



LOCAL 36 BENEFIT FUNDS

2319 CHOUTEAU AVE., SUITE 300 · ST. LOUIS, MO 63103 · www.smw36benefits.org
Tel: (314) 652-8175 Toll-Free: (800) 741-9411 Fax: (314) 652-0338

January 23, 2023

Dear Member,

The Sheet Metal Workers Local 36 Welfare Fund is pleased to notify you of our new medical network. Effective March 1, 2023, the Fund will be utilizing Cigna Health as a network provider in place of Aetna/Meritain. This will be effective for all Saint Louis active members, Arkansas active members, contractor office employee members, and non-Medicare retirees.

Benefits will remain the same, as outlined in the schedule of benefits provided on the Fund Office website at www.smw36benefits.org. There are three levels of benefits as follows; The first level of benefits is provided when seeking services from a provider that participates in the Cigna Health Network (Tier One), the second when using a wrap network provider or the out of area benefit (Tier Two), and the third when using a non-network provider (Tier Three). This schedule will make it easier for you to determine your benefits at a glance.

To help prepare you for this network change, you can expect to receive a new identification card in the next few weeks. You should use the new identification card when seeking medical, mental health, vision, and prescription benefits beginning March 1, 2023. This card will replace your current Aetna/Meritain identification card. Each individual dependent will receive his or her own identification card. AmWINS RX will remain in place as the Pharmacy Benefit Manager used when obtaining prescription medication.

While changing networks is never easy, one of the reasons the Board of Trustees chose to change networks is to allow access to deeper discounts, thereby reducing your out-of-pocket expenses as well as the cost to the Fund. We expect that you will be pleased with these changes as they are beneficial to both SMW Local 36 participants and to the Fund. In the event that you have any questions or concerns, please feel free to contact the Fund Office at 314-652-8175.

Respectfully,

SMART Local 36 Welfare Fund

Frequently Asked Questions

Q. How will this change to Cigna Health impact my family?

A. For the most part, providers in the Aetna/Meritain network are also in the Cigna Health Network so there should be little disruption to your family when seeking a network provider. The Cigna Health Network provides better discounts on health care services, which will provide savings to both you and the Fund.

Q. Will my benefits change?

A. The Plan will continue to provide a 3-tiered structure of benefits. The top tier of benefits will be provided when you use a provider in the Cigna Health Network; the second tier of benefits applies if you use a provider in one of the wrap-networks utilized by the Fund, or qualify for the Out-of-Area benefit; and the third tier is the Out-of-Network benefit. You will continue to receive the best benefits by utilizing the top tier, Cigna Health Network, allowing the highest level of benefits at the best discounts. The co-pays, co-insurance, deductibles and out-of-pocket maximums have not changed. This will be outlined in more detail in the schedule of benefits. Some small changes in the benefits are detailed below.

Q. How can I locate a provider that participates in the Cigna Health Network?

A. You can visit www.cignasharedadministration.com (Find a Doctor, then click on Shared Administration OAP Provider Directory, click on Medical Plans, choose OAP) or call 1-800-768-4695 to locate a participating health care provider.

Q. When will I get new identification cards?

A. New identification cards will be mailed to you within the next few weeks. Please take some time to review the card for accuracy and contact the Fund Office if you find an error.

Q. Will I have a new identification number?

A. Yes, you will be issued a new identification number.

Q. Will the Member Assistance Program (MAP) change from PAS (Personal Assistance Services)?

A. No, you should still contact PAS when seeking services that are related to mental health or substance use disorder. The contact number for PAS is 1-800-356-0845 or you can access their website at www.paseap.com. Your continued care with a provider covered under PAS will not be disrupted. If PAS determines you need a higher level of care than what the MAP can offer, they will refer you to the Cigna Health Network.

Q. How do I know what services will require prior authorization?

A. To determine whether you are required to obtain prior authorization for a specific type of service, call the Fund Office at 314-652-8175. Your provider should also contact Cigna Health at 1-800-768-4695 to determine if a service requires prior authorization.

Q. Does a prior authorization for determination of medical necessity mean my claim will be covered by the Plan?

A. No, medical necessity determines whether the proposed medical care is appropriate for your condition without consideration if the service is a covered benefit from the Plan or if you have current active coverage through the Plan. Both you and the provider need to call the Fund Office to verify eligibility and determine whether a requested service is covered.

Example:

A requested service for a dependent child who has aged out of coverage will not be covered by the Plan, regardless of medical necessity.

Example:

The Plan only covers sleep studies provided by free-standing facilities and does not cover sleep studies provided at hospitals. A hospital may obtain a prior authorization stating the service is medically appropriate, however, the service will not be covered at the hospital.

Q. What benefits are changing?

A. The Fund currently covers sleep studies and CPAP equipment at 100% when services are provided through a special limited network and under the standard schedule of benefits for Aetna/Meritain providers. With the move to Cigna Health, sleep studies from in-network, free-standing facilities and CPAP equipment obtained from any Cigna Health Network provider will be covered at 100%. No coverage is provided for hospital-based sleep studies and related services that are obtained from non-network providers.

Q. I am currently on case management. Will my case manager change?

A. Mary Beth Cyliax is the nurse case manager at the Fund Office and will work closely with the case management team at Cigna Health to continue providing case management services to participants in the SMART Local 36 Welfare Fund.

Q. Will I still contact the Fund Office with questions about my benefits?

A. Yes, although the Fund will be utilizing the Cigna Health Network for various services provided to members and their dependents, the Fund Office will continue to administer your benefits. You are encouraged to call the Fund Office at 314-652-8175 with any questions or concerns regarding your eligibility, benefits, or claims.

Q. What if I am currently receiving services with a provider that does not participate in Cigna Health Network and will be expecting to continue those services after March 1, 2023?

A. You will have benefits with the same provider at the out-of-network level of benefits effective for those services. Transitioning to a provider that does participate in Cigna Health Network would allow you a greater benefit from your Plan. If you need assistance finding a Cigna Health Network provider, please call the Fund office at 314-652-8175 or Cigna Health at 1-800-768-4695. You can also access a provider directory www.cignasharedadministration.com (Find a Doctor, then click on Shared Administration OAP Provider Directory, click on Medical Plans, choose OAP).

Q. What if I lose my insurance card?

A. The Fund Office will assist you with ordering a new identification card. Please call 314-652-8175.