

For Your Benefit

Did you receive a form for salary deduction? Please return the form if you have not done so!

If you do not return this form, your benefit coverage through the Fund will end December 31, 2014.

COMPLETE THE FORM NOW
IF YOU HAVE NOT!

Call (800) 638-2972 for details, or go to www.associated-admin.com under the FELRA tab for copies of the deduction forms.

If you already have a payroll deduction for coverage, the above may not apply to you.

Summary Annual Report in This Issue!
FELRA & UFCW Health and Welfare Fund.



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Some Vaccines and Prescriptions Covered At 100%

The following Summary of Material Modification (“SMM”) applies to participants under the FELRA & UFCW Active Health and Welfare Plan whose medical coverage is provided through the Fund, not an HMO.

Effective March 1, 2014, the Board of Trustees approved coverage of some vaccines and preventive prescriptions at 100%, at the pharmacy level. These prescriptions are covered under the preventive services provision of the Patient Protection and Affordable Care Act of 2010 (ACA).

What Is Covered At 100%?
Listed below are examples of drugs that are covered at 100% under the pharmacy benefit. For over-the-counter medications such as aspirin and smoking cessation drugs, make sure you purchase them using your **Prescription Drug card!** This is very important – if you don’t purchase them

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The purpose of this newsletter is to explain your benefits in easy, uncomplicated language. It is not as specific or detailed as the formal Plan documents. Nothing in this newsletter is intended to be specific medical, financial, tax, or personal guidance for you to follow. If for any reason, the information in this newsletter conflicts with the formal Plan documents, the formal Plan documents always govern.

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using your Rx card, you will be charged for these items:

- Aspirin (males age 45 – 79 years and females age 55 – 79 years)
- Fluoride (birth through age 5 years)
- Folic Acid (women through age 50 years)
- Iron Supplements (birth through 12 months)
- Smoking Cessation (for adults 18 years +)
- Bowel Preparation Agents (limited to age 50 – 75 years and in conjunction with a colonoscopy)
- Vaccines (flu, pneumonia, shingles, rabies)
- Vitamin D

- Female Contraceptives
- Breast Cancer Drugs (Tamoxifen, Raloxifene, Soltamox)

Complete List on Our Website

A complete list of preventive services and drugs, along with a detailed description of coverage limitations and exclusions, can be found on the Fund's website: www.associated-admin.com. Click on "Your Benefits" located at the left side of the page and select "FELRA & UFCW." You will be directed to the FELRA homepage. Click on FELRA & UFCW Health and Welfare Fund and under "Downloads," you can view the ACA Preventive Services list.



Change in Retiree Co-Payments

The following article applies to participants under the FELRA & UFCW Retiree Health and Welfare Plan.

Retiree co-payments changed on November 1, 2014. Letters were mailed notifying retirees of the new rates. See the chart below to find the category that applies to you.

FELRA & UFCW RETIREE HEALTH AND WELFARE PLAN RETIREE CO-PAY RATE CHART – EFFECTIVE NOVEMBER 1, 2014

CATEGORY	STATUS AT RETIREMENT		COVERAGE	FAMILY OR INDIVIDUAL	OUT OF AREA RATE	HMO RATE
	AGE	SERVICE				
A	At Least 60	At Least 30 Years	Regular	Family	\$202	\$88
			Regular	Individual	\$119	\$36
			Mixed	Family	\$204	\$59
			Medicare	Individual	\$64	\$22
			Medicare	Family	\$96	\$45
B	Less Than 60	At Least 30 Years	Regular	Family	\$401	\$242
			Regular	Individual	\$245	\$105
			Mixed	Family	\$406	\$179
			Medicare	Individual	\$123	\$73
			Medicare	Family	\$194	\$120
C	At Least 60	At Least 25 Years	Regular	Family	\$401	\$242
			Regular	Individual	\$245	\$105
			Mixed	Family	\$406	\$179
			Medicare	Individual	\$123	\$73
			Medicare	Family	\$194	\$120
D	At Least 55	At Least 20 Years	Regular	Family	\$803	\$572
			Regular	Individual	\$488	\$408
			Mixed	Family	\$815	\$479
			Medicare	Individual	\$252	\$94
			Medicare	Family	\$388	\$134
E	Retired at 9/1/92	Less Than 20 Years	Regular	Family	N/A	N/A
			Regular	Individual	N/A	\$562
			Mixed	Family	\$1,018	\$594
			Medicare	Individual	\$311	\$110
			Medicare	Family	\$484	\$154
F	Disability Retiree	At Least 10 Years	Regular	Family	\$401	\$242
			Regular	Individual	\$245	\$105
			Mixed	Family	\$406	\$179
			Medicare	Individual	\$123	\$73
			Medicare	Family	\$194	\$120

