



FREQUENTLY ASKED QUESTIONS (FAQs)

EnvisionRxPlus Employer Group Retiree PDP

Starting **January 1, 2020**, EnvisionRxPlus Employer Group Retiree PDP will be the new prescription drug plan for retired members and their covered spouses and/or covered dependent children who are eligible for Medicare. These FAQs will answer many of your questions.

Q1: What is EnvisionRxPlus Employer Group Retiree PDP?

A1: EnvisionRxPlus Employer Group Retiree PDP (referred to as “EnvisionRxPlus”) is a group Medicare Part D prescription drug plan with additional coverage provided by Puget Sound Electrical Workers Healthcare Trust (the “Trust”). It will provide prescription drug coverage for retired members and their covered spouses and/or covered dependent children who are eligible for Medicare.

EnvisionRxPlus is offered by Envision Insurance Company which has a contract with Medicare. The plan is administered by EnvisionRx, the Trust’s current pharmacy benefit manager.

Q2: What does the “Employer Group Retiree PDP” mean?

A2: “Employer Group Retiree PDP” means that it is an employer-provided (Puget Sound Electrical Workers Healthcare Trust -provided) group retiree Medicare Part D Prescription Drug Plan. EnvisionRxPlus combines a standard Medicare Part D prescription drug plan with additional coverage provided by the Trust, to close the gaps between the standard Part D plan and your current coverage. This means that you will have **more coverage than a standard Medicare Part D plan**.

Q3: What is Medicare Part D?

A3: Medicare Part D is Medicare prescription drug coverage that helps to cover the cost of prescription drugs for anyone who is entitled to Medicare Part A and/or enrolled in Medicare Part B. It is provided through private insurance companies, health plans, or group plans.

Q4: Why is the Puget Sound Electrical Workers Healthcare Trust changing to EnvisionRxPlus?

A4: The move to EnvisionRxPlus will change the way the Trust manages ever-rising prescription drug costs. With EnvisionRxPlus, the Trust can take advantage of more favorable government subsidies and benefits available with an employer-provided group



Medicare Part D plan. In turn, this will help to keep costs down for both the Trust and for our members.

Q5: How do I qualify for a Medicare Part D plan?

A5: To qualify for a Medicare Part D plan, you must:

- Be entitled to Medicare Part A and/or enrolled in Medicare Part B, and
- Be a U.S. citizen or lawfully present in the United States, and
- Live in the plan's service area which includes all 50 states, the District of Columbia, Puerto Rico and Guam.

Q6: Who may be covered by EnvisionRxPlus Employer Group Retiree PDP for Puget Sound Electrical Workers Healthcare Trust retirees?

A6: To be eligible for EnvisionRxPlus Employer Group Retiree PDP for Puget Sound Electrical Workers Healthcare Trust, you must:

- Be eligible for coverage provided by the Trust, and
- Be entitled to Medicare Part A and enrolled in Medicare Part B, and
- Be eligible for Medicare Part D, and
- Live in the EnvisionRxPlus service area which includes all 50 states, the District of Columbia, Puerto Rico and Guam, and
- Meet any additional eligibility requirements for this plan established by the Trust.

Q7: What information will the Puget Sound Electrical Workers Healthcare Trust need to enroll me in the plan?

A7: You will be contacted by the Administration Office if any information is needed to enroll you in the plan, such as

- Your **Medicare Claim Number** from the old Medicare Health Insurance card (*right*)
- or
- Your **Medicare Number** from the new Medicare Health Insurance card (*right*)

MEDICARE HEALTH INSURANCE
1-800-MEDICARE (1-800-633-4227)
NAME OF BENEFICIARY
MEDICARE CLAIM NUMBER
SEX ☐ MALE ☐ FEMALE
IS ENTITLED TO
HOSPITAL (PART A)
MEDICAL (PART B)
EFFECTIVE DATE

MEDICARE HEALTH INSURANCE
Name/Nombre
JOHN L. SMITH
Medicare Number/Número de Medicare
1EG4-TE5-MK72
Coverage starts/Comenzará a empezar
HOSPITAL (PART A) 03-01-2016
MEDICAL (PART B) 03-01-2016



Q8: When does my coverage in EnvisionRxPlus begin?

A8: Your coverage in EnvisionRxPlus will begin on **January 1, 2020**, if you are currently eligible for Medicare.

