FOR YOUR BENEFIT

Spring 2014 for Retired Members



My Pension information is now online

Learn more about your pension benefits

EBT retirees now have access to extensive information about their retirement benefits and pension at www.ufcwtrust.com.

Log into* **www.ufcwtrust.com** and select the "My Info" tab at the top of the homepage. Your personal information will be displayed.

It is important for the Trust Fund to have your most current address, so please take a moment to double check your personal information is accurate.

(Please see page 2)

* Retirees must have had Health and Welfare benefits in the previous 18 months in order to log into the site.

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UFCW & Employers Benefit Trust P.O. Box 8086 Walnut Creek, CA 94596-8086

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- PPO preventive care benefits for retired members Page 6
- Walnut Creek office prepares for move Page 8

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.

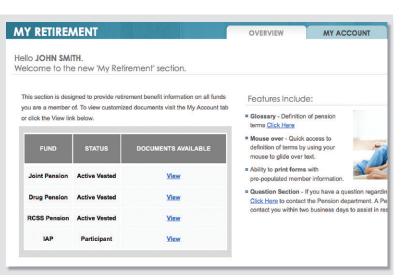
Phone hours for the Trust Fund office's Health and Welfare Services Department are 7:30 a.m.-5:30 p.m., Monday-Friday. Or visit us online at www.ufcwtrust.com.

¿Le gustaría una versión en Español de este boletín de noticias?

Would you like a Spanish version of this newsletter?

Visite www.ufcwtrust.com, haga clic en el menú de Recursos y seleccione formas para elegir un tema. Visit www.ufcwtrust.com, highlight the Resources menu and select Forms to choose an issue.

Learn more about your pension benefits



(Continued from front page)

Now select the "My Pension" icon. You will see an overview of your retirement benefit information, including the funds in which you are a member, as well as your status and links to personalized documents.

You can also access a glossary of pension terms and submit a question to the Pension Department online. You will receive a response to your question within two business days.



For Your Benefit is the official publication of the UFCW & Employers Benefit Trust. 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.

> 1277 Treat Blvd., 10th Floor Walnut Creek, CA 94597

2200 Professional Dr., Suite 200 Roseville, CA 95661

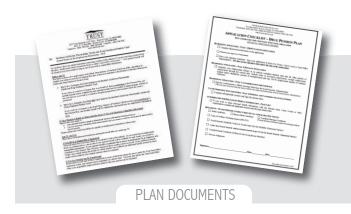
(800) 552-2400 • www.ufcwtrust.com

"PLAN DOCUMENTS"

Select the "PLAN DOCUMENTS" tab:



You will have access to all of the documents related to the plans in which you are a member. These include updates and notices about changes to your benefits, as well as your Summary Plan Description and Annual Funding Notices.



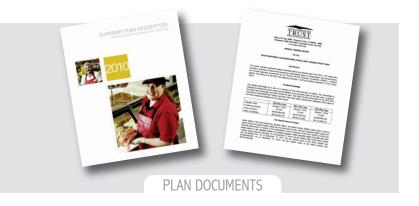
Glossary

A **covered expense** is the expense which you may incur for covered services, limited to a maximum amount described in the applicable Summary of Benefits and Coverage.

Covered services are Medically Necessary services or supplies which are listed in the Summary Plan Descriptions, Evidence of Coverage (HMO participants) and Summary of Benefits Modifications.

Your **deductible** is the amount of expenses (usually a specific dollar amount) you must pay before the Trust Fund begins paying any expenses.

online with My Pension



"MY ACCOUNT"

Select the "MY ACCOUNT" tab:



If you are a retiree who has not yet submitted your annual **Pension Payment Verification** form, you can

