



U.A. Local No. 393 Health and Welfare Plan  
Benefits Department/HR  
P O Box 2460  
San Jose, CA 95109

**NAVITUS**  
**MedicareRx (PDP)**  
P.O. Box 1039  
Appleton, WI 54913

### **Important Plan Information**

[Date]

[Member\_FirstName] [Member\_LastName]  
[Member\_Address1]  
[Member\_Address2]  
[Member\_City] [Member\_State] [Member\_Zip]

Dear [Member\_FirstName] [Member\_LastName]:

U.A. Local No. 393 Health and Welfare Plan is enrolling you in Navitus MedicareRx Prescription Drug Plan (PDP) as your retiree prescription drug plan beginning 1/1/2023. Navitus MedicareRx is a Medicare Prescription Drug (Part D) plan, which is included with the health plan you selected. Enrollment in Navitus MedicareRx will automatically cancel your enrollment in any other Medicare Prescription Drug (Part D) plan. It is important to contact the Plan Administrator at U.A. Local No. 393 at 1-408-588-3751, press 2 for Members, then press 1 for the Member Services Department, if you will be enrolling in a different Medicare Prescription Drug plan other than Navitus MedicareRx, for 1/1/2023. If you do not wish to be enrolled in our Navitus MedicareRx Medicare Prescription Drug (Part D) plan you must notify U.A. Local No. 393 Health and Welfare Plan Benefits plan between October 31 and November 11, 2022, which is your Open Enrollment period.

### **What do I need to know as a member of Navitus MedicareRx?**

This mailing includes important information about Navitus MedicareRx and the coverage it offers, including a Summary of Benefits document. Please review this information carefully. If you want to be enrolled in this Medicare prescription drug plan, you don't have to do anything, and your coverage will start on 1/1/2023. Once you are a member of Navitus MedicareRx you have the right to appeal plan decisions about payments or services if you disagree. When you are enrolled, you can read the Evidence of Coverage from Navitus MedicareRx to know which rules you must follow to receive coverage with this Medicare prescription drug plan. To access the Evidence of Coverage and other documents electronically, visit our website at [Medicarerx.navitus.com](https://Medicarerx.navitus.com) (to log into the member portal, click on Members, then Login).

Navitus MedicareRx is a Medicare drug plan and is in addition to your coverage under Medicare Part A or Part B. Your enrollment in Navitus MedicareRx doesn't affect your coverage under Medicare Part A or Part B. It is your responsibility to inform Navitus MedicareRx of any prescription drug coverage that you have or may get in the future. You can be in only one Medicare prescription drug plan at a time. If you are currently

in a Medicare prescription drug plan, your enrollment in Navitus MedicareRx will end that enrollment. Enrollment in Navitus MedicareRx is generally for the entire year.

By joining this Medicare prescription drug plan, you acknowledge that Navitus MedicareRx will release your information to Medicare and other plans as is necessary for treatment, payment, and health care operations. You also acknowledge that Navitus will release your information, including your prescription drug event data, to Medicare, who may release it for research and other purposes which follow all applicable Federal statutes and regulations.

**What happens if I don't join Navitus MedicareRx?**

You aren't required to be enrolled in this plan. You can also decide to join a different Medicare drug plan. You can call 1-800-MEDICARE (1-800-633-4227) 24 hours per day, 7 days per week for help in learning how. TTY/TDD users should call 1-877-486-2048. **However, if you decide not to be enrolled in the Navitus MedicareRx plan, you will still need to pay your monthly premium to remain covered for medical benefits under the U.A. Local No. 393 Health and Welfare Plan.**

**What should I do if I don't want to join Navitus MedicareRx?**

**To request not to be enrolled by this process,** notify the Plan Administrator at U.A. Local No. 393 at 1-408-588-3751, press 2 for Members, then press 1 for the Member Services Department.

**What if I want to leave Navitus MedicareRx?**

Medicare limits when you can make changes to your coverage. You may leave this plan only at certain times of the year or under certain special circumstances. To request to leave, Plan Administrator at U.A. Local No. 393 at 1-408-588-3751, press 2 for Members, then press 1 for the Member Services Department.

Navitus MedicareRx serves a specific area, which includes the United States and Puerto Rico. If you move out of the area that Navitus MedicareRx serves, you need to notify U.A. Local No. 393 Health and Welfare Plan so you can be disenrolled.

Keep in mind that if you leave our plan and don't have or get other Medicare prescription drug coverage or creditable coverage (as good as Medicare's), you may have to pay a late enrollment penalty in addition to your premium for Medicare prescription drug coverage in the future.

If you have any questions, please call Navitus Customer Care at 1-866-270-3877 24 hours a day, 7 days a week, excluding Thanksgiving and Christmas Day. TTY/TDD users should call 711.

***No action is required in order to enroll in the U.A. Local No. 393 Health and Welfare Plan Medicare Prescription Drug (Part D) plan through Navitus.*** Navitus MedicareRx looks forward to providing your Part D prescription benefits.

Thank you,

U.A. Local No. 393 Health and Welfare Plan and Navitus MedicareRx (PDP)