

September 2018

Notice of Benefit Changes: Effective January 1, 2019

The following changes to your benefits will take effect on January 1, 2019. Please keep this notice with your copy of the Plan’s Summary Plan Description (SPD). For more information please refer to the SPD, available at www.sagafttraplans.org/healthspd. Changes outlined in this notice include:

1. Annual increase in minimum requirements for eligibility.
2. Annual increase in earnings required to earn a Retiree Health Credit.
3. Increase in comprehensive out-of-pocket maximum for in-network services.

1. Annual increase in minimum requirements for eligibility.

Per page 9 of the SPD, the minimum requirements for earned eligibility will increase by 2% each year, with the exception of Plan II Age and Service earnings requirement, which increased by more than 2% in 2018 with no additional increases scheduled through 2020.

For eligibility beginning on or after January 1, 2019, the minimum earnings thresholds will increase as follows:

Eligibility Type	Current Eligibility Requirements	For Eligibility Beginning on or after January 1, 2019
Plan I	\$33,660	\$34,333
Plan II	\$17,340	\$17,687
Plan II – Age and Service*	\$13,000	\$13,000
Plan II – Alternative Days	80 days	82 days

*Note: Although the Age and Service eligibility requirement is scheduled to remain at \$13,000 through 2020, the Plan reserves the right to amend the eligibility requirements at any time.

2. Annual increase in earnings required to earn a Retiree Health Credit.

A retiree health credit is credit toward eligibility for future senior performers coverage. Credits are earned through covered employment during a calendar year. Per page 25 of the SPD, earnings required to earn a Retiree Health Credit will increase by \$1,000 each year, through 2022. Effective January 1, 2019 the minimum covered earnings required to earn a Retiree Health Credit will be \$24,000.

3. Increase in comprehensive out-of-pocket maximum for in-network services.

In accordance with the Affordable Care Act, the comprehensive out-of-pocket maximum for in-network services will increase on January 1, 2019 by \$550 per person, from \$7,350 to \$7,900, and will increase by \$1,100 per family, from \$14,700 to \$15,800. The comprehensive out-of-pocket maximum is the maximum amount you could pay in any calendar year – including all copays, coinsurance and deductibles – for hospital, medical, prescription drugs, mental health and substance abuse services from in-network providers under the Plan. For more information please see page 50 of the Summary Plan Description.

Women's Health and Cancer Rights Act of 1998 Annual Notice

As required by the Women's Health and Cancer Rights Act of 1998, the Health Plan provides benefits for mastectomy-related services including reconstruction and surgery to achieve symmetry between the breasts, prostheses, and complications resulting from a mastectomy (including lymphedema). For more information contact the Plan at (800) 777-4013.

Notice of Availability of HIPAA Privacy Notice

The federal Health Insurance Portability and Accountability Act of 1996 (HIPAA) requires periodic reminders of your right to receive a copy of the Plan's HIPAA Privacy Notice. This notice explains how your private health insurance information is used by the Plan and your rights under HIPAA. You can find the Plan's HIPAA Privacy Notice on the Plan's website, www.sagaftplans.org, or you may request a copy by contacting the Plan.