# **Northwest Ironworkers Trust Funds**

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> Administered by Welfare & Pension Administration Service, Inc.

Date: May 3, 2023

To: Medicare Retirees covered under the Northwest Ironworkers Health and Security Trust

Subject:Change to United Healthcare Medicare Advantage PPO and<br/>Prescription Drug (MAPD) Plan

Beginning July 2022, the medical and prescription coverage you receive through the Trust changed to United Healthcare (UHC) under what is called a Medicare Advantage PPO and Prescription Drug (MAPD) Plan (Note: this does not apply to retirees in Oregon enrolled in the Kaiser option).

Prior to this change, your coverage through the Trust was secondary to Medicare – meaning that Original Medicare (Parts A and B) paid first, and the Trust plan paid secondary. The Trust also provided your prescription drug coverage. The UHC MAPD plan that you are now covered under replaces Original Medicare and the Trust's secondary and prescription drug coverage.

Since the move to UHC the Trust has received questions and concerns about the new UHC MAPD coverage. This notice provides a more detailed explanation of how the UHC MAPD plan works and addresses some commonly asked questions about your benefits.

<u>You are still covered by Medicare</u> – A Medicare Advantage Prescription Drug (MAPD) Plan is a type of Medicare insurance plan offered by an insurance company (UHC in this case). UHC contracts with Medicare to provide your medical benefits (Medicare Parts A and B) as well as supplemental and prescription drug coverage similar to those previously provided by the Trust. When covered by a MAPD plan, **you are still enrolled in Medicare and must continue paying your Medicare Part B premium,** as you did before the change. The difference is your benefits are now being paid by UHC, instead of directly from Medicare and the Trust. You may also hear MAPD plans referred to as Medicare Part C plans.

<u>UHC Medicare Advantage (PPO) includes an "open" PPO network</u> – Some MAPD plans have a limited network of providers (doctors, hospitals, etc.). However, that is NOT the case with your UHC MAPD plan. Your plan is an "open" Preferred Provider (PPO) plan, meaning any provider that accepts Medicare payment can submit claims to UHC, even if they do not have a PPO contract with UHC. This can be confusing for providers, so be sure your providers know this is an "open" PPO plan. It is possible that some providers may still refuse to bill UHC. If you run into any issue with a provider not accepting your coverage, please contact LaborFirst immediately for assistance.

<u>LaborFirst (a division of RetireeFirst) can help you with your questions</u> – The Trust retained LaborFirst when the change to UHC happened. LaborFirst's role is to provide Customer Service representatives to assist you with any issues you are having regarding your coverage through UHC - ranging from access to a doctor to prescription drug coverage. If you have medical and prescription drug coverage questions or issues call LaborFirst. Do NOT call the UHC customer service number on the back of your ID card –

LaborFirst should be your first call for medical and prescription drug issues as their job is to assist you and be your advocate in dealing with issues related to your UHC coverage.

## The LaborFirst number is: (206) 259-5758 or (855) 433-1667

<u>What if you have Prescription Drug issues?</u> – If you are having difficulty with any prescription drug matter call LaborFirst. They can assist you with questions on:

- The amount you are paying out of pocket.
- Problems with mail-order prescriptions.
- Drugs being covered or excluded (Formulary issues).
- Other questions related to your prescription drug coverage.

<u>What is your Glasses/Vision Benefit?</u> – You have access to an annual vision test through the UHC MAPD plan, but no benefit for glasses or contact lenses. Your benefit for glasses and contact lenses under the Trust is the same as you had before the move to UHC. The Trust uses the VSP Vision Care network (vsp.com), and you can use the same eye doctor or provider that you used prior to the change, or any other eye doctor/provider covered under the VSP network. When you go to an eye doctor/provider office make sure to tell them you have coverage through VSP. Most offices can look up your VSP coverage online. Do not show your eye doctor/provider your UHC card. If you show your UHC card, your eye doctor/provider may not be aware you have VSP and may only quote you the UHC annual vision test coverage.

<u>What is your Hearing Benefit?</u> – Under the UHC MAPD plan you have access to a hearing benefit, including a routine hearing exam each year and \$2,000 every three years toward the cost of hearing aids. However, the range of hearing aid options available under the UHC plan are limited. **The Trustees have expanded access to hearing aids to provide you with the same hearing aid benefit you had prior to the change to UHC.** You may choose which benefit to use (UHC or the Trust) when purchasing hearing aids. The Trust benefit will be effective retroactive to July 1, 2022, and is as follows:

### **Trust Hearing Benefit**

### HEARING AIDS

Hearing aids are covered when there is an examination by a Physician who **provides written certification** of a hearing loss that may be lessened by the use of a hearing aid. Benefits will **not** be provided without this certification.

Benefits are limited to \$2,000 in a three consecutive year period, which includes: the purchase of a hearing aid instrument (monaural or binaural) prescribed as a result of the examination; ear mold(s); the initial batteries, cords and other necessary ancillary equipment; a warranty; and follow-up consultation within 30 days following delivery of the hearing aid.

The following are not covered:

- The replacement of a hearing aid for any reason more than once in a three-year period.
- Batteries or related equipment other than that obtained upon purchase of the hearing aid.
- Repairs, servicing or alteration of hearing aid equipment.
- A hearing aid which exceeds the specifications prescribed for correction of hearing loss.

• Expenses incurred after termination of coverage under this Plan except expenses for a hearing aid which was ordered prior to termination and was delivered within 45 days after the date of termination.

Charges are not subject to the Medical deductible or Out-of-Pocket Maximum.

#### HEARING EVALUATION

The following expenses for a hearing evaluation are covered once each calendar year:

- One otologic examination by a Physician.
- One audiologic examination and hearing evaluation by a certified or licensed audiologist including a follow-up consultation.

Charges are not subject to the Medical deductible.

<u>What is your Dental Benefit?</u> – No dental coverage is available under the UHC MAPD plan. Optional dental benefits are available through the Trust. You must enroll in dental coverage under the Trust within 30-days of your retirement and pay the additional premium to the Trust. If you stop paying for dental coverage at any time you will lose this coverage and not be able to re-enroll later.

The following table provides a quick reference for where to call when you have questions on your various benefits:

Benefit	Who Provides Coverage	Contact for Questions/Issues
Medical and Prescription Drug	United Healthcare MAPD	LaborFirst – (206) 259-5758 or (855) 433-1667
Glasses/Vision	VSP Vision Care	VSP – (800) 877-7195
Hearing Care/Hearing Aids (Trust Coverage)	Trust	WPAS – (866) 986-1515
Hearing Care/Hearing Aids (UHC MAPD Coverage)	United Healthcare MAPD	LaborFirst – (206) 259-5758 or (855) 433-1667
Dental	Trust	WPAS – (866) 986-1515
Retiree Health Contributions	Trust	WPAS – (866) 986-1515

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S-Mailings Individual Trust Fund Mailings (SMM, Benefit Changes, COBRA, etc.) (F15\F15-02 - Mailing - 2023 - 05.03 - Change to United Healthcare Medicare Advantage PPO and Prescription Drug Plan.docx

**Important Reminder** - You must advise the Administration Office of any changes in your basic demographic data, including changes in your name, marital status, dependents, other insurance coverage available, designated beneficiary, home address, email address and telephone number. Provide information changes by completing and sending a new Enrollment Form to the Administration Office. If you have a change in dependents: divorce requires a complete filed copy of your divorce decree along with any accompanying court orders including the parenting plan. Marriage requires a copy of your marriage certificate, the parenting plan for stepchildren and their birth certificates.