

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 2020

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

The Santa Monica UNITE HERE Health Benefit Trust Fund's annual open enrollment period is underway. During open enrollment, you can change your medical plan and/or dental plan (if your current employer contributes at the required minimum contribution rate). In addition, you may add or remove a dependent from coverage, or you may enroll for coverage if you are eligible but not yet enrolled. Remember, you and all of your covered dependents must be enrolled in the same medical plan and dental plan.

Please note, you can enroll in the Kaiser Permanente HMO plan only if your current Employer contributes at the required contribution rate, and you have had coverage under the Health Net Plan for at least 6 consecutive months as of January 1, 2021. Please note, you can enroll in the Kaiser Permanente HMO plan only if you have had coverage under the Health Net Plan for at least 6 consecutive months as of January 1, 2021.

To make any changes, you must contact the Administrative Office and request an enrollment form. **The enrollment form must then be completed in full and returned to the Administrative Office at the address shown below by December 11, 2020.** Changes will then be effective on January 1, 2021.

If you do not wish to change your current medical or dental plan, or to add or delete a dependent no action is required. Your current coverage will continue, as long as you are eligible under the Fund.

Your choice of medical & dental plans during this year's annual open enrollment are as follows:

MEDICAL

- Health Net Salud y Más
- Kaiser Permanente HMO Medical Plan

DENTAL

- Delta Dental PPO
- United Concordia Dental Plan DHMO

Open enrollment ends December 11, 2020. You will not be able to make changes after that date, unless you or a dependent have a special enrollment right. You and your dependents must be enrolled in the same medical plan and the same dental plan

If you are considering making a change to your current medical or dental plan, or if you would like to add or remove a dependent or enroll for coverage, you may request additional information about the plans and receive an enrollment form for any of the above plans by calling the Administrative Office at (866) 345-5189 or (562) 463-5075. **To make any changes, you must complete the appropriate enrollment forms and mail them to the Administrative Office before December 11, 2020.** Any changes made during open enrollment will be effective January 1, 2021.

Sincerely,
Benefit Programs Administration
On Behalf of the Board of Trustees

LP:ajb
Enclosures