

# 2011 Health Care Benefit Highlights

*Addendum to the 2010 Schedule of Benefits and Summary Plan Description previously published.*

Dear UAW Trust Member,

Since January 2010, the UAW Retiree Medical Benefits Trust (the "Trust") has been providing health care benefits for UAW auto retirees and their dependents. The Trust is pleased to provide a variety of health care options designed to meet the unique needs of our diverse retiree population. The Trust team has worked with outside consultants and medical professionals to review the current benefit structure in order to develop benefits for 2011 that are designed to address the specific needs of our retirees, lessen the impact of health care inflation, and preserve core benefits.

Specifically we aimed to:

- Encourage healthy behaviors and preventive measures through plan design enhancements
- Enhance select benefits that improve retiree health outcomes
- Minimize the out-of-pocket financial impact to members

Your 2011 benefit design includes:

- ✓ **Coverage for new** diabetes education, smoking cessation and cardiac rehabilitation programs
- ✓ **Expanded coverage for:**
  - Dependent children to age 26
  - Urgent Care at a flat rate copay of \$50
  - Nurse Practitioner and Physician Assistant provider types
  - Shingles Vaccine
- ✓ **No increase** in the monthly contributions you pay to the Trust
- ✓ **No increase** in your deductible or out-of-pocket maximums
- ✓ **No increase** in the generic prescription drug copay – remains at \$10 retail and \$20 mail
- ✓ **Increase of \$5** in the brand drug copay - now \$30 retail and \$60 mail
- ✓ **A new third tier** copay of \$80 for drugs where a generic alternative or equivalent exists. A **small percentage** of prescriptions fall into this tier. (See page 3 for additional information).

***Our Mission:***  
*To provide the retiree population coverage that preserves core benefits and assets of the Trust*

Additional details on 2011 benefits are included in the following pages. If you have specific questions about these benefits, contact Retiree Health Care Connect (RHCC) online at <http://resources.hewitt.com/rhcc/> or at 866-637-7555.

Finally, the Trust is pleased to announce the launch of a UAW Trust website. The website provides general information about the Trust, member benefits, and resources available to members. We hope you find the site useful as well as informative. Access [www.uawtrust.org](http://www.uawtrust.org) to view the new the website.

We wish all of our members the very best in retirement and a healthy 2011.

Sincerely,

The Committee of the UAW Retiree Medical Benefits Trust

## 2011 Retiree Benefits

This information is a supplement to the Summary Plan Description and Schedule of Benefits issued in 2009. If there is any conflict between the wording of the Plan Document, the Schedule of Benefits or any applicable certificate of coverage and this supplement, those documents will govern. The Committee reserves the right to interpret, amend, or terminate the Plan of health care benefits at any time.

The following table outlines cost sharing provisions effective January 1, 2011. **There are no changes in these amounts. The tables are included here for your reference.**

Cost-Sharing Provisions	2011 Benefit Level – NO CHANGES from 2010
<p><b>Monthly Retiree Contributions</b></p> <p>This is the amount deducted from your pension payment or the amount you pay monthly to participate in health care coverage through the Trust</p>	<p><b>General Population</b> \$15 Single/\$30 Family</p> <p><b>*Protected Population</b> \$15 Single &amp; Family</p>
<p><b>Deductible</b></p> <p>This is the amount you pay annually before the Plan begins to pay a portion of costs</p>	<p>\$170 Single/\$340 Family</p>
<p><b>Co-insurance</b></p> <p>The amount you pay after your deductible is met</p>	<p>In-network 10% Out-of-network 30%</p>
<p><b>Out-Of-Pocket Maximum</b></p> <p>The total amount you pay annually (deductibles, co-insurance, and copays) before the Plan covers 100% of the costs</p>	<p>\$285 Single/\$570 Family</p>

*\*Note:* A Protected status retiree has a pension benefit income of \$8,000 or less **and** a monthly pension benefit rate of \$33.33 or less per month per year of credited service. Most Retirees and Surviving Spouses are General Retirees. If you have any questions about your status, contact Retiree Health Care Connect (866-637-7555).

