



UAW Retirees of Daimler Trucks North America Welfare Benefit Trust

October, 2016

PLEASE READ CAREFULLY

IMPORTANT INFORMATION REGARDING YOUR HEALTH BENEFITS FOR 2017

Dear Participant:

The Committee that is responsible for the management of the *UAW Retirees of Daimler Trucks North America Welfare Benefit Trust* ("the Trust") regularly reviews the benefits that the Trust offers to eligible participants. The Committee takes into consideration factors which influence the Trust's ability to provide benefits such as health care cost and expected inflation, utilization, and actual and expected investment returns. They also review the quality of benefit delivery and retiree satisfaction. As information on the ongoing cost and experience of the Trust continues to become available, the Committee's understanding of the financial health of the Trust becomes clearer.

2017 Contribution Rates

The Committee is pleased to announce that there will be no change in your monthly contribution rates. The rates will be the same in 2017 as in 2016.

MONTHLY CONTRIBUTION FOR MEMBERS ELIGIBLE FOR MEDICARE

	2017 Monthly Contribution
Single	\$50
Two or more persons	\$100

MONTHLY CONTRIBUTION FOR MEMBERS WHO ARE NOT ELIGIBLE FOR MEDICARE

Retirees with Less than 20 Years of Service at Retirement	2017 Monthly Contribution
Single	\$150
Two Person	\$300
Family	\$375

P.O. Box 4447 • Troy, MI 48099-4447

Local Phone Number: (248) 641-4918 • Toll Free Number: (844) 582-4443 • Fax: (248) 460-4241

Retirees with 20 or More Years of Service at Retirement	2017 Monthly Contribution
Single	\$100
Two Person	\$200
Family	\$250

2017 Plan Design

The Committee is pleased to announce that there will be no change in Medical benefits for Pre-Medicare and Medicare eligible members in 2017. **However, changes will be made to the Prescription Drug benefits.** Please review the changes described below carefully.

Members Not Yet Eligible for Medicare

The prescription drug copayments for 2017 are shown below:

PRESCRIPTION DRUG COVERAGE	Retail – Up to 31 Day Supply	Retail – 90 Day Supply	Home Delivery 90 Day Supply
Tier 1: Generic Drugs	\$15	\$45	\$30
Tier 2: Preferred Brand Name Drugs	\$35	\$105	\$70
Tier 3: Non-Preferred Brand Name Drugs	\$90	\$270	\$180

The member copayments have been changed to encourage the use of cost effective prescription drugs, and to help the Trust afford to continue to offer comprehensive benefits. Specifically, members should look to:

- Use generic drugs when possible
- Receive maintenance medications (those prescription drugs expected to be taken on an ongoing basis) through mail order
- Use cost effective (preferred) brand name drugs when generics are not available

Other Prescription Drug Program Changes:

Effective January 1, 2017, the Trust will be implementing the following care and cost management programs:

Mandatory Mail Order: If you are taking maintenance medications – those prescriptions that are expected to be taken over the long term (longer than two refills) – you will be required to receive those prescriptions through mail order. Members who fill a maintenance prescription will be allowed three 30-day fills at a retail pharmacy, but if you do not switch the prescription to mail

order on the fourth fill, ***you will be responsible for the entire cost of the prescription drug*** until you move to mail order. Remember, both you and the Trust save money when maintenance medications are filled by mail order. Please contact Express Scripts for a mail order form.

Exclusion of Proton Pump Inhibitors: Proton Pump Inhibitors or PPIs include medications such as Nexium and Prilosec, which are now available over the counter at most pharmacies. The Trust will no longer provide coverage of these drugs.

Effective January 1, 2017, the Trust will be implementing a number of safety and care management programs described below. These include programs to ensure the drugs you are being prescribed are appropriate and cost effective. If you are impacted by one of these programs, you and your physician will be notified when you fill your prescription.

Quantity Limits – to prevent overutilization, as well as waste or abuse, the number of pills dispensed each month may be limited for certain medications.

Step Therapy – certain brand name medications and specialty drugs may not be covered under the plan until other similar acting but less costly drugs are tried first. These programs will be discussed with your physician.

Prior Authorizations – certain drugs may require a prior authorization before the medication can be dispensed. This will help ensure members will receive the appropriate therapies for their disease and conditions.

