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June 1, 2012

Mr. Tom Dalzell, Business Manager Local Union No. 1245 International Brotherhood of Electrical Workers, AFL-CIO P.O. Box 2547 Vacaville, CA 95687

Dear Mr. Dalzell:

This letter and its attachments will confirm the table agreement reached by the Company's Negotiating Committee and the Union's Negotiating Committee in General Negotiations with respect to the IBEW Physical Agreement; and the Medical, Dental, Vision Agreement and Benefits Agreement ("Benefits Agreements").

#### **Union Committee Position**

The Local 1245 Bargaining Committee and Union Business Manager are recommending a "Yes" vote on the ratification of these new tentative agreements.

#### **Ratification Vote**

The Company's GWI, Working Conditions, and Benefits proposals are dependent upon ratification of both the Physical Agreement and Benefits Agreements. Implementation of the GWI, working conditions and benefits changes will not occur until both the Physical Agreement and Benefits Agreements are ratified.

#### **Term**

The Physical Agreement; Medical, Dental, Vision Agreement; and Benefits Agreement each will have a three-year term of January 1, 2012 through December 31, 2014.

#### <u>Wages</u>

The Company will grant a general wage increase, using normal rounding, of 2.75 percent (2.75%) retroactive to January 1, 2012; 2.75 percent (2.75%) effective January 1, 2013; and 2.75 percent (2.75%) effective January 1, 2014.

# **Suspend Letter Agreement 10-36**

PG&E and Local 1245 agree on the importance of creating a new safety culture at the Company. Both parties want to see the Company become a leading organization in the areas of public and employee safety. Toward that end, the parties agree as follows:

- 1. The parties agree that this provision will supersede Letter Agreement 10-36, which amended the Positive Discipline System. Letter Agreement 10-36 was intended to allow the Company to consider an employee's overall safety record, both positive and negative in making discipline decisions. The Agreement was designed to prevent an employee from being terminated for a minor offense simply because the employee had an active DML. It was also designed to hold more accountable employees who had historically poor safety records. In practice, the Agreement was used to support lesser discipline as many times as it was used to support greater discipline. Regardless, employee perception of the Letter Agreement was negative. Because the parties believe that the existence of Letter Agreement 10-36 became a distraction from the far more important goal of achieving the highest levels of public and employee safety, they agree to suspend the Agreement.
- 2. In suspending the Agreement, both parties are mindful that doing so could send the wrong message. Therefore, the parties affirm that they are committed to improving both the safety culture and performance of PG&E. The Union agrees that employees with poor safety records should be held accountable. The Company believes that minor safety infractions may not always result in escalated discipline.
- 3. The parties acknowledge that a discipline system is a necessary component of any leading safety policy.
- 4. The parties also acknowledge that near miss reporting, corrective action procedures and risk avoidance in general are equally necessary components.
- 5. The parties agree that the current PD system could be improved. Accordingly, the parties agree to establish a Joint Company-Union Safety Committee on how to deal with safety offenses.
- 6. If the parties are unable to reach agreement, the parties may agree to defer the issue to an arbitrator for resolution or the Union may cancel Letter Agreement 10-36.

#### Meals

- Maintain current contract language pending review and agreement of new language by a Joint Company-Union Meals Committee.
- Upon contract ratification, suspend itemized receipt requirements and menu restrictions for meals \$30 or less.
- Itemized receipts will be required for meal expenses over \$30 and the menu restrictions under the Meals Supplement will apply.
- Establish Meals Committee
  - Until new provisions are established, this committee will review itemized receipts of meal expenses over \$30 to determine if they are reasonable.

 Committee will develop a joint recommendation to modify the meal provisions. If the parties are unable to reach an agreement, either party may submit the dispute to an arbitrator for resolution.

# Commercial Driver's License Addendum (CDLA)

- The CDLA premium (\$600) will be added to the hourly wage rate for current employees
  that are required to have a commercial driver's license as part of the job definition,
  eligible or required by letter agreement, or based upon the Company and Union's current
  understanding that employees utilize a commercial driver's license for the convenience
  of the Company.
- Upon ratification, all new hires, bidders and transfers from outside the lines of progression to Gas and Electric T&D, General Construction Gas and Line Departments or other Departments as described herein will be required to have and maintain a CDL as part of their job duties and will not receive additional compensation.
- Incumbent Gas and Electric T&D employees who bid/transfer into CDL positions will be eligible for the higher wage rate, which includes the \$600 premium in base.
- Maintain accommodation language in LA 90-113
- 150% ratio of employees with CDL to vehicles at the headquarters.

See attachment.

### **Grievance Timelines**

Provisions have been added to the grievance language to facilitate the more timely resolution of grievances.

# Job Bidding

- The maximum number of bids on file at a time will be 80.
- During discussions on the job bidding process, the Company clarified how Hiring Hall employees receive consideration for regular positions with the Company. In general, candidates with Hiring Hall experience are typically placed at a higher tier for consideration than those with no experience.

# **Ad Hoc Committees**

The parties agreed to establish several Ad Hoc Committees consistent with Title 400 of the Physical Collective Bargaining Agreement.

See attachment.

#### **Medical Plan**

PG&E and the IBEW acknowledged the complexity of healthcare issues early in the joint education process this year and decided to work collaboratively with consultants and experts from both sides sharing data and researching options to propose common ground solutions.

The goal was to design a plan that focused on keeping employees healthy while at the same time keeping premiums and out-of-pocket costs among the lowest in the nation.

In response to feedback from employees on the previously proposed medical plan, the parties made the following adjustments to the proposed medical plan:

- A phased-in approach of the medical plan changes in 2013 and 2014: effective 2013, reduce healthcare administrators from 4 to 2 and continue 2012 medical plan design; effective 2014 implement jointly developed single plan design with 2 plan administrators.
- Simpler health incentives that enable employees to have a \$0 deductible under the new health plan design;
- Additional health account funding for employees whose wage rate is at or below the 2<sup>nd</sup> step of the Service Rep 1 classification;
- Enhanced mental/behavioral health provisions; and
- Except in the limited circumstance described below, the parties agree that they will not seek modifications to the HRA funding, co-insurance, deductible, and out of pocket maximum (OOP) levels over the next 9 years. This obligation shall survive the expiration of the parties' current collective bargaining agreement and all future collective bargaining agreements through December 31, 2020. However, this obligation shall be null and void and the collective bargaining agreement shall be reopened on the topic of medical benefit plan design in the event there is a modification in the federal or state law regulations governing medical plan benefits or any other government agency ruling or pronouncement that results in a substantial and serious change in funding or costs associated with the medical benefits offered.

See attachment.

# **Medical Plan Collaboration**

The Company and Union will continue their joint collaboration to identify high-quality providers for various medical services.

#### Hearing Aids, effective January 1, 2014

Hearing aids to be covered at 80% for features determined medically necessary.

### Dental Plan, effective January 1, 2014

Dental implant coverage to be covered under major care of the Dental Plan.

# Vision Plan, effective January 1, 2014

Replaces the current VSP signature Plan with the VSP Choice Plan. See attachment.

# Cash Balance Pension Plan/Automatic RSP Enrollment

Effective January 1, 2013, new employees hired on or after January 1, 2013, will be covered by a new cash balance defined benefit pension plus increased employer match in the Retirement Savings Plan (RSP). The new plan will not affect employees hired before January 1, 2013, who will remain in the current pension plan. Current employees who might want the new pension

plan and higher RSP match will be given the option to elect the new plan effective 2014. The cash balance pension design will annually credit each employee with a percentage of pay which will accumulate with interest during employment. A higher employer match will automatically apply to RSP contributions made by employees participating in the cash balance plan. See attachment.

Effective January 1, 2013, employees participating in the cash balance plan will be automatically enrolled in the Retirement Savings Plan upon reaching eligibility for company matching contributions (one year of service). Automatic enrollment payroll deductions will equal the percentage of pay eligible for company match (8% of pay). Employees may increase, reduce or cancel the payroll deduction at any time.

In response to Union feedback, Company agreed to add a 10% Pay Credit band for participants with 80+ points (age + service).

Except in the limited circumstance described below, PG&E agrees that it will not in any future negotiation seek to transition those current employees who have elected to continue earning benefits under Part II of the Pacific Gas and Electric Company Retirement Plan to the Cash Balance provisions of the Plan and this obligation shall survive the expiration of the parties' current collective bargaining agreement and all future collective bargaining agreements. However, this obligation shall be null and void and the collective bargaining agreement may be reopened on the topic of pension in the event that there is a modification in the federal or state law or regulations governing the Plan or any other government agency ruling or pronouncement that results in a substantial and serious change in funding obligations or other cost associated with the Plan.

# Pension Adjustment

Certain retirees will receive a pension adjustment as follows effective March 1, 2012:

Retired before 1987

5.0%

# Group Life Insurance Changes effective January 1, 2014

This is a packaged offering for life insurance plan provision changes including expanded age-rated supplemental life insurance benefit options to employees that will replace the flat rate premium. New benefits included in this packaged proposal would be Spousal/Domestic Partner, Child and Accidental Death and Dismemberment (AD&D) insurance options and enhanced Will Preparation benefits.

The benefit design and costs for supplemental life insurance and other ancillary benefits such as Accidental Death and Dismemberment, and dependent coverage options, and other administrative changes are provided in Attachment C.

#### **LTD Adjustment**

Effective January 1, 2013, participants who are receiving Long-Term Disability benefits will have their monthly LTD benefit increased by the following adjustments:

Date of LTD Eligibility	<u>Increase</u>
Before January 1, 2000	5.0%
1/1/00 to 12/31/06	2.5%

# **Board Approval and IBEW Membership Ratification**

All proposed changes to the agreement reached for the general wage increase and Benefits are subject to PG&E Corporation Compensation Committee approval and ratification by the IBEW membership.

# **Effective Date**

The changes made in the Table Settlement for the Medical, Dental, Vision Agreement and Benefits Agreement will have an effective date as noted.

Attached are amended Contract sections as agreed to during the negotiations, as follows:

- A. Physical Agreement and its Exhibits, Supplements
- B. Medical, Dental, Vision Agreement
- C. Benefit Agreement

If any of the above or the attachments thereto are not in accordance with your understanding of our settlement, please let me know immediately.

Sincerely,

Stephen A. Rayburn Director and Chief Negotiator

Attachments

#### **ATTACHMENT A**

#### PHYSICAL AGREEMENT

# TITLE 3. CONTINUITY OF SERVICE

3.2 The duties performed by employees of Company as part of their employment pertain to and are essential to the operation of a public utility and the welfare of the public dependent hereon. During the term of this Agreement employees shall not partially or totally abstain from the performance of their duties for Company including to support a strike or labor action initiated by another union or a strike or labor action taken by a separate bargaining unit of the same union. Union shall not call upon or authorize employees individually or collectively to engage in such activities and shall make a reasonable effort under the circumstances to dissuade employees from engaging in such activities, and Company shall not cause any lockout. (Amended 1-1-12)

# **TITLE 4. UNION SECURITY**

# 4.1 AGENCY SHOP

- (a) No change.
- (b) Any employee of Company in a classification represented by Union and who, on December 1, 1970, was an employee and was not a member of the Union, and who remains an employee continuously after December 1, 1970, is exempt from the provisions of Subsection 4.1(a) unless he or she becomes a member of Union.

  \*\*Provision will no longer apply.\*\*

  [Amended 1-1-12]
  - (c) No change.
  - (d) No change.
  - (e) No change.

#### **TITLE 101. LEAVE OF ABSENCE**

#### 101.9 FUNERAL LEAVE

- (a) If at all possible a, A regular employee will be granted up to three days off with pay if a member of the immediate family dies. the actual time off with pay necessary to attend the funeral of a member of the immediate family, including the time the body may lie in state and the day of the funeral, and the time necessary to travel to and from the location of the funeral, but not to exceed three workdays. Unused vacation or floating holidays may be granted to extend an employee's funeral leave beyond the three days provided for above or personal time off without pay for the time needed will be granted. The immediate family shall be limited to: an employee's spouse or employee's registered domestic partner, parent, grandparent, grandparent-in-law or grandparent of employee's registered domestic partner, parent-in-law or parent of employee's registered domestic partner, child or child of employee's registered domestic partner, grandchild, son-in-law, daughter-in-law, stepchild, brothers, sisters, half-brothers and half-sisters, step-brothers, step-sisters, foster parents, step-parents, aunts, uncles, or an individual who was a member of the employee's immediate household at the time of death. (Amended 1-1-12)
  - (b) No change
  - (c) No change

#### TITLE 102. GRIEVANCE PROCEDURE

#### **102.3 TIME LIMITS**

# (a) Filing

- (1) A grievance which involves the discharge of an employee must be filed not later than 14 calendar days after the employee is notified in writing of the discharge. Whether or not a grievance is filed, Company shall, at Union's request, state in writing the <u>specific</u> <u>factual and policy reasons</u> therefore within two workdays of such request. <u>(Amended 1-1-12)</u>
- (b) Steps One Through Five Extension of Time Limits No change.

