

WELCOME TO OPEN ENROLLMENT FOR YOUR 2027 RETIREE COVERAGE

Enroll online or by calling the Aerospace Benefits Service Center

2027 Open Enrollment Guide

RETIREE EDITION

Enroll November 1-15, 2026

PEOPLE OPERATIONS
Total Rewards

AEROSPACE

The 2027 Retiree Open Enrollment Guide is not an employment contract or an offer to enter into an employment contract, nor does it constitute an agreement by the corporation to continue to maintain the plans described or referred to in this document.

Although the corporation intends to continue these plans, the corporation reserves the right to amend, change, modify or terminate the plans at any time. The corporation's decisions to amend, change, modify or terminate these plans may be due to changes in federal or state laws governing welfare benefits, the requirements of the Internal Revenue Code, the requirements of the Employee Retirement Income Security Act of 1974 (ERISA), the provisions of a contract or policy involving an insurance company, or any other reason.

Plan participants and beneficiaries do not have a vested right to any plan benefits. If the plans are amended, changed, modified or terminated, plan participants and beneficiaries will not be vested in any plan benefits or have any further rights other than payment of covered expenses to which they were entitled before the plans were amended, changed, modified or terminated.

Any examples in this Retiree Open Enrollment Guide are included for illustrative purposes only. They are not intended as recommendation of action you should take or benefits you should elect.

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To Keep Your Current Coverage: No Action Required

You do not need to enroll if you are not changing plans or adding/removing eligible dependents. If you want to change or waive medical coverage, or change covered dependents, go to the Aerospace Benefits Service Center portal at **https://compass.empyreanbenefits.com/aerospace** or call the Aerospace Benefits Service Center at 844.361.2400.

Information About Your Aerospace Employee Benefits

2027 RETIREE OPEN ENROLLMENT: NOVEMBER 1-15, 2026

Welcome to Open Enrollment for your Aerospace retiree medical benefits. This is your annual opportunity to make changes to your medical plan elections for the upcoming year.

Your medical coverage will carry forward to 2027 with updated cost-sharing rates unless you make a change during Open Enrollment.

We are pleased to announce that there are minimal changes to your benefits for 2027. Key information to consider when making your enrollment choices:

- We encourage you to take advantage of the Aerospace Benefits Service Center to help you enroll and manage your retiree benefits (page 5).
- Consider signing up for Health Advocate, a free advocacy service paid for by Aerospace that provides access to experts who can help you navigate the complex world of health care (page 6).
- Kaiser Medicare-eligible participants should consider taking advantage of the Silver&Fit program, which gives you access to fitness facilities, exercise programs, meal planners, health trackers and more (page 7).
- Additional information on your retiree medical plan choices is available on the Aerospace Benefits Service Center portal at **https://compass.empyreanbenefits.com/aerospace** or on the Aerospace Retirees website at **retirees.aerospace.org**.

WHAT YOU NEED TO DO:

1. Read this guide for an overview of medical coverage options.
2. Visit the Aerospace Retirees website at **retirees.aerospace.org** to view the Retiree Medical Plan Comparison Chart for each medical insurance plan. You can also find general notices and enrollment instructions if you are changing medical plans for 2027.
3. Log in to the Aerospace Benefits Service Center portal to see your medical options and/or 2027 rates, add or change dependents and beneficiaries, and change your coverage for 2027.

Enroll Online!

You do not need to enroll if you are not making any changes to your coverage. However, if you want to change or waive medical coverage or change covered dependents, use the Aerospace Benefits Service Center portal or call the Aerospace Benefits Service Center. See "How to Make Coverage Changes for 2027" on the next page.

A CHANGE TO MEDICAL BENEFIT ENROLLMENT

If eligible for Retiree Medical, beginning January 1, 2027, you may enroll in medical benefits regardless of whether you have started receiving your retirement income. Previously, retirement payments were required before medical coverage could be elected.



HOW TO MAKE COVERAGE CHANGES FOR 2027

IMPORTANT: To make changes, log in to the portal or call the Aerospace Benefits Service Center.

