

# **IPALCO Enterprises, Inc. Voluntary Employee Beneficiary Association (VEBA) Plans**

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## **BOARD MEMBERS**

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MAX CALIFAR

COMMITTEE MEMBER  
STEVEN MEYER

COMMITTEE MEMBER  
STEPHEN J. PLUNKETT

TRUSTEE  
NATIONAL BANK OF INDIANAPOLIS  
INDIANAPOLIS, IN

*IPALCO VEBA complies with applicable Federal civil rights laws and does not discriminate based on race, color, national origin, disability, or sex.*

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## **INSTRUCTIONS FOR 2021**

### **IMPORTANT - PLEASE READ AND SAVE FOR FUTURE REFERENCE**

Each year the Plan requires a mailing to notify you of the open enrollment period. For the 2021 open enrollment period, IPALCO VEBA members **AGE 65 AND YOUNGER WILL BE REQUIRED TO COMPLETE AN ENROLLMENT FORM** to be sent back to Dunn & Associates. Those members affected by this requirement must submit their forms no later than **February 1, 2021**.

Members who are **over age 65** **DO NOT** need to complete a form unless you wish to make changes (change of address, phone number, email address, etc.).

Attached is a 2021 enrollment form required for **members age 65 or younger** or those wishing to make a status change. You may also access the enrollment/change and ACH form in the following ways:

- Access the web portal at [www.dunnbenefit.com](http://www.dunnbenefit.com) (instructions provided)
  - Email: [IPALCOTeam@dunnbenefit.com](mailto:IPALCOTeam@dunnbenefit.com)
- Contact Dunn & Associates at (812) 378-9960 or (800) 880-9960

**IMPORTANT NOTE FOR NEW ELIGIBLE RETIREES:** It is imperative that you submit this Enrollment Form within 30 days of becoming eligible under the Plan (e.g. your retirement date) for coverage to be retroactive to your initial eligibility date. If you are a new retiree (Group C or D) enrolling in the VEBA, there will be a 60-day review period by the IPALCO VEBA Committee. If your enrollment is both timely filed and approved by the Committee, your coverage will be retroactive back to your retirement date. Your ACH premium deductions will not begin until your enrollment is approved. Accordingly, your initial ACH premium deduction may include two months premiums if necessary, to pay for the retroactive coverage. ACH premium deductions will revert to once monthly thereafter.

### **Web Portal**

We encourage all IPALCO VEBA members to register on the web portal ([www.dunnbenefit.com](http://www.dunnbenefit.com)). Step by step instructions to register on the portal are provided in this mailing. Once registered, members will be able to view claims and important documents including the 2020 Plan Document, enrollment/change and ACH form. Forms can be printed and mailed, emailed, or faxed (812) 378-9967 back to Dunn & Associates.

### **EMAIL**

Dunn & Associates has a designated email address for IPALCO VEBA members to send correspondence, forms, and documents along with general inquiries. Please feel free to use this email address:

[IPALCOTeam@dunnbenefit.com](mailto:IPALCOTeam@dunnbenefit.com)

### **General Mail**

Dunn & Associates Benefit Administrators, Inc.  
Eligibility Department  
PO Box 2369  
Columbus, IN 47202-2369  
Phone (812) 378-9960  
FAX (812) 378-9967

## Required Contributions

The monthly contributions for medical coverage in 2021 will be as follows:

1. Retiree Group A (retired before January 1, 2010): **\$ 0**
2. Group A - Spouse, Surviving Spouse, Dependent or Surviving Dependent who is Medicare eligible before 1/1/2010 (Medicare Medical<sup>1</sup> + VEBA Pharmacy): **\$247.52**
3. Group B - Spouse or surviving spouse who became Medicare eligible after **1/1/2010** or who became eligible for Medicare prior to 1/1/2010 and has elected Medicare Part D (Medicare Medical Only – **No** VEBA Pharmacy): **\$82.37**
4. Group C - Spouse, Surviving Spouse, Dependent or Surviving Dependent who is **NOT** Medicare eligible (Non-Medicare Medical + VEBA Pharmacy until Medicare eligible): **\$644.84**
5. Group C or D - Retiree only coverage (retired on or after January 1, 2010): **\$148.50**
6. Group C or D Spouse of a retiree who retired on or after January 1, 2010, and the retiree is no longer eligible for coverage: **\$1,166.90** (retiree ages into Medicare and spouse elects pre-Medicare coverage – Medical & Pharmacy)

A person is considered Medicare eligible if he or she is covered by Medicare Part A or would be covered by Medicare Part A if he or she had made a timely election for such coverage.

### **Premium Payments**

**All premiums must be paid by Automatic Withdrawal from your checking or savings account. No other payment methods will be accepted.** The automatic debit method is a free, convenient and easy way to ensure your contributions are made in a timely manner while saving you time and postage. Your checking or savings account will automatically be debited on the 1<sup>st</sup> of each month for the amount set forth by the Plan. **We will also automatically adjust the amount each year should the Plan change the premium or at any time you become Medicare eligible.** You will always be notified of these premium changes. If you need to change your account information, please access the ACH form in the manner indicated above.

**Please Note** - If at any time your account has insufficient funds to process the automatic withdrawal, you will incur a \$25 insufficient funds fee. The \$25 fee will also apply if your withdrawal is returned due to the account being closed or blocked or should you fail to provide us with any updates to your account information. After two occurrences of insufficient funds or other returns, your coverage will be subject to termination. **In order to prevent returns and late payments, please ensure you provide us with the correct account information and notify us of any account changes.**

### **General Information**

Any retiree, spouse or surviving spouse who was not eligible for Medicare before January 1, 2010, will not be eligible for drug coverage through the IPALCO VEBA Trust when the retiree, spouse or surviving spouse becomes eligible for Medicare. Any eligible employee who retired on or after January 1, 2010, will lose all coverage through the IPALCO VEBA Trust when he or she becomes eligible for Medicare. This also applies to spouses and surviving spouses of those employees.

If the retiree and spouse were part of the reduction in force (RIF – Group D) on April 1, 2018 the retiree is eligible to come on to the VEBA medical and Rx at age 62 (1<sup>st</sup> of the month following 62<sup>nd</sup> birthday) **IF** they elected the pension plan immediately. Medical and Rx coverage will terminate upon Medicare eligibility.

### **Third Party Administrator Information**

Dunn and Associates Benefit Administrators, Inc. is in Columbus, Indiana, and is available to handle all your medical coverage needs. Please feel free to contact Dunn and Associates at 1-800-880-9960 or 812-378-9960 should you have any questions or concerns regarding your medical or prescription drug coverage. Please visit our website at [www.dunnbenefit.com](http://www.dunnbenefit.com).

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<sup>1</sup> "Medicare Medical" means that medical benefits are secondary to and reduced by Medicare medical benefits (including benefits that would have been covered by Medicare if you had timely applied for Medicare coverage)