

2025 – Ironworkers Local 395 Anthem Medicare Advantage with Prescription Drug Plan (MAPD)



Frequently Asked Questions

Plan Design

Medical Carrier:



Medical	You pay
Deductible	\$200
Maximum Out of Pocket (MOOP)	\$500
Office Visit: Primary Care	\$0
Office Visit: Specialist	\$0
Inpatient Hospital	\$0, per admit
Outpatient Care	\$0
Home Health Care	\$0
Skilled Nursing Facility	\$0, days 1-20 \$25, days 21-100
Emergency Room	\$50, waived if admitted within 24hrs.
Urgent Care	\$25, waived if admitted
Ambulance Service	\$0

Lab Services	\$0
Radiology Services	\$0
Durable Medical Equipment	\$0
Preventative Screenings	\$0
Chiropractic	Medicare covered services only
Acupuncture	Medicare covered services only
Podiatry	\$0, 12 visits per year
Foreign Travel (World-wide) Coverage	\$50, Emergency Room waived if admitted within 24 hours \$25 Urgently Needed Care waived if admitted \$0, inpatient care, 60 days per lifetime
Hearing	\$0, Routine exam 1 per calendar year \$0, hearing aid fitting evaluation, 1 per covered hearing aid \$70 maximum benefit every calendar year for fitting evaluations & exam combined \$500, maximum hearing aid benefit every 3 calendar years Must use hearing care solutions provider
Vision	\$0, Routine eye exam 1 per calendar year
Dental	Medicare covered services only
Fitness Benefit	SilverSneakers

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
Annual Deductible: \$0			
Tier 1 Generic	\$0	\$0	\$0
Tier 2 Brand	\$30	\$90	\$60
Tier 3 Non-Preferred Brand	\$60	\$180	\$120
Tier 4 Specialty	\$60	N/A	N/A
<p>Note: CMS caps the 30-day supply cost for Insulin medication at \$35. Costs for a 30-day supply may be less but will not exceed \$35 for 2025.</p>			

Plan Questions

- 1. Will I be automatically enrolled, 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. 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

219.212.2906 (TTY 711) or toll free 800.381.6492 (TTY711), Monday-Friday, 8am-5pm EST.

4. Are there any plan changes?

Iron Workers Local 395 did their best to match or enhance your current benefits. Below are a few highlights of your new plan:

- Most Medicare-covered medical services are \$0 to you.
- One routine eye exam per calendar year is \$0 to you.
- One routine hearing exam and 1 hearing aid fitting evaluation is \$0 cost to you.
- \$500 maximum hearing aid benefit every 3 calendar years. Must use hearing care solutions provider.
- Podiatry Coverage: 12 podiatry visits per year are \$0 cost to you.
- Mail Order prescription discount available.
- Access to SilverSneakers Fitness Benefit.
- Continued Access to RetireeFirst Advocates for assistance with understanding and using your benefits.

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 **219.212.2906 (TTY 711) or toll free 800.381.6492 (TTY711)** 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. If I leave the plan, will it affect any of my other benefits?

Yes, it may. Once you leave, you will need Board approval to return.

8. If I leave the plan, can my spouse remain on the plan?

No. If you opt out of the plan, or leave the plan, your spouse will also be disenrolled from the plan.

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

Iron Workers Local 395 can be reached at 312.410.8941 to answer any billing questions.

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

Please call RetireeFirst at **219.212.2906 (TTY 711)** or **toll free 800.381.6492 (TTY711)** to reach your dedicated Iron Workers Local 395 Retiree Advocacy Team, Monday-Friday, 8am-5pm, EST.

Medical Questions

11. Is there a medical deductible?

Yes, The Medical deductible is \$200.

12. Is there co-insurance or copays?

Yes, there are copays associated with your plan. Please refer to the medical plan design on pages 1 and 2 of this document to learn more about the costs associated with the plan.

13. Does this plan require referrals?

No, this plan does not require referrals.

14. Does this plan require pre-certifications?

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.

15. 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.

16. Can I go to my current providers?

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

17. 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 Anthem ID Card for medical and prescriptions.

18. 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 at **219.212.2906 (TTY 711) or toll free 800.381.6492 (TTY711)** to assist; we can reach out to your provider to explain.

Prescription Questions

19. Is there a prescription deductible?

No, there is no prescription deductible.

20. Is there co-insurance or copays?

Yes, there are copays associated with your plan. Please refer to the prescription plan design of this document to learn more about the costs associated with the plan. Please call RetireeFirst at **219.212.2906 (TTY 711) or toll free 800.381.6492 (TTY711)** for assistance.

21. Are my prescriptions covered?

Most likely yes, the prescription list is a comprehensive formulary just as before. Please call RetireeFirst at **219.212.2906 (TTY 711) or toll free 800.381.6492 (TTY711)** if you need help looking up your prescriptions.

22. Can I go to the same retail pharmacy?

Most likely, yes. There should be little to no pharmacy disruption. Anthem has over 65,000 pharmacies in network. You do NOT need new prescriptions for retail pharmacy refills.

23. Is there a mail order pharmacy?

There is a mail order pharmacy, CarelonRx which can be reached at 833.409.1228 EST. You can also call RetireeFirst at **219.212.2906 (TTY 711) or toll free 800.381.6492 (TTY711)** with questions about mail order prescriptions.

24. 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.

25. 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.

26. Do I need prior authorizations for certain prescription medicines?

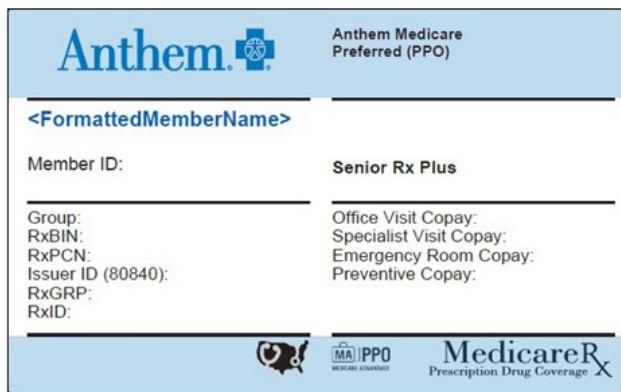
Some prescriptions may require prior authorization. Please contact RetireeFirst at **219.212.2906 (TTY 711) or toll free 800.381.6492 (TTY711)** if you have questions or need assistance with prior authorizations as well as any other requirements such as step therapy, quantity limit, or formulary exceptions.

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

Once your out-of-pocket costs for prescription drugs reaches \$2,000, 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.

Anthem Medicare Preferred PPO Card Sample:

Front:



Back:



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.