

For Your Benefit



Salary Deduction Form And Letter Sent. Please Read Mail And Respond.

Notice of Creditable Coverage
Cut and Keep. See page 3.

Notice of Availability of Pension Statement
See page 7.

Effective January 1, 2015 all Giant and Safeway employees must pay a weekly co-premium for coverage, including a spousal surcharge if applicable, to be paid in the form of salary deductions. A letter and form(s) were sent to participants who (1) are not currently enrolled in Fund coverage, or (2) previously have not had a salary deduction from their paycheck for coverage. If you received this mailing from the Fund office, it is **very important that you complete and sign the form(s) and return them to the Fund Office.**

The co-payments shown in the letter were determined in collective bargaining for Giant and Safeway employees and will be deducted from your pay check by your employer starting January 1, 2015. Once we receive your form, the Fund Office will contact your employer to initiate payroll deductions for health and welfare benefits.

If you do not return the salary deduction form, and you don't already have a weekly deduction for health benefit coverage, your coverage under the Fund will cease as of December 31, 2014.

Simple Ways To Return The Forms

- Via Email**
 We have set up an email option for your convenience. Complete the form(s), scan them, and email to: enroll@associated-admin.com. On the payroll deduction form, only note the last four digits of your Social Security Number to protect your privacy.
- Via Fax**
 You can also fax the completed form(s) to 1-(800) 418-1545.
- Via Mail**
 If you choose to mail the form(s), send to:
 Fund Office
 4301 Garden City Drive, Ste. 201
 Landover, MD 20785-6102
 Attn: FELRA Open Enrollment

If possible, please email or fax the form(s) to us for quicker processing.



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Giant or Safeway Pharmacies Offer Free Flu Shot With Express Scripts Rx Card

With flu season just around the corner, it may be a good time to get your flu shot. All active participants and retirees with Fund coverage can receive a flu shot at any Giant or Safeway pharmacy at no cost, using your Express Scripts Prescription Drug ID card.

Flu Shot at Doctor's Office

If you prefer to get your flu shot from your doctor or don't live near a Giant or Safeway pharmacy, the flu shot will be covered under your medical benefits. For participants and dependents with Fund coverage, the injection itself is covered at 100% up to the UCR fee, and the office visit charge (if there is one) is covered under your Major Medical/Comprehensive benefit (80% for

Plans I and X, 75% for Plan XX and 70% for Plan XXX). Participants in Plans X and XX **must** use a participating CareFirst provider in order to be covered.

For participants in the Kaiser Permanente HMO (actives and retirees) who prefer to get a flu shot from their doctor, the flu shot is covered in full, with no co-pay if you use a Kaiser physician. Further, actively working participants in Kaiser who use Express Scripts for their prescription benefit may have their flu shots administered at a Giant or Safeway pharmacy using the Express Scripts ID card, at no cost.

**Material
Modification**

Express Scripts Has A New Compound Management Program

Effective September 15, 2014, the Plan will not cover compounded medication products that have little or no proven clinical value and have not been evaluated or verified for safety or efficacy by the FDA.

Compound medicines are custom prescriptions mixed by pharmacists based on the prescribing instructions provided

by a doctor. In many cases, there are over-the-counter drugs or conventional prescription drugs that serve the same medical purpose as a compound drug. If you are prescribed a compound drug that is not covered under the Plan, ask your doctor if an FDA-approved drug is available and appropriate for your treatment.



Dental Coverage When Using A Non-Participating GDS Provider

Your plan of benefits provides coverage for dental benefits including exams, x-rays, cleanings, amalgam fillings, and simple extractions, when the service is provided through Group Dental Service of Maryland, Inc. ("GDS"). Except as provided below, **any service you receive from a dentist who does not participate with GDS will not be covered under the Fund.**

You may use a non-participating GDS dentist and receive coverage only:

- When referred by a participating dentist to a non-participating specialist;
- When authorized in advance by GDS;

- In the case of a dental emergency which occurs more than 50 miles from your primary dentist if you are temporarily away from home and outside the GDS service area, GDS will reimburse you for dental expenses relating to minor procedures for the palliative relief of pain up to a limit of fifty dollars per occurrence; or
- When the participant does not live or work within 20 miles or 30 minutes of a participating dentist. Before using a non-participating dentist under this geographical exception, you should verify with GDS that it has no facilities within 20 miles or 30 minutes of your home or work, before your appointment.



Notice of Creditable Coverage Regarding Your Prescription Drug Benefit

The following Notice of Creditable Coverage applies to all Medicare-eligible participants, retirees, and/or dependent spouses.



Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with the FELRA and UFCW Health and Welfare Fund (Active and Retiree Plans) 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. The FELRA and UFCW Health and Welfare Fund (Active and Retiree Plans) has determined that the prescription drug coverage offered by the Fund 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 thereafter from October 15th to 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 FELRA and UFCW Health and Welfare Fund (Active and Retiree Plans) coverage will be affected. See below for more information about what happens to your current coverage if you join a Medicare drug plan.

