IBEW LOCAL 683 HEALTH AND WELFARE PLAN

To: Our Medicare-Eligible Retired Members

From: IBEW Local 683 Health and Welfare Plan Board of Trustees

Date: September 2022

Subject: Your health plan coverage is changing



IMPORTANT NOTICE

Your health and well-being are a priority for the Fund and the Board of Trustees. You've spent years working, and we want you to enjoy retirement knowing that your retiree benefits are here to protect you. For this reason, we're pleased to offer the Senior Retirees a new Medicare Advantage plan through Aetna, available January 1, 2023.

In the coming weeks, you'll receive more detailed information from Aetna about your new Medicare Advantage plan and how it works. In the meantime, please read this letter and the attached frequently asked questions carefully. In addition, you will want to attend a retiree meeting, hosted by the Fund, that will discuss more details of your new plan. Please know that there will be plenty of opportunities to have your questions answered.

What you need to know

- Starting January 1, 2023, the Senior Retirees' new medical and prescription drug plan will be the Aetna Medicare Advantage Preferred Provider Organization (PPO) plan. It will replace the previous Senior Retiree IBEW Local 683 Health and Welfare Retiree Coverage.
- No action is required, unless you want to opt out of the Senior Retiree Aetna Medicare Advantage
 PPO plan. If you and your spouse are covered under the Senior Retiree IBEW Local 683 Health and
 Welfare Retiree Coverage, you will both be automatically enrolled in the Senior Retiree Aetna Medicare
 Advantage PPO plan with coverage beginning January 1.
- If you'd like to opt out of the Senior Retiree Aetna Medicare Advantage PPO plan, call Aetna at **800-307-4830**, Monday–Friday, 8 a.m.–9 p.m. ET, by October 31, 2022.
 - Before doing so, please note that once you opt out of the Senior Retiree Aetna Medicare Advantage PPO plan, you will only be able to return to the Senior Retiree plan if you have maintained continuous coverage through another qualified plan and enroll in the Senior Retiree coverage within the first 60 days after the last month when coverage ended.
- Every member covered by the new plan will receive new member ID cards from Aetna, which can be used for medical services and prescriptions.

About the Senior Retiree Aetna Medicare Advantage PPO plan

The Senior Retiree Aetna Medicare Advantage PPO plan is a Medicare Advantage plan that delivers benefits beyond Original Medicare (Parts A and B) and includes basic prescription drug coverage (Part D). Through the Senior Retiree Aetna Medicare Advantage PPO plan, you'll be able to use any doctor, hospital, or specialist in or out of the Aetna Medicare Advantage PPO network, without paying more for out-of-network services. This is as long as the provider has accepted the plan and has not opted out or has been excluded from Medicare. Through this plan, you'll also have access to programs like lifestyle coaching and Aetna's employee assistance program (EAP), called Resources For Living®, to help you stay healthy all year long.

Important: The Senior Retiree Aetna Medicare Advantage PPO plan is not a supplement plan and does not pay secondary to Medicare. All claims for payment are submitted directly to Aetna, not Medicare.

Additionally, you can only be enrolled in one Medicare program at a time. This means that you cannot enroll in both the Senior Retiree Aetna Medicare Advantage PPO plan and any other Medicare Advantage plan or Part D plan. If you enroll in another Medicare plan after enrolling in the Senior Retiree Aetna Medicare Advantage PPO plan, you will be automatically disenrolled from the Senior Retiree Aetna Medicare Advantage PPO plan.

What's next?

Watch your mail for a welcome kit from Aetna with more information.

Mark your calendars for a scheduled retiree meeting to learn more about your new benefits. Note that you'll only need to attend one of the two meetings below, as the same information will be presented at both meetings. The meetings will be held at the Local 683 building at 939 Goodale Boulevard, Columbus, Ohio, on the following days:

October 4, 2022, at 1 p.m. ET October 5, 2022, at 9 a.m. ET

We will also offer a virtual meeting on October 6, 2022, at 7 p.m. ET. Visit <u>aet.na/ibew683</u> and follow the steps on the homepage to register. Once registered, you'll receive an email reminder in advance of the meeting.

Know that the Fund and our dedicated Aetna support team will continue to keep you updated as we move through this transition process together. If you have any immediate questions, please refer to the contact table below.

CONTACT	то	HOW
Aetna	Learn about plan benefits Find a provider Look up prescription drugs Opt out of coverage	Visit <u>aetnamedicare.com</u> or call 800-307-4830 , Monday–Friday, 8 a.m.–9 p.m. ET
Fund Office	Ask about eligibility Make changes in coverage	Visit ibew683benefits.org or call TIC International Corporation, 844-683-0683, Monday-Friday, 7:30 a.m5:30 p.m. ET
Medicare	Questions about Medicare Parts A and B	Visit <u>medicare.gov</u> or call 800-633-4227 (TTY 877-486-2048), 24 hours a day, 7 days a week

SENIOR RETIREE AETNA MEDICARE ADVANTAGE PPO PLAN Frequently Asked Questions

1. Who is eligible for the Senior Retiree Aetna Medicare Advantage PPO plan?

Retirees who are over 65 and currently covered under the IBEW Local 683 Health and Welfare Retiree Coverage are eligible for the Senior Retiree Aetna Medicare Advantage PPO plan.

