

LLNS 2024 Settlement Supplement

As you are aware, the 2024 Open Enrollment process for your LLNS retiree medical plan benefits has ended. This summary provides details about the Settlement Supplement that Class Members will receive for eligible expenses as of January 1, 2024. This Settlement Supplement helps offset a portion of your out-of-pocket costs (i.e., premiums and eligible unreimbursed medical expenses) for the health care coverage option you selected during the 2024 LLNS Open Enrollment period.

We are pleased to announce that the 2024 Settlement Supplement will be increased over 2023 by **7.0%**. Please see the chart below for the amount of the Settlement Supplement by option for 2024.

Enrolling in a Medical Plan

To be eligible for the Settlement Supplement, you must elect medical coverage as of the start of the plan year (1/1/2024) under one of the **LLNS-sponsored plans**. For ***Medicare-eligible Class Members***, this means selecting an option with *Via Benefits (either a Medicare Supplement or Medicare Advantage plan) or Kaiser Senior Advantage (through Empyrean)*. For the ***non-Medicare eligible Class Members***, this means choosing coverage under one of the *Anthem Blue Cross plans offered or through Kaiser (also through Empyrean)*. Their contact information is listed below.

The amount of the Settlement Supplement differs depending on the plan option and your family coverage category (e.g., retiree-only, retiree plus spouse).

If you do not receive a Supplement but believe you are eligible to receive one, please contact ARCHER as soon as possible. ARCHER will request that you provide proof that you have made a valid health care plan election, as described above. Valid forms of proof are (1) a confirmation statement showing that you have enrolled through LLNS in a qualified medical plan or (2) a premium statement showing that you have been paying premiums starting 1/1/2024.

Help with LLNS Benefit-Related Questions

There are several options to obtain help with questions during and after Open Enrollment. Depending upon your eligibility group, the LLNS medical plans are administered through either Via Benefits or Empyrean. You can contact them with questions regarding detailed plan benefits and coverage. If you are (1) not Medicare-eligible or (2) in Kaiser Senior Advantage, contact Empyrean representatives at (844) 750-5567. Their website is <https://compass.empyreanbenefits.com/llns>. The Via Benefits toll-free number is (866) 682-4841; their website is <https://my.viabenefits.com/LLNS>. If the reach out to Via Benefits or Empyrean fails, the LLNS Benefits department can be reached at (925) 422-9955 and by email at llnl-benefits@llnl.gov.

We understand that sometimes Class Members may need extra assistance. We ask that you please start with the providers, but if you have further requests or do not receive a satisfactory response, contact us by calling the ARCHER toll-free number 1-800-978- 8522 or email us at llnretireesettlement@archersystems.com. **Email communication is preferred to provide the most accurate and timely response.**

Important Note: Empyrean, LLNS Via Benefits and the LLNS Benefits Department will not have information about the Settlement Supplement – which is separate from LLNS. Questions regarding the Settlement Supplement should be **directed to [LCASE Via Benefits](https://my.viabenefits.com/lcase) through the website at <https://my.viabenefits.com/lcase> or by phone at 833-939-1210. Please remember when speaking with a Via Benefits representative to refer specifically to the [LCASE Supplement](#).**

Considerations if you are Medicare-eligible

If you are Medicare-eligible and electing your Medical/Rx plan under Via Benefits, the 2024 annual Settlement Supplement provides \$706 per Class Member. The Settlement Supplement can be used to offset the premiums for the coverage you elect. It can also be used to reimburse yourself for eligible medical expenses.

For those electing Kaiser Senior Advantage, your annual premium for coverage is \$3,197.88, an increase of almost 17% from 2023. Assuming you had 20+ years of service at retirement, you would receive \$2,450 from LLNS, and your 2024 annual Settlement Supplement will be \$717 per Member for a total of \$3,167. You can apply this to your premium and will only have \$30.88 remaining to pay out of pocket.

Please note that all references assume 20 or more years of service. If you worked for fewer than 20 years, you receive a prorated share of the LLNS HRA contribution; however, all class members receive the same basic Supplement amount.

Considerations if you are non-Medicare eligible

If you are non-Medicare eligible, key considerations include how expenses are reimbursed under each option and how much you must pay to purchase the coverage. Below is a link to the page with all of the applicable plans for your reference: <https://www.llnl.gov/join-our-team/benefits/retirees/medical-plan-options>. You can also find links to other available benefit plans.

Once you review the available options, you can compare the premium amounts for each coverage to see how the Settlement Supplement provides additional funds for your medical coverage purchase. For example, assume you are an over-age 65 Class Member with 20+ years of service upon retirement and elect retiree-only coverage. The table below shows your net out-of-pocket cost for the premium *after the Settlement Supplement is taken into consideration*.