Retirees: Know How Your Mental Health/ Substance Abuse Benefits Are Provided



If your benefits are provided through CIGNA, you should use ValueOptions for your mental health and substance abuse benefits. Those benefits are not provided through CIGNA. Call ValueOptions at (800) 35-FELRA or (800) 353-3572 to make an appointment.

Retirees whose medical benefits are provided through the Fund under the Medicare Supplemental benefit should also use ValueOptions.

Retirees whose benefits are provided through Kaiser Permanente Medicare Plus should use Kaiser for their mental health/substance abuse benefits.

Be Sure You Understand A Workers' Compensation Settlement Before Accepting One

If you have Accident and Sickness benefits through the Fund and you sustain a work-related illness or injury, you must file a claim with your employer's Workers' Compensation ("WC") carrier. You should also submit your claim to the Fund Office **at the same time, along with a note that you have filed for workers' compensation.** That way, you will have filed your claim within the Fund's time limits (90 days for Accident & Sickness/180 days for Medical claims) if the claim is eventually determined to be **not work-related.** The Fund initially will deny your claim as being work-related until a final decision is made by the WC carrier.

If the WC carrier denies your claim as being **not** work-related, send a copy of the denial to the Fund Office. The Fund will send you an agreement called a "Promise to Appeal." It states that you agree to appeal the WC carrier denial to the WC Commission (or its equivalent in your state).

The agreement also lists the steps you must follow in order to have the Fund pay your claim (for medical or accident and sickness claims) **before** your case is decided by the WC Commission (which can take a long time). Because we don't want you to have to wait that long to be paid, the Fund will process your claims as soon as you sign and return the agreement – **before** the final decision has been made by the Commission.

However, Fund rules state that you must repay the Fund in full for any monies it has paid if you ultimately receive an award from a WC carrier.

Although this seems clear enough, it can become a little confusing when a settlement is involved. If your attorney advises you (or if you decide on your own) to accept a settlement of your WC claim, you must notify the Fund Office and obtain the Fund's approval **prior** to accepting the settlement. If you don't obtain approval before accepting a settlement, you will be required to repay the Fund the entire amount it has paid in benefits, even if that amount is more than the settlement amount you received.

For example, if the Fund paid \$4,000 in Accident and Sickness and/or Medical claims, and you accepted a settlement for \$3,000 without the Fund's approval, *you would be required to repay the Fund the full \$4,000, even though your settlement was for \$3,000!*

Be careful! Once you accept a WC settlement, **WC will close your case – for current claims and for any future claims relating to that illness or injury.** For example, if your work-related shoulder injury flares up a year from now (and you have accepted a settlement), you will not receive benefits from the WC carrier **or** the Fund relating to that injury. Since benefits were paid by the WC carrier, the Fund will deny the claim as being work-related.

Accepting a settlement is your choice. In some cases, it may be the best solution for you, but make sure you understand what it means and what your responsibilities are **before** you agree to accept one.

IMPORTANT: Notify The Fund Office If Receiving Workers' Compensation

If you are receiving WC, it is important that you notify the Eligibility Department of the Fund Office at (301) 459-3020 or (800) 638-2972. Your health and welfare benefits are maintained by the Fund while you are collecting WC (as long as it does not exceed your Accident and Sickness benefit entitlement). Notifying the Fund Office of WC helps ensure you do not lose eligibility for benefits.

When Health Care Is Needed, You Must Use A CareFirst In-Network Provider

The following article applies to participants of FELRA & UFCW Active Health and Welfare Plans X, XX and XXX who have Fund coverage not HMO coverage.

