

# BENEFITS ENROLLMENT GUIDE

## Healthy Living

UFCW Local's 951, 75, 1059 and 227 continue to work together with Meijer to enhance healthy living opportunities and improve your healthcare choices for 2010. Healthcare affordability, access and quality is at the forefront of each and every one of us and your union recognizes how important these healthcare issues are to you and your families. The combined efforts and hard work have paid off with good news for 2010 to name a few:

1. The Integrated Health Plan (IHP) has been substantially improved.
  - Primary care office visits were \$20, are now \$10.
  - Visits to a specialist and an urgent care center were paid at 80% only after you paid your annual deductible (\$500/\$1,500). Now they are copays (\$30 and \$50) and are paid without a deductible.
  - Meijer will contribute \$250 / \$500 to a new Personal Health Bank. You decide to save or spend this money on eligible medical expenses. Any balance remaining at the end of the year will remain in your account for use in future years while enrolled in the IHP
  - No annual or lifetime maximum

2. Generic Drugs co-pay will be reduced from \$5 to \$4 for a 30 day supply.
3. Part time members qualify for additional plan benefits the first of the month following 12 months of service (was 18 months).
4. Improved coverage for diabetic diagnostic lab procedures and diagnostic cancer screening.
5. If you have an enrolled spouse and you both complete the HRA and the follow up activities you will receive the full price incentive. If only one of you completes them you will now receive a partial price incentive.

For those of you wishing to enroll in one of the HMO plans we encourage you to take a look at the other health care plans available to you, especially the Premier Health Network which is the special Meijer plan exclusively offered to you as a union member and an employee at Meijer. The Premier Health Network plan may give you the coverage you want and need at an affordable price. Unfortunately there are significant cost increases for those choosing to remain with their HMO plan. Remember, the cost of the HMO is out of the hands of your Local Union and Meijer – they are determined by each individual HMO plan and are rising at alarming amounts.

## Complete the HRA by January 31 2010 and save

*The HRA is CONFIDENTIAL!* Neither Meijer nor your union have access to your answers and results. The HRA is a health questionnaire similar to what you would fill out when visiting your Doctor. This year if you have an enrolled spouse there is a wellness discount if one of you completes the HRA and an even greater discount if both of you complete the HRA. Please remember you and or your spouse must complete, in a timely fashion, the HRA and any required follow up health education activities in order to receive and maintain a 'wellness discount' rate. This means more money in your weekly take home pay. You may take the HRA on line (or by telephone if you do not have access to a computer) for the BCBS PPO plans. PHN (Premier

Health Network) and HMO plans will administer their own HRA at their specific web sites. If you are enrolled in PHN or BCN HMO go to <http://www.mibcn.com>. If you have selected the Priority West or East - [www.priorityhealth.com](http://www.priorityhealth.com), the Health Alliance Plan - [www.hap.org](http://www.hap.org), Health Plus - [www.healthplus.org](http://www.healthplus.org), or Grand Valley Health Plan - <http://www.gvhp.com>. You must complete your HRA by January 31, 2010 if you are enrolled in the Blue Cross Blue Shield PPO plans. If you are enrolled in Priority West or East you must complete your HRA by March 31, 2010 and if you have selected the PHN plan or BCN HMO you have until March 31, 2010 to complete your HRA. In all other HMO plans, you must complete the HRA by January 31.

### Activities Required to Receive the \*\* Full and \* Partial Wellness Discount

Rate	Full-time individual	Full-time with spouse	Part-time individual
** Full Wellness Discount	You <b>complete both</b> : 1. HRA 2. Follow up Activities ✓	You and your spouse <b>complete both</b> : 1. HRA 2. Follow up Activities ✓	You <b>complete both</b> : 1. HRA 2. Follow up Activities ✓
* Partial Wellness Discount	N/A = Not Applicable	<b>Either you - or - your spouse completes both</b> : 1. HRA 2. Follow up Activities ✓	N/A = Not Applicable
Full Rate	You <b>do not complete</b> : 1. HRA 2. Follow up Activities	You and your spouse <b>do not complete</b> : 1. HRA 2. Follow up Activities	You <b>do not complete</b> : 1. HRA 2. Follow up Activities

**\*\* Full Wellness Discount** = You (if single) or you and your enrolled spouse both complete the Health Risk Assessment (HRA) form and complete follow up activities.

