



IAMAW Group Plan – Frequently Asked Questions

Eligibility

Do I have to be enrolled in Medicare Part A & B to be eligible for this Humana Medicare Advantage plan?

Yes, you must be enrolled into both Medicare Parts A & B to be eligible for this plan.

Would it make a difference if I was on Medicaid or Medicare?

Individuals solely on Medicaid are not eligible for this plan. An individual must also be enrolled in Medicare A & B to be eligible for this plan.

Does this insurance cover if I am in a retirement home?

Individuals living in a retirement home may enroll into this plan so long as they are enrolled into Medicare Parts A and B. Medicare-covered medical services provided in a nursing home are eligible for coverage. Please note that this is not a long-term care plan and does not cover the cost of custodial care.

The plan is currently available in 50 states and Puerto Rico. Is the plan available in the Virgin Islands?

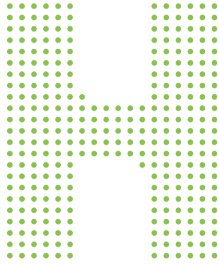
Individuals who reside in the US Virgin Islands will be eligible to enroll in this plan for the 2021 plan year.

I am on disability but not of retirement age. I am enrolled in Medicare A and B. Am I eligible for this program?

Yes. Machinist retirees and dependents, who are eligible for Medicare via disability and enrolled in Medicare Parts A and B, are eligible for this plan regardless of age.

If I am is disabled, will Medicare kick in immediately?

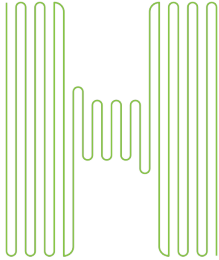
Individuals who are disabled will be automatically enrolled in Medicare Parts A and B after receiving disability benefits from Social Security for 24 months. Questions regarding disability Medicare should be directed to Medicare.gov or 1-800-Medicare.



Eligibility Continued

If I have a dependent on Medicare, would they be eligible under the IAMAW plan? Would they remain eligible if the retiree passes away?

Yes, surviving spouses and dependents would be eligible to remain on the plan after the death of a retiree. Dependents (spouses and children) of retirees who are enrolled in Medicare Parts A and B are eligible for this plan.



If parents move back in with me, would they be considered a dependent, and thus be eligible to enroll into this plan?

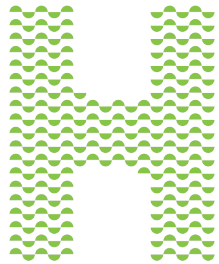
Yes, they would be eligible if considered a dependent by the IRS. Your parent must first meet income requirements set by the Internal Revenue Service to be claimed as your dependent. To qualify as a dependent, your parent must not have earned or received more than the gross income test limit for the tax year. This amount is determined by the IRS and may change from year to year.



Benefits

Medicare consists of parts A, B, C and D – Does this plan replace everything?

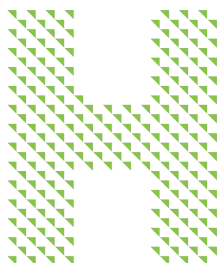
This plan replaces A and B and serves as your Parts C (Medicare Advantage) and D (prescription drug) coverage. Please note that you are still responsible for your Original Medicare premiums while enrolled into this plan.



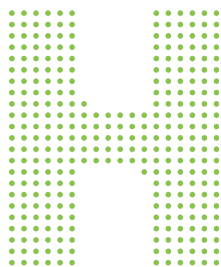
Note: most people do not pay for Part A, only for Part B

How does this plan coordinate with other insurance?

We coordinate benefits in accordance with the Medicare Secondary Payer rules, which allow us to bill, or authorize a provider of services to bill, other insurance carriers, plans, policies, employers, or other entities when the other payer is responsible for payment of services provided to you. When you have additional coverage, how we coordinate your coverage depends on your situation. If you are already enrolled in the Humana plan, please refer to your Evidence of Coverage for additional details.



You cannot be enrolled in another Medicare Advantage or Medicare Prescription Drug plan at the same time as this plan. This plan does not coordinate with a Medicare Supplement plans.

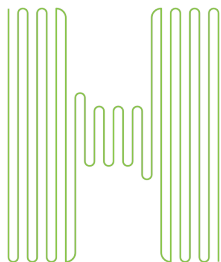


Benefits continued

Will Medicare be the primary and the Humana plan my secondary or vice versa?

Under a Medicare Advantage plan, the insurance carrier is responsible for payment of claims instead of Original Medicare.

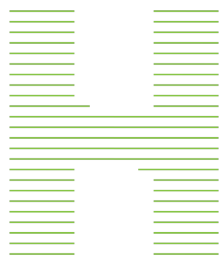
If you have additional health coverage outside of Medicare, you should refer to the Evidence of Coverage for coordination of benefits information.



