

SANTA MONICA UNITE HERE HEALTH BENEFIT TRUST FUND

Administered By: Benefit Programs Administration
Telephone • (866) 345-5189 • (562) 463-5075 • FAX (562) 463-5894
www.santamonicauniteherefunds.org

November 2016

To Qualified Participants of the Santa Monica UNITE HERE Health Benefit Fund

The Santa Monica UNITE HERE Health Benefit Fund's annual open enrollment period is underway. If your current employer is contributing at the required minimum contribution rate, you have the opportunity during open enrollment to change your medical and dental plan. In addition if you want to add or delete a dependent you must contact the Administrative Office and request an enrollment form. The enrollment form must then be completed in full and returned back to the Administrative Office at the address shown below.

Effective January 1, 2017, your choices of Medical & Dental plans are as follows:

MEDICAL

- Employee Health Systems Medical Group (EHS)
- Kaiser Permanente

DENTAL

- Delta Dental PPO
- United Concordia Dental Plan DHMO

If you are interested in changing your current medical or dental plan, you may request additional information about the plans and can receive an enrollment form for any of the above plans by completing and returning the enclosed business reply postcard or calling the Administrative Office at (866) 345-5189 or (562) 463-5075. If you choose to change from your current plans, you must complete and mail the appropriate enrollment form to the Administrative Office before **December 5, 2016**.

If you do not wish to change your current medical or dental plan enrollment, or add or delete a dependent no action is required. Your coverage will continue under your current medical and dental plan, provided that you continue to be eligible under the Fund. You will not be permitted to change your plan until the Fund's next open enrollment period next year, unless you qualify for special enrollment under HIPAA.

NOTICE: GRANDFATHERED HEALTH PLAN STATUS

The Board of Trustees of the Santa Monica UNITE HERE Health Benefit Fund believes its group health plan (the "Plan") is a "grandfathered health plan" under the Patient Protection and Affordable Care Act (the "Affordable Care Act"). As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that it had in place on March 23, 2010, when that law was enacted.

Being a grandfathered health plan means that your Plan may not have to include certain consumer protections of the Affordable Care Act that would otherwise apply. For example, if you are enrolled in the Plan's Kaiser Permanente option, you will not be able to access preventive health services without any cost sharing. However, all plans (including grandfathered plans like the Plan) must comply with certain other consumer protections in the Affordable Care Act: for example, the elimination of lifetime limits on benefits.

If you have questions about which consumer protections in the Affordable Care Act apply to each medical plan option under the Plan, or questions about what could cause the Plan to stop being a grandfathered health plan, please contact the Board of Trustees, which acts as the Plan Administrator. You can call the Administrative Office at (866) 345-5189 or (562) 463-5075, or send your questions to:

Board of Trustees of the
Santa Monica UNITE HERE Health Benefit Fund
c/o Benefit Programs Administration
13191 Crossroads Parkway North, Suite 205
City of Industry, CA 91746-3434

You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at 1-866-444-3272 or www.dol.gov/ebsa/healthreform. This website has a table summarizing which consumer protections under the Affordable Care Act do and do not apply to grandfathered health plans.

Sincerely,

Benefit Programs Administration
On Behalf of the Board of Trustees

LP:dlw
Enclosures