If you previously registered, use the user ID and password you created to access the site and make coverage changes. If you are logging into the site for the first time, follow these steps:

1. Go to the Aerospace Benefits Service Center portal: **https://compass.empyreanbenefits.com/aerospace**
2. At the log-in screen, click **Register**
3. Enter your personal information:
   a. First and last name (as on record with Aerospace)
   b. Date of birth
   c. Aerospace employee badge #
   d. Click **Next**
4. Create a user ID and password
   a. Your user ID can be your personal email address
   b. Your password must have at least 8 characters, 1 letter, 1 number and 1 symbol (i.e., * & + # $)
5. Set up a security question and answer to use in case you forget your password
6. Read the terms of service agreement and click **I Agree**

If you have any questions or experience issues with online registration, please contact the Aerospace Benefits Service Center at 844.361.2400.

Note: Survivors do not have the option to waive Aerospace group medical coverage. If a survivor terminates Aerospace group medical coverage due to disenrollment or non-payment, the survivor cannot re-enroll with Aerospace later.

Go Online to Enroll or Call for Enrollment Help

If you want to make changes to your retiree coverage for 2027, visit the Aerospace Benefits Service Center portal from November 1-15, 2026, and follow the instructions on this page.

If you have questions or need to enroll with the help of a representative, call the Aerospace Benefits Service Center at 844.361.2400. Representatives are available from 7 a.m. – 4 p.m. PT, Monday through Friday.

'I've logged into the benefits portal. Now what? How do I make changes?'

Once you have registered and logged in to the benefits portal, you will see a pending event screen for Open Enrollment. Here's what you need to do:

- Click **Continue** and the enrollment system will walk you through the steps to verify or make changes to your:
  - Personal information
  - Dependent(s) information
  - Benefit elections
- When you are done making changes, click **I'm Ready to Finalize My Elections**.
- Complete a final review of your elections.
- When you are ready, click **Submit My Elections**.
- To confirm your enrollment, click **Accept**. *Note: This is important!* Your elections will not be recorded until you click **Accept**.
- You will see a final confirmation summary and receive a confirmation number for reference.
- Click **Print** to get a copy for your records. You can view and print your elections at any time by going to **Benefits History**.

HEALTH ADVOCATE: REAL SUPPORT FOR RETIREES

Health Advocate is a free advocacy service paid for by Aerospace that gives you access to experts who can help you navigate the complex world of health care services, providers, diagnoses, claims and more. This dedicated team of healthcare professionals does the legwork so you get the right care and support you need.

What Health Advocate can do for you:

- Find in-network doctors, dentists, hospitals and other providers.
- Arrange appointments, including second opinions with hard-to-reach specialists.
- Help explain your doctor's instructions.
- Provide guidance with insurance coverage.
- Help with insurance choices before you are eligible for Medicare.
- Explain Medicare coverage and costs.
- Explain how Medicare coordinates with your employer-provided insurance.
- Compare various Medicare plan options.
- Locate care facilities and support.
- Research local adult daycare, assisted living and long-term care facilities.
- Locate in-home care and nursing support resources.
- Help facilitate transportation to your medical appointments.
- Handle insurance-related issues.
- Review your employer-provided retiree health benefits.
- Help resolve billing and claims issues.
- Provide the estimated out-of-pocket costs of common medical procedures in your area.



Remember… your personal Health Advocate can answer your questions about health care after retirement as well as assist you with a variety of health care and insurance issues. Eligible retirees, their spouses, dependent children, parents and parents-in-law are all covered. Just call or email **answers@HealthAdvocate.com**.

For 24/7 support, call **866.695.8622** or visit **HealthAdvocate.com/members**.

Worried about your diagnosis or treatment plan?

Get a second opinion—confidential, expert-reviewed and free.

A second opinion can uncover new treatment options or even a different diagnosis. With Health Advocate, you will receive a detailed report from a specialist to share with your care team, giving you and your loved ones peace of mind.

They handle everything. You pay nothing.

2027 Medical Coverage

MEDICAL PLAN OPTIONS

You may choose from several medical plan options offered by Aerospace for you and your covered dependents. Your choices are based on your location, military affiliation, Medicare eligibility status and date of retirement. Review the chart below for 2027 options.