### (c) Time Limit Compliance (Added 1-1-12)

Each month, the parties shall prepare a list of any grievances which have not been settled or referred within the time limit provided for in Step Two. The Fact Finding Committee agenda shall include a report out by the responsible Labor Relations Specialist and Business Representative regarding the reason(s) for the delay, what steps have been taken to process the grievance, and whether the Local Investigating Committee meeting is necessary and/or has been scheduled.

The Company and Union Fact Finders may direct the Labor Relations Specialist and Business Representative to settle the grievance based on agreed to facts, or instruct that the grievance be settled or referred by the next Fact Finding. Any grievances which have not been settled or referred by the next Fact Finding date will be reported to the Chair and Secretary of the Review Committee along with the information described in the paragraph above. The Review Committee Chair and Secretary will take whatever action they deem necessary to ensure the grievance is settled or referred.

Each month, the parties shall prepare a list of any grievances which have not been settled or referred within the time limit provided for in Step Three. The Review Committee agenda shall include a report by the Company and Union Fact Finders regarding the reason(s) for the delay, what steps have been taken to process the grievance, and when the grievance will be heard in Fact Finding.

The Chair and Secretary of the Review Committee may direct the Fact Finders to settle the grievance based on agreed to facts, or instruct that the grievance be settled or referred by the next Review Committee. The Review Committee Chairs will take whatever action they deem necessary to ensure the grievance is settled or referred. (Added 1-1-12)

#### (d) Expedited Grievance Decision (Added 1-1-12)

Prior to or following a Local Investigating Committee meeting, either party may request an Expedited Grievance Decision. A two person panel composed of the Company and Union Fact Finders will review the relevant factors of the grievance as presented by the Labor Relations Specialist and Business Representative. The panel may agree to provide instructions as to grounds for settlement which will be final and binding, but without prejudice to the position of either party. If the panel does not agree on a settlement, the grievance will be processed as provided for in the Local Investigating

<u>Committee Section. Use of this option does not waive or extend the grievance processing time limits. (Added 1-1-12)</u>

#### **TITLE 107. MISCELLANEOUS**

#### 107.2 SAFETY STRAPS

Initially employees <u>Company</u> shall furnish their own safety straps, which shall conform to Company specifications. When a safety strap is worn out in Company service, or is condemned by Company, it shall be replaced at no cost to the employee. <u>(Amended 1-1-12)</u>

#### 111.15 VOLUNTARY VACATION TRANSFER

- a) By local agreement between Company and Union, employees may voluntarily sell vacation and transfer the proceeds to an employee experiencing a medical emergency, (including a medical condition of a family member), who has insufficient leave available to cover their absence from work. In addition, and by local agreement between Company and Union, an employee may also sell vacation for the purpose of relieving personal financial difficulties experienced as a result of a medical emergency in his or her own family even though the employee may have paid leave available. (Amended 1-1-94)
- (b) By local agreement between Company and Union, employees may voluntarily sell vacation and transfer the proceeds to an employee's spouse upon the employee's death or to an employee upon the death of his/her spouse, registered domestic partner or child for the purpose of relieving personal financial difficulties experienced as a result of the death. (Added 1-1-12)

#### TITLE 205. JOB BIDDING, PROMOTION AND TRANSFER

#### 205.4 PREBID PROCEDURE

Any regular employee of Company may submit a prebid on any existing job classification and headquarters for which the employee desires consideration in accordance with the following procedure provided the employee does not exceed a combined maximum number of <u>80</u> 100 prebids and transfers. This maximum will not apply to employees subject to the provisions of Title 206.1. (*Amended 1-1-12* 1-1-09)

- (g) **Cancellation of Prebids:** Prebids are valid for a period of one year from the date of receipt or until such time as the employee changes classification and/or headquarters, or until such time as the employee rejects an appointment to the classification and headquarters (and shift, if appropriate) on which the prebid was made. Company will notify an employee of the cancellation of employee's prebids as indicated below. Cancellation shall be effective as follows:
  - (1) no change.
  - (2) no change.
- (3) immediately after any employee's change of headquarters, or position. (Amended 1-1-12 1-1-09)
  - (4) (Deleted 1-1-09)
  - (5) no change.
  - (6) no change.
- (h) **New Jobs at a Headquarters:** The Company shall post, on all bulletin boards throughout the System, a notice describing all new classifications at existing headquarters or any

job at a new headquarters in the Company, on the first or fifteenth of any month, as soon as such jobs are authorized to be filled. Such notice shall remain posted until the next Directory listing the new classification is posted on the bulletin board, but not less than 15 days. If no prebids are received 18 days after the date shown on the notice, or after two lists have been exhausted, Company <u>may</u> will have 60 days to fill the vacancy <u>at its discretion</u> under the provisions of Section 205.13. (<u>Amended 1-1-12 1-1-09</u>)

#### 205.5 FILLING BEGINNER'S CLASSIFICATIONS

- (h) Cancellation of Transfers: Applications for Transfer are valid for a period of one year from the date of receipt or until such time as the employee changes classification and/or headquarters, or until such time as the employee rejects an appointment to the classification and headquarters on which the transfer application was made. Company will notify an employee of the cancellation of employee's applications for transfer as indicated below. Cancellations shall be effective as follows:
  - (1) no change.
  - (2) no change.
- (3) Immediately after any employee's change of headquarters, or position. (Amended 1-1-12 1-1-09)
  - (4) (Deleted 1-1-09)
  - (5) no change.
  - (6) no change

#### 205.9 PREFERENCE BY LENGTH OF SERVICE

- (a) (b) no change
- In the event a conflict arises as to seniority between two (2) or more employees whose seniority date is the same, the following will be the sequence of consideration for the purpose of a tié-breaker:
- (1) any <u>regular</u> prior service as a Company employee shall be taken into consideration and the employee whose prior service is greater shall be deemed to have the greater seniority; (Amended 1-1-12)
- no change.
  (Deleted 1-1-12) the employee whose application was first filed with the Company will be deemed to have the greater seniority; or

no change

(c) no chánge

#### 205.13 APPOINTMENT TO UNBID VACANCY

- (a) No change.
- (b) No change.
- (c) When a journeyman classification is to be filled, employees in provisional classifications will not be considered qualified bidders for the journeyman classifications until having successfully completed their agreed-to Joint Apprentice Training Plan. (Added 1-1-12)

#### 205.15 NOTIFICATION TO UNION OF BYPASS

When an employee is to be appointed to fill a job vacancy in preference to an employee with greater Service, as provided in Section 205.7, Company shall notify Union of the decision prior to such appointment. Notifications will be limited to bypasses for reasons other than 1) lack of minimum qualifications and 2) wrong Line of Progression. (Amended 1-1-12 -88)

#### TITLE 301. EXPENSES – FIELD EMPLOYEES

#### **301.11 TRAVEL ALLOWANCE**

(b) Where possible, all travel time pursuant to this Section 301.11 shall be taken during regular work hours on a workday, and shall be compensated at the straight rate of pay for the classification the employee will hold at his or her new headquarters or point of assembly, except that if Company requires an employee to travel <u>for more than four hours</u> outside of regular work hours or on a non-workday, the travel time <u>outside of regular work hours or on a non-workday</u> in excess of four hours shall be paid at one and one-half times the straight rate of pay for the classification the employee will hold at his or her new headquarters or point of assembly. (<u>Amended 1-1-12</u>)

#### TITLE 305. JOB BIDDING AND PROMOTION

#### 305.4 TEMPORARY UPGRADES

(d) Each month Company shall provide Union with a list of temporary upgrades effected during the prior month. Such list shall include each upgraded employee's name, social security number personnel number, job headquarters, promotion-demotion area, the classification(s) to which each employee was upgraded and the hours each employee worked in such classification(s). This list shall be cumulative, reflecting hours worked in upgraded classification(s) during the prior 13 payroll periods. Additionally, each job headquarters will be furnished with a copy of that portion of the list which shows the upgrades effected in the Promotion-Demotion Geographic Area (as defined in Section 305.5) in which such headquarters is located. Employees shall be permitted to review the list upon request. (Amended 1-1-12 10-1-03)

#### **305.8 FILLING BEGINNER'S CLASSIFICATIONS** (Added 10-1-03)

- (e) Within ten calendar days after the first of each month, Company shall, within each department identified in Exhibit II and by promotion-demotion geographic area, provide Union information on beginning job vacancies that have been filled the previous month as follows: (Amended 10-1-03)
- (1) Name of individual, **social security number personnel number**, employment date and classification. **(Amended 1-1-12)** 
  - Classification of vacancy filled.
  - (3) Department and promotion-demotion geographic area of vacancy filled.
  - (4) Date vacancy filled.
  - (5) Show whether vacancy is regular or part-time.
- (6) Show whether vacancy is filled by transfer, new hire or new hire no transfers on file.

# 305.7 GENERAL CONSTRUCTION PREBID PROCEDURE

Any regular employee of Company may submit a prebid on any existing job classification and promotion/demotion geographic area, as defined in Exhibit II of the Agreement for which the employee desires consideration in accordance with the following procedure provided the employee does not exceed a combined maximum number of <u>80</u> 100 prebids and transfers. This maximum will not apply to employees subject to the provisions of Title 306. (<u>Amended 1-1-12</u> 1-1-09)

- (h) Cancellation of Prebids: Prebids are valid for a period of one year from the date of receipt or until such time as the employee changes classification or until such time as the employee rejects an appointment to the classification in a specific promotion-demotion geographic area (and shift, if appropriate) on which the prebid was made. Company will notify an employee of the cancellation of employee's prebids as indicated below. Cancellation shall be effective as follows:
  - (1) no change.
  - (2)no change.
- immediately after any employee's change of classification, or position. (<u>Amended 1-1-12</u> 1-1-09)
  - (4)(Deleted 1-1-09)
  - (5)no change.
  - (6)no change.

# 305.10 PREFERENCE BY LENGTH OF SERVICE (Added 10-1-03)

- When employees in the same preferential sequence as provided in Section 305.7 are each qualified by knowledge, skill, efficiency, adaptability and physical ability for appointment to a job, the bid of the employee with the greatest Service shall be given preference for appointment.
- In the event a conflict arises as to seniority between two (2) or more employees (b) whose seniority date is the same, the following will be the sequence of consideration for the purpose of a tie-breaker:
- (1) any <u>regular</u> prior service as a Company employee shall be taken into consideration and the employee whose prior service is greater shall be deemed to have the greater seniority; <u>(Amended 1-1-12)</u>
  (2) no change.
  (3) (Deleted 1-1-12) the employee whose application was first filed with
- no change.
  (Deleted 1-1-12) the employee whose application was first filed with the Company will be deemed to have the greater seniority; or
  - (4)no change.
  - (c) no change.

# **EXHIBIT II**

# GENERAL CONSTRUCTION PROMOTION-DEMOTION GEOGRAPHIC AREAS (Amended 1-1-12) For Use With Titles 305 and 306

**CLERICAL SERVICES** (All Departments) (including Camp and Kitchen Employees) (Amended 1-1-12)

1)	Humboldt and North Bay Divisions
<u>2)</u> 3)	Sacramento, Sierra and Vaca Valley
3)	North Valley Division
<i>4</i> )	San Francisco/Peninsula
5)	East Bay
<u>6)</u> 7)	Stockton
	San Jose and Coast Valleys
8)	San Joaquin

# EXHIBIT XVIII (Amended 1-1-12 Added 1-1-09) (Letter Agreement R2-05-67-PGE) CONDITIONS APPLICABLE TO NEW GENERATION POWER FACILITIES

(b) The provisions of Title 206 shall not be applicable unless an employee is subject to layoff for lack of work, then the employee's option will be limited to <u>Sections 206.5</u> and 206.6 to positions outside of New Generation. vacant beginning level positions that the employee is qualified to fill in the Company. The employee shall be entitled to Section 206.8 provisions. (Amended 1-1-12)

#### **INTER-PLANT TRANSFERS**

- (a) Employees may be temporarily assigned to other plants covered under this Exhibit for the purposes of operational and/or maintenance needs or the duration of an outage.

  Company shall first solicit volunteers for such assignments and selection will be made on the basis of qualifications and experience. The expenses shall be covered by Title 201. The parties agree that alternative arrangements can be worked out between the employee and the supervisor and the Local Business Representative.

