RetireeFirst

2024 – NECA IBEW Family Medical Care Plan Medicare Advantage PPO & Prescription Drug (MAPD) Plan with Sav-Rx Wrap



Frequently Asked Questions

Plan Design



Medical	You pay
Deductible	\$0
Medical Maximum Out of Pocket	\$1,800
Office Visit: Primary Care	\$20
Office Visit: Specialist	\$20
Inpatient Hospital	\$0 per admit
Outpatient Surgery	\$0
Home Health Care	\$0
Skilled Nursing Facility	\$0, Days 1-100
Emergency Room	\$65, waived if admitted within 24 hrs.
Urgent Care	\$50, waived if admitted within 24 hrs.
Ambulance Service	\$0

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Lab Services	\$20	
Radiology Services	\$20	
Durable Medical Equipment	\$0	
Preventative Screenings	\$0	
Chiropractic	\$20, 12 visits per year	
Acupuncture	\$20, Medicare covered services only	
Podiatry	\$20, 6 visits per year	
Foreign Travel (World-wide) Coverage	\$65 Emergency Care and \$50 Urgent Care- both waived if admitted within 24 hrs.	
Hearing Must use UHC Hearing	\$0 Routine Hearing Exam – 1 per year \$500 Hearing Aid Allowance- every 3 yrs.	
Vision	\$0 Routine Eye Exam – 1 per year	
Dental	\$0 Medicare covered services only	
Fitness Benefit	Renew Active	



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 Preferred Brand	20% Brands with Generics Member Pay Difference	20% Brands with Generics Member Pay Difference	20% Brands with Generics Member Pay Difference			
Tier 3 Non-Preferred Brand	30% - \$40 Min Brands with Generics Member Pay Difference	30% - \$80 Min Brands with Generics Member Pay Difference	30% - \$80 Min Brands with Generics Member Pay Difference			
Insulin Medications	\$35	\$70	\$70			

Plan Questions

1. Are there any plan changes?

No, there have been no changes made to the 2024 UnitedHealthcare® Group Medicare Advantage PPO and Prescription Drug (MAPD) plan with Sav-Rx Wrap. You will continue to receive the same benefit coverage as you currently have in place. NECA IBEW Family Medical Care Plan did enhance your healthcare experience by partnering with RetireeFirst, a retiree benefits



management solutions and advocacy service provider, which now allows you access to a team of dedicated advocates able to assist you with understanding and using your benefits.

2. Will I receive my ID card?

Yes, you should have received a new UnitedHealthcare® in November. A new SavRx card will be arriving within the next week or two.

3. What do I do if I lose my card?

Please call RetireeFirst at (706) 229-8769 (TTY 711) or toll free (855) 220-9437 (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.

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

NECA IBEW Family Medical Care Plan Customer Service Line can be reached at 877-937-9602 to answer any billing questions.

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

Please call RetireeFirst at (706) 229-8769 (TTY 711) or toll free (855) 220-9437 (TTY 711) to reach your dedicated NECA IBEW Family Medical Care Plan Retiree Advocacy Team, Monday-Friday, 8am-5pm, EST.

Medical Questions

6. Is there a medical deductible?

No, this plan does not have a deductible for any medical services.

7. Is there co-insurance or copays?

Yes, there are some copays for certain medical services. Please refer to the benefit chart beginning on page one.

8. Does this plan require referrals?

No, this plan does not require referrals.

9. Does this plan require pre-certifications?

Some services may require pre-certification.



10. 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.

11. Can I go to my current providers?

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

12. Do I need my Medicare card?

No, put your Medicare card in a safe place in case you need it later. You will only use your UnitedHealthcare® ID Card for medical services and your UnitedHealthcare® and Sav-Rx cards for prescriptions.

13. 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 (706) 229-8769 (TTY 711) or toll free (855) 220-9437 (TTY 711) to assist; we can reach out to your provider to explain.

Prescription Questions

14. Is there a prescription deductible?

No, there is no prescription deductible with this plan.

15. Is there co-insurance or copays?

Yes, there are copays or co-insurance for prescriptions depending on the prescription tier. The cost share amounts can be found in the table beginning on page two of this document.

16. Are my prescriptions covered?

Most likely yes, the prescription list is a comprehensive formulary just as before. Please call RetireeFirst at (706) 229-8769 (TTY 711) or toll free (855) 220-9437 (TTY 711) if you need help looking up your prescriptions.



17. Is there a mail order pharmacy?

Yes, Sav-Rx will be your dedicated Mail Order pharmacy.

- Ask your doctor to send the prescription(s) electronically to Sav-Rx in Fremont, NE or, ask your doctor to fax your prescription(s) to Sav-Rx at 402-753-2809.
- Call Sav-Rx with your prescription drug names, strength, and dosing along with your physician's contact information. Sav-Rx will do the rest! Your dedicated Sav-Rx Member Service Telephone Number is 800-545-2810.

18. 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.

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

Some prescriptions may require a prior authorization. Please contact RetireeFirst at (706) 229-8769 (TTY 711) or toll free (855) 220-9437 (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.

20. 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.

21. 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.

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UnitedHealthcare Medicare Advantage MAPD Plan Card

Sample:

Front: Back:





SavRx Card Sample:

Front: Back:





