



Dependent Eligibility Verification: Do your part!

The Trust Fund Office (TFO) is conducting an ongoing Dependent Eligibility Verification this year.

The TFO is doing this verification for two reasons: (1) to ensure all Dependents who are receiving benefits are verified and the appropriate supporting documentation (e.g. birth certificates, marriage certificates) for these Dependents is on file with the TFO, and (2) to confirm that Spouses and Domestic Partners who are enrolled in the UEBT Plan have taken any other health coverage available to them from their current or former employers.

In order to minimize disruption to the membership, the TFO first did a thorough check of its records, and then reached out only to those participants with missing supporting documents.

Members who are contacted about missing documentation must submit the necessary supporting documentation for

(Please see page 2)

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Working For Your Benefit
UFCW TRUST

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FOR YOUR BENEFIT

is a newsletter designed to keep all Members informed about how to use their benefits most effectively. Members also may contact their Union's Benefit Clerks or call the Trust Fund Office directly at (800) 552-2400. Phone hours for the Trust Fund Office's Health and Welfare Services Department are 7:30 a.m.–5:30 p.m., Monday–Friday. Or visit us online at UFCWTRUST.COM.

¿Le gustaría una versión en Español de este boletín de noticias? Would you like a Spanish version of this newsletter?

Visite UFCWTRUST.COM, haga clic en el menú de Recursos y seleccione "For Your Benefit Newsletter" para elegir una edición. Visit UFCWTRUST.COM, highlight the Resources menu and select For Your Benefit Newsletter to choose an issue.

TRUST FUND OFFICE MISSION STATEMENT

OUR PURPOSE IS TO PROVIDE EXCEPTIONAL
BENEFIT ADMINISTRATION TO THOSE WE SERVE



Dependent Eligibility Verification: Do your part!

(Continued from page 1)

their Dependents to the TFO immediately in order for their Dependents to be eligible for benefits in 2018.

The TFO also will be reaching out to Members who have enrolled Spouses or Domestic Partners to ask them to provide updated documentation regarding whether the Spouse/Domestic Partner has other coverage available to them, and if so, whether the Spouse/Domestic Partner has enrolled in that other coverage.

Pay close attention to your Open Enrollment materials. In your cover letter, on the first page, it shows your personalized Dependent Eligibility Verification status as of July 14, 2017. In addition, you can log into **UFCWTRUST.COM** and click on your 2017 Dependent Verification button located on your My Info page to view your most current status and to upload documents.

Look for the overall results of the Fund's Dependent Eligibility Verification in a future issue of *For Your Benefit*.

If you received a missing-documentation notification letter, don't procrastinate. Send your required documentation immediately! **Failure to submit the required supporting documentation for a Dependent will result in him or her being dropped from the Plan effective January 1, 2018.**

For more information on eligible Dependents and the required supporting documentation, see the Spring 2017 issue of *For Your Benefit*. You can locate the Spring 2017 issue by visiting **UFCWTRUST.COM**, clicking on "Resources" and then selecting "For Your Benefit Newsletter."



For Your Benefit is the official publication of the UFCW & Employers Benefit Trust (UEBT). Every effort has been made to provide correct and complete information regarding particular benefits, but this newsletter does not include all governing provisions, limitations and exclusions, which may vary from Plan to Plan. Refer to the Summary Plan Description, Plan Document, Evidence of Coverage and/or Disclosure Form ("Governing Documents") for governing information. In the event of any conflict between the terms of this newsletter and the Governing Documents, the Governing Documents will control. As always, the Board of Trustees for the UFCW & Employers Benefit Trust retains the sole and complete discretionary authority to determine eligibility and entitlement to Plan benefits and to construe the terms of the Plans. The information in these articles is for general use only and should not be taken as medical advice. In an emergency, you are advised to call 9-1-1.

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Share your stories and ideas with the Trust Fund Office

Would you like to share a story of how UEBT benefits made a difference in your life or for one of your loved ones? Do you have a benefit-related topic you would like to learn more about in a future issue of *For Your Benefit*?