There will be **no interruption in your prescription drug coverage**. You will remain in your current EnvisionRx plan through **December 31, 2019**. On **January 1, 2020**, your coverage through EnvisionRxPlus will begin.

Q9: Why are my spouse and I both receiving information from EnvisionRxPlus?

A9: Medicare is an individual benefit. That means that every person has his or her own account with Medicare. Each person in your family who is eligible for Medicare will receive his or her own documents and his or her own ID card from EnvisionRxPlus.

When you get your prescriptions filled, make sure to use your own ID card. Your spouse, and/or your covered dependent child who is eligible for Medicare, needs to use his or her own ID card to get his or her prescriptions filled.

Q10: What happens to my spouse or my child who is covered by the Puget Sound Electrical Workers Healthcare Trust but is not eligible for Medicare?

A10: Your spouse and/or your child who are eligible for coverage from the Trust but are not eligible for Medicare will continue to be covered on the current EnvisionRx plan. He or she should continue to use his or her current ID card for his or her prescriptions.

Q11. What do I have to pay when I get my prescription filled?

A11. This new prescription drug plan combines the Trust's current prescription drug benefits with Medicare Part D and is designed to mirror your current prescription drug benefit. That means you will pay the **same coinsurance and/or copayment** that you currently pay for generic, preferred and non-preferred brand name drugs. Please note, some drugs may move from preferred to non-preferred status (or vice versa) under EnvisionRxPlus.

You will now be able to get up to a 90-day supply of your non-specialty medications at a retail pharmacy, instead of just a 30-day supply. Your copayment for up to a 90-day supply at a retail pharmacy will be three times the copayment for a 30-day supply.

You will continue to pay the designated copay for generic drugs filled at **Costco retail and Costco mail-order pharmacies**.

Q12. How does my prescription drug benefit work with Medicare Part D?

A12. In the materials you will receive from EnvisionRxPlus, you will see information that shows the different stages or benefit levels for a standard Medicare Part D plan.



You don't have to worry about the different stages. The additional coverage provided by Puget Sound Electrical Workers Healthcare Trust covers the gaps between the standard Medicare Part D plan and your current coverage. You will have the **same copayment** for generic, preferred and non-preferred brand named drugs that you have in your current EnvisionRx plan.

Once you reach Medicare's out-of-pocket maximum of \$6,350, you pay the lower of your current Puget Sound Electrical Workers Healthcare Trust copayment or Medicare's catastrophic coverage copayment.

Q13. How does a Medicare Part D plan work?

A13. The **standard Medicare Part D plan** has four stages or benefit levels. This is how these stages work in 2020 for a standard Medicare Part D plan and for your EnvisionRxPlus plan:

Stage	Standard Medicare Part D Plan <u>without</u> your additional coverage provided by Puget Sound Electrical Workers Healthcare Trust	EnvisionRxPlus <u>with</u> your additional coverage provided by Puget Sound Electrical Workers Healthcare Trust <u>This is what you pay</u>
Deductible	\$ 435	\$0
Initial Coverage	After meeting the deductible, a person pays 25% of the drug cost until he or she reaches \$4,020 in total drug costs.	Since you have no deductible, you start in this stage and pay your Puget Sound Electrical Workers Healthcare Trust copayment.
Coverage Gap	Also called the "donut hole," this is when a person pays a larger portion of the cost, either <ul style="list-style-type: none"> • 25% of the brand-name drug cost • 25% of the generic drug cost 	You continue to pay only your Puget Sound Electrical Workers Healthcare Trust copayment.
Catastrophic Coverage	After a person reaches \$6,350 in Medicare Part D out-of-pocket costs, he or she pays the greater of : <ul style="list-style-type: none"> • 5% of the drug cost, or • \$3.60 for generic drugs • \$8.95 for brand-name drugs 	After you reach \$6,350 in Medicare Part D out-of-pocket costs, you pay the lower of : <ul style="list-style-type: none"> • Your Puget Sound Electrical Workers Healthcare Trust copayment or • The Medicare Catastrophic Coverage cost-share, the <u>greater of</u>



		<ul style="list-style-type: none">○ 5% of the drug cost, or○ \$3.60 for generic drugs○ \$8.95 for brand-name drugs
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Q14: What does the additional coverage provided by the Puget Sound Electrical Workers Healthcare Trust cover?