Medical benefits will be covered for active participants in Plan X, Plan XX and Plan XXX **only if services are performed by an in-network provider**, with the exception of services provided by pathologists, anesthesiologists, radiologists, and emergency room treatment at in-network facilities. When you need to use a provider (whether a hospital, physician, or other health care provider), be sure they are in the CareFirst network. Otherwise, your claim will be denied.

To Locate A CareFirst Provider

Go online to the CareFirst website, www.carefirst.com. Click on "Members and Visitors," then click on "Find a Doctor." Under "Search the Provider Type," click on either medical or facilities, depending upon your needs. If you are looking for a medical plan, and your Plan ID

card is white, you should search under the heading at the bottom of the page which says, "Other Networks," then choose the "PPO-National/International Blue Cross Blue Shield Directory" link. If your ID card is green, you should look under the header "Select Your Medical Plan" and choose "BluePreferred (PPO)."

To Locate A Provider By Telephone

Call (800) 235-5160 if you have a green ID card, or (800) 810-2583 (which is 800-810-BLUE) if you have a white ID card. These numbers are also on your ID card.

Note that these numbers are **ONLY** for finding a participating CareFirst provider. No other questions (claims, eligibility, etc.) will be answered on these lines.

Use Online Banking To Make Your Monthly Co-Payment

Did you know you have the convenience of making your monthly co-payment by logging onto your bank's website and making an on-line payment from your checking or savings account directly to the Fund Office? Online bill pay can help you manage your bills without having to worry about paper bills and checks.

Use Online Banking for These Payments:

- Retiree co-payments
- Kaiser Permanente co-payments
- COBRA self-payments
- Reimbursements for medical claims

Check with your bank to find out if your bank offers Online Bill Pay. This service will send money out of your bank account directly to the Fund Office. In some

cases these online bill services will actually print a check and mail it to the Fund Office. Checks should be made payable to FELRA & UFCW Health and Welfare Fund, and should be mailed to:

Fund Office
FELRA & UFCW Health and Welfare Fund
911 Ridgebrook Road
Sparks, MD 21152-9451

Online Banking Offers:

- Peace of mind knowing that your payment is made on time,
- Convenience of not having the hassle of locating stamps or envelopes, and
- A way to help the environment. You'll save trees and reduce waste by using less paper.

You Must Use Quest Or LabCorp When Lab Work Is Needed

The following applies to all participants in the FELRA & UFCW Active Health and Welfare Plan who have Fund medical coverage, not an HMO.

You must use either Quest Diagnostic Patient Service Centers (“Quest”) or Lab Corporation (“LabCorp”) for all laboratory services in order for such services to be covered by the Plan

Tell Your Doctor Up Front

Be sure your doctor knows before the lab work is performed that you will receive coverage for lab work

only if the bill comes to the Fund directly from either a LabCorp or Quest facility. Even if your doctor has a contract with LabCorp to perform lab work in his/her office, tell him/her that only lab work performed at a Quest or LabCorp facility will be covered. Your Plan will not pay for lab work performed and billed from your doctor’s office.

Locating Labs

To find the most current list of Quest or LabCorp facilities, log onto their websites or call them:

- www.questdiagnostics.com or by telephone at (800) 377-8448, or
- www.labcorp.com or (800) 845-6167 – patient customer service.

Notify The Fund Office If You Get Divorced, Become Legally Separated Or No Longer Live Together

You should notify the Fund Office if you and your spouse no longer live together, are legally separated, or become divorced. If you don’t, you may have to repay the Fund for claims paid for services provided to your spouse after that date.

Since the State of Maryland does not recognize legal separation, if you live in Maryland you are considered

married until you are divorced, with no “in-between.” Legal separation is still valid in some other states.

If you and your spouse are physically separated, he/she may remain as a dependent under your Fund coverage until the earliest of: (1) three years after you physically separated; (2) the date you become legally separated; or (3) the date you become divorced.

Reconstructive Surgery Following Mastectomy

The following article applies to you if your medical benefits are provided through the Fund, not an HMO. If you have coverage through an HMO, you should receive a similar notice directly from the HMO.