Email your story or ideas to
MemberProfile@ufcwtrust.com.

We may contact you for more information.



What happens to claims in the event of an accident?

If a Participant's injury, illness, death, or other condition is caused by a third party, the Fund rules provide that the Fund will not be responsible for the individual's health care expenses except under the conditions described in this article.

However, the Fund will agree to advance payment for those benefits provided the Covered Person agrees in writing to refund the Fund the full amount advanced out of any recovery from a third party or an insurance company.

Examples of claims when a third party may be responsible include those resulting from motor vehicle accidents, injuries on another person's property,

medical malpractice, or employment-related injuries. (Please note there are different procedures for workers' compensation claims.)

UEBT Trustees make the determination as to whether a third party is responsible for payment of our Members' or Dependents' health care expenses.

In a process called Subrogation of Reimbursement, the Fund has the right to be substituted ("subrogated") in place of the Participant in his or her claims or rights against the third party in order to recover the costs of benefits provided by the Fund.

In such cases, "reimbursement" refers to a Participant's obligation to

return to the Fund the full cost of benefits related to the illness, injury or death caused by the third party that the Fund has paid or may pay from the amount the Participant recovers from a third party.

The Fund may initiate, intervene in or assert a lien in a legal action to recover its costs, but not in excess of the amount of those costs. This may happen even if the actual or potential recovery from a third party is less than full compensation for the actual loss suffered by the Participant. The Fund also may seek a settlement with the third party with respect to its obligation to reimburse the Fund for the amounts the Fund has paid for those claims.

WHAT HAPPENS IF I AM IN AN ACCIDENT?

1

The Trust Fund Office (TFO) receives a claim that may be related to an incident where a third party may be liable or it may be a work-related injury; the claim will be denied pending a response from the Member with information about the accident.

2

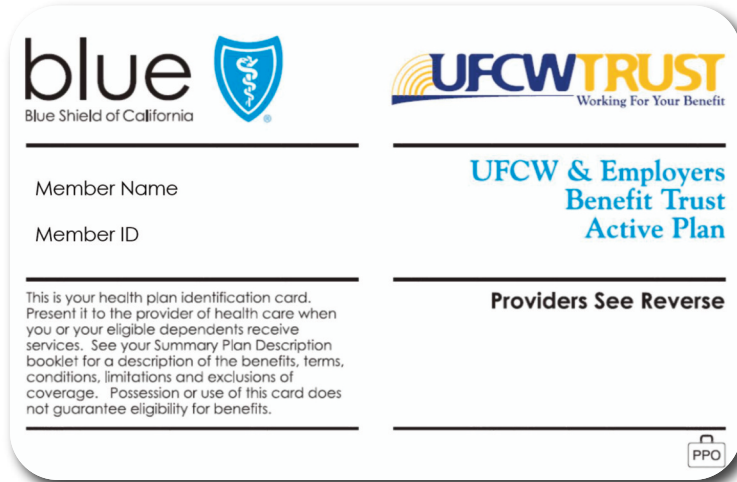
A letter will be sent to the Member asking if the incident was due to an accident or the Participant's employment. If the Member responds "yes," the claim is related to an accident, the claim will remain denied and the TFO will send the Member a subrogation agreement for his or her signature. This agreement denotes a legal right for an insurer to pursue a third party that caused an insurance loss to the insured. This is done as a means of recovering the amount of the claim paid to the insured for the loss.

3

Once the Member signs the subrogation agreement, the claims involved will be released for processing.

