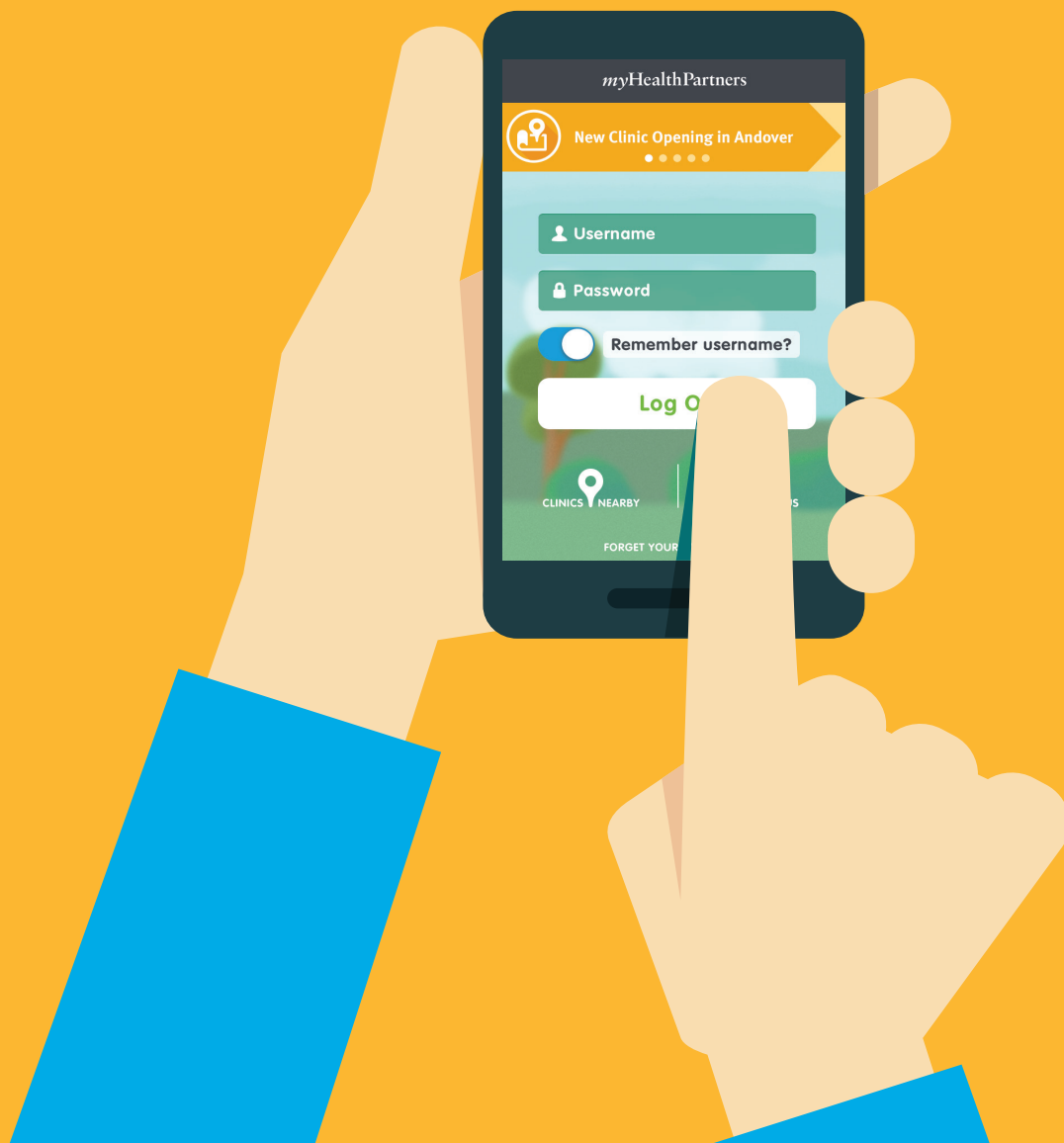


MORE POWER TO YOU



Feel confident and in control when you get care.



Your medical plan benefits	1
Tools and resources	4
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Choosing a plan

Finding the right health plan can feel like a challenge. There's a lot of information to look at, and the terms and language may seem unfamiliar. To get started, ask these questions as you review your options.

WHAT WILL MY COSTS BE?