UPCO-Northern California Bright 1227 Treat Bosslevard, 10 Maill: P. O. Box 3085 - W Tatephones: (925) 746-75	Ploor - Wassie Creek, CA 94596-8086			
		Pension Paymer	nt Ver	ification
1/30/2013 WANDA 6240 VERNON AVE	powers	Change of Address Street or PO Box		APT/STE#
FRENCHT UNITED STATES	CA SHESS	City or Post Office	State	Zp+4
and to verify your own verification (PPV) form 1. Review your addre 2. Review the inform pro-printed parson 3. Complete all appli 4. Have your algrat Look, Trust Fusion bank through the 5. Mail your comple	your persion benefit will be sool nes (allower) note amy changes, vation in section 1. Compiles at lat information. Isable questions in section 2 rep jure witnessed in section 3. Vot Mediation Signature Guarantee fed form to the Trust Fund office fed form to the Trust Fund office	ill applicable questions and make a anding your monthly benefit. You must sign this document in the party also have your signature will Program. I using the enclosed return enveloped to the program of the second	sey necessor wesence of messed and	ry changes to your an authorized Union guaranteed by your
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		r ank account or other financial institu	tion?	Yes No No

access the form under the "MY ACCOUNT" tab.

Your personal information will already be inserted, so simply print the form, complete it and mail it to the Pension Department using the address on the form

GECW & Employars Trust, LLC Mouth & Retirement Sunsities 1277 Trust Souleverd 10th Floor Submit Creek, California 94587-6953	
tiovernoer 1, 2013	
JOHN SMITH	
241 ROSE AVE. SACRAMENTO, CASK203-6895	
RE: UFCSI Northern California Employers J	out Pension Trust Fund
JOHN SEETH HAVE AND THE PERSON OF THE PERSON	
Dear JOHN SMITH	g is an itemized breakdown of the monthly retrement benefit
in reply to your recent request, the following you currently receive from this Trust Fund.	
**Gross Monthly Pension:	\$1,742.93
Health & Western Deduction:	\$275.00
Federal Tax Withholding:	\$146.D4
State Tax Withholding:	\$14.90
OTHE	\$715.00
	9589-96
Net Pension Check	
"This benefit is considered to be a lifetime reduced if you suffer a divorce, have a ma comply with any Trust Fund procedures to	e benedit, provided your current satus is maintained. The courter and another enduction buth as a liney, lien, shell support order, or fail to sail could cause a surpensors of your benefits.
Smoonely,	
Pension Department	

Also accessible in the "MY ACCOUNT" tab are your 1099R tax statements and **Verification of Deposit** documents. The Verification of Deposit form is a detailed breakdown of the gross monthly pension amount you receive, minus deductions and withholdings.

Pension terms to know

Benefit Accrual Credits are used to calculate your monthly pension benefit and are based on the Hours of Covered Service you worked in each Plan Year.

Covered Service is your work under a Collective Bargaining Agreement that outlines contributions to a Plan on your behalf, or your work for an Employer for which contributions would have been made to a Plan if a Collective Bargaining Agreement had been in place. Covered Service includes hours for which you are paid for vacation, jury duty, holiday absences and funeral leave. In certain circumstances, Covered Service may include periods of time when you receive State Disability or Workers' Compensation Benefits or when you are on military duty.

Normal Retirement Benefits is the term for the full retirement benefit which becomes available when you reach your Normal Retirement Age. Please refer to the Plan's Summary Plan Description for your Normal Retirement Age.

When you are **vested**, it means you have earned the right to receive retirement benefits from the Plan. You can become vested by working enough Hours of Service to earn the minimum required number of Vesting Credits under the Plan.

Ensure your family members receive the full benefits to which they are entitled

any factors need to be considered when coordinating the health care benefits you and your spouse/domestic partner enjoy.

Review the information below and take the necessary actions, if applicable, to ensure your family members receive the full benefits to which they are entitled.

Take time to log into **www.ufcwtrust.com** to review your benefit coverage for you and your spouse/domestic partner. This will help avoid confusion and could help you avoid paying for unnecessary out-of-pocket expenses.

For the purpose of this article, "dual coverage" refers to two retired members or a retired member and an active member, both covered under the UEBT health plan.