The Women’s Health and Cancer Rights Act (“WHCRA”) provides protections for individuals who elect breast reconstruction after a mastectomy. Under federal law related to mastectomy benefits, the Plan is required to provide coverage for the following:

- All stages of reconstruction of the breast on which a mastectomy is performed;
- surgery and reconstruction of the other breast to produce a symmetrical appearance;
- prostheses; and
- treatment of physical complications of all stages of mastectomy, including lymphedema.

Such benefits are subject to the Plan’s annual deductibles and co-insurance provisions. Federal law requires that all participants be notified of this coverage annually.



Food Employers Labor Relations Association and United Food and Commercial Workers Health and Welfare Fund

911 Ridgebrook Road
Sparks, Maryland 21152-9451
Telephone: (410) 683-6500
(800) 638-2972
www.associated-admin.com

4301 Garden City Drive, Suite 201
Landover, Maryland 20785-6102
Telephone: (301) 459-3020
(800) 638-2972
www.associated-admin.com

Summary Annual Report For FELRA and UFCW Health and Welfare Fund

This is a summary of the annual report for the FELRA and UFCW Health and Welfare Fund, (Employer Identification No. 52-1036978, Plan No. 501) for the period January 1, 2013 to December 31, 2013. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

BASIC FINANCIAL STATEMENT

The value of plan assets, after subtracting liabilities of the Plan, was \$60,663,029 as of December 31, 2013 compared to \$52,900,964 as of January 1, 2013. During the plan year the Plan experienced an increase in its net assets of \$7,762,065. This increase includes unrealized appreciation or depreciation in the value of plan assets; that is, the difference between the value of the plan's assets at the end of the year and the value of the assets at the beginning of the year, or the cost of assets acquired during the year. During the plan year, the Plan had total income of \$164,769,888. This income included employer contributions of \$153,330,263, employee contributions of \$7,775,165, realized losses of \$24,610 from the sale of assets, earnings from investments of \$3,682,754 and other income of \$6,316. Plan expenses were \$157,007,823. These expenses included \$10,562,430 in administrative expenses and \$146,445,393 in benefits paid to participants and beneficiaries.

YOUR RIGHTS TO ADDITIONAL INFORMATION

You have the right to receive a copy of the full annual report, or any part thereof, on request. The items listed below are included in that report:

1. An accountant's report;
2. Financial information and information on payments to service providers;
3. Assets held for investment;
4. Transactions in excess of 5 percent of the plan assets; and
5. Insurance information including sales commissions paid by insurance carriers.
6. Information regarding any common or collective trust, pooled separate accounts, master trusts or 103-12 investment entities in which the plan participates.

To obtain a copy of the full annual report, or any part thereof, write or call the office of:

Board of Trustees of the FELRA & UFCW Health & Welfare Fund
Associated Administrators, LLC
911 Ridgebrook Road
Sparks, Md 21152-9451
52-1036978 (Employer Identification Number)
410-683-6500

The charge to cover copying costs will be \$0.25 per page.

You also have the right to receive from the plan administrator, on request and at no charge, a statement of the assets and liabilities of the plan and accompanying notes, or a statement of income and expenses of the plan and accompanying notes, or both. If you request a copy of the full annual report from the plan administrator, these two statements and accompanying notes will be included as part of that report. The charge to cover copying costs given above does not include a charge for the copying of these portions of the report because these portions are furnished without charge.

You also have the legally protected right to examine the annual report at the main office of the plan:

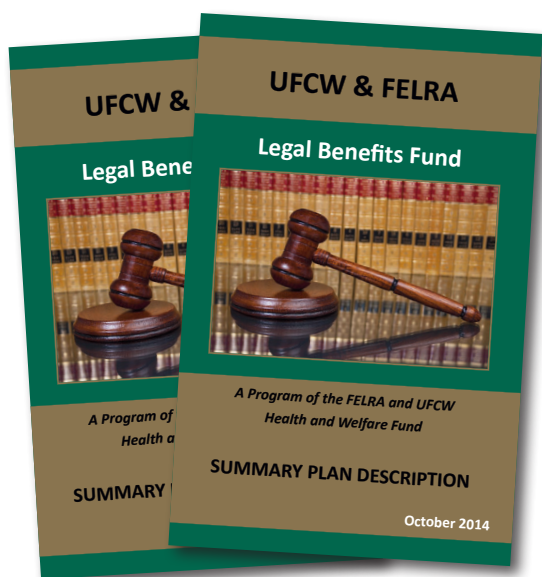
Board of Trustees of the FELRA and UFCW Health & Welfare Fund
911 Ridgebrook Road
Sparks, MD 21152-9451

and at the U.S. Department of Labor in Washington, D.C., or to obtain a copy from the U.S. Department of Labor upon payment of copying costs. Requests to the department should be addressed to: U.S. Department of Labor, Employee Benefits Security Administration, Public Disclosure Room, 200 Constitution Avenue, NW, Suite N-1513, Washington, D.C. 20210.