  (Amended 1-1-12)
- (b) Employees can submit written requests for transfers to other plants covered under this Exhibit to regular or part-time positions. The Company shall determine the granting of transfers or hire by other means consider such requests on the basis of job performance and skills, the qualifications needed at the new work location, the impact on the employee's current work location and the number of times the employee has previously transferred. The Company shall also retain the right to fill such vacancies through new hire.

#### Lead Power Plan Technician (Added 1-1-12)

Regular Lead Power Plant Technician positions may be established at each plant. Such position shall receive a 10% wage increase over the Advanced Power Plant Technician rate.

Candidates will be interviewed by a panel consisting of a Company representative and one or more Technicians. The panel will consider such factors as job performance, experience, and leadership and technical abilities. If the panel is unable to reach a consensus, the final selection will be made by the Company representative. Employees who accept the position may be promoted effective on the date of the offer.

#### 4) Additional Job Responsibilities (Noted in LA 06-53, 09-13 and 09-49) (Added 1-1-12)

• Temporary assignments to Lead Power Plant Technicians are not intended to replace regular Lead positions but may be utilized for a trial period for regular assignments, increase work load, vacation relief, etc.

# Commercial Driver's License

As the result of discussions between the parties, the Company proposes to convert the \$600 CDLA premium to an hourly rate for those employees covered by a CDLA letter agreement. In addition, the Company proposes to extend the CDLA hourly wage rate to classifications covered by this agreement.

- For Electric T&D and Gas T&D Title 200 employees only, the parties agree to update Letter Agreement 90-113 (Commercial Driver's License Addendum—CDLA) to include (1) 150% ratio of employees with Commercial Driver's License (CDL) to vehicles at the headquarters and (2) employees on a daily upgrade currently paid at \$2.50/day shall now be upgraded to the CDLA designated classification.
- 2. Incumbent employees in the Gas and Electric T&D Departments or General Construction Line or Gas Departments who promote or bid/transfer into the Title 200 Gas and Electric T&D Departments or Title 300 Line or Gas Departments in the future will be eligible for the higher CDLA wage rate if the position requires a CDL by job definition or a CDL to meet the 150% ratio or the local headquarters desires an additional CDL for operating flexibility.
- Incumbent employees in the Title 200 and 300 Fleet Department shall be treated the same as above. The Company and Union will address other departments, if needed, consistent with this agreement.
- 4. In addition to the employee groups identified above, all employees with a CDL currently in physical bargaining unit classifications that require a commercial driver's license as part of the job definition, eligible or required by letter of agreement, or based upon the Company and Union's current understanding that employees utilize a commercial driver's license for the convenience of the Company, will have the \$600 premium added to the base wage rate.
- 5. Attached is a list of the impacted classifications. The Company and Union will review each classification to determine the future need for a commercial driver's license. It is not the intent of either party to omit classifications that utilize a commercial driver's license for the convenience of the Company, by letter of agreement or required by job definition, therefore, the parties agree to meet and discuss other classifications which may meet the criteria and were not included in the attachment.
- 6. There may be situations where the CDL is not required for all employees in a classification; however, due to operational need, a CDL may be required for individuals in that classification. The parties agree to handle these on a case-by-case basis via letter of agreement, where applicable.
- 7. Current and future Pre-apprentice Lineman will be required to maintain the CDL upon progression.
- 8. Upon ratification, all new hires, bidders and transfers from outside the lines of progression to Gas and Electric T&D, General Construction Gas and Line Departments or other Departments as described herein will be required to have and maintain a CDL as part of their job duties and will not receive additional compensation. Employees must

- obtain a Class A permit by month 3 and a Class A driver's license within 12 months unless Company is unable to provide timely training.
- 9. For departments such as Fleet, new hires, bidders and transfers shall be treated the same as above. The Company and Union will address other departments if needed, consistent with this agreement.
- 10. Accommodation of Current Employees Without Licenses: Employees who are currently being accommodated in a position requiring a license will continue to be accommodated unless there is significant change in local operating conditions which prevent the accommodation or the employee's condition changes.
- 11. Future Accommodation of Employees with Suspended Licenses: Employees who currently possess a license, but have their license temporarily suspended or who are temporarily unable to drive for other reasons, will be considered for accommodation on a case by case basis taking into consideration local operating conditions and the length of the suspension or inability to drive. Accommodation decisions will be subject to the grievance procedure.
- 12. Employees unable to maintain CDL for a medical condition will be reviewed for accommodation on a case-by-case basis. Accommodation decisions will be subject to the grievance procedure.
- 13. Company shall pay all cost associated with obtaining and maintaining the CDL.
- 14. The Company is meeting with SAP/Payroll to determine how to include the CDL premium into the base wage rate. The Company will discuss alternatives with the Union and reach agreement on the process used.
- 15. The wage rate changes will be effective upon SAP implementation or no later than November 1, 2012. The parties agree to retroactively include the CDL base wage rate for retirement calculation purposes for covered employees who retire on or after July 1, 2012.

# CDL Attachment

Title 200 & 300 Classifications currently holding CDL required by Job Definition, LA (93-39) or

Title 200 Classifications eligible for CDLA Premium per LA 90-113, 92-28 (PLO) or 90-228 (Fleet).

Note: Bolded Lines reflect T200 Classifications currently receiving CDL per LA

PS			Pay Scale
Type	Job Code	Job Title	Group
T2	50010376	Apprentice Cable Splicer	2281
T2	50010155	Apprentice Electrician-Electric & Hydro	0481
T2	50010168	Apprentice Fitter	0561
T2	50010245	Apprentice Lineman	1101
T2 T2	50010260	Apprentice Lineman Transmission	1188
T2	50010375	Cable Splicer	<b>2280</b>
T2	50010317 <b>50010191</b>	Crane Operator Electric Crew Foreman	1594 <b>0740</b>
T2	50010191	Electric Crew Foreman - Transmission	0740
T2	<b>50010193</b>	Electric Maintenance Crew Leader	<b>074</b> 0
T2	50010194	Electric Transm & Dsbn Assistant	1096
T2	<b>50010149</b>	Electrician - Electric & Hydro	<b>0467</b>
T2	50010143	Equipment Mechanic	1255
T2	50010276	Equipment Mechanic - DCPP	1259
T2	50010320	Equipment Operator - Gas	1645
T2	50010147	Field Clerk - Electric Transm & Dsbn	0458
T2	50010161	Fieldperson	0524
T2	50010167	Fitter	0560
T2	50010170	Fitter – Arc	0562
T2	50010186	Garage Subforeman	0730
T2	50010427	Gas Control Technician - CGT	2435
T2	50010175	Gas Crew Leader Non-Welding	0641
T2	50010174	Gas Crew Leader Welding	0640
<b>T2</b>	50010283	Gas Mechanic	1300
T2	50010322	Heavy Equipment Operator	1650
T2	50010144	Lead Driver	0433
T2	50010244	Lineman	1100
T2	50010241	Lineman - Transmission	1094
T2	50010298	Mechanic – Welder - CGT	1440
T2	50010378	Night Cable Splicer	2283
T2	50010243	Night Electric Transm & Dsbn Assistant	1098
T2	50010324	Transm & Dsbn Equipment Opr - Transm	1662
T2	50010323	Transmission & Distribution Equip Opr	1660
T2	50010294	Transmission Mechanic – CGT	1406
T2	50010148	Truck Driver Heavy - Gas	0465
T2	50010380	Unassigned Cable Splicer	2286
T2 T2	50010156	Unassigned Electrician - Elec & Hydro Unassigned Fitter	0484
T2	50010170 50010246	Unassigned Fitter Unassigned Lineman	0563 1103
12	30010240	Onassigned Lineman	1103

T2	50072958	Unassigned Transmission Mechanic - CGT	1414
T2	50010361	Unassigned Water System Repairperson	2068
T2	50010188	Underground Constr Crew Frmn - Electric	0737
T2	50010189	Underground Constr Crew Frmn - Gas	0738
T2	50010234	Underground Constr Journeyman - Elec	1077
T2	50010235	Underground Constr Journeyman - Gas	1078
T2	50010271	Utility Equipment Mechanic – Auberry	1252
T2	50010272	Utility Equipment Mechanic – Helms	1253
T2	50010347	Utility Operator - Hydro	1824
T2	50010362	Water System Repairperson	2070
T2	50368698	Pre-apprentice Lineman	1114
Т3	50010305	Backhoe Operator – *Gas Req after 1/1/2009	1515
Т3	50070801	Crane Operator - Davis	1596
T3	50010318	Crane Operator - GC Field - Gas	1597
Т3	50253877	Crane Operator – GC Field – Not Gas	1613
Т3	50010140	Driller	0405
Т3	50010277	Equipment Mechanic - GC	1260
Т3	50010279	Field Garage Mechanic A	1270
Т3	50010281	Field Garage Mechanic C	1276
Т3	50010230	Field Mechanic Inspector	1006
Т3	50010162	Fieldperson - GC - Gas	0525
Т3	50210150	Fieldperson - Tower	0525
Т3	50010326	Hole Digger Operator	1690
Т3	50010231	Mechanical Inspector	1007
Т3	50010321	Miscellaneous Equipment Operator-Gas	1646
Т3	50253878	Miscellaneous Equipment Operator-Not Gas	1616
Т3	503687000	Pre-apprentice Lineman	1115
T3	50258203	Tapping Technician	0261
Т3	50010351	Tractor Operator - Gas	1840
T3	50253879	Tractor Operator-Not Gas	1617

# CDL List T200 & T300 Utilized for Company Convenience

			Pay Scale
PS Type	Job Code	Job Title	Group
T2	50010360	Apprentice Water System Repairperson	2067
T2	50010227	Compliance Inspector	0998
T2	50010228	Compliance Inspector - Underground	0999
T2	50070742	Electrician - Switching	0494
T2	50202594	Engine Analyst - CGT	1422
T2	50010210	Garageman	0880
T2	50315043	M&C Coordinator - Electric	1005
T2	50315042	M&C Coordinator - Gas	1004
T2	50315041	M&C Coordinator - Transmission	1008
T2	50010197	Maintenance Subforeman - DCPP	0755
T2	50010232	Meteorological Instrumentperson	1036
T2	50010431	Transmission Troubleman	2535
T2	50010258	Traveling Machinist - Diablo Canyon	1146
T2	50010370	Traveling Mechanic-Rigger - DCPP	2174

T2	50010432	Troubleman	2540
T2	50010371	Unassigned Traveling Mech-Rigger - DCPP	2176
T2	50010112	Utility Field Clerk - Bakersfield	0242
T2	50010217	Utility Worker – Gas Transm & Dsbn	0930
T2	50010202	Working Foreman	0845
T2	50010200	Water System Crew Leader	0830
T3	50010379	Apprentice Cable Splicer	2285
T3	50010157	Apprentice Electrician	0488
T3	50010248	Apprentice Lineman - GC	1107
T3	50010438	Apprentice Welder - GC - Gas	2628
T3	50253876	Backhoe Operator-Not Gas	1612
T3	50010377	Cable Splicer – GC	2282
T3	50010096	Carpenter A-Gas	0163
T3	50010097	Carpenter B-Gas	0164
T3	50010152	Electrician	0474
T3	50073099	Field Garageman	0885
T3	50010208	Garage Working Foreman	0857
T3	50010173	Labor Foreman A	0630
T3	50010247	Lineman –GC	1106
T3	50010171	Street Fitter	0580
T3	50010179	Subforeman A - Overhead	0650
T3	50010180	Subforeman A - Station/Hydro	0651
T3	50010178	Subforeman A - Underground	0649
T3	50010181	Subforeman B	0653
T3	50010223	Utility Worker - GC	0947
T3	50010435	Welder - GC - Gas	2617
T3	50253880	Welder - GC-Not Gas	1618
T3	50251365	Working Foreman A - Non-Climbing	0105
T3	50010205	Working Foreman B - Climbing	0853
T3	50010206	Working Foreman C – Gas	0854
T3	50251368	Working Foreman B – Gas	0255
T3	50251366	Working Foreman A – Gas	0257
T3	50251367	Working Foreman B - Non-Climbing	0107
T3	50253775	Working Foreman C-Not Gas	1608

### **Ad Hoc Committees**

#### • <u>Transmission/Distribution – Electric Operations</u>

The parties agree to establish an ad hoc committee within three months of the ratification of the Table Settlement. The committee will be tasked with addressing contractual issues surrounding the Transmission and Distribution Control Centers and associated classifications. This will include but not be limited to Relief pay, Sunday premium, factored pay, meals, holidays, and Journeyman wage steps, apprentice programs, classification title changes, Distribution Operator job awards and continuing Operator knowledge testing/certification and work schedules.

# Physical Clerks

An ad hoc committee will review the current duties of Title 200 and Title 300 physical clerks and discuss the possible establishment of a new field support position. This committee should complete its work within six months.