Visit **retirees.aerospace.org** to view the Retiree Medical Plan Comparison Chart as well as legally mandated general notices.

	2027 Medical Plan Options	
	Non-Medicare-Eligible (Pre-65)	**Medicare-Eligible (Post-65)**
Nationwide	Anthem Blue Cross PPO (Preferred Provider Organization)	Anthem Medicare Preferred (PPO) with Senior Rx Plus Open to all retirees
All states except California	Anthem Blue Cross EPO (Exclusive Provider Organization)	
California (based on zip code availability)	Anthem Blue Cross HMO (Health Maintenance Organization)	Anthem Blue Cross Senior Secure HMO* (Southern California only)
	Kaiser Permanente HMO	Kaiser Permanente Senior Advantage HMO*
Colorado	Kaiser Permanente Colorado HMO	Kaiser Permanente Senior Advantage HMO*
Maryland, Virginia, Washington D.C. (based on zip code availability)	Kaiser Permanente Mid-Atlantic HMO	Kaiser Permanente Medicare Advantage HMO*
Military retirees and eligible dependents currently enrolled in the TRICARE Standard, Extra or Prime plans	TRICARE Supplement Plan (ASI/Selman and Company) *Not available if the retiree and/or covered dependent(s) is eligible for Medicare*	N/A

* For those age 65 and older, HMO plans are only available to retiree casuals.

Alight Retiree Health Support + HRA

Eligible retirees who enroll in a medical and prescription plan through Alight Retiree Health Solutions will receive annual contributions from Aerospace into a Health Reimbursement Account (HRA). Retiree Casuals are not eligible to enroll in Alight with the HRA.

An HRA is an employer-funded account designed to help cover qualified healthcare expenses. These include:

- Monthly premiums for medical and prescription drug plans
- Medicare Part B premiums
- Other eligible out-of-pocket costs such as copays and deductibles

You will be reimbursed for eligible expenses until your HRA funds are fully used. Any unused funds will roll over from year-to-year, allowing you to build savings for future health care needs. Best of all, HRA reimbursements are tax-free when used for qualified expenses. Eligible retirees can access Alight at: **https://retiree.alight.com**.

ELIGIBLE DEPENDENTS

You may elect to cover your eligible dependents as summarized below:

- Your legal spouse: Proof of marriage is required.
- Your domestic partner: All domestic partners must be registered as domestic partners with the state of residence and provide proof to the Aerospace Benefits Service Center.
- Your children: Your children or your spouse's/covered domestic partner's children may be covered up to age 26. If the child is disabled and already on your Aerospace medical plan, they may be eligible for coverage beyond age 26. Children of retirees who live in Florida and are enrolled in the Anthem Blue Cross EPO are eligible for coverage up to age 30.

Contact the Aerospace Benefits Service Center for more information.

YOUR MONTHLY CONTRIBUTIONS FOR MEDICAL COVERAGE

Your cost for each medical plan option is shown on the Aerospace Benefits Service Center portal. The cost for coverage depends on the medical plan you choose, the number of eligible dependents you cover and eligibility for Medicare for each participant.

Important note: Rates for retirees with split coverage (i.e., one spouse is Medicare-eligible and one spouse is not) are not bundled. For example, the spouse who is under age 65 can enroll in Kaiser Permanente and the spouse who is over 65 can enroll in the Anthem Medicare Preferred (PPO) with Senior Rx Plus option. Individual rates will be posted on the Aerospace Retirees website at **retirees.aerospace.org**.

Aerospace contributes a monthly fixed dollar amount toward retiree medical coverage, referred to as a Defined Dollar Benefit (DDB). Tier A retirees receive the full DDB and Tier B retirees receive a percentage of the DDB based on years of service rounded down. Keep in mind if the total monthly premium is less than the DDB, your monthly cost will be zero.

How to Make Payments

If your monthly medical plan cost-sharing amount is currently deducted from your pension, you can continue to pay this way. Northern Trust will send you a statement in early January reflecting your 2027 cost-sharing amount along with new gross pension payment information.