**\* Partial Wellness Discount** = If either you or your enrolled spouse completes the Health Risk Assessment (HRA) form and completes follow up activities.

**Full Rate** = 1. Individual – you do not complete either the Health Risk Assessment (HRA) form or follow up activities or, 2. Individual and Enrolled Spouse – both you and your spouse do not complete either the Health Risk Assessment (HRA) or follow up activities.

## HMO INFORMATION

### HMO

	Coverage Area
<b>Blue Care Network</b>	West Michigan (except Kent Muskegon Co)
<b>Blue Care Network Mid-Michigan</b>	Central Michigan
<b>Priority East (Care Choices)</b>	Southeast Michigan
<b>Grand Valley Health Plan</b>	West Michigan —Grand Rapids
<b>Priority West</b>	West Michigan
<b>HAP</b>	Southeast Michigan Ann Arbor, Flint areas
<b>HealthPlus</b>	East Michigan —Flint & Saginaw areas

### Rate Definitions:

**\*\* Full Wellness Discount = You** or you and your enrolled spouse must complete the Health Risk Assessment form and complete follow up actions.

## PRIMARY CARE PLAN (PCP)

- Available to all employees, regardless of hire date or length of service. Provides coverage for everyday medical needs, but not for catastrophic illness or injury.
- Minimal out-of-pocket costs with a \$15,000 per Plan Year maximum, unlimited lifetime maximum.
- Preventative services are covered at 100%
- \$20 primary care office visit co-pay
- Prescriptions cost are a \$4 co-pay for generic drugs and a \$7 co-pay for a 90 day supply of generic maintenance drugs with a maximum of \$5,000 per Plan Year.

PCP	Full-time individual	Full-time w/spouse	Full-time w/child	Full-time w/children	Full-time w/family
<b>** Full Wellness Discount</b>	<b>\$6.33</b>	<b>\$16.78</b>	<b>\$10.13</b>	<b>\$14.88</b>	<b>\$23.43</b>
<b>* Partial Wellness Discount</b>	<b>N/A</b>	<b>\$19.43</b>	<b>N/A</b>	<b>N/A</b>	<b>\$26.08</b>
<b>Full Rate</b>	<b>\$8.98</b>	<b>\$20.76</b>	<b>\$12.78</b>	<b>\$17.53</b>	<b>\$27.41</b>

PCP	Part Time Under 24 hrs/wk	Onboard Part Time 24 – 28 hrs/wk	Part Time 28 + hrs/wk & 5 years of service	Hereafter PT 24+ hrs/wk after 12 mo. of service
<b>** Full Wellness Discount</b>	<b>\$31.67</b>	<b>\$15.83</b>	<b>\$9.50</b>	<b>\$15.83</b>
<b>Full Rate</b>	<b>\$34.32</b>	<b>\$18.48</b>	<b>\$12.15</b>	<b>\$18.48</b>

## EXTENDED CARE PLAN (ECP)

Preventive service, primary care, most out-patient care, and prescription coverage are the same as the PCP. However, the ECP includes coverage for hospital stays.

- \$50,000 per Plan Year maximum, unlimited lifetime maximum
- \$1,000 per person deductible
- Prescription coverage has a \$5,000 maximum per Plan Year

ECP	Full-time individual	Full-time w/spouse	Full-time w/child	Full-time w/children	Full-time w/family
<b>** Full Wellness Discount</b>	<b>\$9.00</b>	<b>\$26.00</b>	<b>\$15.00</b>	<b>\$23.00</b>	<b>\$36.00</b>
<b>* Partial Wellness Discount</b>	<b>N/A</b>	<b>\$32.13</b>	<b>N/A</b>	<b>N/A</b>	<b>\$42.13</b>
<b>Full Rate</b>	<b>\$15.13</b>	<b>\$35.20</b>	<b>\$21.13</b>	<b>\$29.13</b>	<b>\$45.20</b>

