CMS H4036-801
<small>District Council 16 Northern CA Health and Welfare Trust Fund will utilize LaborFirst to handle member contact for health plan administration. See back for contact information.</small>		 <b>MedicareRx</b> Prescription Drug Coverage

<b>Anthem</b> 		<a href="http://anthem.com/ca">anthem.com/ca</a>
<small>Providers: Do not bill Medicare. Submit paper and electronic claims to your local Blue Cross/Blue Shield Plan. Include the 3-digit alpha prefix that precedes the patient ID number listed on the front of this card. Medicare limiting charges apply. Members: Present this ID card to your health care provider before you receive services or supplies. See your Evidence of Coverage for a complete description of coverage.</small>		Labor First Advocacy* 1-855-460-7477
<small>Possession of this card does not guarantee eligibility for benefits. Anthem Providers can submit claims to <a href="http://Avality.com">Avality.com</a> or <a href="http://Medical">Medical</a>, P.O. Box 60007, Los Angeles, CA 90060-0007. Pharmacy, Claims Department - Part D Svcs. P.O. Box 52077, Phoenix, AZ 85072-2077</small>		Member Services: 1-833-910-4432
		TDD/TTY: 711
		Rx Member Services: 1-833-409-1228
		Help for Pharmacists: 1-833-377-4286
		Provider Services: 1-833-910-4432
		24/7 NurseLine: 1-800-700-9184
		*Contracts directly with group sponsor
		<small>Anthem BC Health Insurance Company is the trade name of Anthem Insurance Companies, Inc. Independent licensee of the Blue Cross Association.</small>
Issued:		

### Important things to know:

- As before, you must be enrolled in both Medicare Parts A and B in order to enroll in the Anthem Medicare Preferred PPO with Senior Rx Plus (MAPD) Plan.
- As stated above, you will receive a new ID card from Anthem in February. Present only your Anthem ID card for all doctor, hospital, and pharmacy needs beginning March 1<sup>st</sup>, 2023. You will only need to carry one ID card. You no longer need to carry your Medicare ID card. Please keep your Medicare ID card somewhere safe in the event you need to present for certain COVID related services.
- This Anthem plan will allow you the option to use doctors and hospitals that are *in or out* of the Anthem Medicare network. You will have the flexibility to visit doctors and hospitals of your choice as long as they are licensed and eligible to receive payment from Original Medicare and can bill Anthem.
- You will continue to be able to use most retail pharmacies as the Anthem Plan has a pharmacy network that contains over 66,000 in-network pharmacies nationwide.
- You do not need to obtain new prescriptions if you use your local retail pharmacy and have active refills available. Simply show them your new Anthem ID card after March 1, 2023.
- Anthem also offers CarelonRx Mail Order Pharmacy for your convenience. You will not need new prescriptions if you had prescriptions on file with Ingenio Rx Mail Order.
- Some medications may require prior authorizations, step therapy, or quantity limit restrictions.
- Please note the cost of your drugs can vary year-to-year based on inflation, contracts, supply, etc.

**What Mailings to Expect:**

- You will receive a pre- enrollment guide from Anthem in early February.
- You will receive an acceptance letter, confirmation of enrollment letter, and Welcome Kit mid-late February.
- You will receive your Anthem ID card separately in February. Please keep in mind, each member and any dependents will receive their own ID card and they may arrive and different days. This is normal.

If you are eligible for Medicare and currently enrolled under the Indemnity Medical Plan, you will be automatically transferred into the **Anthem Medicare Preferred PPO with Senior Rx Plus (MAPD)** effective March 1, 2023. We are required by law to give you the choice of Opting Out of the **Anthem Medicare Preferred PPO with Senior Rx Plus**. To Opt-out of the plan or if you have any questions about Opting Out of the plan, please call Labor First Toll Free at **855.460.7477 (TTY 711)**. Please note that if you do Opt-out you will no longer have Medical or Prescription coverage through the District Council 16 Health & Welfare Fund.

**Date:** Friday, February 17, 2023

**Time:** 10:00am PST

**Webinar Directions:** visit [www.zoom.com](http://www.zoom.com) and click join in the right-hand corner

**Meeting ID:** 816 8167 8242

**Passcode:** 123456

We strongly recommend that you attend the presentation to better understand the plan changes. Labor First is available to provide ongoing support with any questions or concerns you may have. Your dedicated District Council 16 Health & Welfare Fund Retiree Advocate Team can assist you with any plan questions you may have such as medical or prescription coverage questions, ID card replacements, prior authorizations, and more.

Enclosed in this mailing is also a Frequently Asked Questions document. If you have questions about any of this information, please do not hesitate to call **855.460.7477 (TTY 711)** or **Toll-free 855.460.7477 (TTY 711)** to speak with a Labor First Retiree Advocate for assistance.

Please keep this important notice with your Plan Document/Summary Plan Description (SPD) for easy reference to all Plan provisions. Should you have any questions, please contact the Administrative Office at **(510) 864-6444**.

Receipt of this notice does not constitute a determination of your eligibility. If you wish to verify eligibility, or if you have any questions regarding the Plan changes, please contact the Administrative Office.

*In accordance with ERISA reporting requirements this document serves as your Summary of Material Modifications to the Plan and we are advising you of these Plan changes within 60 days of the adoption of those changes.*