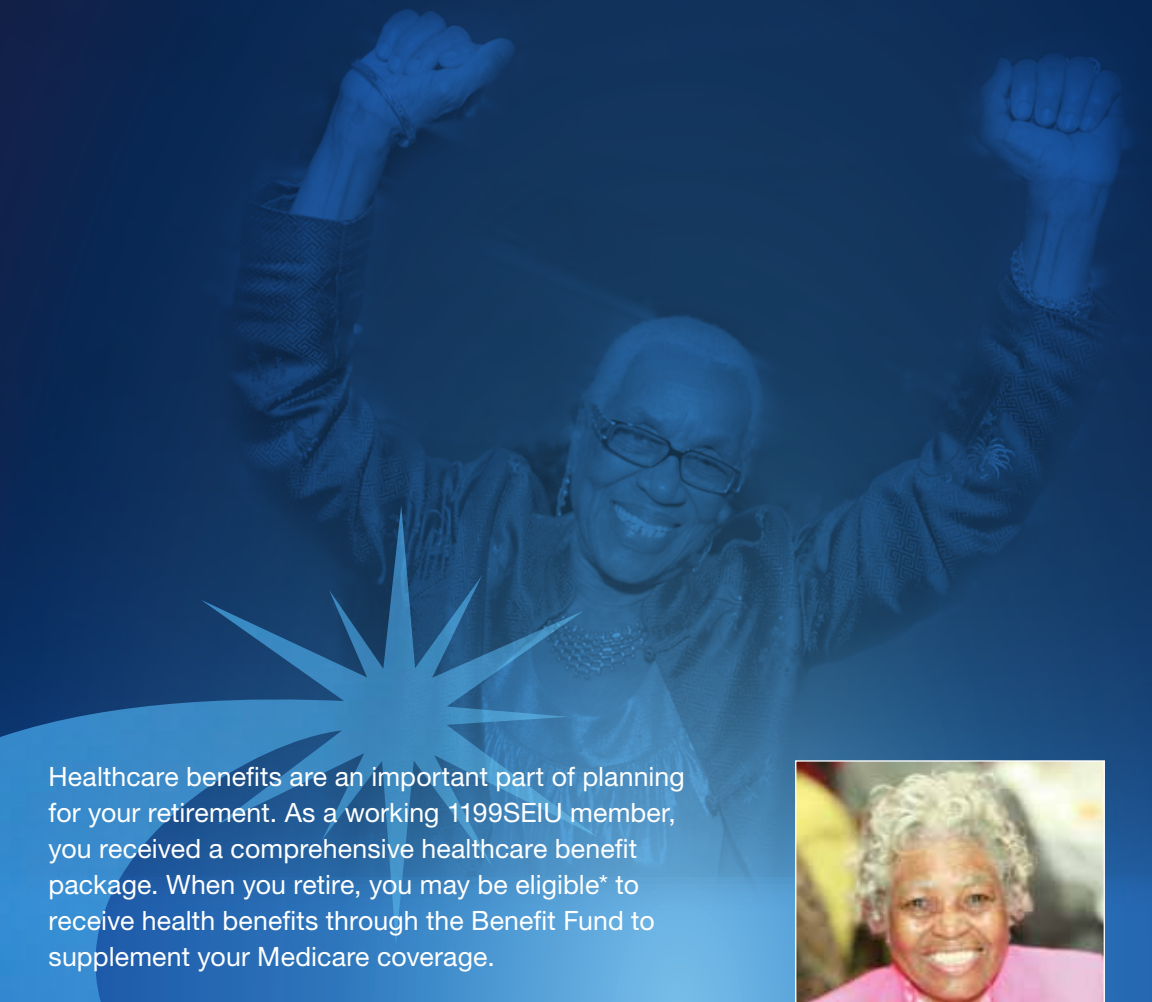




An
OVERVIEW
of Retiree Health Benefits

FOR 1199SEIU NATIONAL BENEFIT FUND RETIREES
LIVING OUTSIDE NEW YORK CITY'S FIVE BOROUGHS, WESTCHESTER,
NASSAU OR SUFFOLK COUNTY, OR DESIGNATED COUNTIES IN FLORIDA



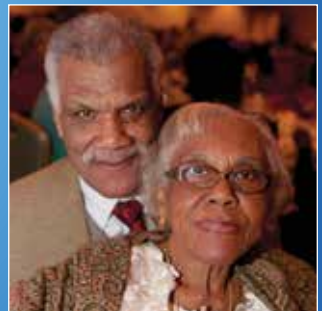
Healthcare benefits are an important part of planning for your retirement. As a working 1199SEIU member, you received a comprehensive healthcare benefit package. When you retire, you may be eligible* to receive health benefits through the Benefit Fund to supplement your Medicare coverage.

