



UFCW UNIONS & EMPLOYERS HEALTH & WELFARE FUND – ATLANTA

1740 Phoenix Parkway, Atlanta, Georgia 30349

Phone: 770.997.9910 or 800.241.3473 Online: atlanta.ufcwemprfund.org

March 2022

IMPORTANT: CHANGES TO YOUR MEDICAL PLAN EFFECTIVE MAY 1, 2022

This notice includes important information regarding three changes to how your medical benefits will be administered. Please read this notice carefully and contact the Fund Office at 770-997-9910 or toll-free at 1-800-241-3473 if you have any questions.

CHANGE #1: ANTHEM CLAIMS PROCESSING

Effective May 1st, there will be a structural change to your Anthem medical benefits in order to more fully combine Carolinas group with the Atlanta group.

- **YOU WILL RECEIVE A NEW ANTHEM ID CARD.** This ID card will have important information to identify the new group number that is necessary to properly identify claims for processing. **You will need to provide this new ID card to your providers each time you seek care on or after May 1st.** You can also access an electronic ID card by logging into www.Anthem.com or through the Sydney Health mobile app for your smart phone or tablet. Your old Anthem ID cards will no longer work after April 30th. Please note that you should keep all other ID cards, including your KPP prescription drug card, as these will not be reissued.
- **YOU WILL HAVE A NEW MEMBER SERVICES NUMBER TO CONTACT ANTHEM** for questions about your medical claims. Anthem's member service is available Monday through Friday from 8am to 8pm at 1-833-664-2851. This new number will be on the back of your new ID card.
- **YOU WILL STILL HAVE ACCESS TO FUND OFFICE CUSTOMER SERVICE.** The Fund Office is still available to answer your questions and to help direct you to the right place for answers regarding eligibility or your medical, prescription, dental, vision, weekly disability, and/or life/ad&d insurance benefits.

YOUR NEW ID CARDS WILL BE MAILED CLOSE TO MAY 1st

CARDS WILL BE SENT BY ANTHEM TO THE ADDRESS ON FILE.

PLEASE CONTACT YOUR EMPLOYER ASAP IF YOUR ADDRESS HAS CHANGED

Have questions or need help? Contact the Fund Office at 770-997-9910 or toll-free at 1-800-241-3473.

CHANGE #2: BALANCE BILLING PROTECTIONS

Recent legislation called the “No Surprises Act” will change the way that claims for certain out-of-network providers will be processed under the H&W Fund and will prohibit these providers from “balance billing” you for the difference between the H&W Fund’s allowed amount and the provider’s billed amount for those claims. These changes will be effective for claims incurred on and after January 1, 2022.

- **TYPES OF SERVICES COVERED UNDER THE NO SUPRISSES ACT:**
 - **Emergency services** – when you have an emergency medical condition and seek emergency care from an out-of-network provider or facility. This also includes certain post-stabilization services, as well as air ambulance when you have an emergency where air ambulance transport is medically necessary. This does not include ground ambulance.
 - **Certain services at an in-network hospital or ambulatory surgical center** – when you have chosen to utilize an in-network facility, but there are certain providers where you do not have a choice of who is utilized and those providers may be out-of-network. This applies to emergency medicine, anesthesia, pathology, radiology, laboratory, neonatology, assistant surgeon, hospitalist, and/or intensivist (i.e., critical care physician) services.

Under your current benefits, the above services are already covered as in-network. However, starting January 1st, the H&W will based what you owe (your in-network cost share) on what it would pay an in-network provider or facility for the same services and will show that amount in your explanation of benefits. Additionally, your cost sharing amounts will be applied to your in-network deductible and out-of-pocket maximum. The out-of-network provider cannot demand that you pay any more than your calculated cost share unless, in certain circumstances, you have given written consent to give up your protections under the No Surprises Act.

- **MORE INFORMATION ON YOUR BALANCE BILLING PROTECTIONS** will be included with your explanation of benefits for any claims that are covered under the No Surprises Act. In addition, a notice providing details about these protections is available online at atlanta.ufcwemprfund.org.
- **YOU ALSO HAVE APPEAL RIGHTS** if the plan has determined that a claim does not qualify to be treated as covered under the No Surprises Act, you can appeal that decision, including requesting an external review to have an independent third party determine whether the claim meets the No Surprises Act requirements.
- **REMEMBER** you are never required to give up your protections from balance billing, please be sure to carefully review all paperwork that a provider asks you to complete prior to receiving care.

CHANGE #3: ADDITIONAL CLAIMS PROTECTIONS

In addition to the balance billing protection, the No Surprises Act also provides the following protections for you effective January 1, 2022:

- If a network provider or facility leaves the Anthem network, you may be able to receive care as if the provider or facility was still a network provider for up to 90 days so that you have time to transition to a network provider. You will have this option if you are inpatient, scheduled for nonelective surgery, or receiving care for a pregnancy, serious and complex condition, or terminal illness when your provider or facility leaves the Anthem network. Contact the Fund Office for more information if you think this may apply to you.

HOW TO GET MORE INFORMATION ON YOUR MEDICAL BENEFITS AND CLAIMS



Go online to www.Anthem.com to register for/sign-in to your member portal



Download Anthem's **Sydney Health** app on your smart phone and/or tablet



Contact Anthem at 1-855-397-9267 for claims incurred prior to May 1, 2022
Contact Anthem at 1-833-664-2851 for claims incurred on/after May 1, 2022
Contact the Fund Office at 1-800-241-3473

This notice is a Summary of Material Modifications ("SMM") providing you with information regarding changes to your Plan benefits effective January 1, 2022, and May 1, 2022. This SMM should be kept with your copy of the Summary Plan Description. If you have any questions, contact the Plan Administrator. If there is any discrepancy between the terms of the Plan, as modified, and this SMM, the provisions of the Plan will control.

Have questions or need help? Contact the Fund Office at 770-997-9910 or toll-free at 1-800-241-3473.