You will receive a monthly invoice mailed to your address on file with Aerospace Employee Benefits if:

- You are a new retiree in 2027 or later
- You are not receiving a pension payment
- Your medical cost-sharing amount is more than your monthly pension
- You have elected to be on direct bill

If you move, please keep your address updated with the Aerospace Benefits Service Center (see page 18 for mailing address).

How Medicare and Aerospace Retiree Medical Coverage Work Together

IF ELIGIBLE, MEDICARE ENROLLMENT IS REQUIRED (POST-65)

You Must Enroll in Medicare Part A (Hospital) and Part B (Medical)

If Medicare-eligible, you and/or your covered spouse/domestic partner must enroll in Medicare Parts A and B to be eligible for Aerospace Retiree Medical Plan coverage.

In some instances, such as End-Stage Renal Disease (ESRD), the Centers for Medicare and Medicaid Services (CMS) requires a waiting period before Medicare becomes primary. In such cases, under age 65 premiums will apply to the covered participant.

Medicare Part D (Prescription Drug Coverage)

Some medical carriers may require additional information to enroll in Medicare Part D. Medicare Part D can only be assigned to one medical insurance plan at a time. Medicare Part D must be assigned to the Aerospace retiree group medical insurance carrier to continue your eligibility.

If you and/or your spouse are newly enrolling in retiree medical and you are over age 65 and have not had continuous Medicare Part D prescription coverage, your medical insurance carrier may charge an additional Late Enrollment Penalty (LEP) amount due to late enrollment in Medicare Part D. You will be responsible for paying this LEP amount in addition to the monthly retiree medical cost-sharing amount that you pay to Aerospace if a gap in coverage is determined.

Important

If you do not provide evidence of Medicare Parts A and B coverage, your coverage in the Aerospace Retiree Medical Plan will be terminated. Medical coverage cannot be reinstated until the next Aerospace Open Enrollment period with proof of Medicare coverage. If you have questions, call the Aerospace Benefits Service Center at 844.361.2400.

Important: If You Become Medicare-Eligible in 2027

If you and/or your dependent will turn age 65 in 2027, you will receive a letter from the Aerospace Benefits Service Center at least two months prior to you or your dependent's 65th birth month notifying you that you must contact the Social Security Administration at 800.772.1213 to sign up for Medicare Parts A and B.

You are eligible for Medicare effective the first day of the month in which you turn age 65. If your birthday happens to land on the first of the month, you will be eligible for Medicare on the first of the month prior to your 65th birthday.

Once you acquire your Medicare Beneficiary Identifier (MBI), Medicare Part A effective date and Medicare Part B effective date, you can view the plans available to you and enroll by either visiting our website at **https://compass.empyreanbenefits.com/aerospace** or by contacting the Aerospace Benefits Service Center at 844.361.2400 7 a.m. – 4 p.m. PT, Monday through Friday.

You can choose to enroll in the Aerospace Anthem PPO or a plan through Alight.

Union Member Medicare Coverage

Effective January 1, 2027, union retirees are eligible to enroll through the Medicare Exchange, which offers a variety of Medicare Advantage and Medicare supplemental plan options designed to help meet your retirement health care needs.

ASSIGNING MEDICARE BENEFITS

If you are eligible for Medicare and are changing Aerospace medical coverage during Open Enrollment, the Aerospace Benefits Service Center will inform you of next steps.

Private Contract Services Are Not Covered

Services or supplies provided under a private contract between the member and provider who has opted out of the Medicare program are not covered by Medicare or the Anthem Medicare Preferred (PPO) with Senior Rx Plus Plan. An example would be concierge services. You would be 100 percent responsible for the payment of these services. If you have any questions regarding this exclusion, please call the Anthem customer service number for the plan you are considering (page 19).



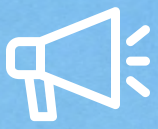
Anthem Medicare Preferred (PPO) with Senior Rx Plus Plan

The Anthem Medicare Preferred (PPO) with Senior Rx Plus is a Medicare Advantage plan. This plan is available nationwide and includes prescription drug coverage. To participate in this plan, you must be enrolled in Medicare Parts A and B.

