

NECA-IBEW LOCAL 480
HEALTH AND WELFARE FUND
3150 US ROUTE 60
ONA, WV 25545
PHONE: 1 855 445-3927

To: All Eligible Participants of the NECA-IBEW Local 480 Health & Welfare Fund

From: Board of Trustees

NECA

We are pleased to announce, effective March 1, 2018, the NECA-IBEW Local 480 Health & Welfare Fund will be paying your claims under the Anthem Blue Cross Blue Shield network. Additionally, we have partnered with Healthlink to provide pre-certification and Case Management services for you.

We are also pleased to announce, effective March 1, 2018, the NECA-IBEW Local 480 Health & Welfare Fund will be moving to SaveRX for your prescription benefit.

THERE HAVE BEEN NO CHANGES TO YOUR BENEFITS

These changes were made to provide you with a positive pre-certification and behavioral experience, as well as a broader medical network and better healthcare discounts. This helps you, the member, and the Fund.

New Anthem Card

Because of the change in claims payor, the contact information on your cards had to change. There have been no changes in your benefits. There is more information below that will be useful for you. Please read it carefully and call us with any questions you may have.

New SaveRX Card

Because of the change in prescription payor, the contact information on your cards had to change. There have been no changes in your benefits. There is more information below that will be useful for you. Please read it carefully and call us with any questions you may have.

Frequently Asked Questions:

1. Why does the Fund partner with Anthem Blue Cross and Blue Shield and Healthlink?

Anthem offers the Fund access to the BlueCard program. This program electronically links all Blue Cross and Blue Shield Plans and their providers — creating one large, national network. The network includes more than 80 percent of the hospitals and nearly 90 percent

of the physicians in the United States. And the Funds members have access to them all. This broad network provides better healthcare discounts that help keep your expenses down – lowers the amount you are responsible for related to coinsurance – and it helps the Fund control its overall claims costs.

Healthlink services deliver flexible medical management services that fit the needs of the members and Fund. They strive to ensure cost effective, high quality, appropriate care for the members, and their accredited programs and clinical expertise are focused on the member's well-being.

2. When will these changes be effective?

March 1, 2018. Please use your new cards for any services on and after March 1, 2018, which will be mailed out next week and destroy your old cards at that time.

3. Were there any changes made to my benefits?

No. There were no changes made to your benefits.

4. When should I use my new ID card?

Please use it for all services rendered on or after March 1st and destroy your old card.

5. How do I know that my current provider participates in the BlueCard PPO network or how can I locate a provider in the network?

This process has not changed. However, you can easily find a participating provider online at www.anthem.com or call – 1-800-810-BLUE (2583). The Anthem web site address and the phone number are located on the back of your new ID card. You can also call your provider directly and ask if they participate in the BlueCard PPO network. You can call the Fund if additional assistance is required. (

855-445-3927

6. Do I need to notify the Fund before seeking services from a non-participating Blue Cross Blue Shield provider?

It is recommended that you do contact the Fund prior to seeking services from a non-participating provider. We may be able to help you select a participating provider, which would eliminate the need for you to use your out-of-network benefits at a reduced rate.

7. How do I file my claims?

This process has not changed. However, your Blue Cross and Blue Shield provider will file your claims for you to the local Blue Cross and Blue Shield Plan. Many healthcare providers will file your claims with the local Blue Cross and Blue Shield Plan even if they are not participating in the network.

8. How do I file a claim if I elect to use a non-participating Blue Cross and Blue Shield provider?

The Blue Cross and Blue Shield PPO provider network is extensive with more than 80 percent of the hospitals and nearly 90 percent of the physicians in the United States. You are encouraged to use a participating provider so that you aren't required to pay for medical services up front and so that you can take advantage of the Blue Cross and Blue Shield negotiated provider discounts. Claims must be filed to the local Blue Cross Blue Shield Plan regardless of the provider's participation status. If a non-participating provider won't file the claim for you, you will be responsible for filing the claim. Assistance with filing the claim will be provided by the Fund.

9. Will the Fund notify me about how my claim was paid?

Yes, the Fund will provide you with an Explanation of Benefits (EOB) just as you have always received them from Indiana Teamsters Health Benefits Fund.

