

Benefits at a Glance

The Fund's supplemental benefit pays for expenses Medicare doesn't cover

- The Plan pays all of the Medicare Part A and Part B deductibles.
- It also pays the 20% coinsurance that Medicare doesn't pay.

**Need help?
Call the Fund**

(866) 686-0003



Effective 1/1/2023

The Fund's supplemental coverage

Medicare Part A Benefits

Medicare Part A usually covers:

- Inpatient hospital care
- Skilled nursing facility care
- Nursing home care (*as long as custodial care isn't the only care you need*)
- Hospice
- Home health services

Each year, you must pay a deductible before Medicare will pay for covered services. What Medicare pays varies by type of care.

Your health fund pays 100% for these services:

- Part A deductible per spell of illness
- Hospital charges for days 91-455
- First 3 pints of blood Medicare doesn't cover
- Daily coinsurance for skilled nursing facility confinement on days 21-100
- Emergency hospital care when you're out of the country

Medicare Part B Benefits

Medicare Part B covers 2 types of services:

- **Medically necessary services:**
Services or supplies that are needed to diagnose or treat your medical condition and that meet accepted standards of medical practice.
- **Preventive services:** Healthcare to prevent illness (like the flu) or detect it at an early stage, when treatment is most likely to work best.

Each year, you must pay a deductible before Medicare will pay for covered services. After you pay this deductible, Medicare usually pays 80% of covered charges for the rest of the year.

Your health fund pays 100% for these services:

- Your annual Medicare Part B deductible
- Part B coinsurance for these services and supplies:
 - Doctor office and hospital visits and services
 - Chiropractic and non-routine podiatric services
 - Outpatient physical, occupational, and speech therapy
 - Kidney dialysis
 - Medical supplies and durable medical equipment
 - Prosthetic devices
 - Oxygen and anesthesia
 - Ambulance transportation
 - These immunizations:
 - ▲ Yearly flu shot
 - ▲ One-time hepatitis B inoculation if you're at high risk
 - ▲ One-time pneumococcal shot, and, if you're at high risk, a booster after 5 years

Limited Medical Benefits *(this benefit is in addition to the Fund's supplemental coverage)*

Each year, you must pay a \$150 deductible before your health fund will pay for benefits. After you pay this deductible, your health fund pays 80% of the first \$2,000 of covered charges in a calendar year. (You pay 20%.) Then your health fund pays 100% for the rest of the year. (You pay nothing.)

Annual Maximum Benefit per Person for the Limited Medical Benefits: \$25,000

Lifetime Maximum Benefit per Person for the Limited Medical Benefits: \$50,000

Covered expenses are:

- One routine eye exam per year
- Private duty nursing services
- Immunizations not covered under Medicare Part B

Formulary Prescription Drug Benefits — Hospitality Rx

Available at network pharmacies (not covered at non-network pharmacies like CVS, Longs and Wal-Mart)

Network Retail
Up to a 34-day supply

Network Mail Order
Up to a 60-day supply

Annual Maximum Benefit	\$21,000 per family	
Smoking Cessation Drugs and Supplies (including prescription generic over-the-counter products, generic products, and certain brand products)	\$0	
Covered Immunizations	\$0	
Generic and Some Brand Drugs	\$15 copay	
Preferred and Non-Preferred Drugs	\$30 copay	
Select Specialty and Biosimilar Drugs*	Not Covered	Generic: \$15 copay Brand: 25% coinsurance
Non-Formulary Prescription Drugs and Supplies	Not covered unless an exception is approved	

*Current pharmacy benefit provider will actively manage and determine drugs in tier. Specialty drugs are only available through the specialty mail order pharmacy or the Atlantic City Health Center. However, if you take specialty medications as part of your HIV treatment plan, you may be able to receive an exception to use your network retail pharmacy instead.