ECP	Onboard Part Time 24–28 +hrs/wk	Part Time 28 +hrs/wk & 5 years of service	Hereafter PT 24+hrs/wk after 12 months of service
<b>** Full Wellness Discount</b>	<b>\$24.00</b>	<b>\$14.00</b>	<b>\$24.00</b>
<b>Full Rate</b>	<b>\$30.13</b>	<b>\$20.13</b>	<b>\$30.13</b>

## HIGH DEDUCTIBLE HEALTH PLAN (HDHP)

This plan offers low cost protection against catastrophic illness or injury. It includes a feature unique to this plan, the Health Savings Account (HSA), detailed below and on page 7 of the Enrollment Booklet.

- Unlimited Plan Year maximum / unlimited lifetime maximum.
- \$1,250 member-only / \$2,500 family deductible. For members electing family coverage, the \$2,500 deductible applies even if only one family member has medical expenses.

- Preventive expenses are paid at 100%
- Prescriptions cost \$4 for a 30 or 90 day supply of generic maintenance drugs, 25% of formulary brand name drug costs, and 50% of non-formulary brand name drugs, after the medical plan deductible has been met. Preventive prescriptions are not subject to the deductible (see pages 5 & 12 of the mBenefitsConnect Enrollment Booklet).
- The HDHP has an unlimited Plan Year prescription benefit.

HDHP	Full-time individual	Full-time w/spouse	Full-time w/child	Full-time w/children	Full-time w/family	Part-time individual
<b>** Full Wellness Discount</b>	<b>\$14.75</b>	<b>\$39.09</b>	<b>\$23.60</b>	<b>\$34.66</b>	<b>\$54.57</b>	<b>\$22.12</b>
<b>* Partial Wellness Discount</b>	<b>N/A</b>	<b>\$48.84</b>	<b>N/A</b>	<b>N/A</b>	<b>\$64.32</b>	<b>N/A</b>
<b>Full Rate</b>	<b>\$24.50</b>	<b>\$53.72</b>	<b>\$33.35</b>	<b>\$44.41</b>	<b>\$69.20</b>	<b>\$31.87</b>

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Full-time employees may elect the HDHP on the first of the month following 6 months of service. Onboard part-time employees may choose HDHP at the start of the Plan Year if they average 28 or more hours per week based on the annual hours test.

## Weekly Contributions

Area	Rate Definition	Full-time individual	Full-time with spouse	Full-time with child	Full-time with children	Full-time with family	Part-time individual
Michigan (Lapeer, Oscoda & Ontonagon Counties)	** Full Wellness Discount	\$68.17	\$151.28	\$98.39	\$136.17	\$204.16	\$75.55
	* Partial Wellness Discount	N/A	\$165.60	N/A	N/A	\$218.48	N/A
	Full Rate	\$82.49	\$172.76	\$112.71	\$150.49	\$225.64	\$89.87
Michigan (Alcona, Alcona & Alcona Counties)	** Full Wellness Discount	\$71.76	\$158.81	\$103.42	\$142.98	\$214.20	\$79.13
	* Partial Wellness Discount	N/A	\$173.13	N/A	N/A	\$228.52	N/A
	Full Rate	\$86.08	\$180.29	\$117.74	\$157.30	\$235.68	\$93.45
Michigan (Alcona, Alcona & Alcona Counties)	** Full Wellness Discount	\$55.11	\$123.83	\$80.09	\$111.33	\$167.57	\$62.48
	* Partial Wellness Discount	N/A	\$138.15	N/A	N/A	\$181.89	N/A
	Full Rate	\$69.43	\$145.31	\$94.41	\$125.65	\$189.05	\$76.80
Michigan (Alcona, Alcona & Alcona Counties)	** Full Wellness Discount	\$37.58	\$87.02	\$55.56	\$78.03	\$118.49	\$44.95
	* Partial Wellness Discount	N/A	\$101.34	N/A	N/A	\$132.81	N/A
	Full Rate	\$51.90	\$108.50	\$69.88	\$92.35	\$139.97	\$59.27
Michigan (Alcona, Alcona & Alcona Counties)	** Full Wellness Discount	\$59.48	\$133.02	\$86.22	\$119.64	\$179.81	\$66.85
	* Partial Wellness Discount	N/A	\$147.34	N/A	N/A	\$194.13	N/A
	Full Rate	\$73.80	\$154.50	\$100.54	\$133.96	\$201.29	\$81.17
Michigan (Alcona, Alcona & Alcona Counties)	** Full Wellness Discount	\$40.81	\$93.81	\$60.09	\$84.17	\$127.54	\$48.18
	* Partial Wellness Discount	N/A	\$108.13	N/A	N/A	\$141.86	N/A
	Full Rate	\$55.13	\$115.29	\$74.41	\$98.49	\$149.02	\$62.50
Michigan (Alcona, Alcona & Alcona Counties)	** Full Wellness Discount	\$43.36	\$99.16	\$63.65	\$89.02	\$134.68	\$50.73
	* Partial Wellness Discount	N/A	\$113.48	N/A	N/A	\$149.00	N/A
	Full Rate	\$57.68	\$120.64	\$77.97	\$103.34	\$156.16	\$65.05

