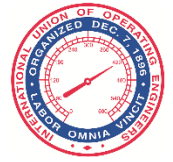


2025 – Locals 302 & 612 of the International Union of Operating Engineers Construction Industry Health and Security Fund Medicare Advantage with Prescription Drug Plan (MAPD)



Frequently Asked Questions

Plan Design

Medical Carrier:

Humana.

Medical	You pay
Deductible	\$0
Office Visit: Primary Care	\$0
Office Visit: Specialist	\$0
Inpatient Hospital	\$0 per admission
Outpatient Care	\$0
Skilled Nursing Facility	\$0, days 1-100
Emergency Room	\$0
Urgent Care	\$0
Ambulance Service	\$0
Lab Services	\$0
Durable Medical Equipment	\$0

Preventative Screenings	\$0
Chiropractic	\$0 – 20 visits per year
Acupuncture	\$0 – unlimited visits
Podiatry	\$0 – 6 visits per year
Foreign Travel (World-wide) Coverage	\$100 deductible, 20% coinsurance, \$25,000 Maximum Annual Benefit or 60 consecutive days, whichever is reached first. Limited to emergency Medicare-covered services.
Hearing	<p>\$0 routine hearing exams up to 1 per year</p> <p>\$3000 maximum benefit coverage amount for hearing aid(s) (all types) up to 2 per year.</p> <p>Note: Includes 80 batteries per aid and 3-year warranty.</p> <p>To utilize this allowance, you must obtain hearing aids from a provider in the TruHearing network.</p>
Private Duty Nursing	\$0 – Unlimited (Member's Home)
Fitness Benefit	SilverSneakers Included

Prescription Carrier			
Humana.			
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	\$10	\$20	\$20
Tier 2 Preferred Brand	\$25	\$40	\$40
Tier 3 Non-Preferred Brand	\$40	\$60	\$60
Tier 4 Specialty	\$40	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 this new 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 for use effective January 1, 2025.

3. Can I opt-out of this plan?

While you are going to be automatically enrolled, we are required by law to give you the choice of opting out of the new plan. Since you are enrolled in the current medical and prescription drug plan it is unlikely that you would not want to participate in this new plan. However, you have the option to opt-out and decline

this medical and prescription coverage. If you do opt-out, you will no longer have any medical or prescription drug coverage through the Operating Engineers retiree plan. If you would like to opt-out, please call RetireeFirst at **(206) 347-7217 (TTY 711) or toll free (855) 250-9941 (TTY 711)** Monday-Friday, 8am-5pm PST.

4. Are there any plan changes?

Locals 302 & 612 of the International Union of Operating Engineers Construction Industry Health and Security Fund did their best to match or enhance your current medical and prescription drug benefits. Below are a few highlights of your new plan:

- You have a \$0 Medical and Prescription Deductible with this plan.
- You pay \$0 copay for Primary Care and Specialist Visits.
- You pay \$0 copay for Inpatient Hospital Care and Outpatient Surgery.
- You pay \$0 copay for Private Duty Nursing.
- One routine hearing exam per year is \$0 cost to you.
- You have a \$3000 Maximum Benefit Coverage Amount for Hearing Aids, up to 2 per year, with 80 batteries per aid and a 3-year warranty included.
To utilize this allowance, you must obtain hearing aids from a provider in the TruHearing network. Please call RetireeFirst at (206) 347-7217 (TTY 711) or toll free (855) 250-9941 (TTY 711) Monday-Friday 8AM-5PM PST for assistance finding an in-network provider.
- 6 podiatry visits per year are \$0 cost to you.
- 20 Chiropractic visits per year are \$0 cost to you.
- Access to SilverSneakers Fitness Benefit.
- 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 of December prior to your January 1, 2025, start date. Medicare 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 **(206) 347-7217 (TTY 711) or toll free (855) 250-9941 (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.

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

Yes, it may. If you leave the plan, you will not be allowed to re-enroll later unless you meet special enrollment provisions and will not be allowed to keep your ancillary VSP vision or Delta Dental benefits through the Trust. Additionally, if you have a spouse covered under the plan, they will not be allowed to remain on the plan if you leave.

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

Locals 302 & 612 of the International Union of Operating Engineers Construction Industry Health and Security Fund can be reached at (877) 441-1212 or retireemedical@wpas-inc.com to answer any billing questions.