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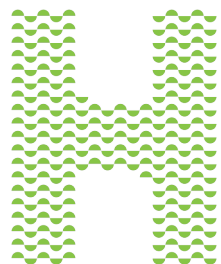


Are plan maximums per family or per individual?

All maximum out-of-pocket limits on this plan are per person. Medicare does not allow for family coverage.

The current cost for benefit coverage is \$84 premium for this plan/group, is this per person?

The \$84 premium is per-person.



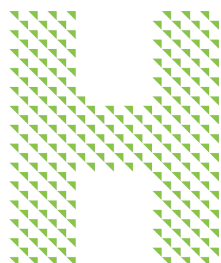
How long are the current rates and benefits guaranteed for this plan?

These rates and benefits are guaranteed through 2021.

Rates and benefits are subject to change annually for 2022 and beyond.

Will the premium ever increase because of my age?

No. The Humana Medicare Advantage plan for IAMAW retirees is a group plan. All individuals who enroll in this plan have the same premium regardless of age, gender, or where they live.

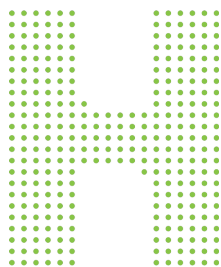


What is the coverage level for durable medical equipment (DME)?

This plan pays 80% of the cost of Medicare-covered durable medical equipment. Please refer to your Evidence of Coverage for full benefit information.

Is there a penalty for non-emergency ER visits? (Example heartburn vs. heart attack)

No. You have a \$90 copay for all ER visits regardless of diagnosis.

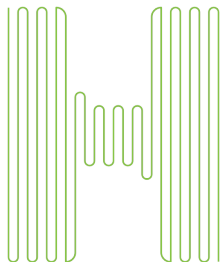


Benefits continued

Are dental procedures performed in a hospital setting covered in the plan?

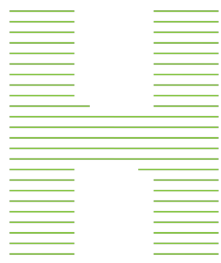
This plan may pay for certain dental services that you get when you are in a hospital including surgery of the jaw or related structures or setting fractures of the jaw or facial bones.

This plan does include a \$250 annual allowance for preventive dental services like cleanings and x-rays. Please refer to your Evidence of Coverage or call customer service at 1-800-733-9064 for further assistance.



What coverage is there for dental?

This plan includes a \$250 annual allowance for preventive dental services like cleanings and x-rays. This allowance is per enrollee.

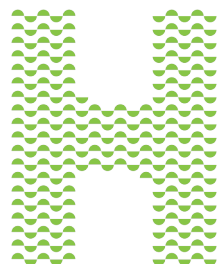


What are the coverage levels for transition and skilled care?

Our plan covers all services that are covered under Original Medicare. Medicare-covered Skilled Nursing services are paid 100% for days 1-20 and 100% after \$178 copayment for days 21-100. Medicare-covered home health care services are paid 100% by the plan.

Do any services require prior authorization?

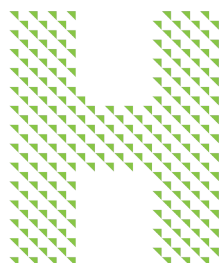
Yes, some services do require a prior authorization. This includes but is not limited to MRI, CT Scan, medical equipment, home health care, non-emergency hospitalization, and some medications.



Please refer to your Evidence of Coverage for additional information.

Is there an appeal process?

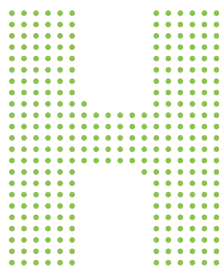
Yes. The Humana Medicare Advantage plan follows Medicare guidelines for appeals on medical and prescription drug claims. Your doctor is able to file an appeal on your behalf or you can call Humana Customer Service for assistance. Our customer service number is 1-800-733-9064. If you are already enrolled in the Humana plan, please refer to your Evidence of Coverage for additional details.



Pharmacy

Are there step-therapy programs in terms of prescription drugs, typically high cost?

Yes, some medication does require step therapy and/or prior authorization. Your Humana Prescription Drug Guide indicates if a particular medication has any special guidelines.

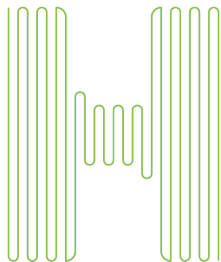


Pharmacy continued

What happens when I enter the donut hole/coverage gap?

