

Aetna MedPremier Insurance Coverage Effective Dates – 2024 Plan Year

Associates on Service Contract Act (SCA) / Service Contract Labor Standards (SCLS) applicable assignments who qualify (must be classified as non-exempt and work full-time) will be eligible for health insurance coverage starting the first of the month following one full calendar month on assignment.

Associates who qualify (again, must be classified as non-exempt and work full-time) will be eligible for health insurance coverage starting the first of the month following one full calendar month on the approved SCA/SCLS assignment. Until the insurance coverage eligibility date approaches and an insurance premium is first paid, the entire Health & Welfare (H&W) benefit will be deposited to the associate's MassMutual Empower Retirement 401(k) as an employer contribution.

If an associate earns enough Health & Welfare to cover the cost of their final employee only premium in the last payroll calendar month on assignment, insurance benefits will end on the last day of the regular calendar month following the month in which the SCA/SCLS applicable assignment ends. If an associate earns less Health & Welfare (H&W) in that period than necessary to cover the cost of the upcoming employee only premium, insurance benefits will end on the last day of the calendar month in which their assignment ends.

If enough money is deducted in the last payroll calendar month on assignment to cover the cost of the dependent premium, coverage for dependents will continue through the regular calendar month following the month in which the assignment terms. If less than the full amount is withheld, dependent coverage will term at the end of the calendar month in which the SCA/SCLS applicable assignment ends. If the associate earns enough Health & Welfare (H&W) dollars to cover the employee only premium in the final month of coverage, remaining dollars may be used to supplement the cost of the dependent coverage.

Verifying Coverage

Anytime an associate adds coverage or makes changes to their plan, the Boon Group will issue a new Aetna ID card. It can take several weeks for the card to go out after coverage becomes effective. If you need to confirm coverage before you get your ID card, please call the Boon Group at **(866) 337-8417**. Associates, providers, pharmacy's, etc... should not call Aetna directly, only the Boon Group at **(866) 337-8417** to verify coverage.

It is recommended if you need to use your insurance before you receive your Aetna ID card, that you verify coverage by phone first. You should also confirm your health provider accepts your insurance plan. Please call the Boon Group at **(866) 337-8417**. **Do not call Aetna directly.** Representatives are available to assist you Monday through Friday from 7:00am to 7:00pm Central Time.

Caremark is the prescription carrier for your plan. You may be asked to provide your social security number when first filling a prescription. Caremark will use your social security number to verify your coverage. If you have question about a participating retail pharmacy or need assistance, please call the Boon Group at **(866) 337-8417** or visit the Caremark website at www.caremark.com.

Claims Reimbursement

If an associate needs to see a provider or get a prescription filled prior to the date that their benefits are showing as active, they will have to pay out-of-pocket for their claim or prescription and then file a claim with the Boon Group for reimbursement. If the prescription is particularly expensive, sometimes the pharmacist can be asked to release a lower count of the prescription (for example, requesting a week's worth of the prescription instead of a full month) to lower the price paid out-of-pocket.

To file a claim for reimbursement, associates can mail a claim form along with itemized receipt to the below addresses (depending on claim type). It is recommended that you keep a copy of the itemized receipt for your own records:

For Aetna medical claims:

Aetna
Attn: Claims
P.O. Box 14079
Lexington, KY 40512-4079
Or Fax to: (859) 455-8650 (Attn: Claims)

For CVS/caremark claims:

CVS/caremark
P.O. Box 52136
Phoenix, AZ 85072-2136

Please reach out to the Boon Group at **(866) 337-8417** should you need assistance with Health and/or RX Claim Forms found on the Benefits tab at www.actonegovernment.com/federalgovernment. These same forms can be used for any covered health expenses that are paid out of pocket.

Finding a Doctor

Follow the steps below to look up a doctor covered under your insurance plan Aetna MedPremier Insurance Plan:

- Go to www.Aetna.com/docfind/custom/aahc/bn
- Enter the type of physician you are trying to locate (Primary, Dentist, etc.) Enter your zip code. Click Search
- From the drop down menu, choose MedPremier Plan – PPO. Click Continue
- Your list of physicians will appear at the bottom.
- You can narrow your results on the left side of the page.
- If you need any assistance locating a physician, doctor’s office, etc. call Member Services at **(866) 337-8417**

Payroll Cycle Calendar – 2024

The Boon Group (which is a 3rd party administrator who manages insurance coverage) and MassMutual Empower Retirement (which invests 401(k) employer contributions) are sent information on a monthly basis. The data is culled from the previous payroll calendar month. Employer paid Health & Welfare (H&W) dollars earned in one payroll month are applied in the following calendar month. For example, all Health & Welfare contributions earned in weeks ending December 30, 2023 through January 20, 2024 would be applied to the month of February. All Health & Welfare contributions earned in weeks ending January 27, 2024 through February 17, 2024 would be applied to the month of March, and so on.

2024 WEEK-ENDING DATES CALENDAR	
<p>JANUARY: 4 WEEKS December 30, January 6, 13, 20</p>	<p>JULY: 4 WEEKS June 29, July 6, 13, 20</p>
<p>FEBRUARY: 4 WEEKS January 27, February 3, 10, 17</p>	<p>AUGUST: 4 WEEKS July 27, August 3, 10, 17</p>
<p>MARCH: 5 WEEKS February 24, March 2, 9, 16, 23</p>	<p>SEPTEMBER: 5 WEEKS August 24, 31, September 7, 14, 21</p>
<p>APRIL: 4 WEEKS March 30, April 6, 13, 20</p>	<p>OCTOBER: 4 WEEKS September 28, October 5, 12, 19</p>
<p>MAY: 4 WEEKS April 27, May 4, 11, 18</p>	<p>NOVEMBER: 4 WEEKS October 26, November 2, 9, 16</p>
<p>JUNE: 5 WEEKS May 25, June 1, 8, 15, 22</p>	<p>DECEMBER: 5 WEEKS November 23, 30, December 7, 14, 21</p>

See full details at www.actonegovernment.com/federalgovernment.

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