Aerospace retirees can view more information on the plan provisions of the Anthem Medicare Preferred (PPO) with Senior Rx Plus at **retirees.aerospace.org**.

What are some of the features of the Anthem Medicare Preferred (PPO) with Senior Rx Plus Plan?

- No deductible
- Known copays for services such as primary care physician visits, specialist visits, etc.
- Participants can go to any provider (in-network or out-of-network) as long as the provider accepts Medicare and agrees to bill Anthem as the primary insurer
- Claims will go directly to Anthem and providers no longer have to bill Medicare first
- One ID card that will be used for both medical services and prescription drugs
- Access to wellness programs such as Healthways Silver Sneakers Fitness and discounts on weight-loss programs and nutritional supplements



If you have questions on the 2027 Anthem Medicare Preferred (PPO) with Senior Rx Plus, please call the Anthem First Impressions Welcome Center at 833.848.8729, Monday through Friday, 8 a.m. – 9 p.m. ET. TTY/TDD users should dial 711.

Highlights of the Anthem Medicare Preferred (PPO) with Senior Rx Plus Plan

Plan Provisions for Anthem Medicare Preferred (PPO) with Senior Rx Plus	Participant Copay
Deductible	$0
Maximum Out-of-Pocket per Plan Year	$2,500
Primary Care Visit	$5
Specialty Visit	$20
Emergency Care	$50 for each Medicare-covered emergency room visit (waived if admitted to hospital within 72 hours for the same condition)
Urgent Care	$10 for each Medicare-covered urgently-needed care visit (waived if admitted to hospital within 72 hours for the same condition)
Lab Tests	$0 for each Medicare-covered clinical/diagnostic lab test
X-Rays	$20 for each Medicare-covered X-ray
Specialized Imaging	$50 for Medicare-covered complex diagnostic test/radiology visit
Inpatient Hospitalization	$100 per admission, maximum out-of-pocket copay is $300 per year
Inpatient Skilled Nursing Facility Care	$10 copay per day for 1-100 days and $0 copay for days 101-180 per benefit period (coverage is limited to 180 days each benefit period; a benefit period begins on the first day and ends when you have not been an inpatient for 60 days in a row)
Outpatient Physical Therapy	$10 for Medicare-covered visits
Routine Eye Examination	$0 for routine vision exams, limited to one exam per year ($50 max benefit)
Hearing Aids	$1,500 maximum benefit every 36 months

Prescription Copays Anthem Medicare Preferred (PPO) with Senior Rx Plus Plan	**Retail Pharmacy** (per 30-day supply)	**Mail-order Pharmacy** (per 90-day supply)
Select Generics	$0, deductible waived	$0, deductible waived
Generics	$10, deductible waived	$20, deductible waived
Preferred Brands (Formulary)*	$30	$60
Non-Preferred Brands and Non-Formulary Drugs*	$60	$120
Injectable Medications	20% coinsurance with a maximum copay of $100 for specialty drugs (generic and brand)	20% coinsurance with a maximum copay of $100 for specialty drugs (generic and brand)

* A single, one time, $100 deductible per calendar year

Retiree Life Insurance and Dental Plan

(Closed to new enrollments)

RETIREE LIFE INSURANCE
(CLOSED TO NEW ENROLLMENTS)

Retiree group life insurance is only offered to current enrollees and is not open to new enrollments. Retiree life is term life insurance and provides a death benefit only; the group life insurance does not have a cash value. Retiree life insurance rates are provided on the Aerospace Benefits Service Center portal.

You may change your beneficiaries and allocations at any time for life insurance. Simply log in to the Aerospace Benefits Service Center portal (page 18) and go to the Beneficiaries page. We encourage you to review your beneficiaries during Open Enrollment and, if necessary, designate at least one person to receive this benefit.

You may permanently cancel your retiree life coverage at any time by logging in to the Aerospace Benefits Service Center portal and selecting the Voluntary Coverage Drop life event. If you cancel life insurance coverage, you will not be able to re-enroll since it will be a closed plan. It will be effective the first of the month following the cancellation.