u (if single)  
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ent (HRA)  
ivities.

\* **Partial Wellness Discount** = If either you or your enrolled spouse completes the Health Risk Assessment (HRA) form and completes follow up activities.

**Full Rate** = 1. Individual – you do not complete either the Health Risk Assessment (HRA) form or follow up activities or, 2. Individual and Enrolled Spouse – both you and your spouse do not complete either the Health Risk Assessment (HRA) or follow up activities.

## PREMIER HEALTH NETWORK (PHN)

- Unlimited Plan Year and lifetime coverage maximums
- Zero Plan Year deductible / \$10 office visit co-pays / preventative expenses are covered at 100%
- Prescription costs are a \$4 co-pay for a 30 day supply of generic drugs and a \$7 co-pay for a 90 day supply of generic maintenance drugs.
- Direct relationship with your Primary Care Physician, who will develop a personal wellness plan for you and work with you to help you maximize your health
- See the Enrollment guide for more information.

PHN	Full-time individual	Full-time w/spouse	Full-time w/child	Full-time w/children	Full-time w/family	Part-time individual
** Full Wellness Discount	\$26.51	\$64.00	\$40.14	\$57.19	\$87.87	\$34.08
* Partial Wellness Discount	N/A	\$76.57	N/A	N/A	\$100.44	N/A
<b>3</b> Full Rate	\$39.08	\$82.86	\$52.71	\$69.76	\$106.73	\$46.65

## INTEGRATED HEALTH PLAN (IHP)

- Expanded pre deductible reduced cost coverage for doctors' office visits and urgent care center visits
- Personal Health Bank \$250 individual/ \$500 family
- Unlimited Plan Year and Lifetime maximums
- \$750 individual / \$1,500 family deductible for in-network services
- \$Unlimited maximum per Plan Year for prescription drugs
- Prescriptions costs are \$4 for generic drugs, 25% of formulary brand name drug costs, 50% of non-formulary brand name drugs and \$7 for a 90 day supply of generic maintenance drugs
- Expanded diabetic and cancer diagnostic and screening coverage

<b>IHP</b>	<b>Full-time individual</b>	<b>Full-time w/spouse</b>	<b>Full-time w/child</b>	<b>Full-time w/children</b>	<b>Full-time w/family</b>	<b>Part-time individual</b>
<b>** Full Wellness Discount</b>	<b>\$30.94</b>	<b>\$73.28</b>	<b>\$46.32</b>	<b>\$65.57</b>	<b>\$100.21</b>	<b>\$38.50</b>
<b>* Partial Wellness Discount</b>	<b>N/A</b>	<b>\$89.50</b>	<b>N/A</b>	<b>N/A</b>	<b>\$116.43</b>	<b>N/A</b>
<b>Full Rate</b>	<b>\$47.16</b>	<b>\$97.61</b>	<b>\$62.54</b>	<b>\$81.79</b>	<b>\$124.54</b>	<b>\$54.72</b>