Compound Drug Management – ingredients have been put on an inclusion list or an exclusion list based on various criteria such as commercial availability, clinical evidence, and cost. If a compound medication includes an ingredient on the exclusion list, the compound medication will not be covered.

Medicare-Eligible Retirees

The prescription drug copayments for 2017 are shown below:

PRESCRIPTION DRUG COVERAGE	Retail – 31 Day Supply	Retail – 90 Day Supply	Home Delivery 90 Day Supply
Tier 1: Generic Drugs	\$15	\$30	\$30
Tier 2: Preferred Brand Name Drugs	\$35	\$70	\$70
Tier 3: Non-Preferred Brand Name Drugs	\$90	\$180	\$180

Effective January 1, 2017, the Trust will be implementing a compound drug management program. The program ensures the drugs you are being prescribed are appropriate and cost effective. Ingredients have been put on an inclusion list or an exclusion list based on various criteria such as commercial availability, clinical evidence, and cost. If a compound medication includes an ingredient on the exclusion list, the compound medication will not be covered. If you are impacted by one of these programs, you and your physician will be notified when you fill your prescription.

Identification Cards

You should continue to use your current ID cards.

Informational Meetings

The Trust will be holding informational meetings at the dates, times and locations listed below. Please join us so you can learn more about your benefit plans and to answer any questions:

Date:	Location:
November 28, 2016, 9:00 am	UAW Local #5287 1408 Courtesy Road High Point, NC 27260
November 28, 2016, 1:00 pm	UAW Local #3520 2290 Salisbury Highway Statesville, NC 28677
November 29, 2016, 9:00 am	UAW Local #5286 112 West Trade Street Dallas, NC 28034
November 29, 2016, 1:00 pm	UAW Local #5285 113 East Central Avenue Mt. Holly, NC 28120

If you have any questions, please contact BeneSys at: (844) 582-4443 Monday through Friday from 7:30 a.m. until 4:30 p.m., Eastern Standard Time.

Vital Information Forms

It is important that the Trust office have your most current contact and dependent information on file. If you have a change in status, please contact the Trust office for a new Vital Form.

Important Phone Numbers

Should you have any questions, below is a list of important phone numbers.

If You Have a Question About.	You Should Contact.
Eligibility-Coverage	BeneSys: (844) 582-4443 Hours: 7:30 a.m. - 4:30 p.m. ET
Pre- Medicare Medical Coverage	BCBSM: (800) 810-2583; TTY users call 711
Medicare Prescription Drug	Express Scripts: (844) 567-8525
Pre- Medicare Prescription Drug Coverage	Express Scripts: (844) 567-8525
Medicare Benefits (Medical, Prescription Drug and Behavioral Health)	BCBSM: (866) 684-8216 TTY users call 711
Pre-Medicare Dental	MODA: (888) 217-2365
All other questions	BeneSys: (844) 582-4443 Hours: 7:30 a.m. - 4:30 p.m. ET

The Committee recognizes that your retiree benefits provide important protections for you and your dependents. The Committee encourages you to attend an informational Meeting in order to understand your benefits and get answers to any questions you may have.

Participant Website

As a reminder, the Participant Website is available for all eligible members. The website will provide key contact information, forms and documents that will help you get the most out of your benefits.

The address is: www.ourbenefitoffice.com/uawdaimlerretirees

Please take some time and familiarize yourself with all it has to offer.

Sincerely,

The Committee of the UAW Retirees of Daimler Trucks North America Welfare Benefit Trust

NOTICE OF NONDISCRIMINATION

The UAW Retirees of Daimler Trucks of North America Welfare Benefits Trust (“Health Plan) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. The Health Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

The UAW Retirees of Daimler Trucks of North America Welfare Benefits Trust cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-844-582-4443

The UAW Retirees of Daimler Trucks of North America Welfare Benefits Trust Daimler Trucks of North America Welfare Benefits Trust

遵守適用的聯邦民權法律規定，不因種族、膚色、民族血統、年齡、殘障 或性別而歧視任何人。

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-844-582-4443

The UAW Retirees of Daimler Trucks of North America Welfare Benefits Trust 은(는) 관련 연방
공민권법을 준수하며 인종, 피부색, 출신 국가, 연령, 장애 또는 성별을 이유로 차별하지 않습니다.

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-844-582-
4443번으로 전화해 주십시오.