

UFCW Unions & Participating Employers Health and Welfare Fund

Plan Y30

Summary of Material Modifications

March 2019

This insert is a Summary of Material Modifications (changes) to your Summary Plan Description (SPD) booklet dated October 2017. If there is any discrepancy between the information printed on this insert and the Plan, the Plan will govern. Please keep this insert with your booklet so you will have it when you need to refer to it.

- **Effective March 1, 2019 – Cost to Add Dependent Children for Plans Y20 and Y30 Part Time Participants**
The cost for dependent coverage for children of part time participants in Plans Y20 and Y30 has changed.

Plan	Per Child Rate	3 or More Children Rate
Plan Y20 Part Time	\$147.85 per month	\$443.55 per month
Plan Y30 Part Time	\$145.21 per month	\$435.63 per month

The 2019 amount will automatically be deducted from your paycheck beginning in March **unless you contact the Fund Office** within 30 days of the date you first receive notice of the new rates to advise that you want to drop the coverage. If you don't contact the Fund Office, you will remain enrolled for Dependent Child coverage at the same level you have currently, and the new rate will apply to you starting in March.

- **Effective April 1, 2018 – Disability Benefit Claims and Appeals**
The Board of Trustees of the UFCW Unions and Participating Employers Health & Welfare Fund ("Fund") has adopted the following changes to the UFCW Unions and Participating Employers Active Health and Welfare Plan ("Active Plan") and UFCW Unions and Participating Employers Retiree Health and Welfare Plan ("Retiree Plan") effective April 1, 2018. These changes provide you with more information on how the Fund reviews certain disability benefit claims and appeals.
 1. **Effective for claims for disability benefits filed on or after April 1, 2018, the following language is added after the "If Your Weekly Disability Claim is Denied" Subsection of the Section entitled "Claims Filing and Review Procedure" in your SPD:**

Initial Disability Claim Denial Involving Discretionary Determination of Disability by the Fund

In the case of a denial of your claim for disability benefits that is based on a determination by the *Fund* (and not by a third party acting independent of the *Fund* such as the Social Security Administration ("SSA")) that you are not disabled under the Plan rules, the written notice of the denial also will include the following:

1. A discussion of the decision, including, if applicable, an explanation of the *Fund's* basis for disagreeing with or not following:
 - (a) The views you presented to the *Fund* of health care professionals treating you and vocational professionals who evaluated you (if any);
 - (b) The views of any medical or vocational experts whose advice was obtained on behalf of the *Fund* in connection with the denial of your claim, even if the advice was not relied upon in making the determination; and

(c) A disability determination made by the SSA, if you provided it to the *Fund*.

2. A copy of the specific internal rules, guidelines, protocols, standards, or other similar criteria of the Plan relied upon in making the adverse benefit determination or, alternatively, a statement that such rules, guidelines, protocols, standards, or other similar criteria of the Plan do not exist; and
3. A statement that you are entitled to receive, upon request, and free of charge, reasonable access to, and copies of, all documents, records, and other information relevant to your claim for benefits.

2. Effective for claims for disability benefits filed on or after April 1, 2018, the following language is added after the “Appeals Procedures – Weekly Disability Claims” Subsection of the Section entitled “Claims Filing and Review Procedure” in the SPD:

Disability Decision on Appeal Involving Discretionary Determination of Disability by the Fund

In the case of a denial of your appeal involving a claim for a disability benefit that is based on a determination by the *Fund* (and not by a third party acting independent of the *Fund* such as the SSA) that you are not disabled under the Plan rules, the written notice of denial also will include all of the information in the “Initial Disability Claim Denial Involving Discretionary Determination of Disability by the *Fund*” section above, as well as the calendar date on which the contractual limitations period expires for the claim.

3. Effective April 1, 2018, the following is added at the end of: (a) the first paragraph of the “Denial of a Claim” Subsection of the Section entitled “Claims Filing and Review Procedure;” and (b) the second paragraph of the “If Your Weekly Disability Claim is Denied” Subsection of the Section entitled “Claims Filing and Review Procedure”:

The written notice of denial also will include a description of any contractual limitations period that applies to your right to bring an action under ERISA if your appeal is denied.

▪ **Effective March 1, 2018 – Cost to Add Dependent Children for Part Time Participants in Plans Y20 and Y30**

The cost for dependent coverage for children of Part Time participants in Shoppers Plan Y20 and Plan Y30 will change.

The chart below shows the cost for the coverage will be effective March 1, 2018.

Plan	2018 Rates Per Child	2018 Rates for Three or More Children
Plan Y20 Part Time	\$137.57 per month	\$412.71 per month
Plan Y30 Part Time	\$135.12 per month	\$405.36 per month

The 2018 amount will automatically be deducted from your paycheck beginning in March ***unless you contact the Fund Office*** to advise that you want to drop the coverage. If you don’t contact the Fund Office, you will remain enrolled for Dependent Child coverage at the same level you have currently, and the new rate will apply to you starting in March.

- **Effective January 1, 2018 – Revised ACA Preventive Services.** The Patient Protection and Affordable Care Act of 2010 (“ACA”) requires 100% coverage for certain medical services **as long as the patient is seen by an in-network provider.** This means you will have no deductible, co-payment or co-insurance for preventive services as long as you see a participating provider.

Complete List on the Fund’s Website

A complete list of the 2018 ACA Preventive Services can be found on the Fund’s website at www.associated-admin.com.