

# NATIONAL ELEVATOR INDUSTRY HEALTH BENEFIT PLAN

19 Campus Boulevard • Suite 200 • Newtown Square, PA 19073-3288  
800-523-4702 • [www.neibenefits.org](http://www.neibenefits.org)

## Summary of Material Modifications

November 2024

**To:** All Participants in the National Elevator Industry Health Benefit Plan, I.U.E.C. Locals and Regional Directors

**From:** Robert O. Betts, Jr.  
Executive Director for the Board of Trustees

**Re:** Effective January 1, 2025, Prescription Drug Coverage for Medicare-eligible Retirees, Retirees' Medicare-Eligible Spouses, and Medicare-eligible surviving Spouses will be provided through the Medicare Part D Program by enrollment in the Express Scripts Medicare® Prescription Drug Plan<sup>1</sup>

**Dear Participant:**

We are writing to notify you of an important prescription drug plan change for Medicare-eligible Retirees, Retirees' Medicare-Eligible Spouses, and Medicare-eligible surviving Spouses (collectively, "Medicare-eligible Retirees and Spouses") covered under the National Elevator Industry Health Benefit Plan (the "Plan").

### ■ Introducing the Express Scripts Medicare PDP

**Effective January 1, 2025**, the Plan's Board of Trustees has made the decision to automatically enroll all Medicare-eligible Retirees and Spouses in an Employer Group Waiver Program ("EGWP") called **Express Scripts Medicare® Prescription Drug Plan** (or "**Express Scripts Medicare PDP**"). The Express Scripts Medicare PDP is an approved Centers for Medicare & Medicaid Services ("CMS")-contracted prescription drug plan under the **Medicare Part D program**. The Express Scripts Medicare PDP will now be how the Plan will provide Prescription Drug coverage to Medicare-eligible Retirees and Spouses. **If a Medicare-eligible Retiree or Spouse chooses to opt out of Express Scripts Medicare PDP, they can keep their medical coverage under the NEI Health Benefit Plan, but there will be no prescription drug coverage provided by the Plan.**

**The monthly Retiree Extended Benefit Rates that apply to Medicare-eligible Retirees and Spouses will not change.**

### ■ Reasons for providing Prescription Drug Coverage for Medicare-eligible Retirees and Spouses through Express Scripts Medicare PDP

After careful consideration and in consultation with the Plan's health care consultants, the Trustees have decided that the Express Scripts Medicare PDP is the best choice to continue providing the most comprehensive, cost-effective prescription drug plan for Medicare-eligible Retirees and Spouses. The Trustees considered many factors in making this decision, including but not limited to, the ever-increasing high cost of prescription medications and the Plan's ability to provide high-quality prescription medications at the lowest possible cost to Medicare-eligible Retirees and Spouses.

Benefits to moving to an EGWP like the Express Scripts Medicare PDP include:

- Reduced Copayments for prescription drugs when you reach a certain limit
- Ability to obtain a 90-day supply at designated retail pharmacies
- Prescription drug cost savings to the Plan

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<sup>1</sup> Prescription drug coverage for a Retiree's Medicare-eligible non-spouse eligible dependent who is otherwise eligible for benefits under the Plan will also be provided through the Express Scripts Medicare Prescription Drug Plan.

## ■ What happens next?

Retirees, their Spouses, and surviving Spouses who are Medicare-eligible as of January 1, 2025 will automatically be enrolled in Express Scripts Medicare PDP on January 1, 2025. Over the coming weeks, Retirees, Retirees' Spouses, and surviving Spouses who are Medicare-eligible as of January 1, 2025 will receive additional information regarding Express Scripts Medicare PDP, including a **new prescription ID card**. They will also receive information directly from Express Scripts Medicare PDP on how to opt out of the program.

Retirees, Retirees' Spouses, and surviving Spouses who become Medicare-eligible **after January 1, 2025** will automatically be enrolled in Express Scripts Medicare PDP at that time and will receive additional information regarding the Express Scripts Medicare PDP including a **new prescription ID card**. They will also receive information from Express Scripts Medicare PDP on how to opt out.

