Theatrical Stage Employees Health & Welfare Trust

Physical: 7525 SE 24th Street, Suite 200, Mercer Island, WA 98040 • Mailing: PO Box 34203, Seattle, WA 98124
Phone (206) 441-7574 or (800) 732-1121 • Fax (206) 505-WPAS (9727) • Website: www.IA15Trust.com

Administered by
Welfare & Pension Administration Service, Inc.

October 7, 2025

TO: All Participants Covered by Kaiser of Washington (Formerly Group Health)
Theatrical Stage Employees Health & Welfare Trust

RE: Prescription Drug Coverage and Medicare Creditable Coverage Notice
Applies to Medicare Eligible Participants

Important Notice From Theatrical Stage Employees Health & Welfare Trust About Your Prescription Drug Coverage and Medicare

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with Theatrical Stage Employees Health & Welfare Trust and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

There are two important things you need to know about your current coverage and Medicare's prescription drug coverage:

1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.

2. Theatrical Stage Employees Health & Welfare Trust has determined that the prescription drug coverage offered by Group Health is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage. Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

When Can You Join A Medicare Drug Plan?

You can join a Medicare drug plan when you first become eligible for Medicare and each year from **October 15th through December 7th.**

However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two (2) month Special Enrollment Period (SEP) to join a Medicare drug plan

What Happens To Your Current Coverage If You Decide to Join A Medicare Drug Plan?

If you decide to join a Medicare drug plan, your current Theatrical Stage Employees Health & Welfare Trust coverage through Group Health Cooperative will not be affected. If you are required to pay a premium for Trust coverage and you choose to enroll in a Medicare prescription drug plan, your premium for Trust coverage will remain the same and will not be reduced because you enroll in a Medicare prescription drug plan. In other words, as long as you have Trust coverage, if you decide to enroll in a Medicare prescription drug plan, you will be required to pay a Medicare Part D premium in addition to the premium you already pay for your medical coverage under the Trust, which already includes prescription drug coverage.

When Will You Pay A Higher Premium (Penalty) To Join A Medicare Drug Plan?

You should also know that if you drop or lose your current coverage with Theatrical Stage Employees Health & Welfare Trust and don't join a Medicare drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later.

If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up at least 1% of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go nineteen months without creditable coverage, your premium may consistently be at least 19% higher than the Medicare base beneficiary premium. You will have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

For More Information About This Notice Or Your Current Prescription Drug Coverage

For further information, contact Group Health Cooperative at 1-888-901-4636. **NOTE**: You'll get this notice each year. You will also get it before the next period you can join a Medicare drug plan, and if this coverage through Group Health Cooperative and the Theatrical Stage Employees Health & Welfare Trust changes. You also may request a copy of this notice at any time.

For More Information About Your Options Under Medicare Prescription Drug Coverage

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare drug plans.

For more information about Medicare prescription drug coverage:

- Visit www.medicare.gov
- Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the "Medicare & You" handbook for their telephone number) for personalized help,
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at www.socialsecurity.gov, or call them at 1-800-772-1213 (TTY 1-800-325-0778).

Remember: Keep this Creditable Coverage notice. If you decide to join one of the Medicare drug plans, you may be required to provide a copy of this notice when you join to show whether or not you have maintained creditable coverage and, therefore, whether or not you are required to pay a higher premium (a penalty).

Date:	October 7, 2025
Sender:	Theatrical Stage Employees Health & Welfare Trust
Contact Office:	Welfare & Pension Administration Service, Inc.
Address:	PO Box 34203, Seattle, Washington 98124
Phone Number:	(206) 441-7574 or (800) 732-1121

JG\sah opeiu#8
S:\Mailings\NOCC\2025\F05-02\F05-02 - Mailings - 2025 - NOCC.docx