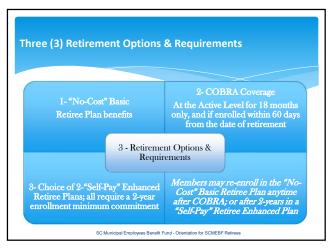


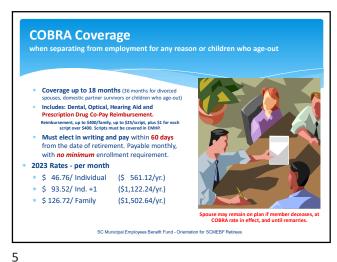


2



COBRA - Consolidated Omnibus Budget Reconciliation Act Gives workers and their **Resignation or Retirement** families who lose their Involuntary job loss health benefits: Reduction in work hours the right to continue Transition between: group benefits provided Jobs/Retirement by their group health/supplemental Death Divorce plan. for limited periods of Aging-out time under certain Cost: circumstances such as: * 102% of the cost to the plan. SC Municipal Employees Benefit Fund - Orientation for SCMEBF Retir

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"NO-COST" Basic Retiree Benefits ~ County DOES NOT contribute to the Fund on behalf of Retirees Annual maximum of \$750 per calendar year per family. Annual maximum of \$500 per calendar year per individual. (same as active members) \$100 per calendar year per covered person * Hearing Aid Co-Pay Reimbursement * \$400 every 36 months per covered person for any out-of-pocket costs, after payment by EMHP, must submit EOB If you choose to remain on the No-Cost basic plan upon retirement, you will have the option to move to a Self-Pay Plan at any time. SC Municipal Employees Benefit Fund - Orientation for SCMERE Retire

More on Retiree Plans

'Self-Pay" Enhanced Retiree Plans

- * Flexibility to choose from two (2) separate plans, all at the Active level of coverage according to individual needs.
- Must maintain plan selection for 2-consecutive year minimum, before opting back to a "No-Cost" Basic Retiree
- * If member deceases, Spouses (until remarried) and eligible dependents (until aged-out) may remain on whichever plan they are in at time of the member's death by paying the premium rate in effect for that plan. (Rates subject to ch
- Domestic Partners, if approved prior to retirement only eligible for 36 months of COBRA Coverage upon the death of the member.

SC Municipal Employees Benefit Fund - Orientation for SCMEBF Retirees

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- * Premium- \$700-Ind.; \$1,400-Ind. +1; \$2,100-Family
- * Dental, Hearing Aid and Optical.
- * Premium Plus T- \$950-Ind.; \$1,700-Ind. +1; \$2,450- Family
- * Dental, Hearing Aid, Optical Prescription Drug Co-pay Reimbursement and Tax Preparation Reimbursement.
- When a retiree "drops-down" to the "No-Cost" Basic Retiree Plan, they must remain in the "No-Cost" Basic Retiree Plan for at least two (2) consecutive years before being given the opportunity to reenroll in one of the "Self-Pay" Enhanced Retiree Plans.
- Choose one (1) of two payment options:)
- 2. Semi-Annually
- 3. Annually Legal Plan Add-on \$108/annually

SC Municipal Employees Benefit Fund-Orientation for SCMEBF Retirees

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Lincoln

The Trustee's are proud to announce a new partnership with Lincoln Financial Group. With this exciting new partnership, the Benefit Fund member will now have access to additional benefits for Life Insurance at no cost to the member.

· Flat 5K Life Insurance for all Retirees Members

https://lincolnfinancial.com/public/microsite/SCAME/home

Lincoln Financial 1-800-423-2765

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MetLife | Identity & Fraud Protection Powered by AURA

Make the internet a safe place for you and your loved ones.

Effective 6/1/23

Aura provides you and your loved ones with a benefit that is simple and easy to stay safe.

Included at no cost to you is the Protection Family Plan, which covers you and 10 additional adults (need not live at the same address) as well as 10 minors (under the age

Provides superior identity theft and financial fraud protection

Keep your online accounts and identity secure.

Get near-real time fraud alerts.

Prevent criminal damages from fraud.

Monitor your credit profile.

Get personalized support and \$5 million in ID theft insurance.

Visit https://my.aura.com/start/scmebf or call Aura at 833-552-2123.

SCME Benefit Fund Orientation Presentation 2023

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Appeals Procedure

- A member has the right to appeal any claim which has been denied, in whole or in part, within 180 days after receipt of denial notice.
- All Appeals for Vision, Tax and Retiree Basic Plan must be in writing addressed to:
- The Board of Trustees
- SCME Benefit Fund 30 Orville Drive, Suite D Bohemia, NY 11716-2513



All Dental Appeals must be in writing addressed to: Healthplex

333 Earle Ovington Blvd., Suite 300 Uniondale, NY 11553-3608

too the Living and Livinge self-housed, the Board to bringer has the ability to grant appeals to anyone on the Fully-fraunced Priese cluddes No-Cod Beatle Reference & Board Rotters Codo Interhence, All appeals may be made directly to Healthyles prospected to the codures, which are listed on the denial letter received by the member. The member should immediately check the date of their denial or and file within the required 150 days.

Congratulations and Good Luck!



Please remember to keep the Benefit Fund up-to-date with all information changes including, change of address, phone numbers, and dependent status, and beneficiaries.

SC Municipal Employees Benefit Fund - Retiree Benefits©

To the extent this retiree benefit presentation describes any benefit provided by this Fund, which is already described in the Fund's comprehensive Legal Service Plan Guide or the Benefit Reference Guides, as amended in subsequent writings by the Fund, or a policy of insurance, the language of the 2008 Benefit Reference Guide, as amended, and/or the group insurance contract, which specify the exact benefits provided will govern in the event of inconsistency between it and the language of this presentation.

SC Municipal Employees Benefit Fund - Orientation for SCMEBF Retiree

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