MEDICARE AND YOUR 1199SEIU BENEFITS

Your Benefit Fund coordinates your health coverage with Medicare. If you are eligible for Medicare, you must enroll in Medicare Part A, Medicare Part B and either the 1199SEIU Humana Medicare Employer HMO Plan **or** the 1199SEIU Benefit Fund's Medicare Part D Prescription Drug Program in order to receive your supplemental Fund benefits.

The coverage described in this Overview is for members who retire with a Wage Class I level of benefits. Members who retire with a Wage Class II or a Wage Class III level of benefits should call the Benefit Fund at (800) 575-7771 for information on their benefits.

**See eligibility requirements on page 11*



AGE 65 WITH 10 YEARS OF SERVICE FOR RETIREES LIVING IN DESIGNATED COUNTIES IN FLORIDA

1199SEIU Humana Medicare Employer HMO Plan

If you retire at or after age 65 with Wage Class I benefits and at least 10 years of service, you'll receive your health coverage through the 1199SEIU Humana Medicare Employer HMO Plan. To get these benefits, you must be enrolled in both Medicare Part A (hospital) and Medicare Part B (medical). If you do not wish to enroll in the 1199SEIU Humana Plan, you must enroll in another Medicare Part D Prescription Drug Plan or Medicare Advantage Plan in order to receive supplemental retiree health benefits through the Benefit Fund.

HOSPITAL INPATIENT CARE

- Covered in full

MEDICAL SERVICES

- Primary care: \$5 co-pay per visit
- Specialists: \$15 co-pay per visit
- Surgery and anesthesia: Covered in full

EMERGENCY DEPARTMENT

- \$50 co-pay (waived if you are admitted)

AMBULANCE

- No co-pay for Emergency and non-Emergency ambulance service
- Limited to Medicare-covered transportation

AMBULATORY (OUTPATIENT) SURGERY

- \$50 facility co-pay

PRESCRIPTION DRUGS

- No co-pay for generic, preferred brand and specialty drugs
- Non-preferred brand drugs: 25% co-insurance with cap of \$75 for 30-day supply
- Use Humana's mail-order program or designated Participating Retail Pharmacies for 90-day supplies of maintenance medications
- Use Participating Retail Pharmacies for short-term prescriptions

SKILLED NURSING CARE

- Days 1-100: No co-pay

FOOT CARE (PODIATRY SERVICES)

- \$15 co-pay per visit
- Includes appliances, devices or shoes for correction or relief of minor ailments and diabetes-related nerve damage and certain conditions
- Routine foot care is not covered

CHIROPRACTIC CARE

- \$15 co-pay per visit
- Manipulation of the spine to correct a subluxation (when one or more bones of your spine move out of position)

OTHER BENEFITS

VISION CARE

- Provided as a supplemental benefit by the Fund
- One eye exam per calendar year: \$15 co-pay
- Fund will provide one pair of glasses or one order of contact lenses once every two years from a Participating Optical Provider

HEARING AIDS

- Provided as a supplemental benefit by the Fund
- Fund will provide one pair of hearing aids (up to the Fund's allowance) once every three years from a Participating Hearing Aid Provider

LIFE INSURANCE

When you retire, the life insurance benefit you had as a working member is reduced by 20 percent. Each year after that, it is reduced by another 20 percent of the original amount, to a minimum benefit of \$1,250. This benefit does **not** include coverage for accidental death & dismemberment. Your spouse is **not** eligible for this benefit.

BURIAL

If available, you are covered for a free burial plot.

SPOUSE COVERAGE

If your spouse is not eligible for Medicare, he or she is eligible for the Early Retiree Dental Plus Plan or the Early Retiree Prescription Plan (see "Age 55 Through 64 with 10 Years of Service" on page 8). When your spouse becomes eligible for Medicare, or if your spouse is already eligible for Medicare when you retire, he or she is eligible for the same benefits as you, except life insurance, when he or she enrolls in the 1199SEIU Humana Plan.