There are two types of costs you should look at:

- 1. The premium that comes out of your paycheck.**
Your employer will probably charge you a portion of the cost of your health plan. Check with them to see how much the plan will cost you.
- 2. Your out-of-pocket costs throughout the year.**
Out-of-pocket costs usually include your deductible, coinsurance and/or copays. Think about how often you fill a prescription or go to the doctor. How are those services covered?

CAN I KEEP MY DOCTOR AND HOSPITAL?

As a HealthPartners member, chances are your doctor and hospital are in the network. To check, visit healthpartners.com/gm and click *Find a doctor, dentist or specialist*.

VISIT THE GENERAL MILLS BENEFITS ENROLLMENT WEBSITE

- Review the dependent eligibility rules and verify your dependents are eligible.
- Use the Evaluate tools to review your plan options and find the plan that best meets the needs of you and your family.
- Use the Flexible Spending Account (FSA) calculator to learn how you can save on your out-of-pocket medical expenses and estimate how much you may want to contribute to a Health Care and/or Dependent Care Spending Account.
- Elect medical and dental coverage for yourself and your dependents and make your FSA election(s).

WHAT ELSE SHOULD I KNOW?

You can get more from your health plan than you may think. Whether you're dealing with a health condition or looking to get in shape, HealthPartners has special programs and discounts you can use.

ALL DETAILS ARE ONLINE. FIND IT FAST!

From your work computer on the General Mills network:

1. Go to **G&Me/Health Benefits**
2. Click **Benefits enrollment website**
3. You will be asked to verify your dependents
4. Click **Evaluate** to learn more about your medical plan options, determine the most cost effective plan for you for 2015, and use the FSA calculator
5. Click **I'm ready to choose my 2015 plans** when you are ready to make your benefit elections for 2015.

From any computer with Internet access:

1. First, while at work, go to **G&Me/Health Benefits/ Find My PIN**
Personnel Number: _____ PIN: _____
2. Then visit <https://genmillsbenefits.ehr.com> and log in
3. You will be asked to verify your dependents
4. Click **Evaluate** to learn more about your medical plan options, determine the most cost effective plan for you for 2015, and use the FSA calculator
5. Click **I'm ready to choose my 2015 plans** when you are ready to make your benefit elections for 2015.



DistinctionsSM II plan

ABOUT YOUR PLAN

With HealthPartners® Distinctions II plan, you're in control. All hospitals and clinics are put into two benefit levels based on quality and cost. The amount you pay for care depends on the benefit level of your hospital or clinic. When it comes to your care, this plan helps you choose the doctor that's right for you!

You also have network access to many services like:

- Convenience and online care
- Specialty care—no referrals needed
- Preventive care

HOW YOUR PLAN WORKS

When you visit a doctor, clinic or hospital you get to choose from one of two benefit levels. The amount you pay for care depends on your clinic's benefit level and the type of care you need. Your clinic's benefit level is based on the quality of care that clinic provides and what it costs to get care there. Here's how it works:

BENEFIT LEVEL	QUALITY	COST
Benefit level 1:	★ ★ ★	\$
Benefit level 2:	★ ★	\$\$

Check your doctor's benefit level before making an appointment—doctors, clinics and hospitals are all rated separately.

YOUR DISTINCTIONS II PLAN BENEFITS

Learn more about your Distinctions II plan by using this chart with your Summary of Benefits and Coverage (SBC).

YOUR DISTINCTIONS II PLAN	
Your network - where can I go to the doctor?	Distinctions II network SBC Page 1
Your deductible - if I have a deductible, how much is it?	SBC Page 1
Your annual out-of-pocket limit - what's the most I will pay for health care?	SBC Page 1
Your office visit costs - how much will I pay for office visits?	SBC Page 2
Your tests - how much will I pay for MRIs, CT scans and X-rays?	SBC Page 2
Your emergency needs - how much does it cost to go to urgent care or the emergency room?	SBC Page 3

FIND A DOCTOR IN YOUR NETWORK

When it comes to your health care, finding the right doctor is really important. To see if your doctor is in the Distinctions II network or to find a new one, you can:

- Visit healthpartners.com/gm and search the Distinctions II network. Search for doctors, clinics, specialty and more.
- Check benefit levels for doctors, clinics and hospitals. Find out how doctors rate on quality and cost.
- Choose from more than 950,000 doctors and other care providers, plus 6,000 hospitals in the United States.