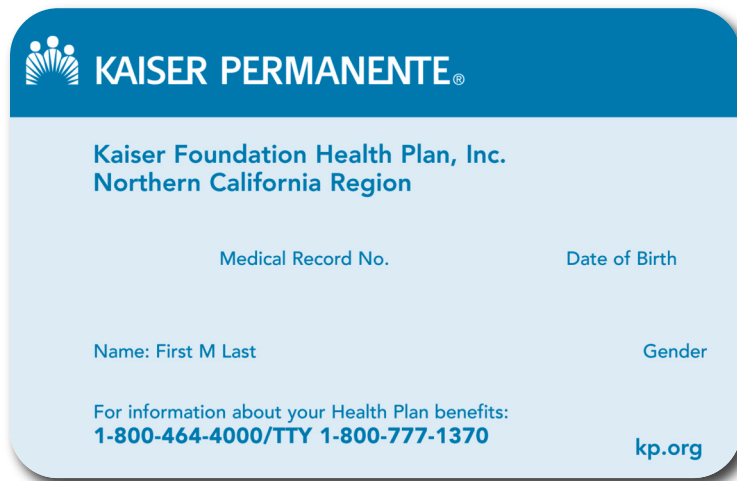
What's in your wallet?

Each Member and his or her Covered Dependents should carry two cards for medical benefits: a Medical or Kaiser ID card and an EnvisionRx Prescription Benefit Card.



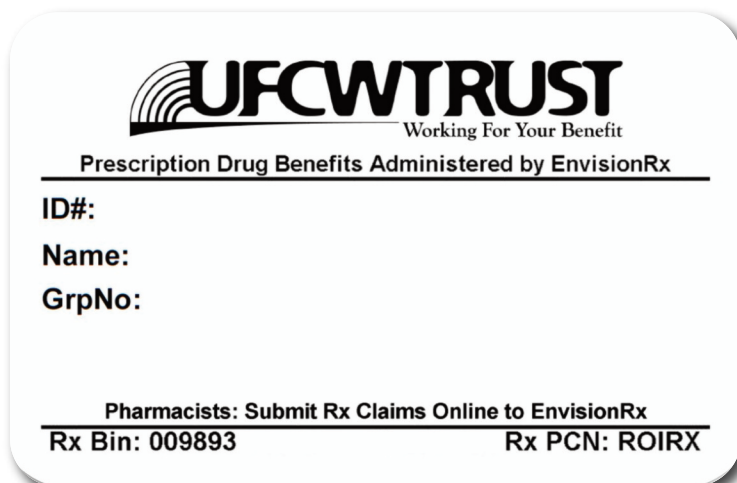
PPO MEMBERS

PPO Members and their covered Dependents should carry a Medical ID Card, issued by the Trust Fund Office (TFO), which has the Blue Shield of California logo and identifies the Member as part of the UEBT Plan. It includes the UFCWTrust logo and name of the UEBT Plan, along with the Member ID number of the Member. The back of the card includes contact information for the Trust Fund Office's (TFO) Member Services, Podiatry Related Services and Mental Health/Chemical Dependency Services, a Blue Card Provider search phone number if traveling outside California, and other important information for Providers.



HMO MEMBERS

Kaiser Members and their covered Dependents should carry their Kaiser ID card, issued by Kaiser, which features the Kaiser logo and their information on the front. On the back are phone numbers to call for appointments, 24-hour health advice and coordinating treatment after emergency care.



PRESCRIPTION CARD

PPO and Kaiser Members and their Covered Dependents also should carry the Prescription Benefit Card issued by EnvisionRx, the Fund's Pharmacy Benefits Manager. This includes information a Pharmacist may need, including instructions for claims, contact information for the Fund and the Member's name, ID number and Group number.



PLANNING FOR THE FUTURE: Life insurance conversion

Members have the option of converting their life insurance for the Member Death Benefit under the UEFT Plan to an individual life insurance contract when their employment or eligibility under the UEFT Plan ends or they transfer out of covered employment. Evidence of Insurability (EOI) is not required to do this.

Accidental Death and Dismemberment coverage cannot be converted.

Covered Spouses or Domestic Partners may convert life insurance coverage for the Dependent Death Benefit under the UEFT Plan to an individual life insurance contract when:

- The Member dies.
- The marriage/domestic partnership ends.
- The Member's employment or eligibility under the UEFT Plan ends.