Contact the Aerospace Benefits Service Center at 844.361.2400 with questions or in the event of a death claim.

RETIREE DENTAL PLAN
(CLOSED TO NEW ENROLLMENTS)

The SafeGuard dental plan is a closed plan and is not open to new enrollments. SafeGuard is only offered in California, Florida and Texas. Dental plan rates are provided on the Aerospace Benefits Service Center portal at **https://compass.empyreanbenefits.com/aerospace**.

If you need a SafeGuard dental provider directory, call 800.880.1800 (Group Plan SG100).

You may permanently cancel your SafeGuard dental coverage at any time by logging in to the Aerospace Benefits Service Center portal and selecting the Voluntary Coverage Drop life event. Once you cancel dental coverage, you will not be able to re-enroll since it will be a closed plan. The change will be effective the first of the month following the cancellation.

Contact the Aerospace Benefits Service Center at 844.361.2400 with questions.

Notice Regarding Use of Social Security Numbers

Under Section 111 of the Medicare, Medicaid and SCHIP Extension Act of 2007 (MMSEA), the Centers for Medicare and Medicaid Services (CMS) generally requires Social Security numbers for retirees and dependents to assist with reporting under the Medicare Secondary Payer requirements. Accordingly, when you enroll in the Aerospace Retiree Medical Plan, you are required to provide Social Security numbers for yourself and any dependents you wish to enroll to assist us in complying with this requirement.

Frequently Asked Questions

Q: My spouse is working and covering me under their medical insurance. If I waive my retiree medical coverage with Aerospace, can I re-enroll again with the Aerospace Retiree Medical Plan later?

A: Yes. If you are a retiree and previously waived Aerospace retiree medical coverage because you were covered by another medical plan outside of Aerospace, you may re-enroll in the Aerospace Retiree Medical Plan within 31 days of a life event such as loss of other coverage due to termination of a spouse's employment. You will need to provide proof of the life event and log in to or call the Aerospace Benefits Service Center to make your new election.

Another way to re-enroll in the Aerospace Retiree Medical Plan is to do so during the Aerospace Open Enrollment period. Open Enrollment is held annually in November with an effective date of January 1. Information is also available on the Aerospace Benefits Service Center portal at **https://compass.empyreanbenefits.com/aerospace** or on the Aerospace Retirees website at **retirees.aerospace.org.**

Q: If I marry after retirement, can I add my new spouse to my Aerospace retiree medical plan?

A: Yes, a retiree may enroll a new spouse as an eligible dependent within 31 days of the marriage date. You will need to provide a copy of the marriage certificate and complete the dependent information on the Aerospace Benefits Service Center portal. Otherwise, you may add the new spouse during the next Aerospace Open Enrollment period with proof of the marriage.

Q: Can my survivor continue Aerospace medical coverage in the event of my death?

A: Yes, but only if the survivor meets the Aerospace eligibility requirements for survivor medical coverage and is not eligible for another group medical plan. If the survivor is on the Aerospace medical plan and subsequently remarries, they will no longer be eligible for Aerospace medical coverage and will need to terminate medical coverage at the end of the month of the new remarriage date.

Q: I have questions about TRICARE retiree coverage. Who do I talk to?

A: Contact TRICARE (Selman and Company) at 800.638.2610 or visit **www.selmanco.com/tricare-supplement**.

Q: I'm not comfortable enrolling online. Can I get a paper form to make my election?

A: Unfortunately, we no longer use paper enrollment forms. If you are having trouble logging in to enroll, or if you need to enroll with the help of a benefits service center representative, please call the Aerospace Benefits Service Center at 844.361.2400, 7 a.m. – 4 p.m. PT, Monday through Friday.

Q: If I turn 65 during the year, how and when do I need to enroll in Medicare?

A: You will receive a letter from the Aerospace Benefits Service Center at least two months prior to your 65th birth month notifying you that you must contact the Social Security Administration to sign up for Medicare Parts A and B (page 9).



Q: What is the difference between an HMO, EPO and PPO?

