

TEAMSTERS MULTI-BENEFIT TRUST

Administered By: Benefit Programs Administration
Telephone • (888)410-1756 • (562) 463-5040 • Facsimile (562) 463-5894

October 2019

IMPORTANT NOTICE CONCERNING YOUR PRESCRIPTION DRUG COVERAGE AND MEDICARE

CERTIFICATE OF CREDITABLE PRESCRIPTION DRUG COVERAGE

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 Teamsters Multi-Benefit Trust "Fund" and about your options under Medicare's prescription drug coverage ("Part D"). This information can help you decide whether or not you want to join a Medicare drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

There are two 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 is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage. Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

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.

However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two (2) month Special Enrollment Period (SEP) to join a Medicare drug plan.

What Happens To Your Current Coverage If You Decide to Join A Medicare Drug Plan?

Since you are already enrolled in the Fund, you do not need to complete any additional forms to keep your Fund prescription drug coverage. Many private Part D providers will ask you to enroll with them; you should scrutinize these solicitations carefully.

If you enroll in a Part D plan, you will still be covered by the Fund's prescription drug and medical coverage. Your new Part D plan will pay your prescription drug claims first. As the secondary payer, the Fund will review your prescription drug claims and determine under its Coordination of Benefit rules whether any portion of your claims are payable. **If you terminate your Fund prescription drug coverage, the Fund may not allow you to re-enroll in the Fund's prescription drug coverage.**

Since your existing Fund prescription drug coverage is creditable, you can keep this coverage and not pay a higher monthly premium (a late enrollment penalty) if you later decide to enroll in a Part D plan, provided that you do not have a 63-day or longer break in creditable coverage.

When Will You Pay A Higher Premium (Penalty) To Join A Medicare Drug Plan?

You should also know that if you drop or lose your current coverage with the Fund and don't join a Medicare drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later.

If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly Part D 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 (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

For more information about this notice or your current Fund prescription drug coverage, contact the Administrative Office. You will receive this notice annually and at other times in the future, such as before the next period you can enroll in Part D or if your Fund prescription drug coverage changes. You may also request a copy of this notice at any time by contacting the Administrative Office.

More detailed information about Part D plans is in the "Medicare & You" handbook. You will receive a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare Part D plans. You can also obtain additional information about Part D from the following:

- www.medicare.gov
- Your State Health Insurance Assistance Program (see the inside back cover of your copy of the Medicare & You handbook for their telephone number)
- 1-800-MEDICARE (1 (800) 633-4227); TTY (1 (877) 486-2048)

For people with limited income and resources, extra help paying for a Medicare Part D is available. Information about this extra help is available from the Social Security Administration (SSA) online at www.socialsecurity.gov, or call 1 (800) 772-1213 (TTY 1 (800) 325-0778).

Remember: Keep this Notice. If you enroll in a Part D plan, you may need to provide a copy of this Notice at the time of enrollment to show whether or not you are required to pay a higher monthly premium (a penalty) for coverage.

Date:	October 2019
Name of Entity/Sender:	Teamsters Multi-Benefit Trust
Contact--Position/Office:	Benefit Programs Administration
Address:	1200 Wilshire Blvd., Fifth Floor Los Angeles, CA 90017-1906
Phone Number:	(562) 463-5040 or (888) 410-1756