Dual coverage

- What if my spouse/domestic partner and I are both UEBT retirees covered under the Plan?
- A: In order to ensure 100% coordination of your benefits and your maximum savings, both of you must:
 - Cover each other and the same dependents.
 - Select the same medical carrier (either PPO or HMO).
- What if there are two retired members, both of whom receive retiree benefits through the UEBT Plan, and they do not want dual coverage?
- As long as one of the members chooses to continue coverage, he or she can cover the other as a dependent without a reduction in benefits.





What if I am a retired member and my spouse/domestic partner is an active member?

In order to ensure 100% coordination of your benefits:

- Both of you must cover each other and the same dependents up to age 24 (you will not be penalized if a dependent child is between the ages of 24-26 and only covered under the Active plan the member and covered spouse/domestic partner will still receive 100% coordination).
- Both of you must select the same medical carrier (either PPO or HMO).
- If your spouse/domestic partner is an active member, he or she must choose the Health Care Partnership plan option, and you both must complete the required Action Steps.

Other insurance information

Q: What if I am a retired member who is working?

If you are working and offered other group health insurance through your current employer, you must take the other insurance regardless of the cost, otherwise a reduction of benefits will be applied. The same rule applies to your covered spouse/domestic partner.

If other group health insurance is not offered, a letter from your or your spouse/domestic partner's employer (on company letterhead) must be submitted to the Trust Fund office explaining that other insurance is not offered. A reduction of benefits will be applied if this letter is not submitted. The letter can be faxed to (925) 746-7549.

Also, if either you or your covered spouse/domestic partner is offered group health insurance through a previous employer, you or your covered spouse/domestic partner must take the insurance regardless of the cost.

What if my covered dependent child is working?

A: If your dependent child is working and is offered other group health insurance, he or she must take the other insurance regardless of the cost.

If other group health insurance is not offered, a letter from his or her employer (on company letterhead) must be submitted to the Trust Fund office explaining that other insurance is not offered. A reduction of benefits will be applied if this letter is not submitted.

Q: What if my spouse/domestic partner has an HMO plan?

If your spouse/domestic partner has an HMO as his/her primary carrier, the HMO will be his/her primary plan. UEBT requires that care must be provided by his/her primary plan and will not reimburse any copayments required by the HMO plan.



PPO preventive care benefits for retirees

aking advantage of preventive care services is one of the best things you can do to maintain your health. Screenings, tests, exams and other preventive services can detect minor health issues and prevent them from turning into major ones.

Here are some PPO preventive-care benefits to keep in mind:

- Your annual physical exam (limited to one per calendar year) is covered at 100% (up to a \$75 maximum) after your \$25 copayment. You must visit a Blue Shield or PPO network provider for 100% coverage.
 - Out-of-network benefits are subject to your out-of-network PPO deductible and paid at 50% up to the \$75 maximum.
- Routine lab tests and x-rays (except pap smears and cancer screenings) ordered by your PPO physician during your physical are subject to your PPO deductible. Once your yearly PPO deductible has been met, PPO benefits are payable at 75% (up to a \$100 maximum benefit).

Out-of-network benefits are subject to the out-of-network deductible and payable at 50% up to the \$100 maximum.

Routine pap smears and all covered cancer screenings are not deducted from your \$100 maximum for routine lab tests and x-rays.

These services are subject to your deductible (from both PPO and out-of-network providers) and then payable at 75% for PPO providers and 50% for out-of-network providers.

 Routine mammograms from a PPO provider are subject to your PPO deductible and then payable at 75% (up to a \$200 maximum benefit).

Mammograms performed by an out-of-network provider are also subject to the out-of-network deductible and payable at 50% up to the \$200 maximum.

· Administration of an immunization

from a PPO provider is covered at 100% after a \$25 co-payment. Out-of-network benefits are subject to the out-of-network deductible and paid at 50%.

If you receive an immunization from a PPO provider, the immunization agent is covered at 75% after the PPO deductible is satisfied. Out-of-network benefits are paid at 50% (up to \$20 per immunization) after the out-of-network deductible is satisfied.