## HMO Office Visit

The Trust continues to offer a variety of plans where cost effective and high quality options can be found. HMO plans continue to be favored among many participants due to the comprehensive offerings and flat copays. In order to continue to offer HMO plans at an affordable rate, the following copay rates are effective January 1, 2011.

Coverage	Description
<p><b>HMO Office Visit</b></p>	<ul style="list-style-type: none"> <li>• Covered with \$25 copay</li> <li>• Applies to both Primary Care Physicians (PCP) and Specialist office visits</li> </ul>

# Your 2011 Prescription Drug Benefit

Prescription drug costs continue to increase as new drugs and specialty medications are introduced. For the Trust, prescription drugs represent one of our highest expenses. In order to continue to offer comprehensive prescription coverage, the Trust has designed a 3-tier copay structure to further support the use of cost-effective medications. We encourage you to work with your physician to review your current medications to see where generic alternatives may exist.

	2011 Retail (30-day Supply)	2011 Mail Order (90-day Supply)	Change from 2010
Tier 1:	\$10	\$20	No Increase
Tier 2:	\$30	\$60	\$5 / \$10 Increase
Tier 3:	\$80	\$160	New copay

## Three Tiers of Copay - What does this mean for you?

### Tier 1: Generic medication - \$10 Retail/\$20 Mail

Over 72% of prescriptions filled by Trust members are generic. If you are currently taking a **generic** medication - there will be **no increase** in the cost of your medication for 2011. Your copay will remain at \$10 retail for a 30-day supply and \$20 mail order for a 90-day supply.

### Tier 2: Brand medication (*Single Source, Preferred Brand, and Sensitive Drug Classes*) - \$30 Retail/\$60 Mail

If you are taking a **Brand** medication that does not have a generic alternative or equivalent available, it is called a **Single Source or Preferred Brand**. Members taking prescriptions in a **Sensitive Drug Class** such as anticonvulsants, immunosuppressants, antipsychotics, Coumadin, estrogen therapy and oral glaucoma medications will remain in this tier. Copays for Tier 2 prescriptions will increase \$5 for a 30-day retail supply and \$10 for a 90-day mail order supply.

### Tier 3: Brand medication (*Multi-Source or Non-Preferred Brand*) - \$80 Retail/\$160 Mail

If you are taking a **Brand** medication that has at least one generic alternative or equivalent option available, it is called a **Multi-Source or Non-Preferred Brand**. **This new third tier affects a small percentage of total prescriptions.** You will still be able to obtain these medications at your discretion, but at a higher cost. The copay for these medications will be \$80 for a 30-day supply at retail and \$160 for a 90-day mail order supply.

Keep in mind there are less expensive options available to you. Work with your physician to see how you can save money by switching your prescription to a Generic or Tier 2 Brand medication.

**If you are currently on a Tier 3 Brand you will receive a personalized letter informing you of the medication affected and options available to you. Medco participants who currently take a Tier 3 Brand will receive a copay waiver to try a generic alternative FREE via mail order (First fill only). Copay waiver may not apply to HMO plans.**

Medco participants with specific questions can call 866-662-0274. If Medco is not your pharmacy benefit provider, contact your health plan using the number on the back of your insurance ID card.

## New Programs

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The Trust recognizes the important role health education programs play in managing your overall health and well-being. We are pleased to offer the following new programs to members enrolled in TCN and PPO health plans. Beginning January 1, 2011, members may contact their health plan for details about each of these programs and specific information about program enrollment. Similar programs currently exist for members enrolled in an HMO or Medicare Advantage plans.

Program	Program Description	Benefits To You
<b>Smoking Cessation</b>	<ul style="list-style-type: none"> <li>A comprehensive smoking cessation program that coordinates and utilizes counseling <u>and</u> prescription drug therapy</li> </ul>	<ul style="list-style-type: none"> <li>While the Trust currently covers two prescription drugs (Chantix and Zyban) to help members stop smoking, the most effective programs also include telephonic or web-based behavioral counseling</li> </ul>
<b>Cardiac Rehabilitation</b>	<ul style="list-style-type: none"> <li>Cover cardiac rehab as part of a therapy benefit for all Trust members who have had a qualifying cardiac episode</li> </ul>	<ul style="list-style-type: none"> <li>Cardiac rehab helps with recovery and establishes sustainable behavior modifications</li> </ul>
<b>Diabetes Education</b>	<ul style="list-style-type: none"> <li>Cover comprehensive, American Diabetes Association-approved education classes for newly-diagnosed or out-of-compliance diabetics</li> </ul>	<ul style="list-style-type: none"> <li>Classes taught by certified diabetes educators will cover topics such as proper nutrition and foot care and are designed to help members self-manage their conditions in order to prevent future complications</li> </ul>