### • SCADA

The Company and Union agree to establish a joint committee involving Troublemen, Electricians and Telecommunications Technicians to discuss the installation and troubleshooting of SCADA equipment. The Committee will discuss possible changes to the Troubleman, Electrician and Telecommunications Technician job definitions. The Committee will make recommendations for any changes to job definitions by December 31, 2012.

# • <u>Hydro</u>

The Company and Union will meet to discuss the job definitions and line of progression for Hydro Utility Operator, Water System Repairperson, and Roving Operator. In addition, the Company understands Union is interested in discussing wage rates for Water System Repairperson. The parties will meet no later than December 31, 2012.

#### Corrosion Mechanic

The parties have also agreed to establish a joint committee to review the Corrosion Mechanic classification, including the job definition, training program, and possible NACE certification.

#### DCPP

The Company and Union shall discuss the following proposals from the 2011 General Negotiations related to DCPP in an ad hoc committee, and shall complete any agreements made by December 31, 2012.

# **Union Proposals**

U-7e: Access suspension

U-55k: Expand Control Technician job description U-55s: Clarify DCPP Subforeman job description

# Company Proposals

C-11: Hours: Allow for change of work hours when a temporary schedule is

needed for work that must be continuous until completed

C-12: Hours: Allow second shift to start at Company discretion

C-32: Replace Utility Worker with Pre-Apprenticeship classifications

# • Fleet

The Union proposed a revision to Section 107.3 for Title 200 and Title 300 Mechanics and Garagemen. The parties agreed that this would be discussed in the existing Fleet Ad Hoc Committee.

#### ATTACHMENT B

#### MEDICAL, DENTAL, VISION AGREEMENT

#### **ACTIVE MEDICAL**

The Company and Union agree to modify the current medical plan in the following ways:

- 1. Employee to pay 7.5% of medical plan premium.
- 2. Effective January 1, 2013, reduce the number of healthcare administrators from 4 to 2 (Kaiser and Anthem/Blue Cross) and continue the 2012 medical plan design. Health Net HMO and Blue Shield HMO will be discontinued
- 3. Effective January 1, 2014, implement the jointly developed single plan design with two plan administrators (Kaiser and Anthem/Blue Cross) for all active employees.
  - a. Provide expanded free access to primary care.
    - i. All enrolled employees and dependents are each eligible for 4 free visits annually to their primary care provider, who must be trained as a generalist (General or Family Practice, Internal Medicine, Pediatrics, Family Nurse Practitioner, Obstetrics & Gynecology).
    - ii. Additional primary care visits will be subject to a 10% co-insurance, with no deductible.
    - iii. Visits to your specialist may also be covered under the 4 free primary care visits if that provider is dual-certified as a primary care doctor in any of the categories listed above.
  - b. Provide free preventive medication and routine lab work: The list of medications and lab tests subject to this Plan coverage provision is specified in the medication and routine lab work attachment. The medications and lab tests cover a variety of chronic conditions. Parties recognize that items on the list may evolve and agreed to discuss updates at the Joint Quarterly Benefits Meetings.
  - c. Provide free (unlimited) maternity, well-baby office visits and hospice services.
  - d. If not specifically mentioned, all prevention services and diagnostics mandated by law will be covered.
- Funded Health Reimbursement Accounts (HRA) to off-set increased deductibles and maximum annual out of pocket limit will be established for all members with medical coverage in 2014 and beyond.
  - a. The HRA is a notional account
    - Account continues if terminated member elects COBRA
    - ii. Account continues for retirees who are eligible for the PG&E retiree medical plan whether they remain in the PG&E medical plan or not.
    - iii. Will not be paid out if a member terminates PG&E service or an active employee leaves the PG&E medical plans.
  - b. Unused HRA funds roll-over for use in future years to continue to reduce future out-of-pocket expenses and deductible.

- i. Available for retirees to use if they are eligible to participate in the PG&E medical plans
- ii. Available for employee's use if the medical plan with HRA is discontinued in the future.
- iii. Company and Union will further discuss administrative procedures.
- c. Employees enrolled on January 1, 2014 will receive HRA automatic deposits and incentive amounts for health screening and tobacco- free participation according to the Table under General Provisions of the attached Health Plan Design Grid.
- d. Health screening will be available for employees to participate in several ways including on-site at many PG&E work locations, through the employee's primary care provider, or visiting a network of contracted labs. The screening will include measurements for Body Mass Index and blood pressure and a finger prick blood test for cholesterol and glucose levels. HRA deposits are given for participation in the health screening, not based on outcomes. The company and union will jointly select a tobacco-use testing method to earn the tobacco-free incentive. Employees who do not test tobacco-free, but who successfully complete the tobacco cessation program the company offers will also be eligible to receive the tobacco-free incentive.
- e. Individual results are provided only to the enrolled employee and are kept completely confidential. No individual results will be shared with PG&E. Results are collected in a third party data warehouse and will be shared in aggregate (total population health) with the joint union and company committee to assist with on-going health and wellness program planning.
- f. All New hires after December 31, 2013 will receive HRA funding at the levels specified for 2015 and beyond.
- g. HRA funds may be used for any qualified medical, dental or vision expense. Allowable reimbursement expenses will be defined by IRS section 213(d).
- h. Annual medical plan deductible is \$1000 (individual) or \$2000 (family). Members who receive both the health screening and tobacco free incentive will reduce their annual deductible to \$0 when applying the Company provided HRA funds.
- i. Annual medical plan out-of-pocket maximum is \$2400 (individual) or \$4800 (family). Members who receive both the health screening and tobacco free incentive will have an effective annual out-of-pocket maximum of no more than \$1400 (individual) or \$2800 (family).
- j. Part-time and regular status intermittent employees enrolled under the medical plans will not have their deductible, maximum annual out-of-pocket or HRA allowances pro-rated.
- k. Additional HRA funding: Employees whose wage rate on January 1 is equal to or less than the End 18 month wage step of the Service Rep 1 rate (i.e. \$22.95/hr for 2012) will receive an additional \$500 in their HRA during that calendar year. New employees who join the plan during the year whose wage rate is equal to or

less than the End 18 month step of the Service Rep 1 rate will receive the additional \$500 in their HRA during that calendar year.

- 5. Change from co-payments to co-insurance for medical services outside of free services outlined in #3 above. The Company and Union will continue their joint collaboration to identify high-quality providers for various medical services and Centers of Excellence for high risk conditions. Once they are identified, enrolled employees and dependents who use these providers will be offered reduced co-insurance.
- 6. Provide a voluntary "one stop shop" for wellness programs, clinical support and benefits advocacy beginning in 2014. Expanded services will be available to enrolled employees and dependents to support efforts to be healthier and choose high quality care. This program will also provide services to enrolled employees and dependents who need help with medical billing issues, specialist referral issues, and chronic care support. In addition, the Company and Union agree to expand free health screenings on-site to employees at selected locations, and expanded tobacco cessation and other wellness programs. All these services will be provided at no cost to employees, and will be provided by a vendor that the representatives from the Union and Company scoring committee select. Individual results are provided only to the enrolled employee and are kept completely confidential.
- 7. Continue collaboration between PG&E management and the Union to drive improvement in quality healthcare and to improve the health of enrolled employees and dependents. Continued collaboration will include Union as equal partner in vendor selection, vendor monitoring and evaluation, health promotion, quality of care improvement initiatives, data review and changes to the free lab tests, and prescription drugs.
- 8. HRA Appeals Process due to Financial Hardship: The company and union agree that employees may appeal to request additional funding in their Health Reimbursement Account (HRA) due to a financial hardship. The decision to grant or deny the additional funding is non-grievable.
  - a. Employee must have reached the out-of-pocket maximum for a minimum of two years in a row to be eligible to appeal.
  - Employees must submit their appeal in writing to: Pacific Gas and Electric Company Benefits Department Appeals 1850 Gateway Blvd. 7<sup>th</sup> Floor Concord, CA 94520
  - c. Within 60 calendar days of the date the appeal is received, the employee will receive a written response. There may be special circumstances where an extension of up to 90 calendar days may be required. The employee will be notified if such an issue occurs. If the Benefit Department denies the claim, the employee will receive a written response that will include the reason for the denial and an explanation of additional appeals procedure. The employee may then have the appeal reviewed by the Employee Benefits Appeals Committee (EBAC). The employee must submit a new appeal in writing stating the reasons for the appeal and enclosing all relevant documentation and information that supports the appeal. Employees will receive EBAC's decision within 90 calendar days of EBAC's receipt of the appeal unless

- there are special circumstances where an extension of up to an additional 90 calendar days may be required.
- d. No special form is needed employees must describe their financial hardship and supply supporting documentation demonstrating their financial hardship.
- e. Each appeal will be considered separately.
- f. If the appeal is granted, the employee will be given a one-time deposit into their Health Reimbursement Account of \$1000 if they have single coverage and \$2000 if they have family coverage.
- g. Employees may be eligible to appeal once every two years provided they have reached the out-of-pocket maximum in each of the previous two years.

# **Health Plan Design**

HRA Deposits	Single Coverage	Family Coverage
• You automatically get:	• \$ 750	• \$1,500
<ul><li>If you take a health screening:</li></ul>	<ul><li>\$ 250</li></ul>	• \$ 500
<ul> <li>If you test tobacco-free or complete PG&amp;E's</li> </ul>	• \$ 250	• \$ 500
tobacco cessation program:	Φ 250	Φ 500
<ul> <li>Yearly Total</li> </ul>	<ul><li>\$ 1,250</li></ul>	<ul><li>\$ 2,500</li></ul>
2015- • You automatically get:	• \$ 500	• \$ 1,000
• If you take a health screening:	<ul><li>\$ 250</li></ul>	• \$ 500
<ul> <li>If you test tobacco-free or complete PG&amp;E's</li> </ul>	• \$ 250	• \$ 500
tobacco cessation program:	Φ 250	Φ 500
<ul> <li>Yearly Total</li> </ul>	• \$ 1,000	• \$ 2,000
Annual Deductible (includes prescription drugs)	• \$ 1,000	• \$ 1,000 / person
		<ul> <li>\$ 2,000 / family</li> </ul>
Out-of-Pocket Maximum (includes deductible)	• \$ 2,400	• \$ 2,400 / person
,		<ul> <li>\$ 4,800 / family</li> </ul>
Co-Insurance		<u> </u>
	• 10% (no	• 10% (no
Additional Primary Care (beyond 4 free visits)	deductible)	deductible)
	<ul> <li>20% after</li> </ul>	<ul> <li>20% after</li> </ul>
Specialty / Hospital Care/ Other	deductible	deductible
Co-insurance costs will never exceed annual out-of-po	cket maximums	
Effective Deductibles (if you earn all incentives):		
2014	• \$ 0	• \$0
	You have \$250	You have \$500
	rollover	rollover
2015-2020	• \$0	• \$ 0
Effective Out-of-Pocket Maximum - includes deductible	e (if you earn all incenti	ives):
2014	• \$ 1,150	• \$ 2,300
	<ul> <li>no more than</li> </ul>	<ul> <li>no more than</li> </ul>
2015-2020	\$1,400	\$ 2,800

Other Provisions	Health Plan Design
General	No lifetime benefit maximum     No pre-existing condition exclusions
Expanded Primary Care Offering	Preventive drugs:  No cost if listed on Attachment B1. Anthem/Blue Cross members need to get through mail-order Preventive screenings:  No cost if listed on Attachment B2. Primary Care office visits:  Up to 4 primary care visits at no cost  10% coinsurance for subsequent visits (not subject to deductible)  Unlimited maternity and well-baby office visits included at no cost
Specialty/ Hospital Care/	<ul> <li>Subject to deductible</li> <li>20% coinsurance up to maximum annual out-of-pocket</li> <li>Includes specialty office visits, inpatient hospital care, outpatient hospital care,</li> </ul>