Well child care (for covered children under age 2), including immunizations, from a PPO provider is covered at 100% after a \$25 co-payment, up to 10 visits per birth year. Out-of-network benefits are covered at 50% after the out-of-network deductible is satisfied, up to 4 visits per birth year.

Refer to your SPD or current Summary of Benefits for information on Preventive Care Benefits covered under the HMO plans.

Preparing for Open Enrollment 2015

e are working to improve your Open Enrollment experience for the 2015 Plan Year. As a result of your feedback, we are "tooling up" to better serve you during the Open Enrollment process for your benefits effective Jan. 1, 2015.

Easy: Completing your online enrollment will now be easier than ever. It has been completely customized to meet your needs and should only take a few minutes to complete. And, **if you do not want to make any changes**, you simply do nothing. Retirees can carry over their benefits from the 2014 Plan Year into the 2015 Plan Year by not doing anything at all. There is no need to even log into the Trust Fund website!

Stress Free: If you want to make changes to your benefits effective Jan. 1, 2015, you now have a two-month period to complete your Open Enrollment. Open Enrollment must be completed between Aug. 1, 2014 and Sept. 30, 2014 for changes to become effective Jan. 1, 2015.

Reliable: We are working hard to ensure all selections made during Open Enrollment are communicated correctly to our carriers for Jan. 1, 2015 eligibility. You will receive documentation confirming your selections well in advance of Jan. 1, 2015.



Rest assured, we have great plans for this year's upcoming Open Enrollment. We look forward to serving you!

Your dental and vision benefits

Dental benefits

Indemnity Dental
There is a \$50 deductible per
person and \$150 per family, waived
for preventive and diagnostic
procedures. The calendar year
benefit maximum is \$1,000.

Plan pays 100% of covered charges for preventive and diagnostic services.



Vision benefits

Eye exams are covered at 100% (after the \$10 deductible is met) once every 12 months, if given by a VSP Network provider. Lens and frames are covered every 24 months, up to wholesale allowance.

Costs for exams, lenses and frames from non-VSP Network providers are covered up to Plan allowances. The member is responsible for 100% of costs above the Plan allowances.



Walnut Creek office prepares for move

We are pleased to announce the Trust Fund Office Headquarters, currently in Walnut Creek, is moving this summer to the City of Concord.

In cooperation with the UFCW Northern California Employers Joint Pension Plan, whose investment makes this move possible, we plan to open the doors at our new location on Monday, July 28, 2014.

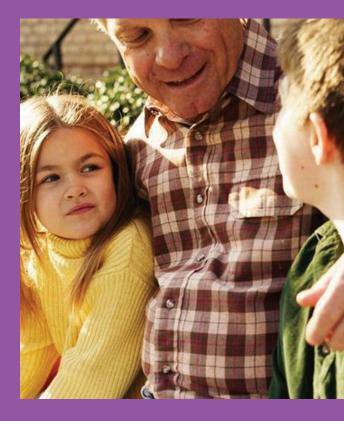
Our beautiful, four-story building, at 1000 Burnett Ave. in Concord, is less than four miles north of the current office in Walnut Creek. It is nestled along Interstate-680, just south of Concord Avenue.

We are changing the name of the building from Galaxy II to the UFCW & Employers Plaza in honor of the outstanding members, employers and unions we work with every day.

There are many advantages to our new location. Parking is free and abundant. Overall, the building is very accessible, with a member lobby and ample meeting rooms on the first floor

Our Walnut Creek doors will close for walk-ins at noon on Friday, July 25, 2014. We'll be fully operational beginning the following Monday, July 28, 2014. More information will be sent to members this summer.

We honor the outstanding members, employers and unions we work with every day.



Report changes to your contact information directly to the Trust Fund

t is important to provide an update of contact information directly to the Trust Fund.

It will save the Trust Fund unnecessary expense in trying to locate you and it is important you receive up-to-date benefit information which could result in saving you money.

Log into www.ufcwtrust.com and on your "My Info" page you can click on "My Contact Info" and fill out the form and submit it online. Your change of information will be updated within five days. Or call (800) 552-2400 to change other insurance information or to make changes to dependent status.