

# MEDICARE SUPPLEMENT REIMBURSEMENT CLAIM FORM

**Effective January 1, 2022** the Board of Trustees amended the Southern California IBEW-NECA Health Trust Fund-Retiree Health Plan *Summary Plan Description* (effective February 1, 2018, as amended), to reflect the termination of the Medicare Supplement Plan. Please refer to Amendment# 5 (a copy is attached to this form).

## INSTRUCTIONS

1. Complete, date and sign the claim form.
2. Attach all Medicare Explanation of Benefit claim forms to Part One.
3. Send the completed Part One and attachments to the address shown below.
4. Remove and retain Part Two for your records.

**NOTE:** Claims are processed after eligibility is verified, and in the order in which they are received. Any claims filed for services occurring after December 31, 2021 are not eligible for reimbursement. Claims may be filed within 15 months from the date the services were provided.

Web: [www.scibew-neca.org](http://www.scibew-neca.org)

## PART ONE

Web: [www.scibew-neca.org](http://www.scibew-neca.org)

Last Name	First Name	M.I.	Last Four Digits of the Social Security Number				
Street Address/Apt # (Do Not Use P.O. Box)	City	State	Zip Code	Phone Number			

I. Please complete the information below.

PATIENT INFORMATION			
	PATIENT LAST NAME	PATIENT FIRST NAME	M.I.
Self			
Spouse			

**Important: A Medicare EOB must be submitted with this form in order to receive reimbursement**

Participant Signature	Date Signed	Spouse Signature	Date Signed
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## RETURN COMPLETED FORM TO:

### COAST BENEFITS, INC.

IBEW-NECA Claims Administration  
 3444 Camino Del Rio North, Suite 100  
 San Diego, CA 92108  
 Telephone: (800) 886-7559 or (619) 280-2009  
 Fax: (619) 280-4304

## PART TWO (Retiree's Portion) – FOR YOUR RECORDS ONLY

### MEDICARE SUPPLEMENT REIMBURSEMENT CLAIM RECEIPT

Please remove the bottom portion of this form for your records

FAMILY INFORMATION AND CLAIM AMOUNT INFORMATION WITH DATES					
	LAST NAME	FIRST NAME	M.I.	TOTAL AMOUNT BILLED	DATE OF SERVICE
Self					
Spouse					

This form is available online at [www.scibew-neca.org](http://www.scibew-neca.org)

**AMENDMENT NO. 5**  
**TO THE SOUTHERN CALIFORNIA**  
**IBEW-NECA HEALTH TRUST FUND RETIREE HEALTH PLAN**  
**(RESTATED AS OF SEPTEMBER 1, 2017)**

This Amendment to the Southern California IBEW-NECA Health Trust Fund, Retiree Health Plan *Summary Plan Description* (“SPD”) (restated as of February 1, 2018, as amended), is made by the Board of Trustees of the Southern California IBEW-NECA Health Trust Fund (“Board of Trustees”) with reference to the following facts and circumstances:

- A. The Board of Trustees wishes to amend the SPD to reflect the termination of the self-funded mandatory generic prescription drug program managed by Citizens Rx and implement the insured prescription drug programs under the Kaiser Permanente and United HealthCare HMO Plans effective for claims and appeal of claims incurred on and after January 1, 2022.
- B. The Board of Trustees wishes to amend the SPD to reflect the termination of the Medicare Supplement Plan and enroll all participants in the UnitedHealthcare Medicare Advantage Plan (referred to as the “Out-Of-Area Plan”).
- C. The Board of Trustees has reserved to themselves the ability to amend the SPD from time to time.

**NOW THEREFORE**, effective January 1, 2022, the SPD is amended as follows:

1. All references in the SPD appearing at Article 1, **Introduction**, Article 2, **Summary of Benefits**, Article 4, **Medical Coverage**, Article 5, **Mandatory Generic Prescription Drug Plan**, Article 8, **Benefits for Disabled Retirees as of April 1, 2017**, subsections 8.1 and 8.2, Article 9, **Important Federal Laws**, and Article 10, **Plan Amendment Procedures and Disclosure Information**, and elsewhere in the SPD are amended by removing “Citizens Rx”.
2. Article 1, subsection 1.3, third paragraph is amended by providing clarification of the language in the following paragraph to refer to claims and appeals for claims incurred prior to January 1, 2022.

“Citizens Rx is a claims fiduciary and handles prescription drug claims and appeals under its claims and appeals rules for claims and appeals for claims incurred prior to January 1, 2022. Citizens Rx will decide appeals and obtain independent medical reviews requested by Participants. Citizens Rx will use an IMR company licensed in the State of California. Participants will be notified in writing of any adverse determinations within the time required by federal law and regulations.

3. Article 2, subsection 2.1.1 is amended to read as follows:

Retirees Under Age 65 and not eligible or enrolled in Medicare

***Benefit Options***

Southern California residents may choose one of the options if you reside in the geographical jurisdiction as defined by the HMO you select.

Benefit Options		Prescription Drug Benefits
Option 1	Kaiser Permanente HMO	Kaiser Permanente Prescription Drug Plan
Option 2	UnitedHealthcare HMO	UnitedHealthcare Prescription Drug Program

**Summary of Benefits**

Early Retirees (Under Age 62 and not eligible or enrolled in Medicare)

Prescription Drugs		
	Kaiser HMO	UnitedHealthcare HMO *
Retail Pharmacy: Generic	\$0 co-payment Up to a 100-day supply	\$0 co-payment Up to a 30-day supply
Retail Pharmacy: Brand - Formulary	\$10 co-payment Up to a 30-day supply	\$10 co-payment Up to a 30-day supply
Retail Pharmacy – Brand- _Non-Formulary	N/A	N/A
Mail Order: Generic	\$0 co-payment Up to a 100-day supply	\$0 co-payment Up to a 90-day supply
Mail Order: Brand - Formulary	\$20 co-payment Up to a 100-day supply	\$20 co-payment Up to a 90-day supply
Mail Order – Brand – Non-Formulary	N/A	N/A

4. Article 7, **Medicare Supplement Plan Prior to January 1, 2016** is deleted in its entirety. All participants enrolled in this Plan will be transitioned to the UnitedHealthcare Group Medicare Advantage-Out-of-Area Retiree Plan of benefits effective for services on or after January 1, 2022.

All other terms and conditions of the Plan shall remain in full force and effect.

Executed this 9 day of September, at Pasadena, California.

**BOARD OF TRUSTEES  
 SOUTHERN CALIFORNIA IBEW-NECA  
 HEALTH TRUST FUND**

By:   
 James Willson, Chairman

By:   
 Joël Barton, Secretary