A14: The additional coverage provided by the Trust fills the gap between the standard Medicare Part D plan and your current coverage, such as:

- Paying the difference in cost between your current copayment and what a standard Medicare Part D plan would pay. You have NO deductible and will not pay increased costs during the Coverage Gap. You will only pay your defined copay.
- Covering certain drugs not on EnvisionRxPlus' Medicare Part D drug list or formulary.
- Covering certain drugs that are not covered by Medicare Part D.

Q15: Which pharmacies can I use?

A15: You will still be able to go to the same network pharmacies that are available under your current EnvisionRx plan, including Costco retail pharmacies as well as Costco mail order pharmacy.

In addition, you will have access to network pharmacies at long-term care facilities and home infusion centers that are not available through the EnvisionRx pharmacy network.

You will continue to have the option to get your prescriptions filled at an out-of-network retail pharmacy and request reimbursement.

You can search a full list of pharmacies by logging into members.envisionrxplus.com on January 1, 2020 or after. Prior to January 1, our customer care team can help you find pharmacies that will be in your network after your new coverage is effective.

Q16: What happens if I use a pharmacy that is not part of EnvisionRxPlus' pharmacy network?

A16: You may be covered when you get your prescriptions filled at an out-of-network Pharmacy. However, in many cases you may be responsible for the full cost of the drug.

For prescriptions filled at out-of-network pharmacies, the plan will reimburse you:



- For drugs listed on the EnvisionRxPlus formulary - The cost of the drug less your copayment.
- For drugs that are not listed on the EnvisionRxPlus formulary and are paid by the additional coverage provided by the Trust - Only the amount that the Trust would have paid at a network pharmacy minus your copayment.

If you go to an out-of-network pharmacy and try to use your ID card to fill a prescription, the pharmacy may not be able to submit the claim directly to EnvisionRxPlus. When that happens, you will have to pay the full cost of your prescription. You will need to send your request for reimbursement to EnvisionRxPlus, along with your receipt showing the payment you have made. We encourage you to contact EnvisionRX Plus or the Trust Office before paying the full cost of your prescription to see if there are alternatives available to you such as using an in-network pharmacy and making sure your pharmacist is putting your prescription through your Part D plan before the Trust's wrap plan.

Q17: May I get my prescriptions filled at a Veterans Affairs (VA) pharmacy?

A17: No. VA pharmacies cannot be included in Medicare Part D plan networks. The federal government does not allow you to receive benefits from more than one government program at the same time.

If you are eligible for VA benefits, you may still use VA pharmacies under your VA benefits. Each time you get a prescription filled, you can compare the Trust's benefit through EnvisionRxPlus to your VA benefit and determine the best option for you.

Q18: What is a formulary?

A18: For EnvisionRxPlus, the formulary is the list of drugs covered by the Medicare Part D portion of the plan. It includes both brand name and generic drugs selected by the plan with the help of doctors and pharmacists.

The additional coverage provided by the Trust will cover certain drugs that are not included in the EnvisionRxPlus formulary or covered by Medicare Part D.

Q19: What if my drug is not on the formulary?

A19: The additional coverage provided by the Trust will cover certain drugs that are not included in the EnvisionRxPlus formulary or covered by Medicare Part D.

You will receive an *Abridged Formulary* booklet in your Welcome Kit in December which lists the most commonly used drugs covered by the Medicare Part D portion of your plan. If your drug is not listed in this booklet, you can call EnvisionRxPlus Customer Care at 1-844-293-4760 to find out if it is covered. TTY users should call 711.



Q20: What should I do if I get a letter saying that I am taking a drug not covered by EnvisionRxPlus?

A20: Call EnvisionRxPlus Customer Care to find out if your drug is covered by the additional coverage provided by the Trust. If your medication was initially denied for coverage, you may be able to submit an appeal for coverage.

If your drug is not on the EnvisionRxPlus formulary, EnvisionRxPlus is required by Medicare to send you a letter, even if your medication is covered through the additional coverage provided by the Trust.

Q21: I take a maintenance medication and have refills that will continue after January 1, 2020. What do I need to do?

A21: Any eligible mail-order prescriptions with refills remaining will be transferred automatically from EnvisionRx to EnvisionRxPlus.

If you have filled your maintenance medications at a retail pharmacy, you just need to go to your pharmacy and show your pharmacist the EnvisionRxPlus information on your new ID card after January 1, 2020.

