

## SEIU LOCAL 1 & PARTICIPATING EMPLOYERS HEALTH TRUST

### **IMPORTANT NOTICE ABOUT YOUR PRESCRIPTION DRUG COVERAGE AND MEDICARE**

*This notice is for all persons eligible for Medicare, even if Medicare is not the person's primary health plan. The information in this notice applies only to participants who are eligible for Medicare, or who become eligible for Medicare during 2022.*

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with the SEIU Local 1 & Participating Employers Health Trust and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. Information about where you can get help to make decisions about your prescription drug coverage is provided at the end of this notice.

There are three important things you need to know about your current coverage and Medicare's prescription drug coverage:

1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.
2. The SEIU Local 1 & Participating Employers Health Trust (the Fund) has determined that the prescription drug coverage offered by the Fund is, on average for all plan participants, NOT expected to pay out as much as standard Medicare prescription drug coverage pays. Therefore, your coverage is considered Non-Creditable Coverage. This is important because, most likely, you will get more help with your drug costs if you join a Medicare drug plan, than if you only have prescription drug coverage from the SEIU Local 1 & Participating Employers Health Trust. This also is important because it may mean that you may pay a higher premium (a penalty) if you do not join a Medicare drug plan when you first become eligible. (Detailed information, formulary list, etc. for SEIU Local 1 & Participating Employers Health Trust Prescription Drug coverage is available on the UHS website [www.unionhealth.org](http://www.unionhealth.org) – click on 'Pharmacy', then click on 'Union Pharmacy Service for Local 25').
3. You can keep your current coverage from the SEIU Local 1 & Participating Employers Health Trust. However, because your coverage is non-creditable, you have decisions to make about Medicare prescription drug coverage that may affect how much you pay for that coverage, depending on if and when you join a drug plan. When you make your decision, you should compare your current coverage, including what drugs are covered, with the coverage and cost of the plans offering Medicare prescription drug coverage in your area. Read this notice carefully—it explains your options.

#### **When Can You Join a Medicare Drug Plan?**

You can join a Medicare drug plan when you first become eligible for Medicare and each year from October 15th through December 7th.

However, if you decide to drop your current coverage with the SEIU Local 1 & Participating Employers Health Trust, since it is employer/union sponsored group coverage, you will be eligible for a two (2)-month Special Enrollment Period (SEP) to join a Medicare drug plan; however you also may pay a higher premium (a penalty) because you did not have creditable coverage under the SEIU Local 1 & Participating Employers Health Trust.

### **When Will You Pay a Higher Premium (Penalty) to Join a Medicare Drug Plan?**

Since the coverage under the SEIU Local 1 & Participating Employers Health Trust is not creditable, depending on how long you go without creditable prescription drug coverage, you may pay a penalty to join a Medicare drug plan. Starting with the end of the last month that you were first eligible to join a Medicare drug plan but didn't join, if you go 63 continuous days or longer without prescription drug coverage that's creditable, your monthly premium may go up by at least 1% of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go nineteen months without creditable coverage, your premium may consistently be at least 19% higher than the Medicare base beneficiary premium. You may have to pay this higher premium (penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

### **What Happens to Your Current Coverage if You Decide to Join a Medicare Drug Plan?**

If you decide to join a Medicare drug plan, your current SEIU Local 1 & Participating Employers Health Trust prescription drug coverage will terminate—you cannot have prescription drug coverage through both the SEIU Local 1 & Participating Employers Health Trust and a Medicare Part D drug plan. You will still be eligible to receive all of your other health benefits from the SEIU Local 1 & Participating Employers Health Trust, but you will receive your prescription drug coverage through the Medicare drug plan in which you enroll. **You must notify the Fund Office if you do decide to join a Medicare Part D drug plan.** Your self-payment for this Plan's coverage will not change if you drop your drug coverage.

*If you do decide to join a Medicare drug plan and drop your current SEIU Local 1 & Participating Employers Health Trust prescription drug coverage, you and your dependents will be able to get this prescription drug coverage back if you later drop your Medicare Part D drug plan coverage. Contact the Fund Office **before** you terminate your Medicare Part D drug plan coverage.*

### **For More Information about this Notice or Your Current Prescription Drug Coverage . . .**

Contact the Fund Office at (312) 233-8888 for further information. NOTE: You'll get this notice each year. You will also get it before the next period you can join a Medicare drug plan and if this coverage through the SEIU Local 1 & Participating Employers Health Trust changes.

You also may request a copy of this notice at any time.

### **For More Information about Your Options under Medicare Prescription Drug Coverage . . .**

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare drug plans.

For more information about Medicare prescription drug coverage:

- Visit [www.medicare.gov](http://www.medicare.gov)
- Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the "Medicare & You" handbook for their telephone number) for personalized help
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at [www.socialsecurity.gov](http://www.socialsecurity.gov), or call them at 1-800-772-1213 (TTY 1-800-325-0778).

Date:	June 2021
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