MEDICARE PREMIUM

You will be reimbursed for 50 percent of the standard Medicare Part B premium. To get this benefit, you must file a claim form with the Benefit Fund once each quarter but no later than two years after the premium payment.

Remember to use Humana Participating Physicians and Pharmacies! For more information, call Humana at (800) 733-9064.

For information on supplemental benefits provided by the Benefit Fund, call (800) 575-7771.

AGE 65 WITH 10 YEARS OF SERVICE

FOR RETIREES LIVING OUTSIDE NEW YORK CITY'S FIVE BOROUGHES, WESTCHESTER, NASSAU OR SUFFOLK COUNTY, OR DESIGNATED COUNTIES IN FLORIDA

1199SEIU Benefit Fund's Medicare Part D Prescription Drug Program

You are eligible for the benefits described below when you retire at or after age 65 with Wage Class I benefits and at least 10 years of service. To get these benefits, you must be enrolled in both Medicare Part A (hospital) and Medicare Part B (medical). **Members who are eligible for Medicare and live outside New York City's five boroughs, Westchester, Nassau or Suffolk County, or designated counties in Florida, will only be able to receive supplemental retiree health benefits through the Benefit Fund if they are enrolled in the Fund's Medicare Part D Prescription Drug Program.** When your spouse becomes eligible for Medicare, he or she must enroll in this program in order to receive supplemental health benefits through the Fund.

You may not be required to enroll in the Fund's Medicare Part D Prescription Drug Program if you are already enrolled in another Medicare Part D Prescription Drug Plan or Medicare Advantage Plan. However, you will be responsible for the full cost of your Medicare Part D premium, if any.

HOSPITAL INPATIENT CARE

Medicare is your **primary** insurer and must pay for your care first. If Medically Necessary, the Benefit Fund covers:

- Your Medicare Part A first-day deductible
- Your Medicare Part A co-insurance and reserve days
- Additional coverage up to a total of 365 days per year after you have exhausted your Medicare Part A coverage

ANESTHESIA

Medicare is your **primary** insurer and must pay for your care first. The Benefit Fund pays the difference between what Medicare pays and the Fund's Schedule of Allowances.

PRESCRIPTION DRUGS

There is no out-of-pocket cost to you if you comply with the Benefit Fund's Prescription Program:

- Mandatory use of generic drugs, whenever possible
- Order 90-day supplies of maintenance medications using *The 1199SEIU 90-Day Rx Solution*
- Use Participating Retail Pharmacies for short-term prescriptions
- Prior authorization required for specific medications
- Ask your doctor to prescribe only medications on the Fund's Preferred Drug List

VISION CARE

You are covered once every two years for:

- One eye exam
- One pair of glasses or one order of contact lenses

HEARING AIDS

You are covered once every three years for one pair of hearing aids.

PRIVATE-DUTY SKILLED NURSING CARE AT HOME

Private-duty skilled nursing care at home will be covered by the Benefit Fund if it is authorized in advance, Medically Necessary and in compliance with the Fund's nursing protocol. Benefits are payable in accordance with the Fund's Schedule of Allowances up to the maximum benefits available and will be coordinated with Medicare.

OTHER BENEFITS

OUTPATIENT SERVICES (MEDICARE PART B)

Medicare is your **primary** insurer and must make the first payment towards the following:

- Durable medical equipment
- Medical supplies
- Physical, occupational or speech therapy
- Facility charges related to ambulatory (outpatient) surgery
- Emergency ambulance service
- Hemodialysis/Chemotherapy drugs

The Benefit Fund pays the difference between what Medicare pays and the Fund's Schedule of Allowances.

LIFE INSURANCE

When you retire, the life insurance benefit you had as a working member is reduced by 20 percent. Each year after that, it is reduced by another 20 percent of the original amount, to a minimum benefit of \$1,250. This benefit does **not** include coverage for accidental death & dismemberment. Your spouse is **not** eligible for this benefit.

BURIAL

If available, you are covered for a free burial plot.

SPOUSE COVERAGE

If your spouse is not eligible for Medicare, he or she is eligible for the Early Retiree Dental Plus Plan or the Early Retiree Prescription Plan (see "Age 55 Through 64 with 10 Years of Service" on page 8). When your spouse becomes eligible for Medicare, or if your spouse is already eligible for Medicare when you retire, he or she is eligible for the same benefits as you, except life insurance, when he or she enrolls in the Benefit Fund's Medicare Part D Prescription Drug Program.