Plan Option (Retiree Only)	Annualized Premium Cost	Annual Settlement Supplement	Net Premium Cost ¹
Kaiser	\$5,064	\$2,582	\$2,482
Anthem Blue Cross Plus	\$11,784	\$8,617	\$3,167
Anthem Blue Cross PPO	\$6,696	\$4,021	\$2,675
Anthem Blue Cross Core Value	\$1,260	\$0	\$1,260
Anthem Blue Cross Core HDHP	\$2,532	\$40	\$2,492
Anthem Blue Cross EPO	\$5,172	\$2,623	\$2,549

¹You will still pay the full premium to LLNS for coverage. The Settlement Supplement will be reimbursed separately as expenses are incurred.

The second column (“Annualized Premium Cost”) is the annual amount you will pay **without** the Settlement Supplement. The third column (“Annual Settlement Supplement”) is the Settlement Supplement you would receive depending on the option chosen. The last column (“Net Premium Cost”) shows your final premium cost for coverage **with** the Settlement Supplement.

The above example shows that for a Class Member who is comparing the Blue Cross Plus Plan to the Blue Cross HDHP plan, the person would pay \$3,167 for the Blue Cross Plus plan and \$2,492 for the HDHP plan **after** receiving the Settlement Supplement.

Note: Please keep in mind that a larger Settlement Supplement does not necessarily mean you will have the lowest out-of-pocket premium costs. The Settlement Supplement is intended solely to offset a portion of the underlying cost of the plan.

Settlement Supplement Availability

The Settlement Supplemental payment into your new HRA is scheduled to be available by the end of February 2024. Please note that **any eligible unreimbursed expenses incurred on or after January 1, 2024**, will be eligible for reimbursement.

Please remember you must provide bank account information for Via Benefits to reimburse you. If you have not provided this information, please visit the Via Benefits website at <https://my.viabenefits.com/lcase> or call 833-939-1210.

For additional information, please see our Frequently Asked Questions:
<http://www.llnretireesettlement.com/faq.php>

Settlement Supplements Effective January 2024

Medicare Eligible Class Members

1. Members electing plans through Via Benefits - \$706 per member per year
2. Members electing Kaiser Senior Advantage. - \$717per member per year

Non-Medicare Eligible Class Members

2024 non-Medicare 65 and Over Annual Retiree Supplemental Payment						
Coverage Category	Kaiser	Anthem Blue Cross PLUS	Anthem Blue Cross PPO	Anthem Blue Cross Core Value	Anthem Blue Core HDHP	Anthem Blue Cross EPO
Retiree only	\$2,582	\$8,617	\$4,021	\$0	\$40	\$2,623
Spouse only	\$2,858	\$9,505	\$4,406	\$0	\$74	\$2,918
Retiree + Spouse	\$5,440	\$18,107	\$8,427	\$0	\$86	\$5,525
Retiree + Children	\$4,672	\$15,519	\$7,221	\$0	\$77	\$4,750
Spouse + Children	\$4,932	\$16,391	\$7,639	\$0	\$122	\$5,044
Retiree + Spouse + Child	\$7,530	\$25,009	\$11,645	\$0	\$136	\$7,652
Children only	\$74	\$6,082	\$3,479	\$0	\$1,424	\$2,682

2024 non-Medicare Pre-65 Annual Retiree Supplemental Payment						
Coverage Category	Kaiser	Anthem Blue Cross PLUS	Anthem Blue Cross PPO	Anthem Blue Cross Core Value	Anthem Blue Core HDHP	Anthem Blue Cross EPO
Retiree only	\$94	\$7,608	\$4,336	\$0	\$1,797	\$3,362
Spouse only	\$100	\$8,366	\$4,772	\$0	\$1,988	\$3,717
Retiree + Spouse	\$194	\$15,990	\$9,125	\$0	\$3,784	\$7,062
Retiree + Children	\$169	\$13,691	\$7,814	\$0	\$3,251	\$6,059
Spouse + Children	\$157	\$14,462	\$8,252	\$0	\$3,427	\$6,398
Retiree + Spouse + Child	\$269	\$22,072	\$12,586	\$0	\$5,224	\$9,774
Children only	\$74	\$6,082	\$3,479	\$0	\$1,424	\$2,682

Each year, the trustees will decide the supplement amount to be provided. Please note that future payment amount(s) may be modified to increase or decrease the supplemental payment in future years based on actual costs, market trends, or other relevant information.

Expense Reimbursement Proper Documentation Checklist

When submitting supporting documentation for premium expenses:		
Provide a supporting document that shows this information:		
▪ Premium coverage period (e.g., 01/01/2020 – 12/31/2020)	▪ Premium type (e.g., Medical, Medicare Part B)	▪ Carrier (e.g., Humana, N/A for Medicare Part B)
▪ Individual serviced (e.g., John Doe)	▪ Monthly amount (e.g., \$200.00)	

When submitting supporting documentation for out-of-pocket expenses:		
Provide a supporting document that shows this information:		
▪ Date of service (e.g., 01/01/2020)	▪ Expense type (e.g., Copay)	▪ Provider (e.g., Dr. Smith, CVS)
▪ Individual serviced (e.g., John Doe)	▪ Amount (e.g., \$100.00)	