

**Questions??**

As long as you maintain eligibility as a covered Fund participant, the Fund will remain your primary carrier for the first 30 months of your Medicare enrollment (the coordination period). Medicare will pick up costs not covered by the Fund. In your thirty-first month of Medicare enrollment, Medicare will become your primary coverage and the Fund will become secondary.

As always, if you have any questions or require additional information, please call the Fund Office at (419) 666-4450.

Your cooperation is greatly appreciated.

**Toledo Electrical Welfare Fund**

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Toledo Electrical Welfare Fund

**A Guide to Accessing your Dialysis Benefit**

**2014**



# What Should I do if I need ongoing dialysis treatment?

Step 1: Select your dialysis provider. Consider the home dialysis option. Many people prefer having the access to dialysis at home as they find it more convenient and easier to stay compliant with a rigorous dialysis regimen.

Step 2: Determine if the provider is in or out-of-network. If you have elected to seek dialysis treatment at an out-of-network provider it will increase the cost of care to you and the Fund. This is your choice.

Step 3: Contact Health Care Strategies at (800) 582-1535. They will assist you in coordinating your benefits with the dialysis provider of your choice.

Step 4: Contact your Social Security Office and apply for Medicare Parts A & B. This can also be done by calling (800) 727-1213. TTY users should call (800) 235-0778. By enrolling in Medicare Parts A & B you can reduce the cost of care to yourself and the Fund.



## Being Diagnosed

No one wants to be diagnosed with chronic kidney disease or end stage renal disease (ESRD), but it's good to know the Fund has you covered



**Know what your medical insurance coverage is.**

in the event you require dialysis services or even a kidney transplant. Dialysis services are very expensive and can cost up to \$60,000 per month. Thankfully, the Fund can obtain these services at a lower cost, but to take advantage of the cost savings, the Fund needs your cooperation to ensure the best care at an affordable price.

## What is your Insurance Coverage

Once you begin a regimen of dialysis at the provider of your choice, the Fund will cover your dialysis bills after deductibles and coinsurance amounts are satisfied. If you are going to a provider within the FrontPath network, the Fund will be able to pay these bills on your behalf at a discounted rate. If you choose to go to a non-network provider, the cost of dialysis can be significantly higher to the Fund. There is a way to reduce this cost and here's where the Fund needs your cooperation. **The Fund can obtain a more favorable rate with the provider of your choice if you enroll in Medicare.**

You can get Medicare no matter how old you are if your kidneys no longer work, you need regular dialysis or have had a kidney transplant, and:

- You've worked the required amount of time under Social Security, the Railroad Retirement Board, or as a government employee.
- You're already getting or are eligible for Social Security or Railroad Retirement benefits.
- You're the spouse or dependent child of a person who meets either of the requirements listed above.

If your condition requires regular dialysis treatment, you will be eligible to participate in Medicare on the first day of the fourth month of your dialysis treatment. If you're eligible for Medicare due to your condition, you can enroll in Part A and Part B by visiting your local Social Security office or by calling Social Security at 1-800-772-1213. TTY users should call 1-800-325-0778.

Participants are strongly encouraged to purchase the optional Part B portion of Medicare to maximize their benefits.

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