MEDICARE PREMIUM

You will be reimbursed for 50 percent of the standard Medicare Part B premium. To get this benefit, you must file a claim form with the Benefit Fund once each quarter but no later than two years after the premium payment.

For more information, call the Benefit Fund at (800) 575-7771.

AGE 62 THROUGH 64 WITH 20 YEARS OF SERVICE

FOR RETIREES LIVING OUTSIDE NEW YORK CITY'S FIVE
BOROUGHES, WESTCHESTER, NASSAU OR SUFFOLK
COUNTY, OR DESIGNATED COUNTIES IN FLORIDA

HOSPITAL INPATIENT CARE

Your coverage includes:

- Up to 365 days per year
- Semi-private room and board
- Medically Necessary services
- Up to 365 days per year for inpatient mental health
- Up to 30 days per year for inpatient physical rehabilitation when provided in an acute care facility

You must call 1199SEIU CareReview at (800) 227-9360 before going into the hospital or within 48 hours of an Emergency Department admission.

MEDICAL SERVICES

Based on the Benefit Fund's Schedule of Allowances, the benefit covers:

- Doctor visits
- Lab and X-rays
- Surgery and anesthesia
- Other medical benefits requiring prior authorization

EMERGENCY DEPARTMENT

Must be within 72 hours of an accident or the onset of a sudden and serious illness.

AMBULATORY (OUTPATIENT) SURGERY

You must call 1199SEIU CareReview at (800) 227-9360 before surgery.

PRESCRIPTION DRUGS

There is no out-of-pocket cost to you if you comply with the Benefit Fund's Prescription Program:

- Mandatory use of generic drugs, whenever possible
- Order 90-day supplies of maintenance medications using *The 1199SEIU 90-Day Rx Solution*
- Use Participating Retail Pharmacies for short-term prescriptions
- Prior authorization required for specific medications
- Ask your doctor to prescribe only medications on the Fund's Preferred Drug List

FOOT CARE

- Up to 15 treatments per year for routine foot care

CHIROPRACTIC CARE

- Up to 12 treatments per year

VISION CARE

You are covered once every two years for:

- One eye exam
- One pair of glasses or one order of contact lenses

HEARING AIDS

You are covered once every three years for one pair of hearing aids.

LIFE INSURANCE

When you retire, the life insurance benefit you had as a working member is reduced by 20 percent. Each year after that, it is reduced by another 20 percent of the original amount, to a minimum benefit of \$1,250. This benefit does **not** include coverage for accidental death & dismemberment. Your spouse is **not** eligible for this benefit.

BURIAL

If available, you are covered for a free burial plot.

SPOUSE COVERAGE

Your spouse has the same coverage you have, except life insurance, until you become eligible for Medicare. At that time, if your spouse is still not eligible for Medicare, he or she will be eligible for the Early Retiree Dental Plus Plan or the Early Retiree Prescription Plan (see “Age 55 Through 64 with 10 Years of Service” on page 8). When your spouse becomes eligible for Medicare, or if your spouse is already eligible for Medicare when you retire, he or she is eligible for the same benefits as you, except life insurance, when he or she enrolls in either the 1199SEIU Humana Medicare Employer HMO Plan **or** the 1199SEIU Benefit Fund’s Medicare Part D Prescription Drug Program, depending on where you live (see “Age 65 with 10 Years of Service” on pages 2 and 4).

NOTE: If you retire between the ages of 62 and 64 with Wage Class I benefits and at least 20 years of service, this health benefit package is available to you until you become eligible for Medicare. Then, you will be eligible for the same health benefit package as members who retire at age 65 (see “Age 65 with 10 Years of Service” on pages 2 and 4), and you must enroll in Medicare Part A, Medicare Part B and either the 1199SEIU Humana Medicare Employer HMO Plan **or** the 1199SEIU Benefit Fund’s Medicare Part D Prescription Drug Program (depending on where you live), to receive those benefits. Your spouse will need to do the same when he or she becomes eligible for Medicare.

