STAY CURRENT on your benefits







Stay Current on Your Benefits

Welcome to the fall edition of *Stay Current on Your Benefits*. With the shorter, cooler days of autumn, our focus often turns inward—to indoor activities and family gatherings. In that vein, take a moment to learn about the inner workings of your PPO network and other tips to get the most value out of your benefits for yourself and your family.

The Benefits of Staying In-Network

The 4th District IBEW Health Fund contracts with Highmark BCBS, which offers a network of health care providers, to offer cost savings and other advantages for your medical and hospital care. When you use the BCBS network providers, you get the best benefits value:

- Lower deductible: You have a lower deductible to meet when you use in-network providers. This means that once you pay a certain amount out of pocket for covered medical expenses (your deductible), the Plan will start to pay its share (80%) toward your treatment costs. If you go out-of-network, you must meet a higher deductible, then the Plan will start paying a lower share toward your treatment costs. See the callout for details.
- **Network discount:** Network providers offer a network discount on services, so you'll pay even less.
- **Convenience:** In-network providers file claims for you, so you don't have to pay up front or file a claim to get reimbursed.
- Free preventive care: You pay no deductible or cost share for in-network preventive care. See below for a list of preventive care services.

Comparing in-network and out-of-network deductibles, depending on your plan		
	In-Network Deductible	Out-of-Network Deductible
Building Trades		
Individual	\$550	\$1,100
Family	\$1,650	\$3,300
Flexible Choice		
Individual	\$1,050	\$2,100
Family	\$3,150	\$6,300



Take advantage of free preventive care benefits

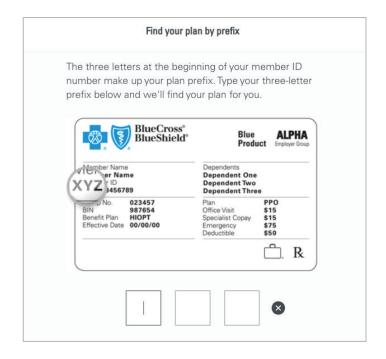
When you visit an in-network provider, the Plan covers the full cost of all the preventive care services listed here; you have no deductible or copay!

- Well-baby and well-child visits, including immunizations
- · Annual physical or checkup, including immunizations
- Vaccines (flu shots, pneumonia shots)
- · Travel vaccines
- Cancer screenings, such as colonoscopies and mammograms, including screening ultrasounds for women with dense breasts

How to Find a PPO Provider

To find a provider in the Highmark Blue Cross Blue Shield PPO Network, you can call Highmark at **800-810-2583**, or search for a provider online (you'll need your insurance card):

- 1. Go to provider.bcbs.com.
- **2.** Enter the zip code or location for where you need a provider.
- **3.** Enter the first three letters of your medical ID located on your insurance card.
- 4. Start searching for providers.



Reminder Round-Up

Important tips to help you stay healthy and get the most out of your benefits



Get your flu shot now!

Getting your flu shot and/or COVID booster as soon as possible this fall ensures that you are protected before flu season peaks. Health experts advise that you can get both vaccinations at the same time. Talk to your doctor to determine what's best for your personal health situation.

Earlier timing of receiving the vaccines could help prevent the spread of viruses. Plus, it can help you stay healthy and active throughout the season. Why wait? Stop by your local pharmacy or your health care provider to get your updated shots and/or boosters. They are 100% covered by the Health Fund.

Are you living a HEALTHY LIFE?

Participating in the HEALTHY LIFE program is the best thing members enrolled in the Building Trades medical plan can do for their health **and** wallet.

That's because members who've participated in the past have shared that the program has amazing incentive benefits, including:

- · Lower in-network deductibles
- Lower share of in-network coinsurance
- Lower in-network, annual out-of-pocket maximum

Log in to the <u>Member Dashboard</u> to check your status, and see if you are eligible for the program.

HEALTHY LIFE x 2

If your spouse is enrolled for coverage, you both must complete the physical exam and related tests for your family to be eligible for HEALTHY LIFE incentives. Please note that your children do not have to complete the physical exam or related tests for your family to be eligible for HEALTHY LIFE incentives.



If you complete your HEALTHY LIFE physical exam by the **November 30** deadline, you will automatically save hundreds of dollars on health care services during the two-year program. Getting your annual physical, which is fully covered by the Plan, is crucial to checking all areas of your health and detecting any early health concerns before they become major medical issues.



Confirm your coverage

Before starting health care services like physical therapy, it's important to confirm your benefits coverage and use a provider who is in-network. This proactive approach ensures that you avoid unexpected costs and lets you focus on your recovery with peace of mind.

Call the Fund Office at **304-525-0331** or **888-466-9094** to verify your physical therapy coverage, what the copayments or deductibles might be, and if there are any limitations or preauthorization requirements. Keep in mind that even if your doctor writes a prescription for a service or therapy, that does not guarantee that it will be covered.

Where do you go for benefits information?

Our benefits website, <u>4thdistricthealthfund.com</u>, contains important health care benefits information, such as medical and dental benefits charts and summary plan descriptions with details of your benefits coverage.

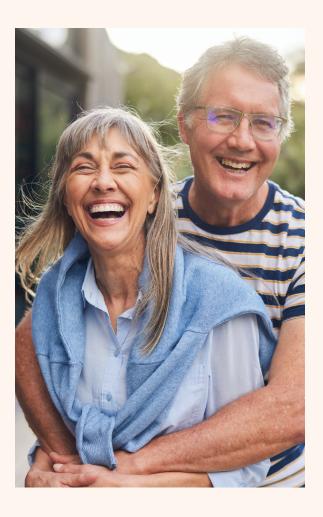
For a personal benefits view, log in to the Member Dashboard to find claim forms, update your personal information, and to check your:

- · Eligibility status
- · Dollar Bank balance
- Claim status
- Who's covered
- HEALTHY LIFE exam due date

Retired members can view the <u>Retiree Benefits</u> page of <u>4thdistricthealthfund.com</u> for the benefits overview chart, UHC Plan Guide, and program flyers for other benefits (e.g., HouseCalls, hearing aid benefits, Rally Coach, home visits, and more).

If you have questions, you can always call the Fund Office at **304-525-0331** or **888-466-9094**.

For other questions, consult our vendor partners.



Don't Get Buried in Mail

Sign up for electronic delivery of all your Fund information, and get access to all your important benefits information in one secure place.

The perks of going digital include reliably receiving important documents and safeguarding the Fund's resources by lowering printing and postage costs.

By opting to go digital, you will begin to receive benefits-related communications, including plan notices and coverage updates, delivered straight to your Member Dashboard on the Fund's website. This way, all your important benefits information is located in one convenient and secure place.

To go electronic, you must first give consent by logging in to your <u>Member Dashboard</u> and selecting the **Go Paperless** option. You will then follow a set of prompts with further details on how electronic consent works, the type of materials it covers, and how to withdraw your consent if you change your mind in the future.

If you have any questions about the process, contact the Fund Office at **304-525-0331** or **888-466-9094**.