10. Whom do I contact if I have questions regarding my eligibility or benefits?

This process has not changed. However, you will contact the Fund. The customer service phone number is listed on the back of your member ID card, or you can call toll free at 1-855-445-3927.

11. Whom does my provider contact if they have questions regarding my eligibility or benefits?

Your provider can get eligibility and benefit information by dialing 1-844-876-8487.

12. Can the participating providers bill me for the difference between what the Blue Plan reimburses (allows) and what the provider charges for covered services?

No. The participating PPO providers cannot bill you for the difference between what the Blue Plan reimburses and what the provider charges for covered health services. You are only responsible for the plan copayments, deductible and coinsurance just as you are today. Your Explanation of Benefits (EOB) will explain this in detail. If you have questions regarding your EOB, please call the Fund at the toll free number above.

13. Are there any changes to my prescription or dental benefits?

No. All Dental information is included on your Anthem/Blue Cross BlueShield card. As for your Prescription Card, you will be receiving a NEW one with SaveRX which will also be effective March 1, 2018.

14. Who do I contact for precertification and Case Management services?

Healthlink will provide pre-certification and Case Management services for the members. You, or your provider, can contact them at the number provided on the card, 1-877-284-0102. Your benefits for these services have not changed.



A Division of A&A Services, LLC

224 North Park Ave. Fremont, NE 68025
866-233-4239 • Fax: 888-810-1394

February 2018

Effective March 1, 2018, the prescription drug benefits will be offered to the NECA IBEW Local 480 Health and Welfare Fund through Sav-Rx Prescription Services. Enclosed are your new identification cards that you will begin using March 1, 2018 to access your pharmacy benefit.

All the information you need to understand and begin utilizing this program is enclosed in this packet. Please read the enclosed material carefully in order to fully understand your benefits. This program is easy to use and can save you money.

For short-term medications, such as antibiotics, it is important that you use your new Sav-Rx ID Card at a participating Sav-Rx Network Pharmacy in order to receive your full benefits. The Sav-Rx Retail Network includes over 65,000 pharmacies nationwide. Most pharmacies in your area are already part of the Sav-Rx Pharmacy Network, including all major pharmacy chain stores. Wal-Mart and Sam's Club pharmacies are not included in this Union-friendly network. To locate a pharmacy near you, please contact 866-233-IBEW (4239) or visit www.savrx.com and enter your group number: **XRB480**

For long-term medications, the Sav-Rx Mail Service Pharmacy is cost effective and convenient for your long-term needs. **Call Sav-Rx toll free at 866-233-IBEW (4239) with your mail order prescription drug names as well as your physician contact information and we will reach out to your physician to obtain your mail order prescription.**

Please call Sav-Rx with any questions concerning this program at 866-233-IBEW (4239). On behalf of NECA IBEW Local 480 Health and Welfare Fund, we hope that you will find value in your prescription drug benefit program.

Sincerely,

Michelle Leonard, Account Manager
Sav-Rx Prescription Services

For Organized Labor, By Organized Labor

Sav-Rx Prescription Services

FREQUENTLY ASKED QUESTIONS

1. How much do I pay for my prescriptions?

RETAIL PHARMACY (UP TO 30 DAYS SUPPLY)	
Generic	\$8.00
Formulary Brand	\$25.00
Non-Formulary Brand	\$35.00
Brand with Generic	\$35.00 + Difference in Cost
SAV-RX MAIL ORDER (UP TO 90 DAYS SUPPLY)	
Generic	\$25.00
Formulary Brand	\$50.00
Non-Formulary Brand	\$85.00
Brand with Generic	\$85.00 + Difference in Cost
SPECIALTY PHARMACY (UP TO 30 DAYS SUPPLY)	
	20% (\$100 MAX)

2. When do I use the mail service?

You may order any prescribed medication, but the mail order service should be used for medications that you will be taking for more than 30 days. This will save you and your Fund money. All regular orders are processed within 24 hours of receipt, and mailed First-Class.

3. How do I get the best value in my pharmacy benefit?

The best way to ensure that you are getting the best value in your pharmacy benefits is to use generics whenever they are available. If you purchase a brand name product that has an equivalent generic available, you will be responsible for paying the difference in cost between the brand and the generic equivalent plus the applicable copay.