You cannot have both Medicare prescription drug coverage and prescription drug coverage through the Fund at the same time. If you do decide to join a Medicare drug plan and drop your FELRA and UFCW Health and Welfare Fund (Active and Retiree Plans) prescription drug coverage, be aware that you and your dependents may not be able to get the same coverage back.

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 the FELRA and UFCW Health and Welfare Fund (Active and Retiree Plans) 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 by 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 may 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.

Note to Kaiser Medicare HMO Enrollees

You will get a notice from Kaiser Permanente that you are enrolled in Medicare Part D. Your coverage for medical and/or prescription drug benefits through Kaiser will remain the same.

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

Contact the Fund office for further information at (800) 638-2972 or (410) 683-6500. **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 the FELRA and UFCW Health and Welfare Fund (Active and Retiree Plans) 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: September 1, 2014

Name of Entity/Sender: Fund Office
FELRA and UFCW
Health and Welfare Fund
911 Ridgebrook Road
Sparks, Maryland 21152-9451

Phone Number: (800) 638-2972 or (410) 683-6500

Apply Now for FELRA & UFCW’s 2015 Annual Scholarship Awards

This article applies to participants of the FELRA & UFCW Health & Welfare Fund employed by Giant or Safeway, and their dependents.

The FELRA & UFCW Health and Welfare Fund will once again be awarding scholarships to a select number of participants and dependents. Please complete the preliminary application below and mail it to the Fund office postmarked by **December 31, 2014**. You may also print the form by logging onto www.associated-admin.com. Click on “Your Benefits” located at the left side of the screen and select “FELRA & UFCW Health and Welfare Fund.” From there you can print the “Preliminary Scholarship Application” form under the word “Downloads.” Late applications will not be accepted.



Key points to remember:

- **Only those currently employed by Giant or Safeway, and their dependents, are eligible. The participant must be employed by Giant or Safeway at the time the scholarship is awarded.**
- The participant must have at least one uninterrupted Year of Service as of December 31, 2014 and be actively employed.
- On December 31, 2014, dependent child applicants must be under the age of 24, unmarried and a dependent of the participant for federal income tax purposes.
- If your dependent does not have medical coverage through the Fund, please include a copy of a marriage certificate (if spouse), or birth certificate or custody order (if child) with the preliminary application.
- If the above requirements are met and eligibility is verified, a formal application will be mailed to the applicant in January 2015.

**United Food and Commercial Workers
and Food Employers Labor Relations Association
Scholarship Fund**

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

*A Program of the
FELRA and UFCW
Health & Welfare Fund*

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

2015 Annual Scholarship Awards
Attention: Employees of Giant and Safeway

If you work for a company listed above, under the provisions of your employer's collective bargaining agreement, you and your dependents may be eligible to apply for a scholarship from the UFCW and FELRA Scholarship Fund.

The Scholarship Fund expects to award scholarships to a select number of eligible participants and their dependents who will be enrolled in an accredited college, university, community college, vocational school, or trade or technical school as a full-time student in the fall of 2015. Participants and their dependents are eligible to apply for a scholarship award if, as of December 31, 2014, the participant has completed at **least one uninterrupted year of service and is actively employed by Giant or Safeway**. In addition, on December 31, 2014, dependent child applicants must be **under the age of 24, unmarried and a dependent of the participant for federal income tax purposes**.

Applicants who submit preliminary applications and meet the initial scholarship award requirements will be **mailed a full application in early January 2015**.

IMPORTANT: If your dependent does not have medical coverage through the Fund Office, please include a copy of a marriage certificate (if spouse), or birth certificate or custody order (if child) with the preliminary application.

PRELIMINARY APPLICATION MUST BE POSTMARKED BY DECEMBER 31, 2014.

Cut, complete and mail to: UFCW & FELRA Scholarship Fund, 911 Ridgebrook Road, Sparks, MD 21152-9451.

Employee's Information:

Name (Please Print) _____ Social Security Number _____

Employer _____ Employee's Email Address _____

Employee's Home Address _____
Street Number City State Zip Code

Applicant's Information:

Name (Please Print) _____ Social Security Number _____

Applicant's Home Address _____
(If different from Employee's address) Street Number City State Zip Code

Date of Birth (If Dependent of Employee) _____ Email Address _____

Remember: Entry Deadline Is December 31, 2014.

FW 2014 Annual Scholarship Applic. CS/bns 7.2014

You Can Check Your Benefits 24/7 By Logging On To NETime Benefit System

NETime (pronounced Anytime) is an online access service that provides personal benefit information to you and your dependents via the Internet, 24 hours a day, 7 days a week. NETime Benefits provides real time access to benefits data in a safe, secure and HIPAA compliant environment.

