

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

www.santamonicauniteherefunds.org

November 2024

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

Open enrollment ends December 6th! During open enrollment, you can change your medical or dental plan or add dependents if you are eligible to do so. See the Benefit Summary included in this packet to see your plan options.

If you don't want to make changes, no action is required. Your current coverage will continue, as long as you are eligible.

How To Enroll:

- By phone/mail: Call the Fund at **(866) 345-5189** and we will mail you the forms. Fill out the forms and mail the packet back or drop it off at our office. If you mail it, call us a week later to confirm that we received it.
- By email: Request and return the forms at santamonicaunitehere@bpabenefits.com
- Forms must be postmarked or emailed by December 6th, 2024. You will not be able to make changes after that date, unless you or a dependent have a special enrollment right.
- Your changes will go into effect on January 1, 2025.
- If you enroll in Kaiser and you are in the **Hotel Plan**, you must fill out the payroll deduction form and send a check for \$40 to cover January and February coverage. Your employer will deduct for your March coverage.
- If you enroll in Kaiser or Health Net and you are in the **Event Center Plan**, you must fill out the payroll deduction form and send a check for either \$100 (Kaiser) or \$50 (Health Net) to cover January and February coverage. Your employer will deduct for your March coverage.
- You and your dependents must be enrolled in the same medical plan and the same dental plan.
- 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 and or the MLK Care Plan for at least 12 consecutive months as of January 1, 2025.