

Local 190 Benefits are Changing . . .

BIG TIME

The objective of your health plan is to provide you and your eligible dependents with accessible and affordable care. Your Board of Trustees works with this objective in mind and has elected to implement an innovative plan design that provides immediate access to your funds while encouraging healthy behaviors and choices.

ENHANCED AND STANDARD COVERAGE LEVELS

As of January 1, 2014 your actions will affect your benefits and your involvement will lead to rewards. Two benefit levels will be introduced: Enhanced and Standard. Member and spouse participation will determine your benefit level.

Those who scheduled and completed an annual physical exam in either 2012 or 2013 will have **Enhanced Plan** benefits: a lower deductible, no co-insurance and lower co-pays. To receive these enhanced benefits for all of 2014, **you and your spouse must schedule and complete your annual physical exam by December 31, 2013.** Watch for more details on these changes.

The new benefit levels are explained in the new Summaries of Benefit Coverage, as follows:

	ENHANCED PLAN	STANDARD PLAN
Deductible	\$100 per contract	\$250 single / \$500 family
Coinsurance	0% most services; after deductible	20% after deductible
Coinsurance Maximum	Not applicable	\$1,000 / \$2,000
Office Copay	20% after deductible	\$30 after deductible
Chiropractic Copay	\$0 copay after deductible up to 38 visits / year	\$30 copay after deductible up to 38 visits / year
Urgent Care Copay	20% after deductible	\$30 after deductible
Emergency Room Copay	\$50 after deductible	\$100 after deductible

You will be placed in the **Standard Plan** where you will remain for the entire 2014 calendar year if you and your spouse have not yet had physical exams in either 2012 or 2013, and you do not schedule and participate in an annual physical exam by December 31, 2013. An annual gynecological exam will also satisfy your annual physical exam requirement.

If you had a physical exam in either 2012 or 2013, you will be in the Enhanced Plan for 2014.

Don't delay! If you or your spouse have not already had an annual physical exam in 2012 or 2013, get it on your calendar before the new year!

NEW EXTERNAL REVIEW REQUIREMENTS

If your claim for health care is denied, you have always had the right to appeal for a full and fair review by the Joint Board of Trustees. This is called an “internal review.” Starting January 1, 2014, if your claim is denied for a reason involving medical judgment or you are appealing cancellation of your coverage (“recession”), you will have the right to an additional full and fair review by an **independent review organization**. This is called an “external review.” Examples of medical judgment include decisions of whether services should be provided in an inpatient or outpatient setting; entitlement to treatment by a specialist; whether a procedure is medically necessary or appropriate; and how much treatment is needed to adequately treat a medical condition. External reviews will be conducted by a professional independent reviewer assigned randomly by Blue Cross Blue Shield of Michigan. A new revised Summary Plan Description will be issued in the near future with more details of this process.

ADULT CHILDREN COVERAGE

Previously, members’ adult children (up to age 26) could be covered unless they had employment-based coverage available. Starting January 1, 2014, adult children up to age 26 who have other employer-based coverage available will be eligible for coverage under the plan.

UA LOCAL 190 HEALTH PLAN CHANGE Q & A’S

Q. If I got a physical or gynecological exam in 2012 or earlier this year, do I need to get another exam to be in the Enhanced Benefit Plan for 2014?

A. **No.** If you had a physical anytime in 2012 or 2013, you are in the Enhanced Plan for 2014.

Q. I have not had a physical in 2012 or 2013. When should I schedule my physical exam?

A. Anytime between now and December 31, 2013. Hurry! You don’t have much time.

Q. Does my spouse also have to schedule an annual physical exam?

A. Yes. Both you and your spouse have to complete an exam between January 1, 2012 and December 31, 2013 to be in the Enhanced Benefit Plan for 2014.

Q. Do I need the exam if I am on Medicare?

A. Yes. You will need to participate in a “Medicare Annual Wellness Exam” annually in order to receive your Enhanced benefits.

Q. What happens if I choose not to get a physical or gynecological exam?

A. You still have access to comprehensive benefits; however you will have higher out-of-pocket expenses in the Standard Benefit Plan.

Q. Will Trustees or employees in the Fund Office have access to the results of my annual physical exam?

A. No! Evidence of the exam is all that’s required, and that will be provided by BCBSM in the form of an employee participation roster only.