NETime can show you:

- The date and amount of contributions your employer paid on your behalf;
- The person(s) named as your beneficiary under the Pension Fund and Health and Welfare Fund;
- Medical claims paid on your behalf for the past three years;
- Your eligibility;
- The date and amount of your pension payments, along with the amount withheld for taxes;
- Your most current Severance balance (if you are eligible for the Severance benefit); and
- The dates of, and payments made to you for, Accident & Sickness ("Disability").

How does it work?

- Log onto www.associated-admin.com, click on "Your Benefits" located at the left side of screen, and select "FELRA & UFCW Health and Welfare Fund." On the FELRA homepage, click on "NETime Benefit System."
- When you first access this site, you will be directed to the page where you are asked to create a user name and password. You and your dependent(s) (if over age 18) can each create your own user name and password.
- Once you have successfully logged in, you will be taken to the "Demographic" page, which displays your address, phone number, and dependent information.
- The menu selection screen appears in the left column of your screen. Here you can click on the category you wish to view (medical claims paid, Accident & Sickness benefits received, etc.).

Note: The information provided on the NETime Benefit System website is not a guarantee of coverage. It is possible that the information shown is inaccurate or is not fully up to date. If you have changes to the demographic information, please submit them in writing to the Fund Office. Be sure to include your name and the last 4 digits of your Social Security number in your letter. Call the Fund Office if you have any questions at (800) 638-2972.

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FELRA

Food Employers Labor Relations Association (FELRA & UFCW)

NETime Benefit System

Summary Plan Description Booklets

- [Plan XX Health & Welfare SPD](#)
SMMs (Benefit Changes) to FELRA Plan XX SPD
- [Plan X Health & Welfare SPD](#)
SMMs (Benefit Changes) to FELRA Plan X SPD
- [Plan I SPD](#)
SMMs (Benefit Changes) to FELRA Plan I SPD
- [Plan I Retiree SPD](#)
SMMs (Benefit Changes) to FELRA Plan I Retiree SPD

Availability of Pension Statement

The following article applies to Active participants in the FELRA & UFCW Pension Fund and the Mid-Atlantic UFCW and Participating Employers Pension Fund only. It does not apply to Retirees.

Under the Employee Retirement Income Security Act of 1974, as amended (“ERISA”), you have the right to request a pension benefit statement annually. You are entitled to one (1) benefit statement per year.

To receive your statement, you must complete a Benefit Service Request form. To get this form, you can:

- Log on to www.associated-admin.com. Click on “Your Benefits” located at the left of the screen. Select “FELRA & UFCW Pension Fund” or “Mid-Atlantic Pension Fund (MAP),” depending upon the Fund you participate in, and print the “Benefit Service Request” form, or
- Call the Fund Office at (410) 683-6500 or toll-free (800) 638-2972.

Complete **all** the information on the form and return it to the Fund Office. It will take approximately 4 - 6 weeks for us to prepare your statement. There is no charge for a Benefit Statement.



Pensioners: Make Sure Your Beneficiary Designation Is Current



Under the FELRA and UFCW Pension Fund and the Mid-Atlantic UFCW & Participating Employers Pension Fund, upon the death of any pensioner (except a pensioner receiving a deferred vested pension), the pensioner's beneficiary will receive a death benefit. To be sure that this benefit is paid to the person you select, please make sure that your beneficiary designation form is up to date.

You can print this form from your computer by logging onto our website (see instructions above) and printing the “Change in Beneficiary” form. You can also call the Fund Office at (410) 683-6500 or toll-free (800) 638-2972.



5 Tips for Conquering Your Diabetes

Diabetes is a chronic and serious condition that affects 25.8 million Americans. If trends continue, more than one third of the country will have the disease by 2050. While it needs monitoring, it doesn't have to take over your life. Below are five strategies for managing diabetes to ensure you keep living every day to the fullest:

- 1. Simplify monitoring.** Glucose monitoring can be time consuming and the data can be inconvenient to record, but using a remote mobile monitoring tool can give patients instant access to data, personalized feedback and coaching. Caregivers and providers can also see the results online, making it easy to keep a precise, ongoing log of glucose levels.
- 2. Steer your own health.** Health Coaches can help you create personal goals to change your behavior so that your diet, glucose levels and exercise routine improve in a way that is right for you.

- 3. Shape up.** Physical activity is key to keeping diabetes at bay, and has the added benefit of lowering risks of other conditions such as heart disease. You don't have to run a marathon to get fit – simple short walks or yoga classes will do the trick.
- 4. Eat well.** Eating a balanced diet can help ensure your sugar levels and weight are in check. Always opt for whole grains, fresh vegetables and fruits, grilled and baked meats, and low-fat dairy products. Be sure to stay away from super sweet drinks like soda and juices, which are loaded with carbs and sugars.
- 5. Clock in the Z's.** Keeping a regular sleep schedule will not only help you feel well-rested and alert, but will also help to keep your glucose levels under control.

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.

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Sparks, MD 21152-9451