Covered Dependent children may convert life insurance coverage for the Dependent Death Benefit under the UEFT Plan to an individual life insurance contract when:

- The Member dies.
- The Member's employment or eligibility under the UEFT Plan ends.
- The Dependent child is no longer eligible under the UEFT Plan.

Conversion process

You may contact the Prudential Group Life Conversion Unit directly to obtain a conversion kit by calling (877) 889-2070. The kit contains a letter, application, product description and rate information. Alternatively, you may obtain conversion information online from prudential.com/giconversions.

Send the signed and dated Notice of Group Life Conversion Privilege form to:

**The Prudential Insurance
Company of America**
Group Life Conversion Unit
80 Livingston Ave.
Roseland, NJ 07068-1733
Mailstop NJ-09-02-24

In most cases, Prudential Life Insurance must receive the signed Notice of Group Life Insurance Privilege form and the first premium payment within 31 days from the date the applicant (Member, Spouse/Domestic Partner or Dependent child) ceases to be eligible under the Plan.

This newsletter article is a Summary of Material Modifications to the Summary Plan Description that describes changes to the UEFT Active Plan. Please read carefully and keep it with your Summary Plan Description and other Plan information. The Trustees reserve the right to amend, modify or terminate the Plan at any time.



Back to school: sports physicals

MedExpert can help you navigate the preparticipation physical evaluation

As the school year approaches, parents find themselves awash in forms, including forms related to their children's health as it affects participation in school sports.

You may have heard of the preparticipation physical evaluation (PPE) — commonly called a “sports physical” — a screening tool required for high school students in almost every state, usually every year.

If your child is thinking about starting or continuing participation in school basketball, football, swimming or other sports, what should you know about the PPE?

In this article, MedExpert takes a look at the history of the PPE, its effectiveness as a screening tool and what parents need to know about what this instrument can do for their child's safety and health. We also take a quick look at a new tool for sports screening.

As you probably know, MedExpert helps Members with their medical questions using the research and opinions of world experts. For more details about how sports physicals factor into your own child's health, we recommend you call (800) 999-1999 to talk with our doctors.

Details of the PPE

The PPE got its start in 1976, when the American Medical Association's Committee on Medical Aspects of Sports recommended completion of a PPE before a student participated in athletics. At first the PPE was considered a legal/medical requirement, but now, in its fourth edition, it is seen as a way to maximize safe participation in physical activities by adolescents.

An issue that researchers have in evaluating the PPE is how differently various doctors approach it. Some may spend more or less time with different areas of the PPE, such as risk of musculoskeletal injury or cardiovascular health.

One of the PPE's listed goals is to predict individuals at risk for musculoskeletal injury during sports participation, but studies show that it remains unclear as to whether the typical PPE exam is an effective predictor of future injuries or how to prevent them in individuals. Traditionally, the musculoskeletal examination portion of the PPE has been a 2-minute



orthopedic screen focused on general range of motion, strength, and joint laxity.

Parents might want to be aware of risks that are coming into better focus:

- Delayed physical maturation is associated with increased acute lower extremity injury in school-age athletes.
- Poor balance seems to be a likely risk factor for ankle sprain in high school-age athletes in sports with a high incidence of ankle injuries.
- Anatomic factors, such as asymmetry in leg length, show promise as a predictive tool for stress fractures in select populations such as track and field athletes.
- Strength matters, but not necessarily as you might expect: maximum isometric strength (e.g., hand grip strength) is not itself a risk factor for injury, but strength imbalance among muscle groups can predict injury.

Most practitioners use a selective approach in using an electrocardiogram (ECG) as a part of a physical screening for athletic participation, an approach recommended by the American Heart Association. As you may know, the ECG is a test that checks for problems

with the electrical activity of the heart. Such tests may be especially important for the urban adolescent athletic population, since their rates of obesity and elevated blood pressure place them at increased risk of cardiovascular complications later in life.

A recent study in the *Clinical Journal of Sports Medicine* says that a limited portable ECG performed during the PPE allows for direct measurements of the heart to more accurately identify athletes with structural abnormalities and to be the most cost-effective screen.