Emergency Room	skilled nursing facility, home health care, substance abuse centers, mental health centers, ambulance services and emergency room visits
Visits/Ambulance Services	
Hospice	Covered at no cost
Maternity Care	<ul> <li>Unlimited office visits covered at no cost</li> <li>Hospital-based delivery covered at 20% coinsurance (subject to deductible)</li> </ul>
Well-Baby Care	Office visits covered at no cost
Urgent Care Visits	Not subject to deductible     Covered as Primary Care with a 10% coinsurance
Routine Physical Examinations	Annual physical exam covered at no cost as part of the 4 free primary care visits
Immunizations	No cost
X-Rays and Lab	Subject to deductible
Tests	<ul> <li>Covered as Specialty Care with a 20% coinsurance</li> <li>Routine lab tests and x-rays for chronic care and routine preventive screenings provided at no cost if listed on attachment B2.</li> </ul>
Outpatient	Subject to deductible
Physical Therapy	10% coinsurance for the first 5 visits
	20% coinsurance beyond 5 visits
Speech Therapy	Subject to deductible
	10% coinsurance for the first 5 visits
0 "	20% coinsurance beyond 5 visits
Occupational	Subject to deductible
Therapy	10% coinsurance for the first 5 visits
Obite a secretic	20% coinsurance beyond 5 visits
Chiropractic	Subject to deductible
Care	10% coinsurance for the first 5 visits
A	20% coinsurance beyond 5 visits
Acupuncture	Subject to deductible
	10% coinsurance for the first 5 visits
Dunalda Madiaal	20% coinsurance beyond 5 visits
Durable Medical	Subject to deductible
Equipment	Covered as Specialty Care with a 20% coinsurance
Hearing Aid	Subject to deductible
	Covered as Specialty Care with a 20% coinsurance
Dahariaral	Evaluations, fittings, equipment; frequency 1 per ear every 3 years
Behavioral	Not subject to deductible
Health (includes substance	10% coinsurance
abuse)	
Outpatient Visits	
(through Value	
Options)	
Behavioral	Subject to deductible
Health (includes	20% coinsurance
substance	
abuse) Inpatient	
Services	
(Through Value Options)	
DOT Mandated	No cost
Treatment – in	THO COST

patient or out-	
· ·	
patient (Through	
Value Options)	
Infertility Medical	Subject to deductible
Services	Covered as Specialty Care with a 20% coinsurance
	\$7,000 lifetime maximum; balances from prior plans carry forward
Annual	N/A - Bundled with medical services in the overall deductible and out-of-pocket
Prescription	maximum outlined above
Drug Deductible	
and Out-of-	
Pocket Maximum	
Preventive Drugs	No cost if listed on Attachment B1. Anthem/Blue Cross members need to get
	through mail-order.
Retail Drugs	Subject to deductible
	30-day prescriptions supplied at a participating pharmacy — plan pays:
	85% for generic
	• 75% for brand
	Maintenance medications: - after three prescription fills at retail pharmacy, plan pays
	\$0 – maintenance drugs must be obtained from Mail Order Pharmacy.
Mail Order Drugs	Subject to deductible
	Plan pays:
	90% for generic
	80% for brand
Infertility, Sexual	Subject to deductible
Dysfunction, and	50% coinsurance for retail and mail order, unless medically necessary
Memory	Medically necessary drugs are covered at standard reimbursement rates
Enhancement	
Drugs.	

#### **Coverage Management:**

- As currently provided in the Summary of Benefit Handbook, preauthorization will still be required for most inpatient, residential and skilled nursing, home health, and expensive medical equipment, physical therapies and for select surgical procedures regardless of setting; enrolled employees and dependents who do not obtain preauthorization will continue to pay a penalty. Exceptions apply for life-threatening emergencies.
- Continuation of the current prescription drug program feature that the enrolled employee or dependent pays the difference for brand name drugs when generics are available. Expansion of mail-order program to include mandatory mail order for maintenance drugs after three retail prescriptions, maintenance drugs on Attachment A are free from mail-order only. Select step therapies will be put into place after Company and Union jointly review. Controlled substances are excluded from mandatory mail order program.
- As currently provided in the Summary of Benefit Handbook, services and care that are not deemed medically necessary by the plan administrator will not be covered.

**Note:** Preauthorization and drug programs described above do not apply to Kaiser. No change to current pre-authorization and drug program practices at Kaiser.

For Kaiser and Anthem NAP CAP members, the amount of employee premium contribution for 2014 will be the same as the contribution amount for 2013 unless the overall cost for the premium falls. Anthem HSA members will pay a premium contribution in 2014 in the same amount as the 2013 Kaiser or Anthem NAP CAP rate.

# **Medco Preventive Medication List**

Drug Category	Examples of products
Anticoagulants/ antiplatelets	<ul> <li>aspirin/dipyridamole (Aggrenox®)</li> <li>clopidogrel</li> <li>dipyridamole</li> <li>prasugrel (Effient™)</li> <li>ticlopidine</li> <li>warfarin</li> </ul>
Antiemetics/ antivertigo agents	<ul> <li>aprepitant (Emend®)</li> <li>dimenhydrinate</li> <li>dolasetron (Anzemet®)</li> <li>granisetron</li> <li>meclizine</li> <li>ondansetron</li> <li>prochlorperazine</li> <li>promethazine</li> <li>scopolamine (Transderm Scop®; Scopace®)</li> <li>trimethobenzamide</li> </ul>
Antiestrogens	<ul> <li>anastrozole</li> <li>exemestane</li> <li>letrozole</li> <li>tamoxifen</li> <li>raloxifene (Evista®)</li> </ul>
Blood pressure/heart health	<ul> <li>ACE inhibitors: benazepril; benazepril-HCTZ; captopril; captopril-HCTZ; enalapril; enalapril; HCTZ; fosinopril ;fosinopril-HCTZ; lisinopril; lisinopril-HCTZ; moexipril; moexipril-HCTZ; perindopril; quinapril; quinapril-HCTZ; ramipril; trandolapril</li> <li>Angiotensin II receptor blockers: ibesartan; ibesartan-HCTZ; losartan; losartan-HCTZ; olmesartan (Benicar®); olmesartan-HCTZ (Benicar HCT®); telmisartan (Micardis®); telmisartan-HCTZ (Micardis HCT®); valsartan; valsartan-HCTZ (Benicar HCT®); telmisartan (Micardis®); telmisartan-HCTZ (Micardis HCT®); valsartan; valsartan-HCTZ</li> <li>Beta-blockers: acebutolol; atenolol; atenolol/chlorthalidone; betaxolol; bisoprolol; bisoprolol-HCTZ; labetalol; metoprolol; metoprolol-HCTZ; nadolol; nadolol-bendroflumethiazide; nebivolol (Bystolic™); pindolol; propranolol; sotalol; sotalol AF; timolol; timolol-HCTZ,</li> <li>Calcium channel blockers: amlodipine; diltiazem; felodipine; isradipine; nicardipine; nifedipine; nisoldipine; verapamil; verapamil ext. release</li> <li>Thiazide diuretics and related diuretics: amiloride; amiloride-HCTZ; chlorothiazide; chlorthalidone; eplerenone; furosemide; hydrochlorothiazide; indapamide; metolazone; spironolactone; spironolactone-HCTZ; triamterene; triamterene-HCTZ</li> <li>Miscellaneous: aliskiren (Tekturna®); aliskiren-HCTZ (Tekturna HCT®); carvedilol; cilostazol, clonidine; clonidine-chlorthalidone; doxazosin; digoxin, hydralazine HCI, minoxidil tablets only, guanfacine HCI; enalapril-felodipine; hydralazine; methyldopa; methyldopa-HCTZ; prazosin; terazosin; amlodipine/benazepril; amlodipine/valsartan (Exforge®);</li> </ul>
Anti-infectives	<ul> <li>atovaquone (Mepron®)</li> <li>pentamidine (NebuPent®)</li> <li>posaconazole (Noxafil®)</li> </ul>

# Attachment B1

Drug Category	Examples of products
Antimalarials	<ul> <li>artemether/lumefantrine (Coartem®)</li> <li>atovaquone/proguanil</li> <li>chloroquine</li> <li>hydroxychloroquine</li> <li>mefloquine</li> <li>primaquine</li> <li>pyrimethamine (Daraprim®)</li> <li>pyrimethamine-sulfadoxine (Fansidar®)</li> <li>quinine (Qualaquin®)</li> </ul>
Anti-ulcer agents	<ul> <li>H2-antagonists: cimetidine; famotidine; nizatidine; ranitidine</li> <li>Miscellaneous agents: misoprostol; sucralfate</li> <li>Proton pump inhibitors: esomeprazole (Nexium <sup>®</sup>); lansoprazole; omeprazole; pantoprazole; metoclopramide HCl tablet, solution</li> </ul>
Antivirals	<ul> <li>acyclovir</li> <li>amantadine</li> <li>famciclovir</li> <li>foscarnet</li> <li>ganciclovir</li> <li>oseltamivir (Tamiflu®)</li> <li>rimantadine</li> <li>valacyclovir</li> <li>valganciclovir (Valcyte®)</li> <li>zanamivir (Relenza®)</li> </ul>
Arthritis/Pain	<ul> <li>methylprednisolone sodium succinate powder for injection</li> <li>methylprednisolone acetate suspension for injection</li> <li>methylprednisolone</li> <li>prednisolone acetate suspension (generic Pred Forte)</li> <li>prednisone</li> <li>indomethacin</li> <li>naproxen</li> <li>naproxen delayed-release</li> <li>naproxen sodium</li> <li>diclofenac sodium</li> <li>diclofenac sodium ext-release</li> <li>diclofenac solution</li> <li>etodolac</li> <li>ibuprofen suspension</li> <li>ibuprofen</li> <li>ketoprofen</li> <li>ketorolac ophthalmic soln</li> <li>meloxicam</li> <li>nabumetone</li> <li>piroxicam</li> <li>sulindac</li> </ul>

# Attachment B1

Drug Category	Examples of products
Asthma therapies	<ul> <li>montelukast</li> <li>zafirlukast</li> <li>albuterol sulfate tablet, syrup, inhalant solution</li> <li>aminophylline tablet</li> <li>budesonide inhalant suspension (Pulmicort Respules)</li> <li>terbutaline</li> <li>theophylline ext-release tabs</li> <li>cromolyn sodium solution, inhalant solution</li> <li>ipratropium bromide solution, inhalant solution</li> <li>ipratropium/albuterol sulfate</li> <li>guaifenesin/dyphylline elixir</li> </ul>
Bowel evacuant products	<ul> <li>polyethylene glycol 3350 combination products such as Colyte<sup>®</sup>, Golytely<sup>®</sup>, HalfLytely<sup>®</sup>, Nulytely<sup>®</sup>, Trilyte<sup>®</sup>, Moviprep<sup>®</sup> (generics only);sodium phoshate salts</li> </ul>
Calcium replacement products	<ul> <li>calcium acetate</li> <li>calcium carbonate</li> <li>calcium citrate</li> <li>calcium gluconate</li> </ul>
Cancer (adjunctive agents)	<ul> <li>amifostine</li> <li>darbepoetin alfa (Aranesp®)</li> <li>dexrazoxane</li> <li>epoetin alfa (Procrit®)</li> <li>filgrastim (Neupogen®)</li> <li>leucovorin</li> <li>mesna (Mesnex®)</li> <li>pegfilgrastim (Neulasta®)</li> <li>sargramostim (Leukine®)</li> </ul>
Cholesterol- lowering agents	<ul> <li>atorvastatin/amlodipine</li> <li>cholestyramine</li> <li>colesevelam (WelChol®)</li> <li>colestipol</li> <li>ezetimibe (Zetia®)</li> <li>ezetimibe/simvastatin (Vytorin®)</li> <li>fenofibrate (Antara®, Fenoglide™, Lipofen®, TriCor®)</li> <li>fenofibric acid (TriLipix™)</li> <li>gemfibrozil</li> <li>HMG-coA reductase inhibitors: atorvastatin; fluvastatin; lovastatin (Altoprev®); pravastatin; rosuvastatin (Crestor®); simvastatin</li> <li>niacin (Niaspan®); niacin ER/simvastatin (Simcor®)</li> <li>omega-3-acid ethyl esters (Lovaza®)</li> </ul>
Contraceptives, non- oral	<ul> <li>diaphragms (Ortho-Diaphragm™)</li> <li>medroxyprogesterone 150mg injectable</li> <li>intravaginal system (NuvaRing®)</li> <li>transdermal system (generic for Ortho-Evra®)</li> </ul>