2015 Distinctions II

Tiering Changes from 2014

Primary Care

Benefit Level 1

Aalfa Family Practice
Advanced Medical Clinic
Burnsville Family Physicians
Cedar Riverside People's Center
Children's Physician Network
Community Univ Health Care Center
Edina Sports Health & Wellness [2]
Entira Family Clinics
France Avenue Family Physicians, PA [2]
Fremont Community Health Services
HealthPartners Central MN Clinics
HealthPartners Clinics
Ilko Family Medicine, PA
Integrity Health (Buffalo Clinic)
Metropolitan Pediatric Specialists
North Memorial Clinics
Northwest Family Physicians, PA
Open Cities Health Center
Richfield Medical Group
Ridgeview Care System
Southdale Pediatric Associates, Ltd
Southside Community Health Services
St. Paul Family Medical Center
Stillwater Medical Group, PA
Valley Family Practice
West Side Community Health Services

Primary Care

Benefit Level 2

Allina Health
Apple Valley Medical Clinic
Bloomington Lake Clinic
Edina Family Physicians
Fairview Clinics
HealthEast Clinics [1]
Hennepin County Medical Ctr
Lakeview Clinic, Ltd.
Multicare Associates [1]
North Clinic, PA
Park Nicollet/Methodist
United Family Practice Health Center
University of Mn Physicians

Cardiology

Benefit Level 1

Children's Heart Clinic, PA
Fairview Clinics
HealthPartners Clinics
Hennepin County Medical Ctr
North Memorial Cardiovascular Services
Park Nicollet/Methodist [2]
University of MN Physicians

Cardiology

Benefit Level 2

Allina Health
HealthEast Clinics [1]
Metropolitan Heart & Vascular Institute
Minneapolis Heart Institute

Ear Nose & Throat

Benefit Level 1

Affiliated Otolaryngologists, PA
Buffalo Clinic, PA
Children's Health Care
Ear Nose & Throat Clinic and Hearing Center [2]
Ear Specialty Center
HealthEast Clinics
HealthPartners Clinics
Hennepin County Medical Ctr
Midwest Ear, Nose & Throat Specialists
Minneapolis Otolaryngology, PA
Paparella, Ear Head & Neck
Children's ENT and Facial Plastic Surgery
Ridgeview Clinics
Southdale Otolaryngology, PA
Stillwater Medical Group, PA

Ear Nose & Throat

Benefit Level 2

Allina Health
Ear, Nose & Throat Specialty Care of MN, PA
Fairview Clinics
Oakdale Ear, Nose & Throat Clinic, PA
Park Nicollet/Methodist
University of MN Physicians

Orthopedics

Benefit Level 1

Buffalo Clinic
Children's Specialty Clinic
Fairview Clinics
Family Health Medical Clinic
Gillette Children's Specialty HealthCare
HealthPartners Clinics
Hennepin County Medical Ctr
Integrity Health (Buffalo Clinic)
Lakes Orthopaedic Specialists, PA
Minneapolis Orthopedics
Multicare Associates of the Twin Cities
Orthopedic Specialists, PA
Park Nicollet/Methodist
Physicians Neck and Back Clinic
Ridgeview Clinics
St. Croix Orthopaedics, PA
Summit Orthopedics, Ltd.
Wayzata Orthopedics, PA

Orthopedics

Benefit Level 2

Allina Health
Aspen Medical Group
Sports and Orthopedic Specialists, PA
Twin Cities Orthopedics, PA
University of MN Physicians

