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2020 UEBT Plan Changes Benton County Plans

Medical Plan A6 – Below is a summary of changes to the A6 Medical Plan. If there are any discrepancies between this handout and the 2020 Plan Booklet, the Plan Booklet will govern.

- **Mail Order Benefit Copay**
Generic mail order copay is 15% up to \$15 maximum
Brand mail order copay is 30% up to \$50 maximum
- **Dependent Pregnancy**
Dependent children pregnancy will be covered for eligible dependents under the age of 26.
Grandchildren are not an eligible dependent and are not eligible to be enrolled in the plan.
- **Death Benefit Beneficiary Designation**
A spouse designated as a participant's beneficiary will be revoked by divorce.

Vision Plan 3 – Below is a summary of changes to the V3 Vision Plan. If there are any discrepancies between this handout and the 2020 Plan Booklet, the Plan Booklet will govern.

- **Vision Exam and Hardware**
To amend the rolling periods (once every 12 months; once every 24 months) to once per calendar year or once every two calendar years

Willamette Dental Group Plan 2 – Below is a summary of changes to WDG Plan 2.

- General or Orthodontic Office Visit copay \$25
- Fillings copay \$10
- Root Planing copay \$25
- Orthodontia Treatment copay \$1,800 (new banding)

Dental Plan's D7, D8 and Orthodontia Plan – No plan changes

Time Loss 2 Plan – No plan changes