

City of Morgantown Group Health Plan

Summary of Plan Document Revisions Effective January 1, 2014 (unless otherwise indicated below)

- Inserted all previously approved amendments into the Plan Document.
- Removed the ERISA Section and ERISA language throughout the document except where mandated by COBRA. Replaced it with language for municipalities provided by BAC's legal counsel.
- Revised the agent for legal process.
- Added Vision Benefits – 1 eye exam and 1 pair of glasses or contacts per year, City of Morgantown pays 80% of costs up to a maximum annual benefit of \$200 for active employees and their beneficiaries.
- Revised the name of the plan, due to the addition of vision benefits, to City of Morgantown Group Health Plan which will allow the City to add or delete ancillary benefits as necessary without further revision to the Plan name.
- Replaced the spousal carveout language with spousal surcharge language. Requirements remain the same, Spouses meeting these requirements may remain on the plan but must pay a surcharge.
- Replaced the Qualified Medical Child Support Order language with the National Medical Support Notice language used by non-ERISA plans.
- Removed the reference to the Best Doctors program that was removed due to lack of use.
- Clarified under the Prescription Drug Benefit that as of January 1, 2011 the City of Morgantown no longer offers the prescription drug benefit to Medicare-eligible retirees.
- Medicare eligible retirees may remain in the City's active Plan but must pay the full premium cost. The City is continuing the group sponsored Medicare Plan and is currently paying 20% of the cost.
- Due to state code provisions, revised coverage for Eligible Retirees to state that Employees hired on or after January 1, 2011 are eligible for retiree coverage under the City of Morgantown retiree plan but must pay the full cost or a higher percentage share of cost than pre January 1, 2011 hires. Should these employees leave the plan at retirement, they may make a 1 time election when they become Medicare eligible to join the City's group sponsored Medicare Plan, but may not rejoin the active Plan. Contact the Plan Administrator for further information.
- Added the future deductible increase for retirees to the document (all previously approved), effective 01/01/16, increasing retiree deductibles to the same level as the active employees.

ACA Regulation Changes:

- Revised Annual Maximum Benefit to Annual Maximum Benefit For Nonessential Health Benefits and revised the \$5,000,000 All Benefits limitation to \$5,000,000 All Nonessential Health Benefits to comply with ACA regulations for plan years beginning on or after 01/01/14, all annual dollar limits on Essential Health Benefits are prohibited.

- Added an exclusion date of January 1, 2014 after Pre-Existing Conditions since pre-ex can still be applied for adults up to that date but can no longer be applied as of that date to comply with ACA regulations.
- Removed the termination of coverage provision for when an Employee, Retiree or Dependent exhausts the Plan's individual Lifetime Maximum Benefit. ACA regulations no longer allow a lifetime maximum.
- Revised Claims Processing Procedures to comply with the ACA regulations.
- Revised the definition of Essential Health Benefits as defined by ACA regulations.