AGE 55 THROUGH 64 WITH 10 YEARS OF SERVICE

FOR RETIREES LIVING OUTSIDE NEW YORK CITY'S FIVE BOROUGHES, WESTCHESTER, NASSAU OR SUFFOLK COUNTY, OR DESIGNATED COUNTIES IN FLORIDA

You are eligible for coverage for the Early Retiree Dental Plus Plan unless you select, **on a one-time only basis**, coverage for the Early Retiree Prescription Plan.

OPTION #1: EARLY RETIREE DENTAL PLUS PLAN

- A dental benefit of up to \$3,000 per year
- A hospital indemnity plan, which pays \$200 per day, up to 10 days per hospital stay
- A vision benefit, which includes one eye exam and one pair of glasses or one order of contact lenses every two years

OPTION #2: EARLY RETIREE PRESCRIPTION PLAN

- Prescription drugs
- One pair of hearing aids every three years
- A vision benefit, which includes one eye exam and one pair of glasses or one order of contact lenses every two years

SPOUSE COVERAGE

Your spouse has the same coverage you have, until or unless he or she is eligible for Medicare.

Please consult the Summary Plan Description (SPD) for a full description of these benefits or call the Benefit Fund at (800) 575-7771 for more information.

NOTE: If you retire between the ages of 60 and 64 with Wage Class I benefits and at least 10 years of service, the Early Retiree plan that you choose is available to you until you become eligible for Medicare. Then, you will be eligible for the same health benefit package as members who retire at age 65 (see “Age 65 with 10 Years of Service” on pages 2 and 4), and you must enroll in Medicare Part A, Medicare Part B and either the 1199SEIU Humana Medicare Employer HMO Plan **or** the 1199SEIU Benefit Fund’s Medicare Part D Prescription Drug Program (depending on where you live), to receive those benefits. Your spouse will need to do the same when he or she becomes eligible for Medicare.

If you retire between the ages of 55 and 59 with Wage Class I benefits and at least 10 years of service, you and your spouse will only remain eligible for the Early Retiree plan that you choose, even after you or your spouse become eligible for Medicare.

ANY AGE – DUE TO PERMANENT DISABILITY WITH 10 YEARS OF SERVICE

FOR RETIREES LIVING OUTSIDE NEW YORK CITY'S FIVE BOROUGHES, WESTCHESTER, NASSAU OR SUFFOLK COUNTY, OR DESIGNATED COUNTIES IN FLORIDA

HOSPITAL INPATIENT CARE

Your coverage includes:

- Up to 365 days per year
- Semi-private room and board
- Medically Necessary services
- Up to 365 days per year for inpatient mental health
- Up to 30 days per year for inpatient physical rehabilitation when provided in an acute care facility

You must call 1199SEIU CareReview at (800) 227-9360 before going into the hospital or within 48 hours of an Emergency Department admission.

MEDICAL SERVICES

If you receive a disability pension on or after October 1, 1998, based on the Benefit Fund's Schedule of Allowances, the benefit covers:

- Doctor visits
- Lab and X-rays
- Surgery and anesthesia
- Medical benefits

EMERGENCY DEPARTMENT

Must be within 72 hours of an accident or the onset of a sudden and serious illness.

AMBULATORY (OUTPATIENT) SURGERY

You must call 1199SEIU CareReview at (800) 227-9360 before surgery.

PRESCRIPTION DRUGS

There is no out-of-pocket cost to you if you comply with the Benefit Fund's Prescription Program:

- Mandatory use of generic drugs, whenever possible
- Order 90-day supplies of maintenance medications using *The 1199SEIU 90-Day Rx Solution*
- Use Participating Retail Pharmacies for short-term prescriptions
- Prior authorization required for specific medications
- Ask your doctor to prescribe only medications on the Fund's Preferred Drug List

FOOT CARE

- Up to 15 treatments per year for routine foot care

CHIROPRACTIC CARE

- Up to 12 treatments per year

VISION CARE

You are covered once every two years for:

- One eye exam
- One pair of glasses or one order of contact lenses

HEARING AIDS

You are covered once every three years for one pair of hearing aids.

LIFE INSURANCE

When you retire, the life insurance benefit you had as a working member is reduced by 20 percent. Each year after that, it is reduced by another 20 percent of the original amount, to a minimum benefit of \$1,250. This benefit does **not** include coverage for accidental death & dismemberment. Your spouse is **not** eligible for this benefit.