2. How do I enroll in the Senior Retiree Aetna Medicare Advantage PPO plan?

You will automatically be enrolled in the Senior Retiree Aetna Medicare Advantage PPO plan on January 1, 2023. No additional action is needed on your part for enrollment.

3. What if I don't want to be enrolled in the new plan?

If you don't want to be enrolled in the Senior Retiree Aetna Medicare Advantage PPO plan, you can opt out by calling Aetna at **800-307-4830**, Monday–Friday, 8 a.m.–9 p.m. ET, by October 31, 2022.

Important: Once you opt out of coverage, you will only be able to return to the Senior Retiree Aetna Medicare Advantage PPO plan if you have maintained continuous coverage through another qualified plan and enroll in the Senior Retiree coverage within the first 60 days after the last month when coverage ended.

4. What will I have to pay for the program?

You will continue to pay the same premium rates you are currently paying.

5. Will I get a new member ID card?

Yes, watch your mail for a new Senior Retiree Aetna Medicare Advantage PPO plan member ID card.

6. What are my benefits with the Senior Retiree Aetna Medicare Advantage PPO plan?

Through the Senior Retiree Aetna Medicare Advantage PPO plan, you have medical, dental, and vision coverage, as well as prescription drug coverage and hearing benefits. You also have access to additional programs through Aetna, such as:

- Lifestyle coaching and tobacco cessation
- Resources For Living® employee assistance program (EAP)
- SilverSneakers fitness benefit
- 24/7 Nurse Line, and more!

7. How do I know if my doctors, hospitals or specialists participate in the Senior Retiree Aetna Medicare Advantage PPO plan?

You'll be able to use any doctor, hospital or specialist in or out of the Aetna Medicare Advantage PPO network, without paying more for out-of-network services. This is as long as the provider has accepted the plan and has not opted out or has been excluded from Medicare. If you need help finding a provider or seeing if your current providers are in- or out-of-network, visit **aetnaretireeplans.com**.

8. Will my current medications be covered?

Every prescription drug plan has a list of covered medications, called a formulary. To view the formulary for the Senior Retiree Aetna Medicare Advantage PPO plan, visit **aetnaretireeplans.com** and scroll to the "Manage Your Prescription" section. Know that when reviewing the Aetna formulary, the Board of Trustees compared it to your current formulary and found minimal disruption.

9. Do I need to be enrolled in Medicare to be eligible for the Senior Retiree Aetna Medicare Advantage PPO plan?

You must be enrolled in Medicare Parts A and B, submit proof of enrollment to Aetna, and continue to pay your Part B premiums to Social Security, in order to be eligible for the Senior Retiree Aetna Medicare Advantage PPO plan provided through the Fund. If you stop paying your Medicare premiums, you may be disenrolled from the Senior Retiree Aetna Medicare Advantage PPO plan.

If you need to enroll in Medicare Parts A and B or are not sure if you're currently enrolled, visit the Social Security website at <u>ssa.gov/locator</u>, or call **800-772-1213**, TTY **800-325-0778**, 8 a.m.–7 p.m., Monday–Friday. You can also call the Fund's office.

10. What if my spouse is not yet eligible for Medicare?

The Senior Retiree Aetna Medicare Advantage PPO plan will NOT cover spouses who are not yet eligible for Medicare. Their coverage will continue to be provided through the IBEW Local 683 Health and Welfare Fund's regular plan, and they will be issued their own prescription ID cards. When they become eligible for Medicare, they will be transferred to the Senior Retiree Aetna Medicare Advantage PPO plan.

Aetna Medicare is a PDP, HMO, PPO plan with a Medicare contract. Our SNPs also have contracts with State Medicaid programs. Enrollment in our plans depends on contract renewal. See Evidence of Coverage for a complete description of plan benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by service area. This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments, and restrictions may apply. Benefits, formulary, pharmacy network, provider network, premium and/or co-payments/co-insurance may change on January 1 of each year. You must continue to pay your Medicare Part B premium. The formulary, pharmacy network, and/or provider network may change at any time. You will receive notice when necessary. Out-of-network/non-contracted providers are under no obligation to treat Aetna members, except in emergency situations. For a decision about whether we will cover an out-of-network service, we encourage you or your provider to ask us for a pre-service organization determination before you receive the service. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services. Participating physicians, hospitals and other health care providers are independent contractors and are neither agents nor employees of Aetna. The availability of any particular provider cannot be guaranteed, and provider network composition is subject to change.

Aetna complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. ATTENTION: If you speak a language other than English, free language assistance services are available. Visit our website at aetnamedicare.com, or call the phone number listed in this material.

ESPAÑOL (SPANISH): ATENCIÓN: Si usted habla español, se encuentran disponibles servicios gratuitos de asistencia de idiomas. Visite nuestro sitio web en **aetnamedicare.com** o llame al número de teléfono que se indica en este material.

繁體中文 (CHINESE): 請注意:如果您說中文,您可以獲得免費的語言協助服務。請造訪我們的網站 <u>aetnamedicare.com</u> 或致電本材料中所列的電話號碼。 GRP_4001_1512 05/2018

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