## ■ Part D-IRMAA and the Plan's D-IRMAA Reimbursement Program

As noted above, the monthly Retiree Extended Benefit Rate Medicare-eligible Retirees and Spouses pay to maintain their coverage through the Plan will not change due to enrollment in the Express Scripts Medicare PDP. However, if a Medicare-eligible Retiree's, or Medicare-eligible Spouse's taxable income in **2023** was more than \$105,000 (or more than \$210,000 if he or she filed taxes jointly), Medicare will assess a monthly surcharge that will be deducted from the Retiree's or Spouse's monthly Social Security check beginning in 2025, this is known as the Medicare Part D Income-Related Adjustment Amount or "D-IRMAA." Medicare-eligible Retirees who are assessed the D-IRMAA may participate in the Plan's **D-IRMAA Reimbursement Program**, which is also outlined below.

A Summary of the Express Scripts Medicare PDP, which will be the Plan's exclusive prescription drug program for Medicare-eligible Retirees and Spouses, effective January 1, 2025, is set forth below.

### Summary of Material Modification (Prescription Drug Benefits for Medicare-Eligible Retirees and Spouses)

#### ➤ Page 48, amend the introductory paragraph below the Chapter heading "Prescription Drugs" as follows:

The Trustees contract with Express Scripts to serve as the Plan's Prescription Benefit Manager for all Participants and eligible dependents who are not yet Medicare-eligible. This chapter describes the Plan's Prescription Drug Benefits for Participants and eligible dependents who are not yet Medicare-eligible. If you are a Medicare-eligible Retiree, Medicare-eligible Spouse of a Retiree, or a Medicare-eligible surviving Spouse please see "**Prescription Drug Benefits: Medicare-Eligible Retirees and Spouses**" below.

#### ➤ Page 51, before the Chapter heading "Organ Transplants" add new Chapter "**Prescription Drug Benefits: Medicare-Eligible Retirees and Spouses**" as follows:

### Prescription Drug Benefits— Medicare-Eligible Retirees and Spouses

Effective January 1, 2025, Prescription Drug coverage for Medicare-eligible Retirees, Medicare-eligible Spouses of Retirees, Medicare-eligible non-spouse dependents of Retirees, and Medicare-eligible surviving Spouses (collectively, "Medicare-eligible Retirees and Spouses") will be provided through the Medicare Part D program. Prescription Drugs will continue to be administered through Express Scripts. Specifically, Medicare-eligible Retirees and Spouses will be enrolled in Express Scripts Medicare® Prescription Drug Plan ("Express Scripts Medicare PDP"). Express Scripts Medicare PDP is an approved CMS-contracted prescription drug plan under the Medicare Part D program. Prescription Drug coverage provided through Express Scripts Medicare PDP is comparable to the Plan's current Prescription Drug coverage and provides better coverage than a standard Medicare Part D plan.

## Frequently Asked Questions

### Q-1: Who is eligible for Prescription Drug Coverage through Express Scripts Medicare PDP?

A-1: You are eligible for Prescription Drug coverage through Express Scripts Medicare PDP if you are entitled to Medicare Part A and/or are enrolled in Medicare Part B, live in Express Scripts Medicare's service area, are a U.S. citizen or are lawfully present in the United States, and are eligible for Retiree or surviving Spouse health coverage through the Plan.

### Q-2: Does enrollment in Express Scripts Medicare PDP impact any other coverage I may already have?

A-2: Enrollment in Express Scripts Medicare PDP may cancel your enrollment in the following types of plans:

- another Medicare Part D plan
- a Medicare Advantage ("MA") Plan with prescription drug coverage ("MA-PD")
- a Medicare Advantage Plan not sponsored by the NEI Health Benefit Plan

### Q-3: What should I do if I don't want to enroll in Express Scripts Medicare PDP?

A-3: Your enrollment in Express Scripts Medicare PDP will occur automatically. However, you can request that you not be enrolled by contacting the Benefits Office at 1.800.523.4702, Monday through Friday, 8:30 a.m. to 7:30 p.m., Eastern Time, except holidays.

