



SOLANO AND NAPA COUNTIES
ELECTRICAL WORKERS BENEFIT FUNDS



Date: May 2015
To: Kaiser Active and Non-Medicare Retiree Participants and Dependents (including COBRA beneficiaries)
From: Board of Trustees
Subject: Summary of Benefits and Coverage (SBC)

**This information is VERY IMPORTANT to you and your dependents.
Please take the time to read it carefully.**

Attached you will find a document called a **Summary of Benefits and Coverage**, commonly referred to as an “SBC.” This SBC provides a brief overview of the medical plan benefits provided by **Kaiser** and the self-funded dental plan benefits provided by the Trust Fund. We have included both the active plan SBC as well as the non-Medicare retiree plan SBC. You will want to review this and share it with your family members who enroll for coverage.

As required by law, insurance companies and group health plans like ours are providing plan participants with a consumer-friendly SBC as a way to help understand and compare medical benefits.

What the SBC Contains

Each SBC contains concise medical plan information, in plain language, about benefits and coverage, including, what is covered, what you need to pay for various benefits, what is not covered and where to go for more information or to get answers to questions. Government regulations are very specific about the information that can and cannot be included in each SBC. Plan sponsors are limited in their ability to customize the SBC. An SBC includes: a health plan comparison tool called “Coverage Examples”, a link to a “Glossary” of common terms used in describing health benefits, and Websites and toll-free phone numbers you can contact if you have questions or need assistance with benefits.

When You Will Receive an SBC

The SBC will be provided to you at important points in the enrollment process, such as when you apply for coverage, at the beginning of each new plan year, and upon your request. Distribution of the SBC at these various times is required by the Affordable Care Act (ACA) and regulations adopted to carry the law into effect.

60-Day Notice for Material Modification of Plan Benefits

If a material change is made to a medical plan during the plan year that is not reflected in the most recent SBC, a notice will be provided to you at least 60 days before the effective date of the change. A material change is any change that would be considered by an average participant to be an important enhancement or reduction in benefits. This 60-day notice applies only to changes that become effective during the plan year. Changes made at the beginning of a new plan year do not require 60-day advance notice.

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Please keep this important notice with your Plan Document/Summary Plan Description (SPD) for easy reference to all Plan provisions. Should you have any questions, please contact Kaiser at (800) 278-3296 for medical benefits and the Fund Office at 1-866-544-9880 for dental benefits.