## Health Plan/Carrier Changes

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We are pleased to announce that all health plan offerings for 2010, with the exception of Blue Cross Blue Shield of Illinois - HMO, will be available for the 2011 plan year. In addition, we are pleased to offer new plan options for both Medicare and non-Medicare members in St. Louis, Missouri with GHP Coventry and the Mid-Atlantic region (Washington D.C. area) with Kaiser HMO.

In addition, Health Plus of Michigan will be expanding to new zip codes near the Flint and Saginaw areas of Michigan. Priority Health and Blue Care Network are expanding in western Michigan. Similarly, Kaiser will be expanding in northeast Ohio. You will receive information from specific health plans if you are in one of the new or expanded locations. As always, you may call Retiree Health Care Connect to find plan availability in your specific location as well as assist you with plan options if your plan is no longer available.

## Expanded Coverage

The Trust has expanded coverage for the following:

	Coverage	Description	Benefits To You
Effective January 1, 2011	<b>Urgent Care Copay</b> TCN, PPO and HMO	<ul style="list-style-type: none"> <li>A flat \$50 copay for Urgent Care under all Plans (except Medicare Advantage)</li> <li>Not subject to deductible or out-of-pocket maximum</li> </ul>	<ul style="list-style-type: none"> <li>Will reduce the amount of out-of-pocket expenses for members needing urgent care; previously members were subject to deductible and co-insurance for Urgent Care visits</li> </ul>
	<b>Urgent Care Copay</b> Medicare Advantage	<ul style="list-style-type: none"> <li>A \$25 copay for Medicare Advantage plans</li> <li>Not subject to deductible or out-of-pocket maximum</li> </ul>	<ul style="list-style-type: none"> <li>The Urgent Care copay is significantly lower than an Emergency Room (ER) copay and provides a lower-cost alternative for urgent needs</li> </ul>
For TCN and PPO Plans	<b>Nurse Practitioner and Physician Assistant</b>	<ul style="list-style-type: none"> <li>Covered as if seen by a doctor</li> </ul>	<ul style="list-style-type: none"> <li>Provides increased flexibility in coverage when seen by certified medical staff in a variety of care settings</li> <li>Expanded among all Trust member groups</li> </ul>
	<b>Shingles Vaccine</b>	<ul style="list-style-type: none"> <li>Administration and vaccination covered 100% at an in-network physician's office (subject to applicable office visit copay)</li> <li>Administration covered at 85% and vaccination covered at 100% at participating pharmacies (must be billed through health plan)</li> </ul>	<ul style="list-style-type: none"> <li>Recognized for preventive vaccination as recommended by the Advisory Committee on Immunization Practices (ACIP)</li> </ul>

### **Coverage Reduction for non-spouse dependents (child / legal guardian)**

Effective January 1, 2011, Assistive Reproductive Technologies (ARTs) will not be covered for non-spouse dependents. Examples of ARTs include In Vitro Fertilization, Artificial Insemination, and Embryo Transfer. This includes all services related to infertility procedures, testing, treatment procedures, prescription drugs to treat infertility, and sterilization reversals.

## 2011 Coverage and Eligibility Rules for Children

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**New Age Limit and Eligibility Rules for Legal Guardianships** - A dependent covered by a *court-ordered* legal guardianship arrangement is eligible for Trust coverage if the child also meets the marital, residency and dependency tests. Effective January 1, 2011 a legal guardian dependent is no longer eligible for Trust coverage at age 18. Legal guardianship children currently enrolled in Trust coverage who are over the age of 18 can remain on Trust coverage through the end of the month in which they turn age 26.

**Age Limit for Children Extended to Age 26** - The Trust has extended coverage for eligible dependent children to the end of the month in which the child turns age 26 (subject to eligibility rules).