# Attachment B1

Drug Category	Examples of products
Contraceptives, oral	<ul> <li>Apri®</li> <li>Estrostep Fe® (generic only)</li> <li>Lybrel® (generic only)</li> <li>Ortho Tri-Cyclen® (generic only)</li> <li>Ovcon® (generic only)</li> <li>Seasonale® (generic only)</li> <li>TriNessa® (generic only)</li> <li>Trivora® (generic only)</li> <li>Yasmin® (generic only)</li> <li>Seasonique® (generic only)</li> <li>YAZ®</li> </ul>
Dental aids	minocycline (Arestin®)
Diabetes	<ul> <li>acarbose</li> <li>glimeprimide</li> <li>glipizide</li> <li>glipizide ext-release</li> <li>glyburide, Micronized</li> <li>glyburide/metformin</li> <li>metformin HCI</li> <li>metformin ext-release</li> <li>nateglinide</li> <li>Glucagon</li> <li>insulin aspart (Humalog)</li> <li>insulin regular (Humulin R)</li> <li>insulin NPH (Humulin N)</li> <li>insulin NPH and insulin regular (Humulin 70/30)</li> <li>insulin aspart protamine and insulin aspart (Humalog MIX 70/30)</li> <li>insulin glargine (Lantus)</li> <li>Accu-Chek test strips</li> <li>One Touch test strips</li> <li>Insulin pen needles – BD Ultrafine</li> <li>Isulin syringes – BD</li> <li>Lancets – BD, Microlet</li> </ul>
Estrogen replacement products	<ul> <li>conjugated estrogens (Premarin®)</li> <li>esterified estrogens/methyltestosterone</li> <li>estradiol (Climara®, Estraderm®, Vivelle®)</li> <li>estradiol gel (Divigel®)</li> <li>estradiol MTDS (Evamist™)</li> <li>estradiol/norethindrone (CombiPatch®)</li> <li>estrogen/medroxyprogesterone (Premphase®, Prempro™)</li> <li>ethinyl estradiol/norethindrone (generic for Femhrt®)</li> <li>synthetic conjugated estrogens, A (Cenestin®)</li> <li>synthetic conjugated estrogens, B (Enjuvia™)</li> </ul>

<b>Drug Category</b>	Examples of products
Fluoride preparations, oral and topical	<ul> <li>Cavarest Gel™ (generic only)</li> <li>Easygel™ (generic only)</li> <li>EtheDent™ (generic only)</li> <li>Fluoritab™ (generic only)</li> <li>Luride Lozi-Tabs® (generic only)</li> <li>Neutragard® (generic only)</li> <li>Phos-Flur® (generic only)</li> <li>sodium fluoride (generic only)</li> <li>Gel-Kam® (generic only)</li> <li>PreviDent® Rinse (generic only)</li> </ul>
Gout	allopurinol     febuxostat (Uloric®)
Heparin/low molecular weight heparin products	<ul> <li>heparin</li> <li>low-molecular-weight heparin: dalteparin (Fragmin®); enoxaparin; fondaparinux</li> </ul>
Iron replacement agents	<ul> <li>Chromagen® (generic only)</li> <li>ferumoxytol (generic for Feraheme™)</li> <li>FoliTab™ (generic only)</li> <li>Foltrin™ (generic only)</li> <li>Niferex® Forte (generic only)</li> </ul>
Magnesium replacement products	<ul><li>magnesium gluconate</li><li>magnesium oxide</li></ul>
Miscellaneous agents	isoxsuprine
Osteoporosis	<ul> <li>alendronate;</li> <li>calcitonin</li> <li>etidronate</li> <li>ibandronate (Boniva®)</li> <li>raloxifene (Evista®)</li> </ul>
Phosphate/ potassium replacement products	<ul> <li>potassium bicarbonate/citric acid (Effer-K®)</li> <li>potassium chloride</li> <li>potassium gluconate</li> <li>potassium phosphate</li> <li>potassium and sodium phosphate</li> <li>sodium phosphate</li> </ul>
Prenatal vitamins	<ul> <li>Nata chew® (generic only)</li> <li>Natafort® (generic only)</li> <li>Natelle® (generic only)</li> <li>Pre Care® (generic only)</li> <li>Prenatal Plus®, Prenatal RX™ (generic only)</li> <li>Prima Care® (generic only)</li> <li>Vitafol-OB™ (generic only)</li> </ul>
Prescription vitamins	<ul> <li>multivitamin w/ fluoride</li> <li>Strovite Advance®, Strovite Plus® (generic only)</li> <li>Theragran® (generic only)</li> <li>Therobec™, Therobec Plus™ (generic only)</li> </ul>

Drug Category	Examples of products
Progestins	<ul> <li>medroxyprogesterone</li> <li>norethindrone</li> <li>progesterone</li> <li>progesterone, micronized (Crinone<sup>®</sup>, Prometrium<sup>®</sup>)</li> </ul>
Renal disease agents	<ul> <li>lanthanum (Fosrenol®)</li> <li>sevelamer (Renagel®)</li> <li>sevelamer carbonate (Renvela®)</li> </ul>
Smoking cessation products	<ul> <li>bupropion (generic for Zyban only)</li> <li>nicotine products (Nicotrol<sup>®</sup> Inhaler, Nicotrol<sup>®</sup> Nasal Spray)</li> <li>varenicline (Chantix™)</li> </ul>
Vaccines	seasonal influenza vaccines
Vitamin B products	<ul> <li>Folgard RX™ (generic only)</li> <li>Foltx® (generic only)</li> </ul>
Vitamin B1 products	thiamine
Vitamin B6 products	pyridoxine
Vitamin B12 products	cyanocobalam     cyanocobalamin/folic acid (Foltrate®)
Vitamin D products	<ul><li>calcitriol</li><li>ergocalciferol</li></ul>
Vitamin K products	phytonadione (Mephyton®)
Vitamins with folic acid	therapeutic vitamins with minerals
Weight loss agents	<ul> <li>benzphetamine</li> <li>diethylpropion</li> <li>orlistat (Xenical®)</li> <li>phendimetrazine</li> <li>phentermine</li> </ul>
Zinc replacement products	<ul><li> zinc gluconate</li><li> zinc sulfate</li></ul>
Mental Health	<ul> <li>bupropion</li> <li>citalopram</li> <li>fluoxetine</li> <li>lamotrigine</li> <li>buspirone</li> <li>divalproex</li> <li>lithium</li> </ul>

Abbreviations: HCTZ = hydrochlorothiazide

# **Kaiser Preventive Medication List**

Drug Category	Examples of products		
Anticoagulants/ antiplatelets *	<ul> <li>aspirin/dipyridamole (Aggrenox®)</li> <li>clopidogrel (Plavix)</li> <li>dipyridamole</li> <li>prasugrel (Effient™)</li> <li>ticlopidine</li> <li>warfarin</li> </ul>		
Antiemetics/ antivertigo agents	<ul> <li>aprepitant (Emend®)</li> <li>dimenhydrinate</li> <li>Ondasetron</li> <li>ondasetron</li> <li>meclizine</li> <li>ondansetron</li> <li>prochlorperazine</li> <li>promethazine</li> <li>scopolamine (Transderm Scop®; Scopace®)</li> <li>trimethobenzamide</li> </ul>		
Antiestrogens	<ul> <li>anastrozole</li> <li>exemestane</li> <li>letrozole</li> <li>tamoxifen</li> <li>raloxifene (Evista®)</li> </ul>		
Blood pressure/heart health: ACE Inhibitors	<ul> <li>benazepril</li> <li>Lisinopril, Lisinopril HCTZ</li> <li>captopril</li> <li>enalapril</li> <li>fosinopril</li> <li>lisinopril</li> <li>lisinopril-HCTZ</li> <li>Imoexipril</li> </ul>		
Blood pressure/heart health: Angiotensin Il receptor blockers	<ul><li>Losartan</li><li>Losartan &amp; HCTZ</li></ul>		
Blood pressure/heart health : Beta blockers	<ul> <li>atenolol</li> <li>atenolol/chlorthalidone</li> <li>carvedilol</li> <li>bisoprolol</li> </ul>		

	• bisoprolol-HCTZ		
	labetalol		
	metoprolol		
	metoprolol tartrate		
	<ul> <li>propranolol</li> </ul>		
	• sotalol		
Drug Category	Examples of products		
	amlodipine		
	diltiazem		
	amlodipine		
Blood pressure/heart	isradipine		
health : Calcium	amlodipine, nifedipine		
channel blockers	nifedipine		
	amlodipine, nifedipine		
	verapamil		
	verapamil ext. release		
	chlorthalidone		
	furosemide		
	hydrochlorothiazide		
Blood pressure/heart	indapamide		
health : Thiazide	metolazone		
diuretics and related diuretics	spironolactone		
uiuietics	spironolactone-HCTZ		
	triamterene		
	triamterene-HCTZ		
	Lisinopril		
	Iisinopril-HCTZ		
	carvedilol		
	captopril		
	clonidine		
	• losartan		
Dland property	doxazosin		
Blood pressure/heart health:	• digoxin		
Miscellaneous	hydralazine HCl		
	minoxidil tablets only		
	guanfacine HCl		
	• losartan		
	hydralazine		
	methyldopa		
	atenolol		
	prazosin		

	<ul><li>terazosin</li><li>Amlodipine plus lisonopril</li><li>amlodipine</li></ul>		
Anti-infectives	<ul> <li>atovaquone (Mepron®)</li> <li>pentamidine (NebuPent®)</li> <li>Voriconazole</li> </ul>		
Drug Category	Examples of products		
Antimalarials	<ul> <li>artemether/lumefantrine (Coartem®)</li> <li>atovaquone/proguanil</li> <li>chloroquine</li> <li>hydroxychloroquine</li> <li>mefloquine</li> <li>primaquine</li> <li>pyrimethamine (Daraprim®)</li> </ul>		
Anti-ulcer agents: H2-antagonists	<ul><li>cimetidine</li><li>famotidine</li><li>ranitidine</li></ul>		
Anti-ulcer agents: Misc Agents	<ul><li>Misoprostol</li><li>sucralfate</li></ul>		
Anti-ulcer agents: Proton Pump Inhibitors	<ul><li>omeprazole</li><li>pantoprazole</li><li>metoclopramide HCl tablet, solution</li></ul>		
Anti-ulcer agents: Other	None		
Antivirals	<ul> <li>acyclovir</li> <li>amantadine</li> <li>famciclovir</li> <li>foscarnet</li> <li>ganciclovir</li> <li>oseltamivir (Tamiflu®)</li> <li>rimantadine</li> <li>Acyclovir</li> <li>valganciclovir (Valcyte®)</li> <li>zanamivir (Relenza®)</li> </ul>		
Arthritis/Pain	<ul> <li>zanamivir (Reienza*)</li> <li>methylprednisolone sodium succinate powder for injection</li> <li>methylprednisolone acetate suspension for injection</li> <li>methylprednisolone</li> <li>prednisolone acetate suspension (generic Pred Forte)</li> <li>prednisone</li> <li>indomethacin</li> </ul>		

	<ul> <li>naproxen</li> <li>Naproxen</li> <li>naproxen sodium</li> <li>etodolac</li> <li>ibuprofen suspension</li> <li>ibuprofen</li> </ul>	
	<ul> <li>ketorolac ophthalmic soln</li> <li>meloxicam</li> <li>nabumetone</li> <li>sulindac</li> </ul>	
Drug Category  Asthma therapies	montelukast     Montelukast, QVAR (beclomethasone) or Asmanex (mometasone)     albuterol sulfate tablet, syrup, inhalant solution     aminophylline tablet     budesonide inhalant suspension (Pulmicort Respules)     terbutaline     theophylline ext-release tabs     cromolyn sodium solution, inhalant solution     ipratropium bromide solution, inhalant solution     ipratropium/albuterol sulfate	
Bowel evacuant products: polyethylene glycol 3350 combination products such as	<ul> <li>Colyte®</li> <li>Golytely®</li> <li>Nulytely®</li> <li>Trilyte®</li> <li>Moviprep® (generics only)</li> <li>sodium phoshate salts</li> </ul>	
Calcium replacement products	<ul><li>calcium acetate</li><li>calcium gluconate</li></ul>	
Cancer (adjunctive agents)	<ul> <li>amifostine</li> <li>Epoetin Alfa</li> <li>dexrazoxane</li> <li>epoetin alfa (Procrit®)</li> <li>filgrastim (Neupogen®)</li> <li>leucovorin</li> <li>mesna (Mesnex®)</li> <li>sargramostim (Leukine®)</li> </ul>	

	amlodipine			
	cholestyramine			
	colestipol			
Cholesterol- lowering	Ezetimibe and Simvastatin, or simvastatin alone			
agents	Simvastatin			
·	<ul> <li>fenofibrate (Antara<sup>®</sup>, Fenoglide™, Lipofen<sup>®</sup>, TriCor<sup>®</sup>)</li> </ul>			
	fenobibrate			
	gemfibrozil			
	atorvastatin			
	Simvastatin			
HMG-CoA Reductase	lovastatin (Altoprev®)			
Inhibitors	pravastatin			
	simvastatin			
	• niacin (Niaspan <sup>®</sup> )			
	medroxyprogesterone 150mg injectable			
Contraceptives, non-	intravaginal system (NuvaRing®)			
oral	intravaginal system (NuvaRing®)			
	monophasic or triphasic oral contraceptives			
Drug Category	Examples of products			
	• Apri <sup>®</sup>			
	Estrostep Fe <sup>®</sup> (generic only)			
	Lybrel® (generic only)			
	Ortho Tri-Cyclen® (generic only)			
	Ovcon® (generic only)			
Contraceptives, oral	Seasonale® (generic only)			
	TriNessa® (generic only)  TriNessa® (generic only)			
	Trivora® (generic only)  Yangaia® (generic only)			
	<ul> <li>Yasmin<sup>®</sup> (generic only)</li> <li>Seasonique <sup>®</sup> (generic only)</li> </ul>			
	Seasonique (generic only)     Ocella			
Dontal side	N/A - covered under dental coverage			
Dental aids	acarbose			
	Glipizide			
	glipizide			
	glyburide			
	glipizide/metformin			
Diabetes	metformin HCl			
	metformin ext-release			
	nateglinide			
	-			
	Glucagon     Noveleg = insulin aspert			
l	Novolog = insulin aspart			