## HEALTH SAVINGS ACCOUNT (HSA)

- Health Savings Accounts are the biggest advantage to the HDHP. If you're in the HDHP, you should put at least some money in an HSA.
- Meijer will match \$2.00 for every dollar you contribute to your HSA in 2010 up to \$250 for individuals, \$500 for spousal or family coverage. This is free money toward your health care expenses.
- Contributions to your HSA are made in equal deductions, pre-tax, from your weekly paycheck. (See the infographic in the Flex Account section to see how this saves you money on your taxes.)
- Money in your HSA is available for you to use as you put money in (compared to Flex Account contributions, which are available in full at the start of the Plan Year.)
- Unlike Flex Accounts, the money in an HSA is yours to keep. It doesn't expire at the end of the year. It stays with you even if you leave Meijer! It makes sense to maximize your contributions to your HSA because you can cover medical dental, and vision costs and HSA money doesn't expire.
- You can contribute up to \$2,800/\$5,650 for individual/family (before Meijer's match) to your HSA in 2010.
- See the Enrollment guide for more information.

## OTHER BENEFITS

### Dental / Vision Coverage

For those of you who do not qualify for the Regular Meijer Delta Dental/Eye Med Vision plan, you may select the Basic Dental/Vision plan (also administered by Delta) knowing you have 'real' coverage...There is no deductible under the Basic Dental/Vision plan and you will receive 85% coverage for all routine exams and adult cleanings, 60% for x-rays, and 50% for other services. Up to a maximum \$750 for the plan year. You are encouraged to find a participating dentist in order to receive the greatest out of pocket savings.

See the mBenefitsConnect web site or the Plan Coverage Comparison Guide for specific coverage information for the Regular Delta Dental/Eye Med vision plan and additional information regarding the Basic Dental/Vision plan. There are no increases in member contributions to either plan.

### Short Term Disability Plan

Short Term Disability coverage is available even if you

have not previously enrolled. The cost of the coverage is not increased for 2010 and is defined in the contract according to your average weekly wage. You must have Short Term Disability coverage for maternity or other medical leave pay.

Short Term Disability coverage is not automatic, you must choose it during enrollment. For the critical protection it offers at a very low price, your Union strongly recommends all members get Short Term Disability Insurance.

### Life Insurance

In the event of your death, the person you designate will receive your annual base wage (up to \$150,000). Full-time workers qualify on the first of the month after 6 months of service. Part-time workers qualify on the first of the month following 12 months of service.

You can find information about Short Term Disability and Life Insurance administered by MetLife. See the Enrollment guide for more information.

<b>Meijer Dental / Vision Plan</b>	<b>FT &amp; PT time individual</b>	<b>Full-time + child</b>	<b>Full-time + children</b>	<b>Full-time + spouse</b>	<b>Full-time w/family</b>
<b>Weekly Contribution</b>	<b>\$2.91</b>	<b>\$4.07</b>	<b>\$5.53</b>	<b>\$6.11</b>	<b>\$8.14</b>

<b>Basic Dental / Vision administered by Delta</b>	<b>Member</b>	<b>Member + 1</b>	<b>Family</b>
<b>4 Weekly Contribution</b>	<b>\$4.20</b>	<b>\$7.82</b>	<b>\$11.59</b>

## ELIGIBILITY GRID

	PCP	ECP	IHP	HDHP	PHN
Full-time	✓	✓	✓	✓	✓
Part-time Under 24 hours/week	✓				
Part-time 24–28 hours/week	✓	✓			
Onboard Part-time 28+ hours/week	✓	✓	✓	✓	✓
Hereafter Part-time 24–28 hours/week	✓••	✓••			
Hereafter Part-time 28+ hours/week	✓••	✓••			

PCP: Primary Care Plan  
 ECP: Extended Care Plan  
 IHP: Integrated Health Plan  
 HDHP: High Deductible Health Plan  
 PHN: Premier Health Network