Many brand name drugs do not have a generic equivalent but a generic drug is available within the same therapeutic class and is designed to treat the same condition. It is recommended that whenever you visit with your physician, you discuss the importance of using generics whenever they are available because it will save you money at the pharmacy.

4. What is a Formulary?

A formulary is a list of preferred products. The formulary considers treatment options on a therapeutics basis first, then based upon cost effectiveness. Generic medications, when they are available and considered equivalent to their brand counterpart, are always preferred over brand name products. When similar brand name medications are available to treat a condition, the formulary helps physicians and patients consider treatment options in order of cost effectiveness.

5. What medications are covered?

Most maintenance medications are covered by your plan. These include, but are not limited to: insulin, diabetic testing supplies, immunizations, blood pressure, cholesterol and more. Please refer to your Summary Plan Description for specific coverage rules.

Certain classes are excluded from coverage such as: devices/appliances, cosmetic, weight loss, erectile dysfunction, and drugs used for experimental purposes.

Some medications may require prior approval such as specialty medications. Some medications may be subject to quantity limits.

Please contact Sav-Rx Prescription Services with any questions regarding your medications.



Call to find out more about your prescription copays, network locations and clinical programs. An agent will be ready to provide you with personalized, professional assistance 24/7.
1-866-233-IBEW (4239)

Please visit our website at:

www.savrx.com

MAIL ORDER FORM

PLEASE PRINT CLEARLY. Enclose this form with your prescription(s) and copayment(s).

MEMBER INFORMATION

CARDHOLDER NAME _____

CARDHOLDER ID # _____ DOB (MO/DAY/YR) _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

DAYTIME PHONE _____ EVENING PHONE _____

PATIENT INFORMATION

PATIENT NAME (LAST, FIRST) _____

DOB (MO/DAY/YR) _____

IMPORTANT

You will receive generic substitutes whenever possible, unless your physician will not allow a generic substitute or you specify otherwise.

By checking this box, I elect to receive brand drugs for all prescriptions in this order. By making this choice, I understand that I will be responsible for the **applicable copay PLUS the difference in cost.**

Please do not send cash.

- Check or money order enclosed
- Charge to my credit card

CARDHOLDER NAME _____

CREDIT CARD NUMBER _____ EXPIRATION DATE _____

CARDHOLDER SIGNATURE _____

Make checks payable to:

Sav-Rx Pharmacy

P.O. Box 8 Fremont, NE 68026

If mailing address for patient is different than cardholder address, please contact Sav-Rx.

HOW TO USE YOUR SAV-RX CARD

Our network of more than 65,000 pharmacies provides prescription services at convenient locations across the country. In addition to more than 3,000 independent pharmacies, Sav-Rx cards are also accepted at every major chain pharmacy. Wal-Mart and Sam's Club are not included in this Union-friendly network. To locate a network pharmacy near you, call Sav-Rx or you may visit www.savrx.com.

RETAIL PHARMACY

You may present your card at any of over 65,000 retail network pharmacies nationwide to purchase your prescription medication. Your pharmacist may call Sav-Rx with any questions 1-866-233-IBEW (4239).

MAIL ORDER

You may also order prescription medication from the Sav-Rx Mail Order Pharmacy. The mail order should be used for your long-term maintenance medications. Using the Sav-Rx mail order may offer some cost savings to you. Regular orders are processed within 24 hours of receipt and mailed First-Class for convenient home delivery.

Your doctor may E-scribe new prescriptions to Sav-Rx or call in a new prescription to Sav-Rx at 1-866-233-IBEW (4239). You may also mail your prescription to Sav-Rx PO Box 8 Fremont, NE 68026. **Please note that your payment is required with every order.** Be sure to reference your Sav-Rx identification number with each prescription. Additional mail order forms are available at www.savrx.com.

Refills may be called in 24 hours a day, 7 days a week to 1-866-233-IBEW (4239). You may also request a refill online at www.savrx.com or download the Sav-Rx App from the App Store or Google Play.



NECA IBEW

Local 480

Health & Welfare

Fund

**PRESCRIPTION DRUG PLAN
ADMINISTERED BY:**



1-866-233-IBEW (4239)