Green = improved from 2014

Red = decreased from 2014

Ob/Gyn

Benefit Level 1

Advanced Specialty Care for Women, PA
Buffalo Clinic, PA
Cedar Riverside People's Center
[Clinic Sofia OB GYN PA \[2\]](#)
Community Univ Health Care Center
Comprehensive Healthcare for Women, PA
Family Health Medical Clinic for Women, PA
Fremont Community Health Services
Generations Women's Health Center, PA
HealthEast Clinics
HealthPartners Central MN Clinics
HealthPartners Clinics
Hennepin Faculty Associates
John A. Haugen Associates, PA
Lakeview Clinic, Ltd.
Metropolitan Obstetrics and Gynecology
Minnesota Gynecology and Surgery
Multicare Associates of the Twin Cities
North Clinic, PA
North Metro Midwives, PA
NorthPoint Health & Wellness Center
Oakdale Obstetrics & Gynecology, PA
Obstetrics and Gynecology Specialists
OB/GYN West
Open Cities Health Center
Partners Obstetrics & Gynecology
Paul Larson Ob/Gyn Clinic, PA
Ridgeview Clinics
Southdale OB/Gyn Consultants
Stillwater Medical Group, PA
West Side Community Health Services
Western OB/Gyn, Ltd.
Women & Adolescents Gynecology Center, LLC

Ob/Gyn

Benefit Level 2

Adefris & Toppin Women's Specialists
Allina Health
Fairview Clinics
Park Nicollet/Methodist
University of MN Physicians
Women's Health Consultants

Hospitals

Benefit Level 1

Children's Hospital – St. Paul & Mpls
Fairview Ridges Hospital
Fairview Southdale Hospital
Gillette Childrens Hospital
Lakeview Hospital
Maple Grove Hospital
North Memorial Medical Center
Olmsted Medical Center/Hospital
Park Nicollet Methodist Hospital
Regions Hospital

Hospitals

Benefit Level 2

Abbott Northwestern Hospital
Buffalo Hospital
Cambridge Medical Center
Fairview Lakes Regional Medical Center
HealthEast St. Johns Hospital
HealthEast St. Josephs Hospital
HealthEast Woodwinds Hospital
Hennepin County Medical Center
Mercy Hospital – Coon Rapids
New River Medical Center
Regina Medical Center
[Ridgeview Medical Center \[1\]](#)
Rochester Methodist Hospital
St. Francis Regional Medical Center
United Hospital – St. Paul
Unity Hospital – Fridley
University of MN Medical Center, Fairview

Only the Twin Cities area providers shown here are assigned to Benefit Levels. Other providers—including all outside the metro area plus specialties not listed above, regardless of their location—are considered Benefit Level 1.

For the most up-to-date information, log on to healthpartners.com.

Visit healthpartners.com to find clinics, doctors, and hospitals in your neighborhood, and your benefit level.





virtuwell® - your 24/7 online clinic

GET REAL TREATMENT BY REAL PEOPLE, REALLY FAST.

virtuwell® is an online clinic connecting you with safe and convenient care. After a simple, guided interview about your symptoms, a nurse practitioner will make a diagnosis. In about 30 minutes or less, you'll get a personalized treatment plan and a prescription if you need one.

TRY VIRTUWELL AND SAVE TIME

1. A virtuwell visit starts with a **quick online interview** that checks your history and makes sure the problem isn't serious.
2. Next, a **certified nurse practitioner** will make a diagnosis and write your treatment plan. You'll get an email or text the moment your plan is ready - usually within 30 minutes or less.
3. If you need a **prescription**, we'll send it to your favorite pharmacy.
4. If you need to speak with a nurse practitioner about your plan, they're **available 24/7**.

Get started at virtuwell.com.

SAVES YOU MONEY

A virtuwell visit only costs \$45. You're only charged if you can be treated, and if you're not completely satisfied you'll get your money back. Still not feeling better? Call virtuwell at anytime for free follow-up care.

Let's get you better. virtuwell.com.

TREATS MANY COMMON CONDITIONS

virtuwell only treats conditions that can be safely treated online:

- Sinus infections
- Pink eye
- Bladder infections
- Upper respiratory infections
- Rashes and other skin irritations
- And more...

Find the full list at virtuwell.com/conditions.



98 percent of customers highly recommend virtuwell®.

Source: *virtuwell patient satisfaction survey*



Know your care costs

When you choose a health plan, you want to know how much you'll pay for care. With so many options, it can be confusing to know where to go. Use this information to help you get the best care while managing your out-of-pocket costs.

