Open Enrollment Is Coming Soon

The Open Enrollment Period to Sign Up for 2021 Health Benefit Plan Coverage Will Take Place in October

Open Enrollment for Rocky Mountain UFCW Unions & Employers Health Benefit Plan coverage in 2021 will take place from October 1-15 this year.

Open Enrollment is your opportunity to review your current benefit coverage and elect the coverage you want for next year. You can start, continue, change or end your coverage, add or remove dependents, or update your life insurance beneficiary designation. Your options will be explained—what plans are available and what you need to do—in the enrollment packet you will receive in the mail.

The elections you make during Open Enrollment will be effective January 1, 2021. Your next opportunity to make changes will be during next year’s Open Enrollment, for coverage effective January 1, 2022 (subject to your HIPAA special enrollment rights).

- **Review your current coverage and then make your decisions for 2021.** The Plan will send you a letter that will come before your enrollment packet. The letter will show your current coverage and your covered dependents. Review the letter before you decide on your 2021 coverage. If you notice that one of your dependents who has coverage under Kaiser is not listed in the letter, please contact the Plan Office immediately. Unless you notify the Plan Office to the contrary, you are certifying that the dependents listed in the letter qualify as eligible dependents under the Plan.

- **If you are enrolling for the first time or want to change your coverage or the dependents you cover, you must enroll during Open Enrollment.**

- **If you do not want to make any changes to your coverage election of the PPO or HMO option and you do not want to make any changes to the dependents you cover, you only need to complete the steps related to verifying your spouse’s coverage (see below), if you are covering your spouse. If you are not covering your spouse, you don’t need to do anything.** The Plan will automatically continue your current coverage option and your weekly employee deductions in 2021. Your coverage will be subject to the terms and conditions, including any modifications to the Plan Options, approved by the Trustees and effective January 1, 2021.

- **Confirm your life insurance beneficiary designation.** Your designated beneficiary is the last named beneficiary on file with the Plan Office. You may change your beneficiary at any time by contacting the Plan Office or visiting the Plan’s web site. Once you designate or update a beneficiary, the designation is effective as of the date the notice is provided. If you do not designate a beneficiary or your beneficiary is not living at the time of your death, payment will be made in accordance with the provisions of the contract with the insurer. Remember to keep your beneficiary designation current by confirming or updating it each year during enrollment, or after a life event such as marriage, divorce, or the birth of your child.

Make sure that the Plan Office has your current address on file so you receive your enrollment materials on a timely basis. If you have any questions, please call the Plan Office at 303-430-9334 or 800-527-1647.

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Are You Enrolling Your Spouse for Plan Coverage as a Dependent?

If you want to continue coverage for your spouse, you must complete a Spousal Verification Form (included with your enrollment packet). If your spouse was not enrolled in the Plan in 2020 but you will be enrolling your spouse for Plan coverage in 2021, you must complete an Enrollment Form and the
Spousal Verification Form included with your enrollment packet.

Please remember that you must verify your spouse’s eligibility for other coverage, every year, regardless of whether your spouse is currently or was ever covered by the Plan, if you want your spouse to have coverage through the Plan in the following year.

If your spouse is eligible for coverage under his/her employer-sponsored plan, but elects not to enroll in that plan, an additional $23.08 weekly co-premium deduction is currently required. To avoid this additional weekly co-premium deduction, your spouse must be enrolled in his/her employer-sponsored plan. Otherwise, your weekly co-premium deduction will include this additional $23.08. This amount will continue to be deducted until your spouse enrolls in the employer-sponsored plan available to him/her or your spouse is no longer working or the employer is no longer providing coverage.

Complete a Health Assessment—and Reduce Your Monthly Co-Premiums for 2021!

If you complete a Health Assessment before December 4, 2020, you will receive a $5 monthly reduction in your employee co-premium effective January 1, 2021, for the entire year. If you and your covered spouse both complete Health Assessments, you will receive a $10 monthly reduction.

The co-premium reduction is offered to Active participants and their covered spouses who elect 2021 coverage under either the PPO or HMO Medical Plan Option offered through the Health Benefit Plan and who complete a Health Assessment on or before December 4, 2020.

Remember: If you do not complete a Health Assessment, you will pay the full co-premium effective January 1, 2021—even if you completed a Health Assessment and your co-premium was reduced in 2020.

Partial completion of the Health Assessment will not result in the co-premium reduction.

Pre-65 and non-Medicare retirees may complete Health Assessments, but are not eligible for premium reductions.

Look for more information in your Enrollment Guide.

Flu Season is Coming—and We’ve Got You Covered!

FREE flu shots are available at Participating Network Pharmacies for eligible participants in the UnitedHealthcare/UMR PPO Medical Plan with prescription drug coverage through Express Scripts.

- Get your flu shot at an Albertsons, City Market, King Soopers or Safeway pharmacy, and the pharmacy will submit a claim for you.
- Get your flu shot at other Participating Network Pharmacies, and you may need to pay for your shot and then submit a paper claim form to the Plan Office for reimbursement.

For more information, visit www.express-scripts.com or call 844-863-5330. You can also call the Plan Office at 303-430-9334 or 800-527-1647.

NOTE: For covered participants 18 and over, flu shots received at a Participating Network Pharmacy are covered 100%, but are not covered at all when received at a doctor’s office. For those under 18, flu shots are covered 100% if they are received at a Network doctor’s office or at a Participating Network Pharmacy. For more information, visit www.umr.com or call 800-826-9781.

If you have coverage through the Kaiser Permanente HMO Plan, go to kp.org or call 800-632-9700 or 303-338-3800 for more information about flu shots.