BURIAL

If available, you are covered for a free burial plot.

SPOUSE COVERAGE

Your spouse has the same coverage you have, except life insurance, until or unless he or she is eligible for Medicare.

NOTE: If you receive a disability pension at any age from the 1199SEIU Health Care Employees Pension Fund with Wage Class I benefits and at least 10 years of service, this health benefit package is available to you until you become eligible for Medicare. Then, you will be eligible for the same health benefit package as members who retire at age 65 (see “Age 65 with 10 Years of Service” on pages 2 and 4), and you must enroll in Medicare Part A, Medicare Part B and either the 1199SEIU Humana Medicare Employer HMO Plan **or** the 1199SEIU Benefit Fund’s Medicare Part D Prescription Drug Program (depending on where you live), to receive those benefits. Your spouse will need to do the same when he or she becomes eligible for Medicare.

PLAN AHEAD FOR RETIREMENT

Retirement is a major change in your life. It is important to know and understand all the factors that will affect your pension and healthcare benefits. Even though you may be vested in the 1199SEIU Health Care Employees Pension Fund after five years, you need to retire with Wage Class I benefits and at least 10 years of Pension Fund Credited Service to be eligible for any retiree health benefits.

TALK TO A PENSION COUNSELOR

At least three to six months before you plan to retire, you should make an appointment with a Pension Counselor, who will help you review your options. For more information, call the Pension Fund at (800) 575-7771, or visit our website at www.1199SEIUBenefits.org.

ELIGIBILITY

The Benefit Fund offers retirees several health benefit packages. To be eligible for the packages listed in this Overview, you must be a Wage Class I active member covered by the Fund immediately before you retire, and you must be receiving a pension from the 1199SEIU Health Care Employees Pension Fund. The benefit package for which you are eligible is based on your age and your number of years of service upon retirement.

Your benefits as a retired member cannot exceed the coverage you had just before you retired. For example, if you did not have prescription coverage right before you retired, you are not covered for prescription benefits after you retire; or, if your spouse was not covered while you were a working member, you cannot enroll your spouse after you retire. If you retired before October 1, 1998, your spouse's benefits will stop 30 days after your death. If you retired on or after October 1, 1998, your spouse will continue to be eligible for retiree health benefits after your death.

Supplemental retiree health benefits are available for you and your eligible spouse only. Dependent children are not covered for these benefits regardless of their age.

If your pension benefit is suspended or stops for any reason (including your return to work or your loss of entitlement to a Social Security Disability Award), you will no longer be eligible for retiree health benefits.

LEGEND

Member	You, the member
Spouse	Your spouse, if eligible
Schedule of Allowances	Fee schedules used to determine the amount allowed or paid by the Plan for a service. Schedules are subject to change.
SPD	Summary Plan Description

IMPORTANT PHONE NUMBERS

General Member Services

(800) 575-7771

1199SEIU CareReview

(800) 227-9360

Medicare

(800) 633-4227

(800) 486-2048 (TTY)

Humana

(800) 733-9064

Social Security

(800) 772-1213

(800) 325-0778 (TTY)

DISCLAIMER

*This document is **NOT** the official Summary Plan Description (SPD) of the 1199SEIU National Benefit Fund. Please consult the SPD for a full description of your Fund benefits, including limitations and exclusions. In case of any conflict between this document and the SPD, the terms of the SPD shall govern. Members can request an SPD by calling the Member Services Department at (646) 473-9200. Outside New York City, call (800) 575-7771.*

The 1199SEIU Benefit Funds comply with applicable federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability or sex.

The 1199SEIU National Benefit Fund believes its health plans are “grandfathered health plans” under the Patient Protection and Affordable Care Act (the “Affordable Care Act”). A grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted in 2010. Being a grandfathered health plan means that this plan may not include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for an external review process for claims appeals. However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, for example, the elimination of lifetime limits on benefits. The Wage Class III plan is not a grandfathered health plan. Questions regarding which protections apply and which protections do not apply to a grandfathered health plan can be directed to the Plan Administrator at (646) 473-9200. You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at (866) 444-3272 or www.dol.gov/ebsa/healthreform. This website has a table summarizing which protections do and do not apply to grandfathered health plans.

1199SEIU NATIONAL BENEFIT FUND

(800) 575-7771

www.1199SEIUBenefits.org

SEPTEMBER 2018