### Q-4: What happens if I don't join Express Scripts Medicare PDP?

A-4: If you decide not to be enrolled in Express Scripts Medicare PDP, you will lose all Prescription Drug coverage provided through the Plan and may not return to Express Scripts Medicare PDP. Keep in mind that if you opt out of Express Scripts Medicare PDP provided through the Plan and don't have or get other Medicare prescription drug coverage or creditable coverage (as good as Medicare's), you may be required to pay a late enrollment penalty ("LEP") if you go 63 days or more without Medicare Part D coverage or other creditable prescription drug coverage.

If you choose not to be enrolled in Express Scripts Medicare PDP, you can join a new Medicare prescription drug plan or Medicare health plan outside the Plan from October 15 to December 7 (open enrollment). Except in special cases, you cannot join a new plan at any other time of the year. You can, however, join or leave a plan at any time if Medicare decides that you need Extra Help with paying the plan costs. If Medicare decides that you no longer need Extra Help, you will have two months to make changes after Medicare notifies you of its decision. You can call 1.800.MEDICARE (1.800.633.4227), 24 hours a day, 7 days a week for assistance. TTY users should call 1.877.486.2048.

**Important!**  
*If you decide to opt out of Express Scripts Medicare PDP coverage, you will lose all Prescription Drug coverage provided through the Plan and may not return to Express Scripts Medicare PDP.*

### Q-5: When I begin participating in the Express Scripts Medicare PDP, do I need to do anything if I am currently taking a Prescription Drug that requires prior authorization?

A-5: If you currently have a prescription for which you have obtained a prior authorization or prior approval from the Plan, call Express Scripts Medicare Customer Service at the numbers listed below to determine if your Prescription Drug requires a prior authorization. If you require a new approval, call Express Scripts Medicare Customer Service after your membership in Express Scripts Medicare PDP becomes effective to start the prior authorization process.

**Express Scripts Medicare Customer Service**  
*If you have any questions about Express Scripts Medicare PDP, you may contact Express Scripts Medicare Customer Service at:*  
**1-844-367-6114**  
**TTY: 1-800-716-3231**  
*Customer Service is available 24 hours a day, 7 days a week.*

**Q-6: When will I receive my new member ID card and other Express Scripts Medicare PDP materials?**

A-6: You should receive a Welcome Kit from Express Scripts prior to the date you first become eligible for Prescription Drug benefits through Express Scripts Medicare PDP.

Your Welcome Kit will include your **new** Medicare prescription drug plan member ID card. If you were a Medicare-eligible Retiree or Spouse prior to January 1, 2025, you should begin using this card on January 1, 2025 when filling prescriptions. Otherwise, you should begin using this card when you first become Medicare-eligible.

*Do not discard your NEI Health Benefit Plan medical coverage ID card! You should continue to use your NEI Health Benefit Plan medical card for any other services covered by the Plan.*

Because Medicare is an individual benefit, a Medicare-eligible Retiree and the Retiree's covered Medicare-eligible Spouse will each have a unique member ID number and prescription drug plan member ID card. In addition, you will each receive separate communications from Express Scripts Medicare.

**Q-7: My Spouse, who is my eligible dependent under the Plan, is not currently Medicare-eligible. How will my Spouse be impacted?**

A-7: Your Spouse cannot be enrolled in Express Scripts Medicare PDP until your Spouse becomes Medicare-eligible. Therefore, your Spouse's Prescription Drug benefits will continue to be provided in accordance with the Plan's Prescription Drug Benefit provisions. Your Spouse should continue to use the existing prescription drug ID card they currently have in their possession.

**Q-8: Does the Express Scripts Medicare PDP cover Medicare Part B or non-Part D drugs?**

A-8: In addition to providing coverage of Medicare Part D drugs, the Express Scripts Medicare PDP sponsored by the NEI Health Benefit Plan provides coverage for Medicare Part B medications, as well as for some other non-Part D medications that are not normally covered by a Medicare prescription drug plan. The amounts paid for these medications will not count toward your total drug costs or total out-of-pocket expenses (see below). Beginning on January 1, 2025, please call Express Scripts Medicare Customer Service for additional information about specific drug coverage and your cost-sharing amount.