A: Each plan differs in the benefits offered and you should review the detailed medical plan comparison charts at the Aerospace Retirees website at **retirees.aerospace.org**.

There are general differences in the plans regarding the providers you may use and how you receive plan benefits:

- **A Health Maintenance Organization (HMO)** decides the amount, type and location of the patient's medical care. Referrals from your primary care physician may be required to see a specialist. With most HMOs, the enrollee must use the doctors and hospitals that are HMO network members or with whom the HMO has contract agreements. HMOs also have limited benefits outside of their service area, generally only for covered emergencies.
- **An Exclusive Provider Organization (EPO)** is similar to an HMO in that you must use the EPO providers except in the case of a covered emergency. However, you don't need a referral to see an EPO specialist. The Anthem EPO is only available to non-California retirees and dependents who are Pre-65 (non-Medicare).
- **A Preferred Provider Organization (PPO)** lets you choose from most licensed providers (including those outside of the United States). However, if you are under age 65, you will generally have a lower out-of-pocket cost when you use in-network providers. Medicare-eligible participants must use a provider who accepts Medicare. Note that private contract providers, such as "concierge" providers, are excluded from coverage under the Anthem Medicare Preferred (PPO) with Senior Rx Plus Plan.

Q: I am a union retiree and eligible for Medicare. What plans are available to me?

A: Beginning January 1, 2027, eligible union retirees may enroll through the Medicare Exchange and select from a variety of Medicare Advantage and Medicare supplemental plan options. Retiree Casuals are not eligible to enroll in Alight with the HRA. Contact the Aerospace Benefits Service Center for enrollment assistance.

Types of Changes During the Year

Your coverage choices will stay in effect through December 31, 2027, unless you have an eligible life status event. Report life status events to the Aerospace Benefits Service Center within 31 days of the event. You may also need to take action during the year as shown below.

Subject	Actions Needed	Contacts
Address Change Important: The Aerospace Benefits Service Center must be notified within 31 days if you are moving out of your HMO plan area.	Report your new mailing address to the Aerospace Benefits Service Center. Your new address will be sent to your medical carrier.	▪ Aerospace Benefits Service Center ▪ Social Security Administration ▪ Aerospace Federal Credit Union ▪ Northern Trust, if applicable
Death of Retiree, Dependent or Survivor	Aerospace will need the following: ▪ Deceased's name, badge number and Social Security number ▪ Date of death ▪ Spouse or other contact's name, phone number and address	▪ Aerospace Benefits Service Center ▪ Social Security Administration ▪ Aerospace Federal Credit Union
Life Status Event Such as marriage, divorce, birth/adoption, death or loss of other medical coverage due to change in employment or moving out of HMO zip code area	Changes must be reported to the Aerospace Benefits Service Center within 31 days if event impacts medical or SafeGuard dental plan. Appropriate documentation (such as marriage, birth or death certificate or divorce decree) will be required.	▪ Aerospace Benefits Service Center



Aerospace Benefits Service Center
Visit https://compass.empyreanbenefits.com/aerospace or call 844.361.2400.
Representatives are available 7 a.m. – 4 p.m. PT, Monday through Friday.

Types of Changes During the Year (Continued)

Subject	Actions Needed	Contacts
Beneficiary Change for Aerospace Retiree Life Insurance (closed plan)	If applicable, log in to the Aerospace Benefits Service Center portal or call the Aerospace Benefits Service Center to update your beneficiaries.	▪ Aerospace Benefits Service Center
Retiree, Dependents or Survivor Becomes Eligible for Medicare (age 65)	Your enrollment in Medicare (Parts A and B) is required when you and/or your eligible dependent reaches age 65 and becomes Medicare-eligible. Log in to the Aerospace Benefits Service Center portal or call the Aerospace Benefits Service Center to make your new election.	▪ Aerospace Benefits Service Center ▪ Social Security Administration
Retiree Dental or Retiree Life Insurance Cancellation (both plans are closed)	Current participants may permanently cancel either plan during the year. Dental and life insurance plans are closed and not available to new enrollees. If you cancel dental or life insurance, you cannot re-enroll later.	▪ Aerospace Benefits Service Center