ADDITIONAL EXPLANATION

Dental claims- Group Dental Services, Inc. – premiums paid \$8,321,934.
Medical claims - Kaiser Foundation Health Plan - premiums paid \$4,739,444.
Life insurance claims – Voya Financial (Reliastar/ING) premiums paid \$204,885
Vision claims - Advantica Eyecare - premiums paid \$1,138,623
Accidental death & dismemberment – Voya Financial (Reliastar/ING) - premiums paid - \$10,778

New SPD For FELRA Legal Benefits Fund



The new UFCW & FELRA Legal Benefits Fund (a program of the FELRA & UFCW Health and Welfare Fund) Summary Plan Description (“SPD”) has been mailed to eligible participants. The booklet replaces the September 2006 SPD and describes your legal benefits, where to call when you need legal help, eligibility rules, and more.

A copy of this SPD can be found on the Fund Office website at www.associated-admin.com. Click on “Your Benefits,” located at the left of the screen and select FELRA and UFCW. From the FELRA home page, choose UFCW & FELRA Legal Benefits Fund. From there, you will be able to click on the link to the SPD.



HEALTH CORNER

Lowering Your Risk Of Osteoporosis

More than half of Americans age 50 and older will have weak bones by 2020, according to the Surgeon General. Osteoporosis is when bones lose minerals, are fragile, and break more easily than they used to. Are brittle bones a normal part of getting older? Not necessarily. You can reduce your chances of osteoporosis by eating well and exercising. There are also treatments your doctor can prescribe that lower the risk of fracture.

The following steps can help to reduce your chance of bone fractures.

- 1. Eat nutritious foods.** Most people don't get enough calcium, which builds bones. Good sources of calcium include milk, leafy green vegetables, yogurt, canned fish with bones, and food fortified with calcium. For bones to be strong, your body also needs vitamin D. You need more calcium and vitamin D as you age. Your doctor may also suggest supplements if your diet doesn't provide enough calcium.
- 2. Exercise.** Bone-building exercises prompt your body to strengthen your bones. These weight-bearing exercises include walking and lifting weights. Experts recommend exercising for at least 30 minutes on most days of the week. Start at a comfortable pace and work up. Talk to your healthcare provider about what kind of exercise will work for you.

- 3. Make your home safer to prevent falls.**

Simple changes in your home can really help to prevent falls that can cause fractures. For example, remove or secure any loose rugs and fix poor lighting. Consider having your vision checked. Find out whether any medications you take cause dizziness or drowsiness.

- 4. Consider medications.** Osteoporosis can't always be prevented with things a person can do on their own. Your doctor may suggest tests for bone density. If these tests show that you already have osteoporosis, your doctor may recommend medications to reduce your chances of fractures.

A Health Coach can help by answering your questions and supporting you in communicating with your doctor. Health Coaches are specially trained healthcare professionals, such as a nurses, respiratory therapists, or dietitians. They are available, 24 hours a day, 7 days a week, at no charge to you. Call 1-866-469-6331 and talk to a Health Coach. They are available to actively working participants who are not in an HMO and to retirees who are **neither** Medicare eligible nor in an HMO (whether CIGNA or Kaiser).

This information is general and not intended to replace the advice of your doctor. Consult your personal physician about your own medical condition. The above article was obtained with permission from Health Dialog.

FINAL NOTICE

If you received a form for salary deduction and did not return it, your benefit coverage will end December 31, 2014.

Return the form now to continue coverage.

Call (800) 638-2972 for details, or go to www.associated-admin.com under the FELRA tab for copies of the deduction forms.

If you already have a payroll deduction for coverage, the above may not apply to you. Contact the Fund Office for more information.

