

TEAMSTERS MULTI-BENEFIT TRUST

Administered By: Benefit Programs Administration
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www.teamstersmultibenefittrust.org

December 2023

TO: **Eligible Participants**
FROM: **Board of Trustees**
RE: **Notice of a Special Enrollment Opportunity through January 31, 2024**

You were previously notified that the Teamsters Multi-Benefit Trust ("Plan") terminated its group contract with Kaiser Health Plan ("Kaiser") and that effective March 1, 2024, United Healthcare Medical Plan ("UHC") would replace Kaiser as a Plan option. Because of this change, you are being given a Special Enrollment Opportunity through **January 31, 2024** to make changes to your Plan coverage.

[Para recibir esta información en español, llame a la oficina Administrativa \(888\) 410-1756 .](#)

If you are currently enrolled in Kaiser and you fail to actively enroll in a new plan by January 31, 2024, you will be automatically enrolled in UHC and automatically assigned a Primary Care Provider ("PCP"), effective March 1, 2024. If you enroll in UHC by January 31, 2024, you will be able to select your PCP. **If you would like to change your PCP within 30 days of initial enrollment, please call UHC at 1-888-641-9142.**

The Plan allows you to waive Plan coverage in accordance with Plan rules during Open Enrollment. If you are currently eligible for coverage but wish to waive Plan coverage during this Special Enrollment period, please contact the Administrative to request a waiver of coverage form.

If your current collective bargaining agreement provides a second medical plan option in addition to Kaiser, you may change your selection during this Special Enrollment period as follows, even if you are not currently enrolled in Kaiser:

- UHC Medical Plan (Replacement for the Kaiser Option)
- Blue Shield HMO Plan – Trio
 - You must live in the Trio Network area to select the Trio plan. The Network area is based on your zip code.
- Blue Shield HMO Plan – Access Plus
 - You must live in the Access Plus Network area to select this plan. The Network area is based on your service area zip code.

To find out if you live in the Trio or Access Plus service areas, please call the Trust Fund Office at (888) 410-1756 or visit the Blue Shield website at <https://blueshieldca.com/networktriohmo>

- Participants who either enroll in UHC or are automatically enrolled in UHC because they failed to waive coverage or select another plan option by January 31, 2024, and are living in the UHC Harmony Network Medical Plan service area will be enrolled in the UHC Harmony Network; Participants living outside the UHC Harmony Network, will be enrolled in the UHC Alliance Network.

All Plan changes during this Special Enrollment Period will be effective March 1, 2024.

To assist you in the transition from Kaiser to UHC or with your selection of another Plan option, we have enclosed important information for your review:

- Summary of Benefit Coverages (SBC's) for the medical plans listed above
- Plan Comparison Chart – comparing the various plans available to you
- Enrollment Forms for each of the medical plans listed above
- UHC Plan Information:
 - Website for the new UHC Medical Plan: <https://www.whyuhc.com/tmbt>
 - UHC Special Enrollment and Information Number: 1-888-641-9142.
 - UHC Informational Flyers

If you have questions, please feel free to call the Trust Fund Office at: (888) 410-1756

The following QR Code can be scanned with your smartphone camera to access United Healthcare's website listed above. The website contains information on benefits and videos on how to enroll.

QR CODE to United Healthcare Website:



If you do not wish to make a change during the Special Enrollment period, no action is required. If you do want to make a change, you must complete and mail the appropriate enrollment form to the administrative office before February 1, 2024.

For more information regarding your Plan benefits or regarding your eligibility for these benefits, please contact the Fund Office at (562) 463-5040 or (888) 410-1756.