When you need:	Go to:	Average cost:	Average time spent:
Health advice from a nurse. For example, if you have questions about: <ul style="list-style-type: none"> Medicines Cold or cough Upset stomach 	CareLineSM service — Call CareLine 24/7 at 612-339-3663 or 800-551-0859	Free	
Treatment and prescriptions for minor medical issues. For example: <ul style="list-style-type: none"> Sinus infection Yeast and bladder infections Pinkeye 	virtuwell[®] (a 24/7 online clinic) or convenience clinics (found in retail and grocery stores)	\$	
A regular checkup or care for urgent problems during the day. For example: <ul style="list-style-type: none"> Diabetes management Ear infection Strep throat 	Primary care clinics	\$\$	
Care for urgent problems when primary care clinics are closed. For example: <ul style="list-style-type: none"> Cuts that need stitches Possible broken bones Sprains 	Urgent care clinics	\$\$\$	
Help in an emergency. For example: <ul style="list-style-type: none"> Chest pain or shortness of breath Serious cuts and burns Head injury 	Emergency room	\$\$\$\$	



Your guide to well-being

Want to live a healthier life? We can help. As a HealthPartners member, you'll get the tools, support and resources you need to be a healthier, happier you. We'll help you focus on what's important to you.

GET HEALTHY

- **Get one-on-one support.**
 - Sign up with a health coach for help living tobacco free. Call **800-311-1052**.
 - Get advice 24/7 from a nurse. Call our CareLineSM service at **800-551-0859**.
- **Make the right decision for you.**

It can be hard to know which treatment option is best for you. Get help making the right decision based on what's important to you. Just call Member Services at the number on the back of your Member ID card and ask for a Nurse Navigator.
- **Watch, listen and interact online.**

Our virtual coaching can help you eat better, be active and stress less.

STAY HEALTHY

- **Discover the Healthy DiscountsSM program.**

Just for being a HealthPartners member, you'll save on exercise equipment, spa services and more.
- **Stay up-to-date.**

Find out when you and your family are due for vaccines, lab tests, screenings and routine checkups.
- **Get group support.**

Take a class or attend a group session. Topics include asthma, car seat clinics, weight loss and more.

Visit healthpartners.com/healthyliving to check out these tools and more.

KNOW HEALTHY

- **Find information about your health.**

Visit the Health Information Library to search health topics, try out the symptom checker and use other great tools.
- **Discover yumPower.**

Find tasty tips and useful resources to eat better and get power at yumpower.com.
- **Sign up for weekly texts.**

Get helpful tips to help you and your family on your way to better health.

To sign up, text one of the following commands to **77199**:

 - **FAMILY** for ideas to support your family's health
 - **QUITNOW** for tips to help you quit smoking
 - **YUM** for better-for-you eating tips from yumPower

Plus, you can get helpful tips for you and your baby's health. Text **BABY** (or **BEBE** for Spanish) to **511411**.





Using your plan

At home, work or on-the-go, it's easy to manage your health care with *myHealthPartners* online and mobile tools. Here's a guide to help you get started.

CREATE AN ACCOUNT

1. Go to healthpartners.com/gm.
2. Click on *Sign up for a myHealthPartners account*, then click on *I have HealthPartners insurance*.
3. Enter your eight-digit Member ID number and date of birth; then click *Continue*.
4. Create a username and password, and enter the email address you'd like tied to your account.
5. Choose three security questions and click *Continue*.
6. Congratulations! You've created a *myHealthPartners* account.

You can also view plan balances on the *myHP* mobile app! Learn more at healthpartners.com/gomobile.

MANAGE YOUR HEALTH CARE COSTS

It's easy to manage your health care costs and plan for future expenses with your *myHealthPartners* account:

- Track your spending.
- Search for a treatment or procedure, and get cost estimates specific to your plan, benefits and deductible.
- View past claims or explanations of benefits (EOB) with the new *My activity* timeline. You'll get a real-time look at how the care you receive works with your plan.





Your plan made easy

As a HealthPartners member, it's easy to manage your plan and feel confident when you get care. Whatever your preference, you can stay connected—online, on your smartphone or via text.

When you want to:	Find it:
See your benefits and specific plan information	
See your claims and explanations of benefits (EOBs)	
Check your plan balances, including your deductible, out-of-pocket maximum and more	
Search for doctors in your network or near your current location	
Manage your health care costs and plan for future expenses	
View your HealthPartners Member ID card and fax it to your doctor's office	
Find tips for getting and staying healthy	



CONNECT ONLINE

With a *myHealthPartners* online account, your specific benefits, claims and tips for living healthy are just a click away. You'll even get cost saving tips based on your claims! Sign up at healthpartners.com/gm.

