

SEIU LOCAL 1 & PARTICIPATING EMPLOYERS HEALTH TRUST

ANNUAL FEDERAL NOTICES

August 2024

IMPORTANT NOTICE ABOUT YOUR PRESCRIPTION DRUG COVERAGE AND MEDICARE

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 (referred to in this notice as the “Fund”), 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 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 Fund has determined that the prescription drug coverage offered under its Plan of Benefits 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 through the Fund. This is also 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.**
3. You can keep your current coverage through the Fund. 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 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 to December 7th. Generally, if you are eligible to join a Medicare drug plan, you will need to enroll in a Medicare drug plan when you first become eligible for Medicare to avoid the late-enrollment penalty, due to the Fund’s prescription drug coverage being considered non-creditable.

When will you pay a higher premium (penalty) to join a Medicare drug plan?

Since the coverage under the Fund’s Plan of Benefits 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 is 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 19 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 coverage through the Fund will not be affected. You will keep your prescription drug coverage through the Fund, and the Fund will coordinate benefits with Medicare. You will also still be eligible to receive all of your other health benefits through the Fund. In order for the Fund to properly coordinate benefits with Medicare, *you must notify the Fund Office if you choose to join a Medicare drug plan.*

For more information about this notice or your current prescription drug coverage

Contact the Member Services Department at the Fund Office. **NOTE:** You will 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 Fund changes. You may also 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 will 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
- 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, or call them at 1-800-772-1213 (TTY 1-800-325-0778).

Date:	August 2024
Name of Plan:	SEIU Local 1 & Participating Employers Health Trust
Who to Contact:	Member Services Department
Address:	111 East Wacker Drive, 17 th Floor, Chicago, IL 60601
Phone Number:	(312) 233-8888

WOMEN’S HEALTH AND CANCER RIGHTS ACT OF 1998 – Coverage for Breast Reconstruction

For individuals receiving mastectomy-related benefits under the Plan, the Plan provides coverage in a manner determined in consultation with the attending physician and the patient for:

- All stages of reconstruction of the breast on which the mastectomy was performed;
 - Surgery and reconstruction of the other breast to produce a symmetrical appearance;
 - Prostheses; and
 - Physical complications for all stages of a mastectomy, including lymphedemas.
- These benefits will be provided subject to the same deductibles and co-payment provisions applicable to other medical and surgical benefits provided under the Plan.

For more information regarding WHCRA benefits, please call the Fund Office at (312) 233-8888.