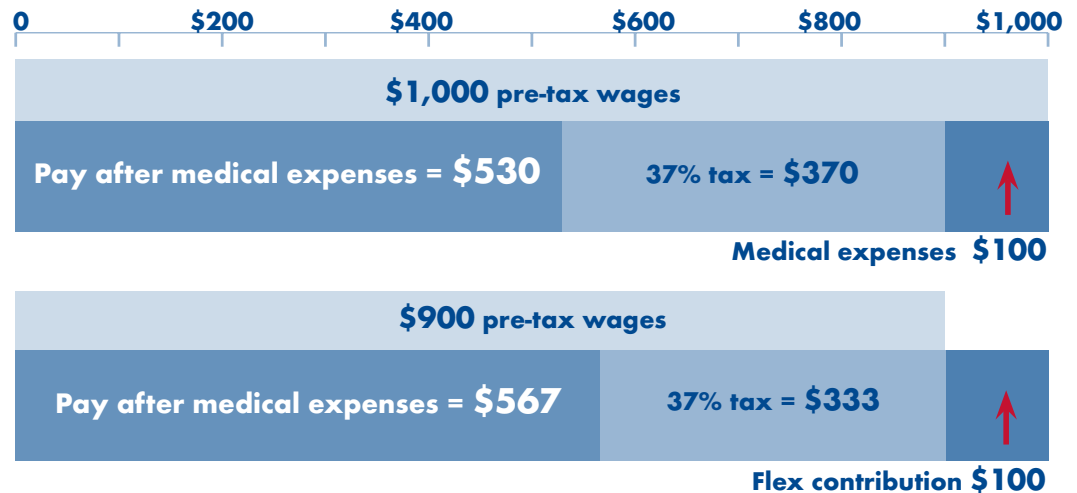
•• Part time employees can choose the ECP the first of the month following 12 months of service with a 24 + hour average. After 5 years and with an average of 28 or more hours they will get a reduced rate. Part time employees also get a reduced rate for the PCP plan after 12 months (with 24+ hour weekly average) and a further rate reduction after 5 years (with 28+ hours).

- For 2010, your average hours will come from your active service hours during the payroll weeks from September 28, 2008 to September 26, 2009.
- Onboard part-time workers need 1,456 hours worked (28 hours multiplied by 52 weeks) during the year before open enrollment to maintain access to the IHP, HDHP, PHN, HMOs, and the Delta Dental / EyeMed, Vision plans.

## TAX ADVANTAGE ACCOUNTS

### Flexible Spending Account

- All Meijer members\* can choose to put \$200–\$2,000 in a Flexible Spending Account in 2010.
- Whatever amount you choose will be divided by the 52 weeks in the 2010 Plan Year, deducted from your weekly paycheck pre-tax.
- However, your annual contribution to your Flex Account is available in full at the start of the Plan Year.
- The advantage of Flex Accounts is in the pre-tax deduction. You'll reduce how much you pay in income tax every week and still pay for your medical expenses. See the infographic to the right that illustrates the possible tax savings.
- Use your Flex Account for:
  - > Doctor or dentist co-pays
  - > Prescription and many over-the-counter medicines
  - > Prescription eyeglasses and eye exams
  - > Many other medical expenses, even if not covered by your health plan.
- Flex Account money is “use it, or lose it.” If you haven't spent



Let's say you make \$1,000 in a month and are taxed 37% for state, federal, and other taxes. You would have \$630 in take-home pay. If you have \$100 in medical expenses that month, you would have \$530 left after paying your medical bills. But, if you put \$100 in your Flex account instead, you would be taxed 37% on \$900 (your wages minus \$100 Flex contribution). After paying your medical bills, you would have \$567 left—a savings of \$37.

- all your Flex Account dollars by the end of 2010, take the opportunity to stock up on allowed items and services.
- Most people have at least \$200 of eligible expenses they could cover with a Flex Account and save themselves on their taxes.