TEXT TO CONNECT

Don't have a smartphone? Check your plan balances by setting up your mobile phone to get texts from HealthPartners. Once you verify your phone number, text us to get your balance. You can also get weekly eat better texts from HealthPartners yumPower by texting YUM to 77199.

CONNECT ON YOUR SMARTPHONE

Whether you're at home or on-the-go, your plan information is right at your fingertips. HealthPartners iPhone app and mobile site makes using your plan easy wherever you are. Visit healthpartners.com/gomobile to learn more.

Looking for more? Download the HealthPartners yumPower iPhone app to find better-for-you meal options at restaurants near you.



Your questions answered

As a HealthPartners member, you have personal support when you need it. Contact us when you have questions about your coverage or health — we're here to help.

If you have questions about:	Call:	Go online:
<ul style="list-style-type: none"> Your coverage, claims or account balances Finding a doctor, dentist or specialist in your network Finding care when you're away from home Immunizations and paperwork needed for travel 	<p>Member Services Monday – Friday, 7 a.m. – 7 p.m., CT</p> <p>Call the number on the back of your Member ID card or 952-967-7985 or 888-324-9722</p> <p>Español: 866-398-9119</p> <p>Interpreters are available if you need one.</p>	<p>Log on to healthpartners.com/gm to chat with Member Services</p>
<ul style="list-style-type: none"> Whether you should see a doctor Home treatment options A medicine you're taking 	<p>CareLineSM service — nurse line 24/7, 365 days a year</p> <p>Call 612-339-3663 or 800-551-0859</p>	<p>Visit healthpartners.com/gm</p>
<ul style="list-style-type: none"> Understanding your health care and benefits How to choose a treatment option 	<p>HealthPartners[®] Nurse Navigator program Monday – Friday, 7 a.m. – 7 p.m., CT</p> <p>Call 952-967-7985 or 888-324-9722</p>	<p>Visit healthpartners.com/gm</p>
<ul style="list-style-type: none"> Your pregnancy The contractions you're having Your new baby 	<p>BabyLine phone service 24/7, 365 days a year</p> <p>Call 800-845-9297</p>	<p>Visit healthpartners.com/gm</p>
<ul style="list-style-type: none"> Finding a mental or chemical health care professional in your network Your behavioral health benefits 	<p>Behavioral Health Navigators Monday – Friday, 8 a.m. – 5 p.m., CT</p> <p>Call 888-638-8787</p>	<p>Log on to healthpartners.com/gm</p>
<ul style="list-style-type: none"> How health care reform might impact you 	<p>Member Services Monday – Friday, 7 a.m. – 7 p.m., CT</p> <p>Call the number on the back of your Member ID card or 800-883-2177</p> <p>Español: 866-398-9119</p> <p>Or talk to your employer.</p>	<p>Visit healthpartners.com/reform</p>

Summary of utilization management programs

HealthPartners® utilization management programs help ensure effective, accessible and high quality health care. These programs are based on the most up-to-date medical evidence to evaluate appropriate levels of care and establish guidelines for medical practices. Our programs include activities to reduce the underuse, overuse and misuse of health services. These programs include:

- Inpatient concurrent review and care coordination to support timely care and ensure a safe and timely transition from the hospital
- “Best practice” care guidelines for selected kinds of care
- Outpatient case management to provide care coordination
- The CareCheck® program to coordinate out-of-network hospitalizations and certain services.

We require prior approval for a small number of services and procedures. For a complete list, go to healthpartners.com/gm or call Member Services. You must call CareCheck® at 952-883-5800 or 800-942-4872 to receive maximum benefits when using out-of-network providers for in-patient hospital stays; same-day surgery; new or experimental or reconstructive outpatient technologies or procedures; durable medical equipment or prosthetics costing more than \$3,000; home health services after your visits exceed 30; and skilled nursing facility stays. We will review your proposed treatment plan, determine length of stay, approve additional days when needed and review the quality and appropriateness of the care you receive. Benefits will be reduced by 20 percent if CareCheck® is not notified.