**Q-9: Will there be additional costs associated with my enrollment in Express Scripts Medicare PDP?**

A-9: Once you're enrolled in the Express Scripts Medicare PDP, the monthly premium you pay to maintain Retiree health coverage through the Plan will not change, and your standard Part D Premium will be paid through the Express Scripts Medicare PDP. However, Medicare may assess a monthly Medicare Part D Income-Related Medicare Adjustment ("**Part D-IRMAA Surcharge**").

For **2025**, you will be assessed a Part D-IRMAA Surcharge if your taxable income in **2023** was more than \$105,000 (or more than \$210,000 if you and your Spouse filed your taxes jointly). For most Retirees, Part D-IRMAA Surcharges are deducted directly from their monthly Social Security check. (For more information in Part D-IRMAA Surcharge income brackets, which are adjusted each year, visit [www.medicare.gov](http://www.medicare.gov) at this link: [Monthly premium for drug plans | Medicare.](#))

However, the Trustees have agreed to provide financial assistance to those Retirees and Spouses of Retirees who may be impacted by the Part D-IRMAA Surcharge and have implemented the **Medicare Part D IRMAA Reimbursement Program**<sup>2</sup> described below.

**Summary of Your Prescription Drug Coverage through Express Scripts Medicare PDP**

The following is a summary of what you will pay for covered Prescription Drugs across the different stages of your Medicare Part D benefit. You can fill your covered Prescription Drugs at a network retail pharmacy or through Express Scripts home

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<sup>2</sup> For over two decades, Medicare has also assessed a monthly Medicare *Part B* Income-Related Medicare Adjustment ("Part B-IRMAA Surcharge"), which a number of the NEI Health Benefit Plan's Medicare-Eligible Retirees have paid in the past and will continue to pay in 2025 and beyond. Please note that the NEI Health Benefit Plan's Medicare Part D-IRMAA Reimbursement Program solely provides reimbursements for Part D-IRMAA Surcharges.

delivery service. Some network retail pharmacies in the Express Scripts Medicare PDP will only dispense a one-month supply, while Walgreens as well as other select retail pharmacies will provide up to a 90-day supply. Beginning January 1, 2025, please visit [www.express-scripts.com](http://www.express-scripts.com) or call Express Scripts Medicare Customer Service for more information.

### YOUR EXPRESS SCRIPTS MEDICARE PDP DRUG BENEFITS AT-A-GLANCE

<b>Plan Premium</b>	Your monthly premium for Prescription Drug Coverage under the Express Scripts Medicare PDP is included in the monthly Retiree Extended Benefit premium you pay to the Plan. A schedule of the Plan's current Retiree Extended Benefit Rates are available online at <a href="http://www.neibenefits.org">www.neibenefits.org</a> or contact the Benefits Office at 1.800.523.4702 for more information.			
<b>Initial Coverage Stage*</b>	You will pay the following until your total yearly drug costs (what you and the Plan pay) reach \$2,000:			
	<b>Tier</b>	<b>Retail One-Month (30-day) Supply</b>	<b>Retail Three-Month (90-day) Supply</b>	<b>Express Scripts® Pharmacy Home Delivery Three-Month (90-day) Supply</b>
	<b>Tier 1: Generic Drugs</b>	20% coinsurance (\$5 minimum/ \$40 maximum)	\$10 Copayment	\$10 Copayment
	<b>Tier 2: Preferred Brand Drugs</b>	20% coinsurance (\$15 minimum/ \$40 maximum)	\$30 Copayment	\$30 Copayment
	<b>Tier 3: Non-Preferred Brand Drugs</b>	20% coinsurance (\$30 minimum/ \$40 maximum)	\$50 Copayment	\$50 Copayment
	You may receive up to a 90-day supply of certain maintenance drugs (medications taken on a long-term basis) by mail through Express Scripts® Pharmacy. There is no charge for standard shipping. Not all drugs are available at a 90-day supply.			
<b>Catastrophic Coverage Stage</b>	<b>If you reach the Catastrophic Coverage stage, you pay nothing for covered Part D drugs.</b>			
	<b>You may have cost sharing for drugs not normally covered by Medicare Part D but that may be covered under the enhanced Express Scripts Medicare PDP that is provided through this Plan.</b>			

\* Note: If you're a Retiree whose pension became effective on or before January 1, 1984, you pay no coinsurance and pay only the following Copayments during the Initial Coverage Stage: (i) \$5 Copayment for Generic Drugs 30-day supply from a retail pharmacy; (ii) \$10 Copayment for brand-name drugs (Preferred Brand or Non-Preferred Brand) for a 30-day supply from a retail pharmacy; (iii) \$10 Copayment for generic drugs 90-day supply from a retail pharmacy or through Express Scripts Pharmacy Home Delivery; and (iv) \$20 Copayment for brand-name drugs (Preferred Brand or Non-Preferred Brand) for a 90-day supply from a retail pharmacy or through Express Scripts Pharmacy Home Delivery.