Q22: What do I need to do if my drug can be covered under Part B or Part D?

A22: Certain drugs may be covered under Part B for some medical conditions and under Part D for other medical conditions. If your drug can be covered under Part B or Part D, you will need to obtain a Part B or Part D determination, a special kind of prior authorization, before the drug can be filled after January 1, 2020.

Through the additional coverage provided by the Trust, you will still be able to get your drug when you go to the pharmacy, but the Part B or Part D determination is still required by Medicare.

Drugs that require a Part B or Part D determination have “BD” next to them in the *Abridged Formulary* which you will receive in December. If you are currently taking a drug that will require a Part B or Part D determination after January 1, 2020, you should contact your doctor to start the Part B or Part D determination process.

If you have any questions, please contact EnvisionRxPlus Customer Care at 1-844-293-4760, 24 hours a day, 7 days a week. TTY users should call 711.

Q23: What is Medication Therapy Management?

A23: Medicare requires Medicare prescription drug plans to offer an optional, free service called Medication Therapy Management (MTM). If you take multiple medications, have a chronic condition or high drug costs, you may be invited to participate in a MTM



program designed for your specific health issue. You may choose not to participate, but you should carefully consider taking advantage of this free service.

Q24: What is Extra Help?

A24: Extra Help is a Medicare program that helps individuals who have low income and resources to pay for prescription drug costs. For 2020, you may qualify if you have

- No more than \$18,735 in income or \$14,390 in resources for an individual
- No more than \$25,365 in income or \$28,720 in resources for a married couple

Resources include such things as bank accounts, stocks and bonds. Social Security does not count your home, car, or any life insurance policy as resources. You may still qualify even if your income is over the amounts above.

Q25: How do I know if I am eligible for Extra Help from Medicare?

A25: If you are identified as a person that qualifies for Extra Help to pay for your prescription drug costs, you will receive a letter from Medicare or the Social Security Administration.

Some people automatically qualify for Extra Help; for instance, if they have full Medicaid coverage, get help from Medicaid to pay their Part B premiums, or if they receive Supplemental Security Income (SSI) benefits.

To see if you qualify for Extra Help, you can:

- Call Medicare at 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048. Assistance is available 24 hours a day, 7 days a week.
- Visit www.medicare.gov.
- Call the Social Security Office at 1-800-772-1213 between 7 a.m. and 7 p.m., Monday through Friday. TTY users should call 1-800-325-0778.
- Visit www.socialsecurity.gov/prescriptionhelp.
- Call your State Medicaid Office.

Q26: How does Extra Help work with Puget Sound Electrical Workers Healthcare Trust coverage?

A26: If you qualify for Extra Help, your share of the cost will be reduced. Extra Help copayments range from \$0 to 15% coinsurance. The LIS (Low Income Subsidy) Rider included with your EnvisionRxPlus Welcome Kit will tell you the exact amount of your coinsurance or copayment in 2020.

You will pay the **lower of**:

- Your Extra Help coinsurance or copayment; or



- Your Puget Sound Electrical Workers Healthcare Trust copayment.

Q27: What is the Late Enrollment Penalty?

A27: The Late Enrollment Penalty (LEP) is the amount that Medicare requires a person to pay if he/she:

- Did not enroll in a Medicare prescription drug plan when first eligible for Medicare or after January 1, 2007, whichever is later
- Did not have creditable prescription drug coverage – coverage at least as good as Medicare’s standard plan
- Had a break in coverage of more than 63 consecutive days.

Q28: I have been covered by the Puget Sound Electrical Workers Healthcare Trust’s retiree medical and prescription drug plan since I retired. Do I have to worry about the late enrollment penalty?

A28: Every year since Medicare Part D was launched in 2006, you have been sent a Creditable Coverage notice from the Trust that your retiree prescription drug coverage is a creditable prescription drug plan, meaning it has met or exceeded the Medicare Part D coverage standard. If you received a creditable coverage notice for every year you have been covered by the Trust’s plan, then you don’t have to worry about a late enrollment penalty.

However, if you had a break in coverage and were not enrolled in the Trust’s prescription drug plan for more than 63 days, you may have a late enrollment penalty.

You will be notified if Medicare’s records show that you have a break in creditable prescription drug coverage.

Q29: Do I have to pay a Part D premium to Medicare, like I pay a Part B premium?

