

### 2019 Changes for Non-Medicare Members

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#### Enhanced Care PPO (ECP) Plan Offering Unlimited PCP and Specialist Office Visits

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Effective January 1, 2019, the nationwide plan available to all non-Medicare members will be enhanced to include coverage for unlimited primary care physician (PCP) and specialist office visits. The new plan – called the Enhanced Care PPO (ECP) plan – will be offered through Blue Cross Blue Shield (BCBS) and will replace the non-Medicare TCN and PPO plans. **There is no action required of members.**

**New for 2019:**

- Unlimited PCP office visits—\$25 copay per visit
- Unlimited specialist office visits—\$35 copay per visit
- Coverage to protect members from facility fee charges
- Access to a personal, dedicated health guide who can help navigate health care
- New enhanced programs

**There are no changes to:**

- Monthly contributions
- Deductibles, coinsurance and out-of-pocket maximums for all plans
- Prescription drug copays
- Copays for office visits, urgent care, and emergency rooms
- TCN plan for Medicare members
- Medicare Advantage (MA) plans continue to have a \$0 monthly contribution

**UBR Resources:** [www.uawtrust.org/UBRFileCabinet](http://www.uawtrust.org/UBRFileCabinet)

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#### ECP Featured Programs

**Customer Service “Health Guide”:** An advocate and single source for help and answers for members while navigating the health care system. Health Guide will help members with things like answering coverage questions, explaining benefits and eligibility, helping with billing and claims questions, resolving issues, and more.

**Fit4D:** Program providing personalized support to manage diabetes. If eligible, Fit4D will reach out to the member.

**AIM Shopper Support:** Helps find lower cost alternatives for things like testing services without sacrificing quality. When appropriate, for instance when a member is prescribed digital image testing by their doctor, a representative on behalf of BCBS will reach out to the member with recommendations.

## Q & A: Recent Inquiries

### 3D Mammography

Coverage for 3D mammograms went into effect 3/1/18, for all members. There is no requirement to have 2D imaging before a 3D imaging can be approved. It is based on a doctors approval and medical necessity.

We recognize that early on in the programming of this benefit some members received rejections for 3D services. These rejections have been reprocessed and paid.

#### Coverage:

- In-Network: 100%
- Out-of-Network: Subject to the deductible and coinsurance (protected members: covered subject to coinsurance)

### Shingrix Vaccine

Shingrix was approved by the Food and Drug Administration (FDA) to protect adults against shingles. Shingrix is recommended for adults aged 50 years and older, even those previously vaccinated with Zostavax®. It is administered in two doses, with the second dose normally given two to six months after the first. This vaccine is covered under Trust benefits:

- For members with Express Scripts prescription drug coverage, Shingrix is covered at the pharmacy under the tier 1 retail copay: \$14 for each dosage (\$28 total). Express Scripts: 866-662-0274.
- Some members may also have coverage through their medical benefit—see plan material or call the number on the back of the medical ID card for details.



## Other Reminders & Updates

### New Medical ID Mailing

Members receiving new medical ID cards can expect to receive their card in December. If a member has not received their new ID card by the end of December, they should call RHCC.

### Dependent Audit (July—December)

The Trust is conducting an audit of dependents aged 19-26. Members will receive three notices requiring a response in the mail. If there is no response by September 30, 2018, the dependents will be dropped from coverage. **Encourage members to respond to these requests for information in a timely manner to avoid coverage disruption.**

### New Web Link for RHCC Login

RHCC has updated their website hyperlink for Trust members. Member can access the portal at: [digital.alight.com/rhcc/](http://digital.alight.com/rhcc/)

### Annual Enrollment Deadline

If members want to select a new plan for 2019, they need to contact RHCC between September 4 and November 31, 2018, in order for the plan to go into effect on January 1, 2019.



### Language Translation

Members who require or desire Trust information translated in another language (the 15 most common languages nationally) can request them at no charge. **Instructions on how to go about getting assistance can be found by clicking the link in the footer of [www.uawtrust.org](http://www.uawtrust.org).**

### Tax Reporting Forms

The Trust will provide households with non-Medicare members the 1095-B tax form, which must be postmarked by January 31, 2019. Non-Medicare members enrolled in an HMO plan will receive a form from the health plan carrier. Members enrolled in Medicare will receive a form from Medicare. The information on these forms is reported to the Internal Revenue Service (IRS) and the copies sent to members are for their reference only.



Retiree Health Care Connect (RHCC)

866-637-7555

(8:30 a.m. — 4:30 p.m.)