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**2024 – Plumbers, Pipefitters & Mechanical Equipment Service Local Union No. 392 Medicare Eligible Anthem Medicare Preferred (PPO) with Senior Rx Plus MAPD Coverage**

**Frequently Asked Questions (FAQ)**

**PLAN DESIGN**

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| CARRIER |
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| MEDICAL | **YOU PAY** |
| Deductible | $200 |
| Medical out-of-pocket maximum | $2,000 |
| Office visit | 20% after deductible |
| Specialist | 20% after deductible |
| Diagnostic procedure/tests | $0 |
| Lab services | $0 |
| Therapy (occupational/physical/speech) | 20% after deductible |
| Allergy shots | 20% after deductible |
| Inpatient services | $200 per day, days 1-5 per admission. $0 copay for days 6 and beyond. |
| Outpatient services | 20% after deductible |
| Skilled nursing facility (days 1-100) | $0, days 1-20  20% after deductible, days 21-100 |
| Urgent care | $50, waived if admitted within 24 hours, deductible does not apply |

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| MEDICAL | YOU PAY |
| Emergency care | $120, waived if admitted within 24 hours, deductible does not apply |
| Ambulance services | 20% per one-way trip, deductible does not apply |
| Foreign travel coverage | * $120 for emergency care, deductible does not apply * $50 for urgently needed services, deductible does not apply * $200 per day, days 1-5, inpatient care, deductible does not apply |
| Podiatry services | 20% after deductible, 12 visits per year |
| Vision services | * $0 routine eye exam, 1 per year, $70 maximum benefit * $100 eyewear allowance every 2 years |
| Hearing services | * $0 routine hearing exam and hearing aid fitting evaluations, 1 per year, $70 maximum benefit * $500 hearing aid allowance per ear, $1,000 total - every 3 years   **To receive benefits, you MUST use Hearing Care Solutions.** |
| Fitness benefit | SilverSneakers |

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| **Carrier** |
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| **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-A preferred generic | $0 | $0 | $0 |
| Tier 1 generic | $8 | $16 | $16 |
| Tier 2 preferred brand | $15 | $30 | $30 |
| Tier 3 non-preferred brand | $20 | $40 | $40 |
| Tier 4 specialty | $20 | Limited to one-month supply | Limited to one-month supply |

**MEDICAL QUESTIONS**

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| 1. **Can I stay on my current plan beginning Jan. 1, 2024?**   No, all Medicare-eligible retirees and/or dependents must change over to this plan if they want to receive coverage through the Fund. Your current plan will no longer be available in 2024.   1. **Are there any plan changes?**   Your new Anthem plan will provide benefits comparable to your current medical and prescription drug benefits.   1. **Is there a Part A and/or Part B deductible?**   Yes, there’s a $200 medical deductible.   1. **Is there co-insurance or copays?**   Yes, the amount varies by service. Please see the copays for medical services listed on pages 1 and 2.   1. **Does this plan require referrals?**   No, this plan does not require referrals.   1. **Does this plan require pre-certifications?**   Some services may require pre-certification. Talk with your provider to help determine if pre-certification is required.   1. **Does this plan have a network?**   Yes, but you can go to any willing Medicare provider, hospital, or facility. This plan’s ~~i~~n- and out-of-network benefits are the same.   1. **Can I go to my current providers?**   Yes, you can see any provider that accepts Medicare and is willing to bill Anthem.   1. **Do I still use my Medicare card?**   No, put your Medicare card in a safe place in case you need it in the future. You will use only your Anthem ID card for medical and drug.   1. **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. Please call RetireeFirst at **(513) 216-4367 (TTY 711) or toll free at (855) 430-7106 (TTY 711)** to assist; we can reach out to your provider to explain. |

**PRESCRIPTION QUESTIONS**

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| 1. **Is there a prescription deductible?**   No, there is no prescription deductible.   1. **Is there catastrophic coverage?**   Yes, you will have a $0 copay in the catastrophic coverage phase.   1. **Are my drugs covered**?   Most likely yes. The drug list is a comprehensive formulary just as before. You will receive an abridged formulary with your Welcome Kit and cards. Please call RetireeFirst at **(513) 216-4367 (TTY 711) or toll free at (855) 430-7106 (TTY 711)** if you need you do not see your drug listed or need help looking up your drugs.   1. **Is my copay structure staying the same?**   Your copay structure for prescription drugs is remaining the same as your current plan. Please keep in mind the tiers may change from year to year.   1. **Can I go to the same retail pharmacy I’ve been using?**   Most likely, yes. Anthem has over 66,000 pharmacies in-network so it’s likely your pharmacy is a network pharmacy. You do NOT need new prescriptions for retail pharmacy refills.   1. **Do I receive a discount on my medications when I use the mail order pharmacy?**   When filling medications that you take on a long-term basis, you can use a retail pharmacy or the mail-order service. You pay the same amount for a 90-day supply through retail or mail-order. But with mail-order, you get the convenience of having medications sent to your home. **You need new prescriptions if you use the mail order service.**   1. **Will my prescriptions transfer from the old plan?**   If you use a 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.   1. **Can I still go to the Veteran Affairs (VA) for my drugs?**   Yes, if you obtain some drugs from the VA, you may continue to do so.   1. **Do I need prior authorization for certain prescription medicines?**   Some drugs may require a prior authorization. Please contact RetireeFirst at **(513) 216-4367 (TTY 711) or toll free at (855) 430-7106 (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. |

## **PLAN QUESTIONS**

**PLAN QUESTIONS**

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| 1. **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 will be automatically enrolled into the plan. You do not need to do anything.   1. **What is this opt-out?** While we don’t expect that you’ll opt out, we are required by law to give you the choice of opting out of the new Anthem plan. If you opt out, you **will not** have medical and/or prescription drug coverage through Plumbers, Pipefitters & Mechanical Equipment Service Local Union No. 392 Health and Welfare Fund. If you want to opt out, please call RetireeFirst at **(513) 216-4367 (TTY 711) or toll free at (855) 430-7106 (TTY 711).** 2. **When will I receive my ID card and Welcome Kit?**   Cards and Welcome Kits should arrive in December. 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; this is normal.   1. **What do I do if I lose my card?**   Please call RetireeFirst at **(513) 216-4367 (TTY 711) or toll free at (855) 430-7106 (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.   1. **Can I leave the plan and come back?**   No, except for a qualifying life event.   1. **If I leave the plan, will it affect any of my other benefits?**   Yes, it may.   1. **Who do I contact if I have questions about paying for the cost of plan coverage?**   You can contact the Fund Office at **513-241-0444 (extension 1)** with any billing questions.   1. **Who do I call if I need assistance with the plan?**   Please call RetireeFirst at **(513) 216-4367 (TTY 711) or toll free at (855) 430-7106 (TTY 711)** to reach your dedicated Plumbers, Pipefitters & Mechanical Equipment Service Local Union No. 392 retiree advocate team from the hours of 8 a.m. to 5 p.m. ET. |

**Card Sample:**

**Front: Back:**

Close-up of a card

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