A29: No, you will not have to pay a base Medicare Part D premium to Medicare, like you do for Part B. However, if you have high income, you may have to pay an income-based premium for Medicare Part D directly to Medicare.

Q30: Will my income affect what I have to pay for my Medicare coverage?

A30: Similar to Medicare Part B, some people may have to pay an extra amount for Medicare Part D. If your modified adjusted gross income (MAGI) reported on your federal tax return is above a certain amount, Medicare requires that you pay an extra amount for your Medicare coverage. It is called an Income-Related Monthly Adjustment Amount or IRMAA. For Medicare Part D, it is referred to as “Part D-IRMAA.”



For 2020, if your MAGI from 2019 is over \$87,000 for an individual or \$174,000 for a married couple filing jointly, you must pay this Part D-IRMAA. The additional amount ranges from \$12.20 to \$76.40 per person per month in 2020.

You will be notified by Social Security if you have to pay this additional amount. It is deducted from your Social Security payment. If you do not receive Social Security or your Social Security payment is not enough to cover the additional premium, Medicare will send you a bill. The additional amount is not paid to the Trust or to EnvisionRxPlus.

It is important that you make the payment, if required. If not, Medicare will notify EnvisionRxPlus that it must stop your prescription drug coverage and you will be disenrolled from the plan. If you are disenrolled from the plan, you will lose your prescription drug coverage from the Trust.

Q31: What information will I receive and when?

A31: Between now and the end of December, you will receive the following information from EnvisionRxPlus:

- Opt-out notification with cover letter and summary of benefits
- In December, after your enrollment has been accepted by Medicare, you will receive the following documents in two mailings from EnvisionRxPlus:
 - *New ID Card:* a new ID card that you will use for all your medical and prescription drug benefits beginning January 1, 2020.
 - ***Plan Benefit Design Sheet:*** a list of your coinsurance and copayments at retail and mail-order pharmacies during all Medicare drug payment stages.
 - ***Abridged Formulary (List of Covered Drugs):*** a list of the most commonly used drugs covered by the Medicare Part D portion of the plan. The *Abridged Formulary* will not include the drugs covered through the additional coverage provided by the Trust. If your drug is not listed, please contact EnvisionRxPlus Customer Care to find out if it is covered by the plan.
 - ***Pharmacy Directory:*** a list of network pharmacies in your area, including retail, mail-order and other pharmacies.
 - ***Low Income Subsidy (LIS) Rider*** – if you are eligible for Extra Help from Medicare, this document will tell you what your coinsurance or copayment will be for drugs covered by Medicare Part D.
 - ***Evidence of Coverage:*** a booklet that explains the rules you must follow to be covered by this plan and your right to appeal plan decisions about payment or services.



- **Supplemental Formulary:** a list of the drugs not covered by Medicare Part D that are covered by the Trust. If your drug is not listed, please contact EnvisionRxPlus Customer Care to find out if it is covered by the plan.
 - **Supplemental SPD:** provides information about how the drugs covered through the additional coverage provided by the Trust work with the EnvisionRxPlus Medicare Part D coverage
- From October through December, you may receive notices, letters or calls if the Administration Office needs more information in order to process your enrollment in the plan.

On **January 1, 2020** your coverage goes into effect. You will receive a *Monthly Prescription Drug Summary*, also called an *Explanation of Benefits*, from EnvisionRxPlus, the month following any month in which you get prescription drugs through the plan. For instance, in February 2020, you will receive a summary listing any drugs you received in January 2020.

Q32: How do I file a grievance regarding my Medicare Part D service?

A32: You can go to www.envisionrxplus.com/Resources/Grievances for more information and directions on how to submit a grievance.

Q33: Who do I call if I have any questions?

A33: If you have any additional questions or need more information, contact:

- EnvisionRxPlus Customer Care
Toll free: 1-844-293-4760
TTY: 711
24 hours a day, 7 days a week

Between October 1, 2019 and December 15, 2019, EnvisionRxPlus Customer Care will only be able to provide general information about Medicare Part D and EnvisionRxPlus. After January 1, 2020, EnvisionRxPlus Customer Care will be able to answer more specific questions about your coverage, such as if your drug is covered or the locations of network pharmacies near where you live or are traveling.

- Puget Sound Electrical Workers Healthcare Trust
866-314-4239 ext 3355
8 am – 5 pm PST.