

ILWU-PMA Pension Plan  
ILWU-PMA Welfare PlanILWU-PMA Watchmen Pension Plan  
ILWU-PMA Supplemental Welfare Benefit Plan

April 25, 2012

**To:** ILWU Southern California Locals 13, 29, 46, 63, 94 and 26 (Watchmen)**From:** Elizabeth Sharpe, Manager, Welfare Plans**Subject: Kaiser Plan Supplemental Summary Plan Description**

Enclosed is a Supplemental Summary Plan Description packet for the Kaiser Foundation Health Plan, consisting of the following publications:

- ILWU-PMA Welfare Plan Supplemental Summary Plan Description
- Your Enrollment Book 2012/Benefit Summary
- Benefit Summary for Senior Advantage
- Summary of Group Plan Provisions for Senior Advantage
- 2011 Summary of Benefits for Senior Advantage

Kaiser has direct shipped supplies of the packets to each Local. Please discard any old Kaiser descriptions you may have.

Enclosure

cc: Sam Alvarado, Southern California Area Welfare Director

ES:jo/opeiu29aficio/MTP Kaiser So CA-042512

**KAISER FOUNDATION HEALTH PLAN**  
**SOUTHERN CALIFORNIA LOCALS 13, 29, 46, 63, 94, 26 (Watchmen)**  
A Supplemental Summary Plan Description

A general description of the Kaiser Foundation Health Plan is provided in the accompanying Kaiser booklets. This insert provides additional information for ILWU-PMA Welfare Plan Participants. The insert and the booklets together comprise the ILWU-PMA Welfare Plan Supplemental Summary Plan Description of the Kaiser Foundation Health Plan for Southern California.

**ELIGIBILITY**

All persons with ILWU-PMA Welfare Plan eligibility and whose Assigned Port is a Choice Port or Choice Area are eligible for the Kaiser Foundation Health Plan.

**ADDRESS AND FAMILY STATUS CHANGES**

Address changes and changes in family status which might affect Welfare Plan eligibility (such as marriage, dissolution of marriage, birth or death of a Dependent) must be reported to the ILWU-PMA Benefits Plans office, 1188 Franklin Street, Suite 101, San Francisco, CA 94109. **IMPORTANT: All enrollment forms must be submitted to the ILWU-PMA Welfare Plan office; do not submit address changes, changes in family status information or enrollment forms directly to Kaiser Permanente.** The Benefit Plans office will forward the necessary information to Kaiser Permanente. Enrollment forms are available at the Locals or from the Benefit Plans office upon request.

**PRESCRIPTION DRUG COVERAGE FOR MEDICARE ELIGIBLES (SENIOR ADVANTAGE)**

Your existing prescription drug coverage under Kaiser has been determined to be better than coverage under a Medicare Part D prescription drug plan. Therefore, do not enroll in a Medicare Part D prescription drug plan. You will continue to receive prescription drug coverage under the Kaiser Plan.

*Note: Kaiser Southern California Health Plan believes this coverage is a “grandfathered health plan” under the Patient Protection and Affordable Care Act. If you have questions about grandfathered health plans, please call Kaiser’s Member Service Call Center at 1-800-464-4000.*

***The information in this booklet is subject to and does not change the provisions of the ILWU-PMA Welfare Plan Agreement or the provisions of the Welfare Plan Summary Plan Description.***