

NOTICE OF SUMMARY OF MATERIAL MODIFICATIONS TO PIONEER EDUCATORS HEALTH TRUST HEALTH AND WELFARE PLAN

Effective April 1, 2010

The Employee Retirement Income Security Act ("ERISA") requires that the Pioneer Educators Health Trust ("PEHT") notify you each time a material change is made to the Plan through a Summary of Material Modifications ("SMM").

The changes reflected in this document affect health and welfare benefits and should be kept with your benefit materials for future reference. Please refer to the Plan Document/Summary Plan Description ("SPD") for more information. In the event of a conflict between this SMM and the Plan Document/SPD, the Plan Document/SPD shall control. If you need a copy of the Plan Document/SPD, please contact the Plan Administrator at 503-224-8390 and one will be mailed to you at no charge. The SPD will be updated later this year to reflect these changes.

The following changes are applicable to the PEHT medical plan effective April 1, 2010:

Benefit Category	Plan Changes
Office Visit Copay	Change in office visit copay from \$20 to \$25
ER Copay	Change in ER copay from \$100 to \$150. (+20% coinsurance still applies. Deductible waived. Copay also waived if admitted.)
Rx Copays	Increase the Rx copay from \$15/35/55 to \$20/40/60. Mail-order copay at 1.5x instead of 2x for 90 day supply.
Annual Deductibles and Out-of-pocket Maximum	In- and out-of -network deductibles and out-of-pocket maximums will not cross-accumulate.
Alternative Care (If applicable)	All service paid at 80% to \$1,500 per calendar year.
Rehabilitation - Inpatient / Outpatient	Benefit changed from 30 days per calendar year to: Inpatient \$25,000 per calendar year and Outpatient \$4,500 per calendar year.
Radiology and Lab - Outpatient	In-network benefit change from 100% to 80% coinsurance.

State or Federal Mandates	Plan Changes
Oregon SB 734: Tobacco Cessation Mandate	Added a new Tobacco Use Cessation program benefit. The benefit is subject to any applicable deductible, the standard coinsurance will apply, and the maximum medical benefit is \$500 per Member's lifetime. Medications are also limited to a separate \$500 maximum benefit per Member's lifetime.
Oregon HB 2589: Children's Hearing Aid Mandate	Added a new Hearing Aid benefit for dependents. Benefit is subject to any applicable deductible, the standard coinsurance will apply, and the maximum benefit is \$4,000 every four calendar years. Routine hearing exams are not covered. Coverage for children will extend to age 23 or the limiting age as stated in the contract. Dependent spouses, including domestic partners, will be covered if they are enrolled in an accredited education institution.
Federal legislation passed the Mental Health Parity Act (MHPA).	Removed the 45-day limit for residential care so coverage for mental health is paid the same as any other condition.
Federal legislation passed the Special Enrollment provision	Federal legislation, effective 4/2009, allows for participants (employees) who are eligible for coverage but not enrolled in the group plan to enroll within 60 days if the employee or dependent's Medicaid or CHIP (state premium assistance) eligibility ends, or if the employee or dependent becomes eligible for a premium subsidy under Medicaid or CHIP.
	The Special Enrollment provision was revised to describe an additional qualifying event based on: - Loss of Medicaid/CHIP coverage; or - Becoming eligible for Medicaid/CHIP