	<ul> <li>Novolin R = insulin regular</li> <li>Novolin N = insulin NPH</li> <li>Novolog 70/30</li> <li>Novolog Plus NPH</li> <li>insulin glargine (Lantus)</li> <li>Accu-Chek test strips</li> <li>One Touch test strips</li> <li>Insulin pen needles – BD Ultrafine</li> <li>Isulin syringes – BD</li> <li>Lancet device – BD</li> <li>Lancets – BD, Microlet</li> </ul>		
Estrogen replacement products	<ul> <li>esterified estrogens/methyltestosterone</li> <li>estradiol (Climara®, Estraderm®, Vivelle®)</li> <li>Estradiol</li> <li>Estradiol, medroxyprogesterone</li> <li>ethinyl estradiol/norethindrone (generic for Femhrt®)</li> </ul>		
Drug Category  Fluoride preparations, oral and topical	<ul> <li>Examples of products</li> <li>Fluoritab™ (generic only)</li> <li>Luride</li> <li>Neutragard® (generic only)</li> <li>Phos-Flur® (generic only)</li> <li>sodium fluoride (generic only)</li> <li>Gel-Kam® (generic only)</li> <li>Prevident gel</li> </ul>		
Gout	allopurinol     Allopurinol		
Heparin/low molecular weight heparin products low-molecular-weight heparin:	<ul><li>heparin</li><li>Enoxaparin</li></ul>		
Iron replacement agents	<ul> <li>Chromagen®</li> <li>ferumoxytol (generic for Feraheme™)</li> <li>Foltrin™ (generic only) (No prescription Required)</li> <li>Niferex® Forte</li> </ul>		
Magnesium replacement products	• None		
Osteoporosis	<ul><li>alendronate</li><li>calcitonin</li><li>etidronate</li></ul>		

Fosamax Plus D		
raloxifene (Evista®)		
potassium chloride		
potassium phosphate		
sodium phosphate		
None		
None		
Examples of products		
medroxyprogesterone		
norethindrone		
progesterone		
norethindrone		
medroxyprogesterone		
Ianthanum (Fosrenol®)		
sevelamer (Renagel®)		
sevelamer carbonate (Renvela®)		
bupropion (generic for Zyban only)      in a time and the text (grown because and the a)		
nicotine products (gum, lozenges, patches)		
seasonal influenza vaccines		
None		
None		
None		
None		
• calcitriol		
ergocalciferol		
phytonadione (Mephyton®)		
therapeutic vitamins with minerals		
·		
None		
• None		
Bupropion		
Citalopram		
Fluoxetine		

Bipolar disorder	<ul><li>Lamotrigine</li><li>Divalproex</li><li>Lithium</li></ul>
Anxiety	Buspirone

# Medication and Lab Testing Allowed at No Cost to Member Inside Expanded Primary Care Package

Radiology Procedures			
Procedure Code	Description	Detail Description	
71020	RADEX CH 2 VIEWS FRNT&LAT	Radiologic examination, chest, 2 views, frontal and lateral;	

Pathology and Laboratory Procedures		
Procedure Code	Description	Detail Description
80048	BASIC METABOLIC PANEL CALCIUM TOTAL	Basic metabolic panel (Calcium, total) This panel must include the following: Calcium, total (82310), Carbon dioxide (82374), Chloride (82435), Creatinine (82565), Glucose (82947), Potassium (84132), Sodium (84295), Urea nitrogen (BUN) (84520)
80061	LIPID PANEL	Lipid panel This panel must include the following: Cholesterol, serum, total (82465), Lipoprotein, direct measurement, high density cholesterol (HDL cholesterol) (83718), Triglycerides (84478)
81000	URNLS DIP STICK/TABLET RGNT NON-AUTO MIC	Urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin, ketones, leukocytes, nitrite, pH, protein, specific gravity, urobilinogen, any number of these constituents; non-automated, with microscopy
82270	BLD OCLT PROXIDASE ACTV QUAL FECES 1 DETER	Blood, occult, by peroxidase activity (e.g., guaiac), qualitative; feces, consecutive collected specimens with single determination, for colorectal neoplasm screening (i.e., patient was provided 3 cards or single triple card for consecutive collection)
82948	GLUC BLD RGNT STRIP	Glucose; blood, reagent strip
83036	HGB GLYCOSYLATED	Hemoglobin; glycosylated (A1C)
85025	BLD# COMPL AUTO HHRWP&AUTO DIFFIAL	Blood count; complete (CBC), automated (Hgb, Hct, RBC, WBC and platelet count) and automated differential WBC count
85610	PROTHROMBIN TM	Prothrombin time;
85651	SEDIMENTATION RATE RBC NON-AUTO	Sedimentation rate, erythrocyte; non-automated

Vaccines			
Procedure Code	Description	Detail Description	
90633	HEPATITIS A VACCINE PEDIATRIC 2 DOSE SCHEDULE IM	Hepatitis A vaccine, pediatric/adolescent dosage-2 dose schedule, for intramuscular use	
90656	INFLUENZA VIRUS VACC SPLIT PRSRV FR 3 YEARS + IM	Influenza virus vaccine, split virus, preservative free, when administered to individuals 3 years and older, for intramuscular use	
90703	TETANUS TOXOID ADSORBED INTRAMUSCULAR	Tetanus toxoid adsorbed, for intramuscular use	
90707	MEASLES MUMPS RUBELLA VIRUS VACCINE LIVE SUBQ	Measles, mumps and rubella virus vaccine (MMR), live, for subcutaneous use	
90716	VARICELLA VIRUS VACCINE LIVE SUBQ	Varicella virus vaccine, live, for subcutaneous use	
90732	PNEUMOCOCCAL POLYSAC VACCINE 23-V 2 YR + SUBQ/IM	Pneumococcal polysaccharide vaccine, 23- valent, adult or immunosuppressed patient dosage, when administered to individuals 2 years or older, for subcutaneous or intramuscular use	

Other Procedures		
DESCRIPTION	DETAILED DESCRIPTION	
ECG ROUTINE ECG W/LEAST 12 LDS W/I&R	Electrocardiogram, routine ECG with at least 12 leads; with interpretation and report	
SPMTRY W/VC EXPIRATORY FLO +-MXML VOL VNTJ	Spirometry, including graphic record, total and timed vital capacity, expiratory flow rate measurement(s), with or without maximal voluntary ventilation	
Mammogram	n/a	
Pap Smear	n/a	
Colonoscopy	n/a	
Prevention Office Visit	n/a	

Medication Testing Allowed at No Cost to Member Inside Expanded Primary Care Package		
Medication Use	Medication Name	Explanation of Narrow Therapeutic Index Classification
Congestive heart failure	Digoxin	The medications listed here are narrow therapeutic index drugs. These medications
Blood clot prevention	Warfarin	have a narrow therapeutic dosage range
Asthma	Theophylline	compared to other medications. For these medications, dosage levels that are too high
Asthma	Aminophylline	can be toxic or even fatal. The therapeutic dose of these drugs is closer to the toxic dose than is the case with most other drugs.

#### **HEARING AIDS**

#### **ACTIVE AND RETIREE MEDICAL**

80% coverage for hearing aids with the one per ear every three years frequency limit

#### What the Plan Covers:

**Hearing Aid Services.** The following hearing aid services are covered when provided by or purchased as a result of a written recommendation from an otolaryngologist or a state-certified audiologist.

- 1. Audiological evaluations to measure the extent of hearing loss and determine the most appropriate make and model of hearing aid. These evaluations will be covered under plan benefits for office visits to physicians.
- 2. Hearing aids (monaural or binaural) including ear mold(s), the hearing aid instrument, batteries, cords and other ancillary equipment.
- 3. Visits for fitting, counseling, adjustments and repairs for a one year period after receiving the covered hearing aid.

## What the Plan does Not Cover (i.e., Exclusions)

No benefits will be provided for the following:

1. Charges for extra features that are beyond the specifications prescribed for the correction of hearing loss or are not medically necessary.

## VSP Signature & VSP Choice Plans

Below is a summary of benefits available through VSP's Signature and Choice Plans.

For a complete proposal or for a network access report, please contact your VSP Representative

VSP Choice Plan Full-service Plan Provider Network Network N/A 1% Disruption **Claim Disruption** N/A 208 WellVision Thorough eye exam covered in full<sup>1</sup> Same as Signature Plan Exam Glass or plastic, single vision, lined bifocal, lined trifocal, or Lenses Same as Signature Plan lenticular prescription lenses are covered in full<sup>1</sup> Photochromic and UV protection are covered in full. Same as Signature Plan **Lens Options** Dependent children are eligible for covered in full Same as Signature Plan polycarbonate prescription lenses Frames are covered in full up to the retail allowance of \$150 Same as Signature Plan Frame 20% off any amount above the allowance Same as Signature Plan 15% off contact lens services, excluding materials Same as Signature Plan Instead of eyeglasses, elective contact lens services and materials are covered up to \$150 toward any type of Same as Signature Plan **Contact Lenses** prescription contact lenses Necessary contact lenses are covered-in-full<sup>1</sup> for members who have specific conditions for which contact lenses Same as Signature Plan provide better visual correction. Laser Through VSP's Laser VisionCare Preferred Program, you VisionCare are provided a one time \$250 allowance per eye to use Same as Signature Plan Preferred towards the cost of laser vision correction surgery. Program Eye Health Includes member materials, care from VSP providers, and Management Same as Signature Plan data that supports your wellness initiatives Program<sup>®</sup> Laser Discounts averaging 15-20% off or 5% off a promotional offer Same as Signature Plan for laser surgery including PRK, LASIK, and Custom LASIK<sup>2</sup> VisionCare Exam - \$30, Single Vision Lenses - \$20, Exam - \$45, Single Vision Lenses - \$30, Non-VSP Bifocal Lenses - \$35, Trifocal Lenses - \$45, Bifocal Lenses - \$50, Trifocal Lenses - \$65, Schedule of Lenticular Lenses - \$75, Progressives - \$45 Elective Contact Lenticular Lenses - \$100, Progressives - \$50, Elective Allowances Lenses - \$75, Frame - \$25, Necessary Contact Lenses -Contact Lenses - \$105, Frame - \$70, Necessary Contact \$250 Lenses - \$250 30% off unlimited additional pairs of prescription glasses 20% off unlimited additional pairs of prescription glasses Value-added and/or non-prescription sunglasses<sup>3</sup> and/or non-prescription sunglasses Benefits Guaranteed pricing on all other lens options, saving our Guaranteed pricing on the most popular lens options,

<sup>1</sup> Less any applicable copay

members an average of 35-40%

saving our members an average of 20-25%

<sup>&</sup>lt;sup>2</sup> Using wavefront technology with the microkeratome surgical device only. Other LASIK procedures may be performed at an additional cost to the member. Laser VisionCare discounts are only available from VSP-contracted facilities.

member. Laser VisionCare discounts are only available from VSP-contracted facilities.

3 30% discount applies to glasses purchased the same day as the member's eye exam from the same VSP Preferred Provider who provided the exam. Members will also receive 20% off unlimited additional pairs of glasses valid through any VSP Preferred Provider within 12 months of the last covered eye exam.

<sup>&</sup>lt;sup>4</sup> Most popular lens options include progressives, anti-reflective, photochromics, scratch resistant coating, polycarbonate, plastic dyes, and UV protection. All other lens options available at 20% discount.

## DENTAL

Add dental implant coverage to be covered under major care of the Dental Plan (85% up to annual maximum).