Benefit Resources and Contacts

Resource	Address/Website/Email	Phone/Fax Number
Aerospace Benefits Service Center ▪ Benefit questions ▪ Add/drop/change coverage ▪ Dependent status changes ▪ Address changes ▪ Report death of retiree/dependent/survivor	Aerospace Benefits Service Center P.O. Box 2087 Bellaire, TX 77402 **https://compass.empyreanbenefits.com/aerospace**	844.361.2400 7 a.m. – 4 p.m. PT, Monday through Friday
The Northern Trust Co. ▪ Update direct deposit information ▪ Change tax withholdings for federal and state, if applicable ▪ Request pension payment statement or copy of Form 1099-R	The Northern Trust Co. Benefit Payment Services 50 S. La Salle – C2N Chicago, IL 60603 **www.northerntrust.com/bppweb**	Northern Trust Benefit Payment Participant Service Center: 312.557.9700 or 800.749.2206 For enrollment or password resets: 888.259.6835
Aerospace Retirees' Club	P.O. Box 2194 El Segundo, CA 90245 aeroretirees@gmail.com **www.aeroretirees.org** **www.facebook.com/aeroretirees**	310.336.2582 or 310.336.CLUB (Aerospace voicemail)
Aerospace Federal Credit Union	**www.aerofcu.org**	800.795.2325 or 310.336.5030
Social Security Administration	**www.socialsecurity.gov**	800.772.1213

Resource	Website	Phone Number
Medical Carriers		
Anthem Blue Cross PPO – Nationwide (Non-Medicare-eligible/Pre-65) ▪ Express Scripts (Pre-65 only) ▪ Accredo Specialty Pharmacy	**www.anthem.com/ca** **express-scripts.com/aerospace** **www.accredo.com**	800.756.7274 855.778.1413 877.895.9697
Anthem Medicare Preferred (PPO) with Senior Rx Plus Plan – Nationwide (Medicare-eligible/Post-65)	**www.anthem.com/ca**	833.848.8730 First Impressions: 833.848.8729
Anthem Blue Cross EPO – All states except California (Non-Medicare-eligible/Pre-65) ▪ Express Scripts (Pre-65 only) ▪ Accredo Specialty Pharmacy	**www.anthem.com/ca** **express-scripts.com/aerospace** **www.accredo.com**	800.756.7274 855.778.1413 877.895.9697
Anthem Blue Cross HMO* (Non-Medicare-eligible/Pre-65)	**www.anthem.com/ca**	844.855.1950
Anthem Blue Cross Senior Secure HMO* (Medicare-eligible/Post-65)	**www.anthem.com/ca**	833.848.8730
Kaiser Permanente HMO* Northern California and Southern California (Non-Medicare-eligible/Pre-65)	**www.kp.org**	800.464.4000
Kaiser Permanente Senior Advantage HMO* Northern California and Southern California (Medicare-eligible/Post-65)	**www.kp.org/medicare**	800.443.0815
Kaiser Permanente Colorado HMO (Non-Medicare-eligible/Pre-65)	**www.kp.org**	303.338.3800 or 800.632.9700
Kaiser Permanente Senior Advantage HMO – Colorado (Medicare-eligible/Post-65)	**www.kp.org/medicare**	
Kaiser Permanente Mid-Atlantic HMO* Maryland, Virginia and Washington D.C. (Non-Medicare-eligible/Pre-65)	**www.kp.org**	301.468.6000 (metro area) 800.777.7902 (out of area)
Kaiser Permanente Medicare Advantage HMO* Maryland, Virginia and Washington D.C. (Medicare-eligible/Post-65)	**www.kp.org**	888.777.5536 (Medicare)
ASI/TRICARE Supplement Plan – Selman and Co. – Nationwide (Non-Medicare-eligible/Pre-65) Group #0001834	**www.selmanco.com/tricare-supplement**	800.638.2610
Dental Carrier (closed plan, not open to new enrollment)		
SafeGuard, a MetLife Company – California, Florida and Texas Group Plan #SG100	**www.safeguard.net**	800.880.1800

* Plan availability based on zip code



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