### Long-Term Care (LTC) Pharmacy

If you reside in an LTC facility, you pay the same as at a network retail pharmacy.

### Out-of-Network Coverage

You must use Express Scripts Medicare network pharmacies to fill your prescriptions. Covered Medicare Part D drugs are available at out-of-network pharmacies only in special circumstances, such as illness while traveling outside of the Express Scripts Medicare PDP's service area where there is no network pharmacy. You generally have to pay the full cost for drugs



received at an out-of-network pharmacy at the time you fill your prescription. You can ask Express Scripts Medicare to reimburse you for its share of the cost. Please contact Express Scripts Medicare Customer Service at the numbers below for more details.

### Other Important Information Regarding Express Scripts Medicare PDP

- The service area for the Express Scripts Medicare PDP is all 50 states, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, Guam, the Northern Mariana Islands and American Samoa. You must live in one of these areas to participate in this prescription drug plan.
- You are eligible for the Express Scripts Medicare PDP if you are entitled to Medicare Part A and/or are enrolled in Medicare Part B, are a U.S. citizen or are lawfully present in the United States, and are eligible for Retiree health benefits through the National Elevator Industry Health Benefit Plan.
- The amount you pay for a prescription may differ depending on what type of pharmacy you use; for example, retail, home infusion, LTC or home delivery.
- If your doctor prescribes less than a full month's supply of certain Prescription Drugs, you will pay a daily cost-sharing rate based on the actual number of days of the Prescription Drug that you receive.
- To find a network pharmacy near you, visit [www.express-scripts.com/pharmacies](http://www.express-scripts.com/pharmacies).
- Express Scripts Medicare PDP uses a formulary – a list of covered drugs. The amount you pay depends on the Prescription Drug's tier and on the coverage stage that you've reached. From time to time, a Prescription Drug may move to a different tier. If a Prescription Drug you are taking is going to move to a higher (or more expensive) tier, or if the change limits your ability to fill a prescription, Express Scripts will notify you before the change is made. The Express Scripts Medicare PDP has no formulary exclusions.
- A PDF of the Express Scripts Medicare PDP's printed drug list for 2025 will be available by logging into [www.express-scripts.com/documents](http://www.express-scripts.com/documents) beginning on October 15, 2024.
- Most adult Part D vaccines are covered at no cost to you.
- The Express Scripts Medicare PDP may require you to first try one Prescription Drug to treat your condition before it will cover another Prescription Drug for that condition.
- Your health care provider must get prior authorization from Express Scripts Medicare for certain Prescription Drugs.
- Some retail pharmacies in the Express Scripts Medicare PDP only provide a one-month supply of your covered Prescription Drugs at the one-month supply cost share.
- Your cost-sharing amount may differ from the information shown in above if you use a home delivery pharmacy other than Express Scripts Pharmacy. Other pharmacies are available in the Express Scripts Pharmacy network.
- Starting in 2025, the Medicare Prescription Payment Plan is a new payment option to help you manage your out-of-pocket drug costs. This new payment option works with your current drug coverage, and it can help you manage your drug costs by spreading them across **monthly payments that vary throughout the year (January – December). This payment option might help you manage your expenses, but it doesn't save you money or lower your drug costs.**
- If the actual cost of a Prescription Drug is less than the normal cost-sharing amount for that Prescription Drug, you will pay the actual cost, not the higher cost-sharing amount.
- If you request an exception for a Prescription Drug and Express Scripts Medicare approves the exception, you will pay the cost-sharing amount set by the Express Scripts Medicare PDP for that drug.
- You must continue to pay your Medicare Part B premium, if not otherwise paid for under Medicaid or by another third party.
- **Important Message About What You Pay for Insulin:** You won't pay more than \$35 for a one-month supply for each insulin product covered by the Express Scripts Medicare PDP, no matter its cost-sharing tier. If the Express Scripts

Medicare PDP sponsored by NEI Health Benefit Plan covers insulin at a lower cost-sharing amount, you will pay the lower amount. There is no deductible for covered insulins.

