MICHIGAN CARPENTERS' FRINGE BENEFIT FUNDS

Michigan Carpenters' Health Care Fund Michigan Carpenters' Pension Fund Managed for the Trustees by: TIC INTERNATIONAL CORPORATION

May 2022

IMPORTANT NOTICE REGARDING YOUR BENEFITS

TO: NON-MEDICARE PARTICIPANTS IN THE MICHIGAN CARPENTERS' HEALTH CARE FUND

RE: SUMMARY OF MATERIAL MODIFICATIONS

Change in Medical Claims Coverage, Prescription Drug Pharmacy Benefit

Manager and Coupon Savings Program – Effective July 1, 2022

Dear Participants:

Effective July 1, 2022, the following changes will be made to the Fund's medical, prescription drug, and prescription drug coupon savings program:

- The *medical network* will change from Blue Cross Blue Shield of Michigan (BCBSM) to Independence Blue Cross.
- Prescription drug coverage will change from OptumRx to Express Scripts.
- The prescription drug coupon savings program will change from Health Plan Advocate to SaveOn.

The *medical and prescription drug coverage* changes will happen *automatically* on July 1, 2022. You will receive new ID cards for your medical and prescription drug coverage in June. Please talk to your providers to ensure that your new insurance information is updated on or after July 1, 2022.

1. MEDICAL CLAIMS COVERAGE

What Is Independence Blue Cross?

Just like BCBSM, Independence Blue Cross is part of the Blue Cross and Blue Shield Association network. We've made this July 1, 2022 change to Independence Blue Cross because it will provide savings to the Fund while keeping your comprehensive Blue Cross network access, out-of-pocket costs and level of benefits the same.

What Is Independence Administrators?

Independence Administrators, a subsidiary of Independence Blue Cross, will provide administrative and claims services to the Fund, effective July 1, 2022. So, if you have questions regarding your *medical claims incurred on or after July 1, 2022*, you should contact Independence Administrators at the customer service phone number listed on the back of your new medical ID card.

Please Note: If you have questions regarding your medical and/or prescription drug claims incurred on or before June 30, 2022, you should contact BCBSM.

Will My Medical Benefits Change on July 1, 2022?

No. You will still have access to the Blue Cross network and your deductibles, co-pays, coinsurance and benefits covered by the Fund will remain the same. Any out-of-pocket costs that you've paid this calendar year toward your deductible and out-of-pocket maximums will apply.

Will I Still Be Able to See My Doctors?

Yes. The same doctors and hospitals are in-network.

Will I Receive A New Medical ID Card?

Yes. You will receive a new ID card from Independence Administrators in June. *You, your spouse and dependent(s) will each receive their own unique ID card*. This ID card should be presented for doctor and hospital visits on or after July 1, 2022.

Please Note: *This ID card is only for medical coverage* and should not be presented for prescription drug coverage. Please see below for information about your new prescription drug ID card.

2. PRESCRIPTION DRUG COVERAGE

What Change Is Taking Place July 1, 2022?

The Fund's Pharmacy Benefit Manager will change from OptumRx to Express Scripts on July 1, 2022.

Your current prescription drug co-pay structure will remain the same, but there may be slight changes that could affect your prescription drugs, such as a new formulary. Please watch your mail for any communications from Express Scripts regarding your current prescription drugs. If you are affected by this change, you will receive a letter from Express Scripts describing the steps must take.

All prescription drugs will be subject to **Express Scripts National Preferred Formulary**. Prior authorization, step-therapy, quantity limits and exclusions will also apply to certain prescription drugs.

Can I Still Fill My Prescription At My Retail Pharmacy Or Do I Have Fill My Prescription By Mail Order?

It depends. If you have a **maintenance** prescription you can fill it at any retail pharmacy for up to a ninety (90) day supply.

If you have a **non-maintenance prescription**:

- You can fill your prescription at any retail pharmacy for up to a thirty (30) day supply.
- If your supply exceeds thirty (30) days, it must be filled through Express Scripts mail order.

If you have a **Specialty drug**, you must fill it through Accredo Specialty Pharmacy.

Will I Receive A New Prescription Drug ID Card?

Yes. You will receive a new ID card from Express Scripts in June. *You, your spouse and dependents will have the same ID card.* You and your family members can use this ID card when filling your prescriptions at a retail pharmacy, mail order, or through Accredo Specialty Pharmacy.

3. PRESCRIPTION DRUG COUPON SAVINGS PROGRAM

Will I Be Eligible For SaveOn's Coupon Savings Program On July 1, 2022?

It depends. You will be eligible for SaveOn's Coupon Savings Program if your prescription is a *Specialty Drug and a manufacturer coupon is available*.

If your medication is a *brand* prescription drug, you will *not* be enrolled in SaveOn's program. But, you may continue to use your manufacturer coupon toward your co-payment.

Will I Be Automatically Enrolled In SaveOn's Coupon Savings Program On July 1, 2022 If I Have A Specialty Drug?

No. You must enroll in SaveOn's Coupon Savings Program prior to your first Specialty Drug prescription fill.

If you are already participating in the Fund's Coupon Savings Program with Health Plan Advocate and are filling a Specialty Drug, you should contact SaveOn at 1-800-683-1074 *prior to July 1, 2022* to ensure that you are enrolled.

Please Note: If you are filling a Specialty Drug, you must do so through Accredo Specialty Pharmacy. SaveOn only provides services to ensure that your manufacturer coupon is applied to your Specialty Drug. It does not order or fill your Specialty Drug.

Does The Amount Of The Manufacturer Coupon Apply Toward My Out-Of-Pocket Maximum?

No.

What Happens If I Am Eligible And I Do Not Enroll In SaveOn's Coupon Savings Program?

If you are eligible for SaveOn's Coupon Savings Program and you do not enroll, you will be responsible for the *thirty percent* (30%) coinsurance.

The Board of Trustees continually review and monitor plan design, vendor access and discounts to maintain the most comprehensive coverage for our Participants and their families, and to ensure that the benefits are sustainable in the future. The decision to change carriers was done after thorough reviews and with the goal of finding administrative savings while maintaining the same Blue Cross network access and comprehensive level of benefits.

If you have questions regarding your benefits, please contact the Fund Office.

Sincerely,

The Board of Trustees of the Michigan Carpenters' Health Care Fund