

# **2025 UAW Trust Prescription Drug Plan**

**UAW Region 8 Retiree Conference 2025**

**Optum** Rx<sup>®</sup>

UAW RETIREE  
Medical Benefits Trust

Administered by UnitedHealthcare<sup>®</sup> Insurance Company or one of its affiliates

# Optum Rx Region 8 States



Tennessee

Kentucky

Virginia

West Virginia

North Carolina

South Carolina

Mississippi

Alabama

Georgia

Florida

District of Columbia

Maryland

Delaware

Arkansas

Texas

Louisiana

New Mexico

Oklahoma

Pennsylvania (Franklin,  
Cumberland, Adams, York)



# UAW Trust Prescription Drug Plan Medicare & Non-Medicare Members

Tier	Your costs	
	Retail (31-day supply)	Optum® Home Delivery Pharmacy (90-day supply)
1	\$0 copay	\$0 copay
2*	\$33 copay	\$33 copay
3	\$115 copay	\$115 copay

\*Annual Out of Pocket Maximum is \$1,000 for Tier 2 only



# Drug Plan Formulary

- ✓ Identifies covered medications for certain conditions and organizes them into cost shares referred to as tiers
- ✓ Let's you know if any medications require prior authorization or step therapy, which may affect how they are covered and how much they will cost
- ✓ Includes information about medications that may have quantity/supply limits or are considered a specialty medication
- ✓ To learn if your medication is covered, check your formulary online or call customer service



# Prior Authorization

- ✓ You may be required to get a prior authorization (pre-approval for benefit coverage)
- ✓ Prior authorization requests can be submitted via phone, fax or online by the member, provider or pharmacy
- ✓ Requests are reviewed and notification is sent via letter and/or fax to the provider. Members are also sent a letter of the decision
- ✓ You may be required to try a different medication first (step therapy)
- ✓ Some medications may only be covered in certain quantities or for a specified time



# Common vaccines for Medicare members:

**Check with your provider to see if these vaccines are right for you.**



## Part B

- ✓ Influenza (flu)
- ✓ Pneumococcal
- ✓ Hepatitis B for those at medium or high risk
- ✓ COVID-19



## Part D

- ✓ Shingles
- ✓ Tetanus, diphtheria, pertussis (Tdap)
- ✓ Hepatitis A
- ✓ Hepatitis B for those at low risk

**Note: Part B vaccinations can be administered in your doctor's office or pharmacy. Part D vaccinations are typically administered at a participating pharmacy and are covered under this plan.**

# Ordering maintenance medications with Optum<sup>®</sup> Home Delivery Pharmacy



- 1 Order submitted**  
After your account is set up, your Optum Home Delivery order enters the Optum pharmacy system
- 2 Pharmacist review**  
A pharmacist reviews your information for drug interactions, allergies and dosage.
- 3 Safety review**  
For your safety, another pharmacist reviews your medication for accuracy after it is dispensed.
- 4 Packaging**  
Optum Home Delivery Pharmacy seals your medication in a tamper-evident package.
- 5 Shipping**  
Optum Home Delivery Pharmacy mails your medication to you and notifies you when it has been shipped.

# Optum Home Delivery Easy Payment Plan



- Payment cost spread over three smaller monthly installments
- After first payment, the full 90-day supply is delivered
- Member notifications sent (via text, email, or phone)
- Reminder notifications prior to second and third installment payments
- Notification if payment transaction is not successful
- No service fee or interest



# Ship & Bill

Web experience

Members have an online payment feature available at the time of check out.

This allows a member to process an order now and pay for the order later.

After the order has been processed and ships, the member will receive a bill for payment.

Optum Rx

Exit

✓

✓

3

Prescriptions

Shipping

Review and pay

Review order and pay

Please review the details below to confirm their accuracy.

Shipping address

Edit address

1234 Main Street

City, ST 98765

Items		Edit prescriptions
Estimated delivery 2 items  Monday, September 23 - Wednesday, September 25		
GEMTUZUMAB OZOGAMICIN 10MCG TAB Generic for Mylotarg 90-day supply		\$15.00
PRAXADA 10MCG TAB Generic for Mylotarg 90-day supply		\$3.02
Shipping		\$0.00

Choose how to pay

☐ Pay \$18.02 in full

Your payment method will be charged when your order ships.