- The Express Scripts Medicare PDP keeps track of the costs of your Prescription Drugs and any payments made when you fill or refill your prescription. This summary, called the *Explanation of Benefits* (Part D EOB), is available electronically by visiting Express Scripts' website, [www.express-scripts.com](http://www.express-scripts.com). You can also request a printed copy to be mailed to you by calling Express Scripts Medicare Customer Service at the phone numbers below.
- The information in the Summary of Material Modifications is not a complete description of benefits provided through the Express Scripts Medicare PDP sponsored by the NEI Health Benefit Plan. Call Express Scripts Medicare at the phone numbers below for more information or review the *Evidence of Coverage* (EOC) by visiting Express Scripts Medicare's website at [www.express-scripts.com/documents](http://www.express-scripts.com/documents). You can request a copy of the EOC by calling Express Scripts Medicare Customer Service.

Express Scripts Medicare Customer Service
Call: 1.844.367.6114   TTY: 1.800.716.3231 24 hours a day, 7 days a week Express Scripts Medicare has free language interpreter services available for non-English speakers. You can also visit Express Scripts on the Web at <a href="http://www.express-scripts.com">www.express-scripts.com</a> .

### Medicare Part D-IRMAA Reimbursement Program

If your income in the calendar year two years prior to your current tax year exceeds a certain threshold, Medicare may assess a monthly Medicare Part D Income-Related Medicare Adjustment ("Part D-IRMAA Surcharge"). For example, if your taxable income in 2023 was more than \$105,000 (or more than \$210,000 if you and your Spouse filed your taxes jointly), you will be assessed a monthly Part D-IRMAA Surcharge. In most cases, the Part D-IRMAA Surcharge is deducted directly from a Retiree's monthly Social Security check.

The NEI Health Benefit Plan's Trustees have agreed to provide financial assistance to those Retirees and Spouses of Retirees who may be impacted by the Part D-IRMAA Surcharge and have implemented the **Medicare Part D IRMAA Reimbursement Program**.

If you paid Part D-IRMAA Surcharges during a calendar year, you may be eligible for reimbursement from the Plan through the Medicare Part D IRMAA Reimbursement Program. To claim your Part D-IRMAA Surcharge reimbursement, you must complete a **Part D-IRMAA Surcharge Reimbursement Claim Form** and provide proof of the Part D-IRMAA premiums you paid in the calendar year. Acceptable proof may be:

- **A copy of the cost-of-living adjustment (COLA) letter sent to you by the Social Security Administration, or**
- **A letter you received from the CMS.**

Proof you submit must include your name and the monthly amount of the Part D-IRMAA Surcharge.

A separate Part D-IRMAA Surcharge Reimbursement Claim Form must be submitted for each individual who is assessed Part D-IRMAA Surcharges. For example, if a Medicare-Eligible Retiree and the Retiree's Medicare-Eligible Spouse are both covered by the Plan and are both assessed Part D-IRMAA Surcharges in 2025, they both must submit to the Plan a Part D-IRMAA Surcharge Reimbursement Claim Form and proof of Part D-IRMAA Surcharge.

Once you receive notice that you will be assessed monthly Part D-IRMAA Surcharges for a calendar year, you should promptly submit your Part D-IRMAA Surcharge Reimbursement Claim Form and proof of Part D-IRMAA Surcharge to the NEI Health Benefit Plan. Documentation received **after December 31** of the calendar year in which you were assessed Part D-IRMAA Surcharges may not be accepted.

Eligibility for the Part D-IRMAA Surcharge reimbursement is determined by the Plan each calendar year. You must submit a new Part D-IRMAA Surcharge Reimbursement Claim Form and updated proof of Part D-IRMAA Surcharge each calendar year in order for the Plan to reimburse you for Part D-IRMAA Surcharges for that calendar year.