This plan offers significant assistance in the donut hole – greater than a typical Medicare Advantage plan. In the donut hole, you will pay either a \$5 copay (generics) or a 20% coinsurance (all other drugs).

Under typical Part D plans, individuals must pay 25% of the cost of a drug while in the donut hole.

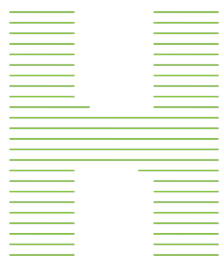


Is the prescription coverage available at a select group of pharmacies, or can you go to Walgreens, Target, Costco, CVS, etc.?

As of 2020, Humana's pharmacy network includes all major national pharmacies including but not limited to Walgreens, Target, Costco, and CVS.

Does the drug coverage benefit apply per person or as a family unit?

All benefits on this plan are per person. Medicare does not allow for family coverage.



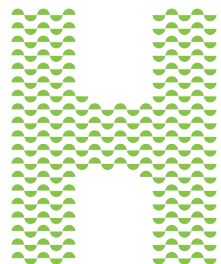
Network

Is this plan a PPO plan or a HMO?

This plan is a Passive PPO, which means your benefit levels are the same for in-network and out-of-network providers. Members on this plan can use any provider in the country who accepts Medicare and agrees to bill Humana.

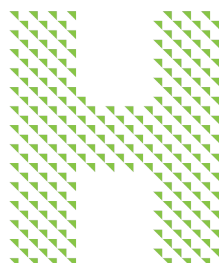
If there is a problem at the provider's office, can I contact customer service?

Yes. Members may call Humana Customer Service at 1-800-733-9064 for assistance with anything related to the Humana plan.



If a provider does not submit a bill to Humana, can, or should, I submit a claim directly.

Although most health care providers will submit claims to Humana, you can file claims directly. You can download a claim form from our website at www.humana.com or call Customer Care at 1-800-733-9064 for assistance.



Humana is a Medicare Advantage PPO plan with a Medicare contract. Enrollment in this Humana plan depends on contract renewal.

At Humana, it is important you are treated fairly.

- You may file a complaint, also known as a grievance:

If you need help filing a grievance, call **1-800-733-9064** or if you use a **TTY**, call **711**.

<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or at U.S. Department of Health and Human Services,

1-800-368-1019, 800-537-7697 (TDD). Complaint forms are available at

<https://www.hhs.gov/ocr/office/file/index.html>.

1-800-927-HELP (4357), to file a grievance.

Humana provides free auxiliary aids and services, such as qualified sign language interpreters, video remote interpretation, and written information in other formats to people with disabilities when such auxiliary aids and services are necessary to ensure an equal opportunity to participate.

Español (Spanish): Llame al numero arriba indicado para recibir servicios gratuitos de asistencia lingüística.

簞 **𦵏** (Chinese) 丸鞫 □ 涸 □ 鑕 贫 焔 示 / 栽 蛭 □ 顗 铃 鏑 鷄 □ 剪 □ □

Tieng Việt (Vietnamese): Xin gQi s6 diệ n tho9i tren day de nhệ n dLtQc cac djch v1, ho trQ ng6n ngcr mien phf.

□물품(Korean)중요퍼퍼히뽀커찌크으짜프여저핀핀짜□으헛□□키키포

Tagalog (Tagalog - Filipino): Tawagan ang numero sa itaas upang makatanggap ng mga serbisyo ng tulong sa wika nang walang bayad.

PyccKilil ili (Russian): nO3BOHVITe nO HOMepy, yKa3aHHOMy BIWe, 4TO6I nOHy4VITb 6ecHnaTHle ycnypVI nepeBOAa.

Kreyol Ayisyen (French Creole): Rele nimewo ki pi wo la a, pou resevwa sevis ed pou lang ki gratis.

Français (French): Appelez le numero ci-dessus pour recevoir gratuitement des services d'aide linguistique.

Polski (Polish): Aby skorzystać z bezpłatnej pomocy językowej, proszę zadzwonić pod wyżej podany numer.

Portugues (Portuguese): Ligue para o numero acima indicado para receber serviç os lingufsticos, gratis.

Italiano (Italian): Chiamare il numero sopra per ricevere servizi di assistenza linguistica gratuiti.

Deutsch (German): Wählen Sie die oben angegebene Nummer, um kostenlose sprachliche Hilfsdienstleistungen zu erhalten.

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___,.. J\9 (Farsi)

Dine Bizaad {Navajo): W0dah7 b44sh bee hani7 bee wolta7g77 bich'9' h0d77lnih 47 bee t'11 jiik'eh saad bee 1k1'1n7da'1wo'd66 nik1'adoowoŋ.

❖ .>.sul (Arabic)