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

Please call RetireeFirst at **(206) 347-7217 (TTY 711) or toll free (855) 250-9941 (TTY 711)** to reach your dedicated Locals 302 & 612 of the International Union of Operating Engineers Construction Industry Health and Security Fund Retiree Advocacy Team, Monday-Friday, 8am-5pm, PST.

Medical Questions

10. Is there a medical deductible?

No, there is no medical deductible with this plan. The ancillary Foreign Travel Coverage benefit does have a \$100 deductible, which only applies to that benefit.

11. Is there co-insurance or copays?

No, there is no co-insurance or copays for medical services with this plan. The ancillary Foreign Travel Coverage benefit has 20% coinsurance.

12. Does this plan require referrals?

No, this plan does not require referrals.

13. Does this plan require pre-certifications?

Some services may require pre-certifications.

14. Does this plan have a network?

Yes, but you can go to any provider, hospital, or facility that accepts Medicare patients and is willing to bill Humana. This plan's in and out of network benefits are the same.

15. Can I go to my current providers?

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

16. 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 Humana ID Card for medical and prescriptions.

17. 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 provider, hospital, or facility that accepts Medicare patients and is willing to bill Humana. Please call RetireeFirst at **(206) 347-7217 (TTY 711) or toll free (855) 250-9941 (TTY 711)** to assist; we can reach out to your provider to explain.

Prescription Questions

18. Is there a prescription deductible?

No, there is no prescription deductible with this plan.

19. Is there co-insurance or copays?

Yes, there are copays for prescriptions with this plan. These are listed in the table on page 3 of this document.

20. Are my prescriptions covered?

Most likely yes, the prescription list is a comprehensive formulary just as before. Please call RetireeFirst at **(206) 347-7217 (TTY 711) or toll free (855) 250-9941 (TTY 711)** if you need help looking up your prescriptions.

21. Can I go to the same retail pharmacy?

Most likely, yes. There should be little to no pharmacy disruption. Humana has over 66,000 pharmacies in network. You do NOT need new prescriptions for retail pharmacy refills.

22. Is there a mail order pharmacy?

There is a mail order pharmacy called CenterWell Pharmacy which can be reached at 800-379-0092 (TTY 711). You can also call RetireeFirst at **(206) 347-7217 (TTY 711) or toll free (855) 250-9941 (TTY 711)** with questions about mail order prescriptions.

23. 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, but you will need to show your new ID card when you pick up prescriptions starting January 1, 2025. If you use mail order, you WILL need to obtain new prescriptions from your provider.

24. 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.

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

Some prescriptions may require a prior authorization. Please contact RetireeFirst at **(206) 347-7217 (TTY 711) or toll free (855) 250-9941 (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.

26. 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. This coverage phase kicks in when you reach a true out of pocket total of \$2000 for prescription drugs. Keep in mind, lifestyle and non-part D prescription drugs do not count toward your out-of-pocket total.

Other Benefit Questions

27. Do I have vision coverage?

Yes, however vision coverage will not be through the Humana MAPD. You will continue to have the same vision coverage through the Trust that you've always had. The Trust uses the VSP network, and you can use the same eye doctor or provider that you used prior to this change, or any other eye doctor/provider covered under the VSP network.

28. Is dental covered under this plan?

Dental coverage is not part of the Humana MAPD. However, you will continue to have the same dental coverage options through the Trust that you've always had. There are three coverage options available through Delta Dental and you pay the full cost for the option you select.

29. Are hearing benefits available outside the TruHearing network?

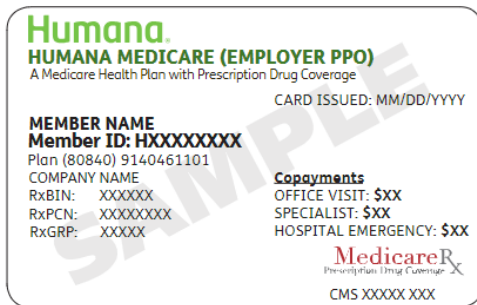
The greatest hearing benefit is available through the TruHearing network which is included in the Humana MAPD. If you aren't able to use the TruHearing network for hearing benefits you can still be reimbursed by the Trust through the Trust's current hearing care benefit. Please note, the Trust's hearing benefit is 80% after a \$100 deductible, limited to \$1,000 per ear every three years and is only available to retired employees. These self-pay claims must be submitted to WPAS for reimbursement.

For Questions concerning Vision or Dental Enrollment and non-PPO Hearing Aid Benefits, contact WPAS at 1-877-441-1212.

Humana Medicare Advantage with Prescription Drug (MAPD)

PPO Plan 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.