Future tools

A newer tool used outside the doctor's office has gained some currency as a prescreening algorithm: the American College of Sports Medicine (ACSM) prescreening algorithm. The ACSM questionnaire looks at a person's medical history, including sports and exercise history, and asks about the kinds of activities being considered before recommending whether a physical is necessary.

Given that for most people, including students, the benefits of physical activity far outweigh the risks, this tool may be worth a look if you are taking up a new sport.

Despite the lack of clarity and consistency with the PPE, such a combination of questions and physical examination can do more than simply predict injury. It can uncover such issues as obesity, cardiac disease and even bullying.

For most student athletes — and their parents — the PPE is a way of life. Like all health tools, it can be done well and used wisely.

MedExpert invites you to reach out to us before and after your child's PPE to ensure you are getting all the facts, asking the right questions and helping your athlete put his or her best foot forward.

ARTICLE BY MEDEXPERT

For further research:

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Gleason CN, Kerkhof DL, Cilia EA, Lanyi MA, Finnoff J, Sugimoto D, Corrado GD. Early Screening for Cardiovascular Abnormalities With Preparticipation Echocardiography: Feasibility Study. *Clin J Sport Med.* 2016 Oct 13.

Kriz PK, Clyne A, Ford SR. Preparticipation Physical Exams: The Rhode Island Perspective, A Call for Standardization. *R I Med J* 2016;99:18-22.

Kropa J, Close J, Shipon D, Hufnagel E, Terry C, Oliver J, Johnson B. High Prevalence of Obesity and High Blood Pressure in Urban Student-Athletes. *J Pediatr.* 2016; 178:194-199.

LaBotz M, Bernhardt DT. Preparticipation physical examination: Is it time to stop doing the sports physical? *Br J Sports Med.* 2016 Dec 1.

Onate JA, Everhart JS, Clifton DR, Best TM, Borchers JR, Chaudhari AM. Physical Exam Risk Factors for Lower Extremity Injury in High School Athletes: A Systematic Review. *Clin J Sport Med.* 2016; 26: 435-444.

Whitfield GP, Riebe D, Magal M, Liguori G. Applying the ACSM Preparticipation Screening Algorithm to U.S. Adults: NHANES 2001-04.



The Trust Fund Office celebrates 60 years

As the Trust Fund Office (TFO) celebrates our 60th anniversary this year, we have a lot to make us proud. In a time when millions of workers across the country don't have access to affordable health care through their employers, UEBT Members enjoy some of the top health benefits in the industry for themselves and their families.

While many other plans are in financial trouble and have been forced to cut benefits, the UEBT has remained strong. Members in some funds have had to deal with the shock of their health plan being scrapped completely and being forced to use subsidies on a health care exchange.

Defined-benefit pensions are also a thing of the past for most workers, but UEBT Members can look forward to a secure and dignified retirement because of the pension fund.

Our history

The TFO, currently known as UFCW & Employers Trust, LLC, was established in 1957 to provide UFCW Members with personalized and specialized administration of their health care and pension benefits.

The TFO performs such functions as calculating

eligibility, processing and paying medical, dental, Sick Leave and disability claims, administering pensions and distributing payments.

Our Board of Directors, which is responsible for the overall administration of the Trust Fund Office, has offices to assist Members. Historically, the LLC has had two office locations; currently they are located in Concord and Roseville.

Looking ahead

None of this success would have been possible if we weren't united. The hardworking UEBT Members, the Unions, the Employers and the TFO all do our part to keep the UEBT strong and healthy day after day, decade after decade.

And we want to keep in touch! We're always exploring new options for educating Members on how to make the best use of their health plan, through this newsletter, through our website, **UFCWTRUST.COM**, and through other media and methods. We welcome your feedback.

For 60 years, the Trust Fund Office has ensured Members and their families get the most out of their benefits negotiated between their Union and their Employer. We look forward to many more successful decades ahead of working for your benefit!