

Plumbers, Pipe Fitters & MES Local Union No. 392 Health and Welfare Fund

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Oct. 12, 2023

Dear Medicare-eligible retiree and/or dependent,

We're pleased to let you know that beginning Jan. 1, 2024, you will have access to dedicated healthcare advocates through RetireeFirst to help answer questions and ensure you receive the care you need. In addition, your medical and prescription drug benefits will be provided through the **Anthem Medicare Preferred Provider Organization (PPO) with Senior Rx Plus**. The benefits you will have through Anthem will be comparable to the benefits you currently have with Humana as highlighted in this letter.

Benefits of your new MAPD plan

Your new Anthem plan will provide benefits comparable to your current medical and prescription drug benefits. Here are some highlights of the benefits you will have with Anthem.

- You will have the ability to use any provider that accepts Medicare and agrees to bill Anthem.
- You don't need a referral when seeing a specialist.
- The plan typically pays 100% for inpatient care and 80% for outpatient care after you meet a \$200 individual deductible.
- You pay a copay for prescription drug, which varies depending on the type and quantity of medication you receive.
- You will have access to well-being tools and resources to help you reach your personal health goals, including fitness benefits, tobacco cessation services, a 24/7 nurse line, and wellness discounts.

For more information about plan coverage, refer to the enclosed summary of benefits and frequently asked questions inserts.

Dedicated health advocates through RetireeFirst

You now have access to a team of advocates through RetireeFirst that are dedicated to building a relationship with you and helping you make the most of your retiree benefits.

RetireeFirst — a U.S.-based retiree advocacy service — provides personalized support and can help you:

- Understand your available benefits and navigate Medicare.
- Connect you to programs that can improve your health and wellbeing.
- Troubleshoot any issues you have with your provider's office or pharmacy or receiving the care you need.

One-time opportunity to switch your coverage

If you and/or your eligible dependents want to adjust the type of coverage you have through the Fund and you haven't previously elected to change coverage, you have a one-time opportunity to do so. You can change from prescription drug (PDP) to medical and prescription drug (MAPD), or vice versa. If you want to make a change, contact the Fund Office **by Nov. 30, 2023**, at **513-241-0444** Monday through Friday, 8 a.m. to 5 p.m. ET. This is a one-time opportunity to change your coverage; you will not be able to adjust your coverage at a later date.

Please join us for an in-person information session

You're invited to join us for an in-person information session to learn more about your new plan and meet RetireeFirst advocates. Spouses and dependents are invited to attend too. Sessions will be held at the Joint Apprenticeship Training Center (JATC) at 1300 Century Circle North, Springdale, Ohio.

Wednesday, Nov. 1
10 a.m. ET

Wednesday, Nov. 1
2 p.m. ET

RSVP by Oct. 25 by calling **513-216-4367** (TTY 711) or toll free at **855-430-7106** (TTY 711) Monday through Friday, 8 a.m. to 5 p.m. ET.

What to expect in the coming months

You can expect to receive these mailings before the end of the year:

- **Termination of coverage letter from your current plan(s)**
- **Anthem materials**
 - Pre-enrollment kit
 - Confirmation of enrollment letter
 - Welcome guide and ID card
 - Evidence of coverage (EOC)

Please keep in mind that each retiree, spouse, and/or dependent may receive the above items on different days.

- **RetireeFirst magnet** (post it on your refrigerator, so you have the number handy)

Opt-out option

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.

If you have questions about any information in this letter, please call RetireeFirst at **513-216-4367** (TTY 711) or toll free at **855-430-7106** (TTY 711) Monday through Friday, 8 a.m. to 5 p.m. ET.

We look forward to seeing you at the informational meeting on Nov. 1.

Sincerely,

The Board of Trustees
Plumbers, Pipefitters & Mechanical Equipment Service
Local Union No. 392 Health and Welfare Fund

Anthem Medicare Preferred Provider Organization (PPO) with Senior Rx Plus
 For Medicare-eligible participants in the Plumbers, Pipefitters & Mechanical Equipment
 Service Local Union No. 392 Health and Welfare Fund