☐ Pay \$6.01/mo for 3 months

Your first payment will be charged when your order ships, and your next 2 payments will be charged to the same payment method 30 and 60 days later. There are no additional fees for paying in multiple installments.<sup>1</sup>

☒ Pay later

You will receive an invoice after your order ships.

Contact

Change >

Your order confirmation and updates will be sent via email.



# Ongoing Member Communication for 2025

A sample of communications members may receive:

- Prior Authorization Notification Letter
- Drug Adherence – Taking your medication as prescribed
- Drug Recall and Withdrawal Notification Mailings sent to you and your provider
- FDA-mandated Market Removal
- Drug Shortages – If your medication is out of stock through Home Delivery
- Formulary Changes/Updates
- Explanation of Benefits (EOB)



# The customer care experience

**Our dedicated  
UnitedHealthcare Customer  
Care Center Advocates  
assist with:**



**Review  
Prescription  
Drug Claims**



**Review of  
Prescription  
Drug Coverage**



**Locate a Retail  
Pharmacy**



**Look-Up  
Prescription  
Drug Cost**

## Mail Order Support

Members are transferred to Optum Home Delivery Pharmacy for support with:

- ✓ Ordering Prescriptions
- ✓ Making a payment
- ✓ Updating payment information
- ✓ Delivery Status



# Important Contacts

## **UnitedHealthcare Customer Care:**

1-855-409-0219, TTY: 711,  
8 a.m. – 8 p.m. local time, Monday – Friday

## **UnitedHealthcare Website:**

[UAWTrustPDP.com](https://UAWTrustPDP.com)

## **Retiree Healthcare Connect (RHCC):**

1-866-637-7555, TTY 711,  
Monday - Friday, 8:30 a.m. – 4:30 p.m. EST





**Thank you**



# Appendix

# Understanding Original Medicare's rules

- **You must be entitled to Medicare Part A and/or enrolled in Medicare Part B** and continue to pay your Medicare Part B premium
- **You can only be in one Medicare Advantage plan at a time.** Enrolling in another plan will automatically disenroll you from any other Medicare Advantage or prescription drug plan.
- **If you do not enroll in a Medicare Part D prescription drug plan or a Medicare Advantage plan that includes prescription drug coverage,** or you do not have other creditable prescription drug coverage, you may have to pay Medicare's Late Enrollment Penalty
- **You must inform us of any current prescription drug coverage or future enrollment** that includes prescription drug coverage
- **Medicare allows you to have different plans for medical (Medicare Advantage) and prescription drug coverage (Part D),** but they must both be group-sponsored retiree health coverage. If you are enrolled in a group Medicare Advantage plan without prescription drug coverage and need Part D coverage, you cannot enroll in an individual Part D plan. You must enroll in a group-sponsored Part D prescription drug plan.
- **When you are a member,** you are encouraged to read the plan's Evidence of Coverage (EOC), including appeals and grievance rights, which can be found at [UAWTrustPDP.com](https://www.UAWTrustPDP.com)
- **The EOC also covers** specific plan benefits, copays, exclusions, limitations and other terms
- **Please review the full text of the Statement of Understanding** in your 2025 enrollment plan guide



Benefits, features and/or devices may vary by plan/area. Limitations, exclusions and/or network restrictions may apply.

The formulary, pharmacy network, and/or provider network may change at any time. You will receive notice when necessary.

This document is available in alternative formats. If you receive full or partial subsidy for your premium from a plan sponsor (former employer, union group or trust), the amount you owe may be different than what is listed in this document. For information about the actual premium you will pay, please contact your plan sponsor's benefit administrator directly.

Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract and a Medicare-approved Part D sponsor. Enrollment in the plan depends on the plan's contract renewal with Medicare.

\*Optum Home Delivery Pharmacy and Optum Rx are affiliates of UnitedHealthcare Insurance Company. You are not required to use Optum Home Delivery Pharmacy for medications you take regularly. If you have not used Optum Home Delivery Pharmacy, you must approve the first prescription order sent directly from your doctor to the pharmacy before it can be filled. Prescriptions from the pharmacy should arrive within 5 business days after we receive the complete order. There may be other pharmacies in our network.

The company does not discriminate on the basis of race, color, national origin, sex, age, or disability in health programs and activities.

We provide free services to help you communicate with us such as letters in other languages, Braille, large print, audio, or you can ask for an interpreter. Please contact Customer Service at 1-844-808-4553, TTY: 711, 8 a.m.–8 p.m. local time, 7 days a week, for additional information

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