Our approach to protecting personal information

HealthPartners complies with federal and state laws regarding the confidentiality of medical records and personal information about our members and former members. Our policies and procedures help ensure that the collection, use and disclosure of information complies with the law. When needed, we get consent or authorization from our members (or an authorized member representative when the member is unable to give consent or authorization) for release of personal information. We give members access to their own information consistent with applicable law and standards. Our policies and practices support appropriate and effective use of information, internally and externally, and enable us to serve and improve the health of our members, our patients and the community, while being sensitive to privacy. For a copy of our privacy notice, please visit healthpartners.com/gm or call Member Services at 952-967-7985 or 888-324-9722.

THIS PLAN MAY NOT COVER ALL YOUR HEALTH CARE EXPENSES. READ YOUR PLAN MATERIALS AND SUMMARY OF BENEFITS AND COVERAGE (SBC) CAREFULLY TO DETERMINE WHICH EXPENSES ARE COVERED.

For details about benefits and services, call Member Services at 952-967-7985 or 888-324-9722.

Provider reimbursement information for medical plans

Our goal in reimbursing providers is to provide affordable care for our members while encouraging quality care through best care practices and rewarding providers for meeting the needs of our members. Several different types of reimbursement arrangements are used with providers. All are designed to achieve that goal.

- Some providers are paid on a “**fee-for-service**” basis, which means that the health plan pays the provider a certain set amount that corresponds to each type of service furnished by the provider.
- Some providers are paid on a “**discount**” basis, which means that when a provider sends us a bill, we have negotiated a reduced rate on behalf of our members. We pay a predetermined percentage of the total bill for services.
- Sometimes we have “**case rate**” arrangements with providers, which means that for a selected set of services the provider receives a set fee, or a “case rate,” for services needed up to an agreed upon maximum amount of services for a designated period of time. Alternatively, we may pay a “case rate” to a provider for all of the selected set of services needed during an agreed upon period of time.
- Sometimes we have “**withhold**” arrangements with providers, which means that a portion of the provider’s payment is set aside until the end of the year. The year-end reconciliation can happen in one or more of the following ways:
 - » Withholds are sometimes used to pay specialty, referral or hospital providers who furnish services to members. The provider usually receives all or a portion of the withhold based on performance of agreed upon criteria, which may include patient satisfaction levels, quality of care and/or care management measures
 - » Some providers — usually hospitals — are paid on the **basis of the diagnosis** that they are treating; in other words, they are paid a set fee to treat certain kinds of conditions. Sometimes we pay hospitals and other institutional providers a set fee, or “**per diem**,” according to the number of days the patient spent in the facility.
 - » Some providers — usually hospitals — are paid according to Ambulatory Payment Classifications (APCs) for outpatient services. This means that we have negotiated a payment level based on the resources and intensity of the services provided. In other words, hospitals are paid a set fee for certain kinds of services and that set fee is based on the resources utilized to provide that service.
 - » Occasionally our reimbursement arrangements with providers include some **combination** of the methods described above. For example, we may pay a case rate to a provider for a selected set of services needed during an agreed upon period of time, or for services needed up to an agreed upon maximum amount of services, and pay that same provider on a fee-for-service basis for services that are not provided within the time period or that exceed the maximum amount of services. In addition, although we may pay a provider such as a medical clinic using one type of reimbursement method, that clinic may pay its employed providers using another reimbursement method.

Check with your individual provider if you wish to know the basis on which he or she is paid.

Notice of grandfathered medical plan*

Your employer believes this medical plan is a “grandfathered health plan” under the Patient Protection and Affordable Care Act (the Affordable Care Act). As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan means that your plan may not include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the provision for the requirement of preventive health services without any cost sharing. However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, for example, the elimination of lifetime limits on benefits.

Questions regarding which protections apply and which protections do not apply to a grandfathered health plan and what might cause a plan to change from grandfathered health plan status can be directed to your employer. If you are on a plan subject to ERISA, you may also contact the Employee Benefits Security Administration, U.S. Department of Labor at 866-444-3272 or dol.gov/ebsa/healthreform. This website has a table summarizing which protections do and do not apply to grandfathered health plans. You may also contact the U.S. Department of Health and Human Services at healthcare.gov. *Applies to Union Plans.



Want tips for eating better?

Check out HealthPartners yumPower—it's all about finding tasty, good-for-you foods that power your body and help you live the best life possible. After all, when you eat better, you feel better! Get started at yumpower.com — your mind, body and taste buds will thank you.