Summary of Benefits	
Available providers	<ul style="list-style-type: none"> You can use any willing Medicare medical provider; no referrals are needed for Medicare-covered medical services.
Deductible	<ul style="list-style-type: none"> You pay a \$200 deductible per person.
Coinsurance	<ul style="list-style-type: none"> You typically pay 0% for inpatient care and 20% for outpatient care after the deductible.
Prescription drugs	<ul style="list-style-type: none"> For retail pharmacy benefits (for a 30-day supply): You pay \$8 for a generic medication, \$15 for a preferred brand-name medication, and \$20 copay for a non-preferred medication. For mail-order pharmacy benefits (90-day supply): You pay \$16 for a generic medication, \$30 for a preferred brand-name medication, and \$40 for non-preferred medication.
Routine annual hearing exam	<ul style="list-style-type: none"> You pay \$0 for routine hearing exam and hearing aid fitting evaluation once per calendar year.
Hearing aid allowance	<ul style="list-style-type: none"> You receive a \$1,000 hearing aid allowance every 3 calendar years (must use Hearing Care Solutions).
Routine annual eye exam	<ul style="list-style-type: none"> You pay \$0 for routine eye exams once per year.
Eyewear allowance	<ul style="list-style-type: none"> You receive a \$100 allowance once every 2 calendar years.
Fitness benefit	<ul style="list-style-type: none"> Access to SilverSneakers® (contact RetireeFirst for more details).

Important checklist

- √ You must be enrolled in Medicare Parts A and B to participate in the Anthem MAPD Plan.
- √ Beginning Jan. 1, 2024, you will use only your Anthem ID card for medical services and prescription drugs. Put your Medicare card in a safe place in case you need it later.
- √ If you want to use the mail-order pharmacy for prescriptions you take on a long-term basis, ask your provider for a new prescription. We'll talk about how to use the mail-order program at the in-person sessions.
- √ For prescriptions filled at retail pharmacies, simply show your new Anthem ID card that you will receive later this year.



Frequently Asked Questions (FAQ)

PLAN DESIGN

CARRIER



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

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 <ul style="list-style-type: none"> • \$120 for emergency care, deductible does not apply
Foreign travel coverage	<ul style="list-style-type: none"> • \$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 <ul style="list-style-type: none"> • \$0 routine eye exam, 1 per year, \$70 maximum benefit
Vision services	<ul style="list-style-type: none"> • \$100 eyewear allowance every 2 years • \$0 routine hearing exam and hearing aid fitting evaluations, 1 per year, \$70 maximum benefit
Hearing services	<ul style="list-style-type: none"> • \$500 hearing aid allowance per ear, \$1,000 total - every 3 years
	To receive benefits, you <u>MUST</u> use Hearing Care Solutions.
Fitness benefit	SilverSneakers

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-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

- 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.
- 2. Are there any plan changes?**
Your new Anthem plan will provide benefits comparable to your current medical and prescription drug benefits.
- 3. Is there a Part A and/or Part B deductible?**
Yes, there's a \$200 medical deductible.
- 4. 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.

5. Does this plan require referrals?

No, this plan does not require referrals.

6. Does this plan require pre-certifications?

Some services may require pre-certification. Talk with your provider to help determine if pre-certification is required.

7. 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.

8. Can I go to my current providers?

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

9. 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.

10. 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

11. Is there a prescription deductible?

No, there is no prescription deductible.

12. Is there catastrophic coverage?

Yes, you will have a \$0 copay in the catastrophic coverage phase.

13. 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.

14. 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.

15. 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.

16. 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.**

17. 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.

18. 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.

19. 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

20. 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.

21. 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)**.

22. 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.

23. 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.

24. Can I leave the plan and come back?

No, except for a qualifying life event.

25. If I leave the plan, will it affect any of my other benefits?

Yes, it may.

26. 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.

27. 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:

Anthem. **Anthem Medicare Preferred (PPO)**

<FormattedMemberName> **PL, PF & MES Local 392 HW Plan**

Member ID: **Senior Rx Plus**

Group:	OH039GRS	Office Visit Coinsurance:	20%
Issuer ID (80840):	9101000302	Specialist Visit Coinsurance:	20%
RxBIN:	020115	Emergency Room Copay:	\$120
RxPCN:	IS	Preventive Copay:	\$0
RxGRP:	WM2A		
RxID:			

CMS H4036-801

Plumbers Pipefitters Local Union 392 will utilize RetireeFirst to handle member contact for health plan administration. See back for contact information.

MedicareRx
Prescription Drug Coverage

Back:

Anthem. **anthem.com**

RetireeFirst Advocacy* 1-855-430-7106
Member Services: 1-833-910-4432
TTY/IDD Line: 711
Rx Member Services: 1-833-409-1228
Help for Pharmacists: 1-833-377-4266
Provider Services: 1-833-910-4432
24/7 NurseLine: 1-800-700-9184
 *Contracts directly with group sponsor

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.
 Possession of this card does not guarantee eligibility for benefits. Anthem Providers can submit claims to Availity.com or Medical, P.O. Box 533, North Haven, CT 06473 Pharmacy, Claims Department - Part D Svcs, P.O. Box 52077, Phoenix, AZ 85072-2077

Anthem Blue Cross and Blue Shield is the trade name of Community Mutual Life Company, independent licensee of the Blue Cross Blue Shield Association.

Issued: 10/06/2023