\* Members enrolled in the HDHP may not contribute to a Flexible Spending Account, but may contribute to a Health Savings Account (HSA).

## Dependent Care Accounts

All UFCW members working at Meijer may make pre-tax contributions through paycheck deduction to a Dependent Care Account (DCA) to pay for child care expenses (for children under age 13), starting at the beginning of the Plan Year or within 45 days after hiring. In contrast to a Flexible Spending Account, you can withdraw only the money you've contributed to a DCA up to that point in the year.

**5** You can find more information about DCAs on the mBenefitsConnect web site.

## DEFINITIONS

### What is the difference between “onboard” and “hereafter” part-time employees?

Part-time employees hired before September 14, 2003 are known as “onboard.” Those hired on or after that date are called “hereafter” in many company documents. We used these terms in this Guide to be consistent with those documents.

### What is a “co-pay”?

An individual’s share of the cost for certain services, such as \$20 for a doctor’s office visit. A co-pay is a flat fee, while co-insurance is a percentage of a service’s cost.

### What is “co-insurance”?

Co-insurance is the part of health care costs that you pay for. This is usually listed as a fraction such as 80/20, meaning you pay 20% of a service’s cost. You still pay co-insurance even after you meet your plan’s deductible.

### What is a “deductible”?

A deductible is the amount of expenses covered by a plan that you must pay out of your own pocket before the plan makes payments for covered benefits.

## FREQUENTLY ASKED QUESTIONS

### What should I look for in 2010?

- The Integrated Health Plan (IHP) has been significantly improved.
- Online enrollment booklet. You will not receive an enrollment booklet in the mail - you may view the information at mBenefit Connect or see your Retail Administrative Assistant for a hard copy.
- Preventive care is covered 100% for all plans and diabetic diagnostic lab procedures and diagnostic cancer screening benefits have been improved.
- Generic prescription drugs cost have been reduced to \$4 for a 30 day supply.
- New Eligibility - you may qualify for your benefits sooner!

### What is the “Wellness Discount”? How do I qualify for them?

Wellness Discounts are lowered rates you pay for your health plan. You can continue to receive the full wellness discount rates if you and your enrolled spouse\*:

- Complete the Health Risk Assessment by January 31, 2010 for the majority of Health Care plans.
- If you have selected Priority West and East you have until March 31, 2010 to complete your HRA and if you have selected the Premier Health Network or BCN HMO you have until March 31, 2010 to complete your HRA.
- Participate in your personal health plan, created based on your HRA answers
- A partial discounted rate is paid if you have an enrolled spouse and only one of you completes the HRA and follow up activities.

### What if I do not want to answer the “Tobacco-Free Incentive” question and/or the “Spouse Surcharge” question?

If you are enrolling your spouse in your medical plan you must respond during the enrollment process

about your spouse's coverage status. You must answer the Tobacco-Free question. Answer both of the sections in order to avoid a non-refundable surcharge.

### What is the “Tobacco-Free Incentive”?

To keep costs low and so everyone pays his or her fair share, those who don’t use tobacco products or complete a tobacco cessation program will receive a discount on their health plan costs each week:

- \$3 discount for the PCP or ECP
- \$5 discount for all other plans
- Discount applies for each adult who pledges he or she is tobacco-free

*You must respond during the online enrollment process about tobacco use to receive the Tobacco-Free Incentive. See the Enrollment Booklet for more information.*

### What is the “Spouse Surcharge”?

Spouses of members who have access to other employers’ health plans may choose to enroll in Meijer plans instead. However, they will pay a weekly surcharge:

- None for the PCP
- \$15 for the ECP
- \$25 for all other plans

*If you are enrolling your spouse in your medical plan, you must respond during the online enrollment process about your spouse’s coverage status to avoid a non-refundable surcharge. See the Enrollment Booklet.*



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3270 Evergreen Drive NE  
Grand Rapids, MI 49525

Phone: 616.361.7683  
Toll-free: 800.999.0951

[ufcw951.com](http://ufcw951.com)  
[information@ufcwlocal951.com](mailto:information@ufcwlocal951.com)

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