



Benefits Basics #11: Important Benefit Changes Coming Soon!

Starting this fall, Teamsters Security Fund for Southern Nevada–Local 14 will make three important benefits changes that you need to know about. Read this issue to find out more.

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Open Enrollment October 15 – November 17

Starting this year, the Fund will be offering annual Open Enrollments. Open Enrollment dates this year will be from October 15 through November 17. Annual Open Enrollment will be your once-a-year opportunity to change your medical and dental elections. Any changes you make this year will take effect on January 1, 2018.



Previously, you could change your medical and dental elections at any time, once every 12 months. This change will make the Fund's enrollment process consistent with other benefit plans in the industry, most of whom offer Open Enrollment.

Outside of Open Enrollment, you will only be able to make medical and dental plan changes within 60 days of experiencing a qualifying life event, such as getting married or divorced, or having a baby. So it's important to think carefully about your choices and make sure you select the right plan for your needs.

What Happens if You Don't Enroll

If you don't enroll between October 15 and November 17, 2017, you and your covered children will have the same coverage for 2018 as you do now, with the Dental PPO Plan change explained on page 2 if applicable. **But if you're married and your spouse is currently covered under the Fund's medical plan, you MUST complete the Spousal Affidavit by November 17. Otherwise, your spouse will lose medical coverage on January 1, 2018.**



Important Change to Spousal Coverage

In order to enroll your spouse for 2018 health care coverage, **you must complete a Spousal Affidavit by November 17** indicating whether your spouse has the option to enroll in other group medical coverage through a current employer. The Spousal Affidavit will be available online at www.teamsters14healthfund.com.

Depending on your spouse's situation:

- **If your spouse has the option to enroll in other group medical coverage but does not elect it and continues to have the Fund's medical plan as primary coverage**, you will need to pay a \$300 monthly premium. Your Open Enrollment packet will include more information on when and how to pay this premium.
- **If your spouse does not have the option to enroll in other group medical coverage**, you will not be required to pay a premium in order for him or her to have the Fund's medical plan as primary coverage, as long as you complete the Spousal Affidavit by November 17.

As you may recall, the Fund considered a similar change last year, but with no option to cover your spouse if he or she had access to other group medical coverage. After talking with members and carefully considering a variety of options, the Trustees have decided to move forward with the change, but are adding the \$300 surcharge option to provide greater flexibility.

The financial benefits from the surcharge, as well as lower claims costs for those who no longer have spousal coverage, will help the Fund continue to provide affordable, quality health care offerings to our members.



Dental PPO Plan Change

Starting January 1, 2018, the Fund will make two changes to the Dental PPO Plan:

- **The plan's dental network will change from Diversified Dental to Delta Dental.** As before, this plan will give you the flexibility to see any dental provider, but you'll save money when you use in-network providers. Since Delta Dental is America's largest dental provider, you'll have more in-network dentists to choose from. Note that you will receive a new ID card reflecting the change to the PPO Dental network.
- **Your dental benefits will change.** Your in-network benefits will increase from 80% to 100% coverage for preventive care. This means you'll pay nothing for routine annual exams and x-rays, plus two cleanings per year. Your in-network benefits for basic and major dental services will stay the same at 80%. However, your out-of-network benefits will change from 80% to 70% for basic services and from 80% to 60% for major services. So it will be even more important to use in-network providers to get the most value when you need dental care.

The Fund will continue to offer the Liberty Dental Plan DHMO option for 2018 with no changes.

New! Enroll Online through the Zenith-American Solutions Website

Starting October 15, you can enroll and complete the Spousal Affidavit quickly and easily online! Just visit the Zenith-American Solutions website at www.teamsters14healthfund.com and log in.



Watch for Your Open Enrollment Packet

In early October, you'll receive an Open Enrollment packet in the mail, with information to help you make informed decisions about the benefit options that best meet the needs of you and your family. The packet will also include detailed instructions for enrolling online and completing the Spousal Affidavit. Be sure to review it carefully.



The Trustees are pleased to continue offering this outstanding, competitive benefits program to you and your family. We hope you take this opportunity to review your health care plan options and participate in the Fund's Open Enrollment this year.

Questions about Open Enrollment or Your Benefits?

Contact Zenith American Solutions at (702) 851-8286, or visit www.teamsters14healthfund.com and log in. For assistance, click on "Need help logging in?".