**Eligibility Rules for Children** –Your dependent children must meet ALL of the following FIVE eligibility tests. If any dependent fails to meet the rules for eligibility, you must call Retiree Health Care Connect at 866-637-7555 to cancel the dependent's coverage.

1. **Relationship Test** -- The child must be your natural child, your stepchild (the natural child of your *current* spouse), a child legally adopted by you or your *current* spouse, or a child (under 18) placed with you for legal adoption.
2. **Age Test** – The child is eligible up to the end of the month in which the child turns age 26 (*new extended age limit*). A *child* deemed by the Trust (upon application) to be permanently and totally disabled prior to the end of the month in which the child turns age 26 can continue Trust coverage beyond the normal age limit.
3. **Marital Status Test** – The child cannot be married.
4. **Residency Test** – The child must live with you. This test is waived if you have a court order requiring you to provide health care for the child.
5. **Dependency Test** – You must be able to claim an exemption for the child on your federal income tax (whether you file or not). This test is waived if you have a court order requiring you to provide health care for the child.

### Updating your Information

**The staff at the Trust is in the process of verifying all retiree and dependent information received during the transition from the autos. It is important to keep your dependent information up-to-date at Retiree Health Care Connect. Beginning in 2011, the Trust will begin random dependent audits since the Trust has a fiduciary responsibility to make sure all retirees and dependents are eligible.**

You can access your benefit information at any time by logging onto Retiree Health Care Connect (RHCC) online at <http://resources.hewitt.com/rhcc/>

You can use the RHCC website to:

- Review your current coverage
- Add or remove dependents from coverage
- Find health plan options in your area
- Sign up for automatic pension deduction for your monthly Trust contributions
- Update your phone number and email address and more

# Learn more about Your Trust via the Web

The Trust is pleased to announce the launch of the UAW Retiree Medical Benefits Trust website. Go to [www.uawtrust.org](http://www.uawtrust.org) for information about the Trust, its leadership structure, news, and specific information about member benefits. You can browse the site to get specific information about medical and prescription drug benefits, eligibility and Medicare or download the Summary Plan Description (SPD), Schedule of Benefits and other communications from the Trust. Check back in the months ahead as we continue to update the website with helpful information and links for our retiree members.



## Legislative and Regulatory Notices

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### Early Retiree Reinsurance Program

In compliance with government regulations, a Notice about the Early Retiree Reinsurance Program (“ERRP”) appears below. The Early Retiree Reinsurance Program is one of the programs developed through the health care reform legislation passed last year in Washington. The Notice talks about what plan sponsors may do under the Early Retiree Reinsurance Program; the Trust Committee is your plan sponsor.

#### **NOTICE ABOUT THE EARLY RETIREE REINSURANCE PROGRAM**

You are a plan participant, or are being offered the opportunity to enroll as a plan participant, in an employment-based health plan that is certified for participation in the Early Retiree Reinsurance Program. The Early Retiree Reinsurance Program is a Federal program that was established under the Affordable Care Act. Under the Early Retiree Reinsurance Program, the Federal government reimburses a plan sponsor of an employment-based health plan for some of the costs of health care benefits paid on behalf of, or by, early retirees and certain family members of early retirees participating in the employment-based plan. By law, the program expires on January 1, 2014.

Under the Early Retiree Reinsurance Program, your plan sponsor may choose to use any reimbursements it receives from this program to reduce or offset increases in plan participants’ premium contributions, co-payments, deductibles, co-insurance, or other out-of-pocket costs. If the plan sponsor chooses to use the Early Retiree Reinsurance Program reimbursements this way, you, as a plan participant, may experience changes that may be advantageous to you, in your health plan coverage terms and conditions, for so long as the reimbursement under this program are available and this plan sponsor chooses to use the reimbursement for this purpose.

A plan sponsor may also use the Early Retiree Reinsurance Program reimbursements to reduce or offset increases in its own costs for maintaining your health benefits coverage, which may increase the likelihood that it will continue to offer health benefits coverage to its retirees and their families.

### Privacy Notice

In compliance with government regulations, an updated Privacy Notice has also been included in this mailing.