### **ATTACHMENT C**

#### **BENEFIT AGREEMENT**

## 1. SUPPLEMENTAL LIFE INSURANCE PLAN

• Plan Design for Supplemental Life:

Step rates for Supplemental Life insurance based upon age

- Coverage based on annual salary levels. 1-6X coverage levels to a maximum of \$1Million
- \$50K coverage level
- Eliminate the 1.5X coverage level option in previous contracts

Е	Employee Supplemental Life Rates (per \$1,000 of covered benefit)		
Age	<u>Current</u>	2014 Rates	
< 25	\$0.370	\$0.115	
25 – 29	\$0.370	\$0.135	
30 – 34	\$0.370	\$0.155	
35 – 39	\$0.370	\$0.165	
40 – 44	\$0.370	\$0.195	
45 – 49	\$0.370	\$0.295	
50 – 54	\$0.370	\$0.370	
55 – 59	\$0.370	\$0.370	
60 – 64	\$0.370	\$0.410	
65 – 69	\$0.370	\$0.410	
70 +	\$0.370	\$0.410	

The company would continue to offer each employee basic life insurance of \$10,000 at no cost

## 2. DEPENDENT LIFE PLAN

- Offer Dependent Life
  - Spouse/Domestic Partner Life plan
    - Employees select: \$10K, \$25K, \$50K, \$75K, or \$100K
    - Guarantee issue up to \$25K, then Medical Evidence of Insurability required
  - Child /Children plan
    - Employees select: \$5K, \$10K, or \$25K

Dependent Life	Plan Design	
Spouse/Domestic Partner Plan	Choice of \$10,000,	
	\$75,000, or \$100,000.	
Maximum	Up to 50% of employee coverage	
Evidence of Insurability Level	\$25,000	
Child/Children Plan: Birth to 14 days: \$1,00		00
Birth to 14 days	14 days to age 26:	
14 days to age 26	Choice of \$5,000, \$10,000 or \$25,000	
Rate Information		
Spouse Rate Per \$1,000 / Month	Age	Rate
(based on employee age)	<30	\$0.060
	30-34	\$0.080
	35-39	\$0.090
	40-44	\$0.100
	45-49	\$0.150
	50-54	\$0.230
	55-59	\$0.430
	60-64	\$0.660
	65-69	\$1.270
	70-74	\$2.060
Child Rate \$5,000 Option - Per EE / Month		\$0.420
Child Rate \$10,000 Option - Per EE / Month		\$0.840
Child Rate \$25,000 Option - Per EE / Month		\$2.100

#### 3. ACCIDENTAL DEATH AND DISMEMBERMENT PLAN

MetLife's Accidental Death and Dismemberment (AD&D) coverage pays a benefit for a covered accident that results in a loss of life, speech, hearing and/or sight, paralysis and more

### **Basic Accidental Death and Dismemberment**

- Plan Design:
  - Company paid Basic AD&D for Employee
  - Basic AD&D coverage is \$10,000
  - No Medical Evidence of Insurability

## **Voluntary Accidental Death and Dismemberment**

- Plan Design:
  - Coverage based on annual salary. 1 to 6X coverage levels; maximum of \$1 Million
  - No Medical Evidence of Insurability
- Rate:
  - \$.02 Per \$1,000 / Month Employee Only
  - \$.03 Per \$1,000 / Month Employee, Spouse + Child/Children

Employees do not have to select Supplemental Life to participate in Voluntary Accidental Death and Dismemberment

#### **Living Benefits:**

- Travel Assistance & Identity Theft Solutions (Covers all employees with Basic AD&D)
  - Travel Assistance offers access to valuable services such as:
    - Medical assistance while traveling
    - Emergency medical evacuation
    - Help with lost documents and credit cards
    - Identity theft guidance and support
    - Additional key benefit of the Travel Assistance program is that covered persons may use the service
      while traveling for business or pleasure. Also, dependent spouses and children are covered for these
      services whether they are traveling with the employee or not.
    - Identity Theft Solutions (Covers all employees with Basic AD&D)
  - an additional, value-added benefit packaged with Travel Assistance. Identity Theft Solutions is part of
    MetLife's continued commitment to meeting your customers' diverse needs today and as they evolve over
    time. This new enhancement educates employees and their dependents on preventing an occurrence and
    provides personal assistance and guidance to help alleviate the stress and time burden that victims often
    face
- Hospital Confinement Benefit (Covers only employees with Voluntary AD&D)

 Pays an additional monthly benefit if a covered person is confined in a Hospital as a result of an accidental injury.

## If covered person dies:

- Air Bag Benefit: (Covers all employees with Basic AD&D)
  - If an Air Bag is deployed for the covered person during the accident and the covered person dies as a result
    of the accident while driving or riding in a passenger car and wearing a properly fastened seat belt,
    beneficiaries will receive an extra 10% of the face value of the coverage.
- Seat Belt Benefit (Covers all employees with Basic AD&D)
  - Beneficiaries will receive an extra 10% of the face value of the coverage if a covered person dies from
    injuries sustained in an accident while driving or riding as a passenger in a Passenger Car, provided the
    person was wearing a properly fastened Seat Belt at the time of the accident.
- Common Carrier Benefit (Covers only employees with Voluntary AD&D)
  - Pays an additional benefit if a covered person dies as a result of an accidental injury while traveling in a Common Carrier. If a person dies in an accident on a common carrier, they would receive an additional 100% of the face amount of their AD&D insurance (200% total)
- Child Care Benefit (Covers only employees with Voluntary AD&D)
  - Provides an additional amount to attend a licensed Child Care Center for up to 4 consecutive years. For children under 12 years of age, whose covered parent dies in an accident covered by this policy, they would receive childcare benefits for a maximum of 4 years. There is a cap of \$5000/year and payments cannot exceed (in total) 12% of the face value of the AD&D insurance.
- Child Education Benefit (Covers only employees with Voluntary AD&D)
  - Provides an additional benefit equal to the tuition charges for each eligible dependent child to attend college
    or another accredited institution for up to 4 consecutive years. There is a cap of \$10,000/year and payments
    cannot exceed (in total) 20% of the face value of the AD&D insurance.
- Spouse Education (Covers only employees with Voluntary AD&D) Provides an additional amount equal to the tuition charges for 1 academic year up to \$5,000 per year and payment cannot exceed 3% of the face value of the AD&D insurance.

# Basic and Voluntary Accidental Death and Dismemberment Benefits

Covered Loss	Benefits Amount
Life	Full Amount
Seat Belt Benefit for Loss of Life	Full Amount and 10% of Full Amount
Air Bag Benefit for Loss of Life	Full Amount and 10% of Full Amount
Seat Belt and Air Bag Benefit for Loss of Life	Full Amount and 20% of Full Amount
A hand	50% of Full Amount
A foot	50% of Full Amount
An Arm	75% of Full Amount
A Leg	75% of Full Amount
Sight of an eye	50% of Full Amount
Any combination of a hand, a foot, and or sight of an eye	100% of Full Amount
Thumb and Index finger on same hand	25% of Full Amount
Speech and hearing in both ears	100% of Full Amount
Speech	50% of Full Amount
Hearing in both Ears	50% of Full Amount
Paralysis of both arms and legs (Quadriplegia)	100% of Full Amount
Paralysis of both legs (Paraplegia)	50% of Full Amount
Paralysis of one arm <u>and</u> one leg on the same side of the body (Hemiplegia)	50% of Full Amount
Paralysis of one arm <u>or</u> leg	25% of Full Amount

#### 4. WILL PREPARATION BENEFITS

- Included with Supplemental Life at no additional cost
- Fully covers the legal fees associated with preparing or updating wills for employees and spouses, when using a participating attorney.
- Covers Simple and Complex Wills
- Living Wills, Health Directives, Testamentary Trusts and Power of Attorney
  - Living Will:
    - Ensures your wishes are carried out, and protects your loved ones from making these very difficult and personal decisions by themselves.
    - Also called an "advanced directive;"
      - Document authorized by statutes in all states
      - Individual is appointed as his/her representative to make decisions on maintaining extraordinary life-support in a circumstance where an individual cannot communicate their wishes
  - Power of Attorney:
    - Allows you to plan ahead by designating someone you know and trust to act on your behalf in the event of unexpected occurrences or if you become incapacitated. It is a written document that grants an individual the power to act on the grantor's behalf.
- Easy to use initiating a request via 1-800-821-6400
- Over 10,000 participating attorneys in the Hyatt Legal Plans' network.
- Out-of-Network option.

#### **5. ADMINISTRATIVE CHANGES**

Below are Administrative changes:

Change unit of measure from per/\$100 to per/\$1,000 of coverage.

Changes to coverage: Employee may decrease level of Supplemental insurance at any time.

<u>Evidence of Insurability:</u> When an employee is first eligible for Supplemental life insurance, the employee may elect up to 2X without a Statement of Health (SOH). If the employee wants to elect a coverage level greater than 2X when first eligible, the employee must complete a SOH, that is subject to approval by MetLife.

After the employee's initial enrollment, an employee can increase his supplemental life insurance coverage at any time by completing a SOH. Any increase in coverage level(s) are subject to approval by MetLife

One-Time Special Enrollment period: For the special enrollment period campaign only, to take place during the fall of 2013, employees may elect up to 2X Life insurance coverage without completing an Evidence of Insurability form. For all coverage levels greater than 2X, the employee must complete an on-line short form (or paper submission) during the EnrollSmart Campaign. The on-line short form is an abbreviated questionnaire. A Full Statement of Health (if needed) may be required after the MetLife analysis of the short form questionnaire.

#### RETIREMENT

The Company proposes a new retirement income platform to replace the current defined benefit pension (formula using a percentage of final pay times years of service) plus employer matching contribution in the Retirement Savings Plan for Union-Represented Employees (RSP-U) with a cash balance defined benefit pension plus increased employer match in the RSP-U. The cash balance pension design would annually credit each employee with a percentage of pay which will accumulate with interest during employment. The higher employer match would automatically apply to RSP-U contributions made by employees participating in the cash balance plan.

#### Cash Balance Pension Plan:

The Company proposes the following basic cash balance design:

1. On the last day of each year, a cash balance plan participant will be credited with Pay Credits equal to a percentage of base compensation, shift, Sunday and nuclear premium paid for that year. Annual pay credits would be awarded based on a point system derived from a combination of age and service:

Points (Age + Service)	Pay Credits
< 40	5%
40 - 49	6%
50 - 59	7%
60 - 69	8%
70 - 79	9%
80+	10%

- 2. On the last day of each year, an annual interest credit based on an average of the 30-year Treasury rates for the year would be applied to the accumulated account balance.
- 3. Retirement benefits will be based on the accumulated account balance at retirement or termination. The normal form of benefit will be a monthly pension benefit payable for life that is actuarially equivalent to the Cash Balance Account Balance. Actuarial equivalence will be based on your account balance and age at benefit start date, and the interest and mortality rates specified by the Internal Revenue Service. Employees will also have the option to elect one-time payment of the account balance in a lump sum.
- 4. Other Cash Balance Plan Highlights:
  - Participation in the Plan continues to begin on the first day of employment; there is no waiting period to begin earning a benefit
  - Participants will have a vested right to cash balance benefits after three years of service. Vesting for the final pay plan will continue at five years of service.
  - Normal retirement age will continue to be age 65. Employees who end employment before
    reaching normal retirement age are eligible to receive the full account balance or an actuarially
    equivalent monthly benefit. There is no reduction in account balance for early retirement.
  - Lump sum distributions of the Cash Balance account will be eligible for direct rollover to an Individual Retirement Account (IRA) or other qualified employer retirement plan that accepts rollovers. If a former employee defers distribution of the cash balance account, interest will continue to be credited until the benefit is distributed.

Employees electing conversion to a monthly pension benefit will continue to have survivor benefit
options for a spouse or another named beneficiary. In the event of death prior to retirement, the
full Cash Balance account balance would be payable to your spouse, or another named
beneficiary.

### **Retirement Savings Plan for Union-Represented Employees**

Employees participating in the cash balance pension also will be eligible for an employer matching contribution in the Retirement Savings Plan for Union-Represented Employees (RSP-U) of 75% of the employee's pre-tax and/or after-tax contributions up to 8% of pay.

### **Application of the new Cash Balance and RSP-U Program:**

- Any employees hired on or after January 1, 2013 will participate in the new cash balance plan, and will be eligible to receive the higher 75% employer matching contribution on up to 8% of pay after completion of one year of service.
- During 2013, current employees (those hired before 2013) would be offered the choice to participate
  in the new cash balance and RSP-U program. Those choosing the new plan would begin to accrue
  benefits under the cash balance plan, and would be eligible for the increased RSP-U employer
  matching contribution, beginning January 1, 2014. Pension benefits earned under the current final
  pay pension formula would be frozen as of December 31, 2013.

### **Automatic Enrollment in RSP-U Program**

Effective January 1, 2013, employees participating in the cash balance plan will be automatically enrolled in the Retirement Savings Plan upon reaching eligibility for company matching contributions (one year of service). Automatic enrollment payroll deductions will equal the percentage of pay eligible for company match (8% of pay). Employees may increase, reduce or cancel the payroll deduction at any time.