



Providing Benefits to Oregon Homecare
and Personal Support Workers

Supplemental & Benefits Trusts

October 7, 2017

Dear Participant,

This document describes certain changes to the Benefit Booklet of the Oregon Homecare Workers Supplemental Trust (“Supplemental Trust”) and the Oregon Homecare Workers Benefit Trust (“Benefit Trust”) (collectively, the “Trusts”). The page numbers refer to the section of the Benefit Booklet that is changing. **Please read this summary carefully, and keep it with your Benefit Booklet.**

Enrollment Rules – Trust-approved Plans for 2018

1. The Trust-approved Plans are changing for 2018. The following language is added to page 11 in the section entitled “Enrolling During Open Enrollment”.

Participants Residing in Oregon

- For 2018: Non-Kaiser Service Area portion of Clackamas County: PacificSource \$2,500 Deductible Silver LHN plan
- For 2018: Crook, Deschutes or Jefferson County: PacificSource \$2,500 Deductible Silver SCN plan
- For 2018: Coos, Curry, Josephine, Tillamook, or Wasco County: Moda \$2,500 Deductible Standard Silver (Beacon) plan, Providence \$2,500 Deductible Oregon Standard Silver Signature Network, or Moda \$3,000 Deductible Beacon Be Prepared Silver 3000
- For 2018: Jackson or Hood River County (outside of the Kaiser Service Area): Moda \$2,500 Deductible Standard Silver (Beacon) plan, Providence \$2,500 Deductible Oregon Standard Silver Choice Network, or Moda \$3,000 Deductible Beacon Be Prepared Silver 3000
- For 2018: Benton (outside of the Kaiser Service Area), Clatsop, Douglas, Lane, Lincoln, Linn (outside of the Kaiser Service Area), or Marion County (outside of the Kaiser Service Area): Providence \$2,500 Deductible Oregon Standard Silver Choice Network
- For 2018: Baker, Gilliam, Grant, Harney, Klamath, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, or Wheeler County: Providence \$2,500 Deductible Oregon Standard Silver Signature Network
- For 2018 Moda enrolled: Moda \$2,500 Deductible Standard Silver (Beacon) plan or Moda \$3,000 Deductible Beacon Be Prepared Silver 3000 or the other Trust-Approved plan for your area

The benefits of the Homecare Workers Supplemental and Benefits Trusts were negotiated by SEIU Local 503 homecare and personal support workers through their bargaining team.

P.O. BOX 6, MUKILTEO, WASHINGTON 98275

Trust Administration: 844-507-7554 fax: 866-459-4623

website: orhomecaretrust.org

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Supplemental & Benefits Trusts

Summary of Benefits

1. The amount that the Trust covers under the Benefit Convenience Card also is increasing for 2018. The following language is added to Section A.2, subsection C) on page 13:
 - For 2018, the amount is increasing to up to a maximum amount of \$5,000.
2. The amount that the Trust covers also is increasing for 2018. The following language is added to Section A.3 on page 13:
 - Beginning in 2018, this amount is up to a maximum amount of \$5,000 per year.
3. The sub-section “Payment of Premiums and Out-of-Pocket Expenses” on page 14 also is revised to reflect that the amount that the Trust reimburses is increasing for 2018 as follows:
 - Beginning in 2018, the maximum amount available under the Trust for payment of deductibles, co-payments and co-insurance expenses applicable to benefits and services provided to you under your Trust-approved insurance plan increases to \$5,000.

Exchange Medical Insurance Plans

1. The Trust-approved Plans are changing for 2018. The following language is added to the first paragraph of the sub-section entitled “Oregon” on page 17.
 - The 2018 Trust-approved plans in Oregon are Kaiser Permanente \$2,500 Deductible Silver plan (if you live within the Kaiser Service Area), PacificSource \$2,500 Deductible Silver LHN plan (if you live in the non-Kaiser Service Area portion of Clackamas County), PacificSource \$2,500 Deductible Silver SCN plan (if you live in the Crook, Deschutes or Jefferson County), Moda \$2,500 Deductible Standard Silver (Beacon) plan, Providence \$2,500 Deductible Oregon Standard Silver Signature Network, or Moda \$3,000 Deductible Beacon Be Prepared Silver 3000 if you live in Coos, Curry, Josephine, Tillamook, or Wasco County, Moda \$2,500 Deductible Standard Silver (Beacon) plan, Providence \$2,500 Deductible Oregon Standard Silver Choice Network, or Moda \$3,000 Deductible Beacon Be Prepared Silver 3000 if you live in Jackson or Hood River County (outside of the Kaiser Service Area), Providence \$2,500 Deductible Oregon Standard Silver Choice Network if you live in Benton (outside of the Kaiser Service Area), Clatsop, Douglas, Lane, Lincoln, Linn (outside of the Kaiser Service Area), or Marion County (outside of the Kaiser Service Area), Providence \$2,500 Deductible Oregon Standard Silver Signature Network if you live in Baker, Gilliam, Grant, Harney, Klamath, Lake,



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Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, or Wheeler County, Moda \$2,500 Deductible Standard Silver (Beacon) plan or Moda \$3,000 Deductible Beacon Be Prepared Silver 3000 or the other Trust-Approved plan for your area if you are enrolled in the Moda plan in 2017.

2. The following language added to the last bullet in the sub-sections “Oregon” and “Washington” on page 18 of the plan booklet, and “Idaho” and “California” on page 19 of the plan booklet.
 - Beginning in 2018, your medical and prescription copays, deductibles and co-insurance expenses relating to claims covered under your Trust-approved Exchange plan, up to a combined total of \$5,000. You will see in-network deductible costs listed in the Explanation of Benefits that you receive from your medical insurance carrier.
3. The following language is added to the first paragraph of the sub-section entitled “Washington” on page 18.
 - The 2018 Trust-approved plans in Washington are Kaiser Permanente \$2,500 Deductible Silver plan (if you live within the Kaiser Service Area).

Supplemental Trust Reimbursement

1. The following language replaces the current bullets in the sub-section entitled “You may receive reimbursements for:” on page 23.
 - Medicare deductibles, copays and co-insurance expenses (In 2014 up to \$2,500 for deductibles only, beginning in 2015 up to \$3,000, beginning in 2017 up to \$4,000, beginning in 2018 up to \$5,000, must attach EOB from Medicare using the Ameriflex Reimbursement Form)
 - Medicare Supplemental or Prescription plan premium (monthly up to \$39 in 2014, up to \$41 beginning in 2015, and up to \$44 beginning in 2017, must attach invoice and receipt using the Trust Reimbursement Form)
 - Medicare Part B Premium (Monthly up to \$104.90, or up to \$121.80, depending on eligibility, must attach invoice and receipt using the Trust Reimbursement Form)
 - Exchange Insurance Premium (Monthly, must attach invoice and receipt using the Trust Reimbursement Form)
 - Medical Insurance Expenses (For 2014, up to \$2,500 for both medical deductible and prescription copays over \$50. Beginning in 2015, your maximum medical deductible, copay, co-insurance and prescription reimbursement is \$3,000 annually. Beginning in 2017, your maximum medical deductible, copay, co-insurance and prescription reimbursement is \$4,000 annually. Beginning in 2018, your maximum medical

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deductible, copay, co-insurance and prescription reimbursement is \$5,000 annually. Must attach EOB from your Insurance Company using the Ameriflex Reimbursement Form)

- Advance Premium Tax Credit Reconciliation Reimbursement (Must attach your Form 1095, Form 1040 and Form 8962 using the Premium Adjustment Reimbursement Form)

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