

# 2022 Annual Update

*This is an annual update including financial information about the Trust as of December 2022. The Trust is required to provide you with updated financial information annually.*

*This document does not involve changes to your health care benefits. You do not need to take any action in response to this letter.*

Dear UAW Trust Member:

We are writing on behalf of the Committee that oversees the administration of the UAW Retiree Medical Benefits Trust (the “Trust”). The Trust provides healthcare benefits to UAW retirees from General Motors (GM), Ford and Chrysler. The following pages describe updates to our **2022 calendar year** financial position.

The pandemic made sweeping changes across many sectors of society. Major pivots in the healthcare sector—like the way clinicians deliver care to patients and the use of technology—have transformed over the past two years. But we’ve also seen negative impacts like provider shortages, rising costs, and supply chain issues.

More importantly, inflation has had a direct impact on retirees—that’s why, for 2024, we are pleased to have eliminated monthly contributions and in-network coinsurance, and lowered medical deductibles and office visit copays. In addition, most prescription drug copays (tier 1 and tier 2) will be lower. (Does not apply to Kaiser plan members.)

The Trust continues to work to ensure we provide strong value, and the most cost-efficient retiree benefits possible. We understand how critical this is to you and our goal is to provide healthcare coverage that supports your needs.

You play a significant role in helping the Trust save money by engaging in preventive care. This care, including immunizations, screenings, and routine physicals, is essential to good health and reducing overall healthcare costs. Learn more about the Trust online at [uawtrust.org](http://uawtrust.org) or by calling Retiree Health Care Connect (RHCC) at 866-637-7555 if you have questions about your benefits.

We wish you good health.

## Mission, Vision and Values

The mission of the Trust is to provide every member with health benefits and the opportunity to achieve their best quality of life.

The Trust exists to serve our members. Our mission is 100% retiree-focused and seeks to meet the unique needs of our membership.

The Trust is an advocate for programs that support retiree health and health care.

We are committed to the long-term viability of the Trust.

Robert H. Naftaly  
Committee Chair

Shawn Fain  
UAW President & Committee Member

# About the Trust

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Since January 1, 2010, the Trust has provided medical coverage to UAW retirees of GM, Ford, and Chrysler. The Trust is separate from the auto companies and the UAW and is governed by an 11-person Committee (six independent members and five appointed by the UAW).

**During 2022, the Trust provided benefits for more than 580,000 members, of which, more than 360,000 are from GM.**

*In 2022, the Trust paid approximately \$4.0 billion providing health care for its retirees and dependents, including filling over 14.9 million prescriptions during the plan year.*

Since the launch of the Trust, we have successfully managed benefit costs, allowing us to stretch every dollar to provide retirees with coverage in the most cost-effective way possible.

*The Trust call center, RHCC, handled nearly 310,000 calls, helping retirees get answers to questions about healthcare claims.*

## Annual Cost of Benefits

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### **How much money did the Trust spend in 2022?**

In total, the Trust spent \$4.0 billion in 2022. Of that, \$2.3 billion was for GM retirees. This covers \$2 billion of direct payments to hospitals and doctors, as well as prescription drugs and other direct-patient care costs.

In addition to direct health care costs, the Trust spends money to administer the medical plan itself, including the cost of reviewing and paying millions of individual medical and prescription drug claims, and the cost to maintain an eligibility system to keep track of members. We regularly add new programs for retirees. We continue to strengthen our case management and pharmacy programs to help our members with complex chronic conditions. We also pay outside investment managers to make sure we invest the Trust's assets wisely. For GM in 2022, the total cost of all these administrative, operational and program costs was \$305 million. We are also required to pay various taxes, including a tax on certain investment income.

# **Funds Available in the Trust**

## **What assets are in the Trust?**

The value of the Trust's net assets at the end of 2022 was approximately \$58.6 billion, of which the GM portion was \$28.8 billion.

Investment markets declined in 2022. As investors attempted to determine the long-term effects of the pandemic on the global economy, markets were impacted by fears of economic recession. However, the Trust's ongoing efforts to control costs by delivering benefits more efficiently—along with Trust retirees continuing to engage in prudent purchasing of health benefits—continue to help improve our financial strength by keeping our liabilities as low as possible.

The Trust remains in a strong financial position. But we must remember the future is uncertain. Events completely out of our control can occur and have a negative impact on the Trust's financial condition. Declines in the investment markets, spikes in healthcare inflation, or negative changes in federal Medicare programs can all have an adverse impact on the Trust. The Trust works to protect members from these uncertainties by continuing to operate efficiently, investing wisely, and encouraging members to take advantage of programs to improve their health.

## **Trust Investments**

The assets in the GM portion of the Trust are invested in a diversified portfolio of investments. The Trust and its Investment Sub-Committee, internal investment staff, and outside investment professionals, regularly review investment policies, results, and practices to make sure that our investments are aligned with the Trust's long-term goals.

### **How did the Trust investments perform during 2022?**

A bear market hit the U.S. in 2022. Market volatility and investor uncertainty are not unusual and often lead to periodical market ups and downs. The Trust's cautious approach, adjusting to its long-term targets, allowed losses to be minimal. Overall, the investments in the GM account lost roughly 6.27% for the calendar year 2022. The Trust accounts fared better than policy benchmarks, which were down 7.94%, and broad market stock and bond indices, which experienced on average negative returns of more than 15%.

Since 2010, the investments in the GM account have earned an average annual rate of return of 5.79%, not including the return on GM-related holdings.

# Current Member Needs and Long-Term Solvency

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## How does the Trust balance the needs of current members and the need to maintain long-term financial stability for future retirees?

The Trust is always working to balance two goals:

Medical benefits are vital to the economic security of every family, particularly retirees who live on a fixed income. The UAW fought for retiree medical benefits at the bargaining table for decades. The Trust is now the entity that provides these vital benefits. **The Trust works hard to provide the best possible benefits to current retirees who need these benefits today.**

The money in the Trust must also be used carefully. We need to protect the long-term financial health of the Trust. In addition to the 580,000 retirees already receiving benefits from the Trust, there are approximately 50,000 active workers (along with their qualified dependents) who will be eligible for Trust benefits upon their retirement. Both of these groups will have medical needs for many years. **A key part of our job is to make sure there is money in the Trust to provide these benefits for decades to come.**

We have **improved benefits and expanded coverage**. Over the years, we've added coverage for primary care and specialist office visits; urgent care centers; immunizations; and dental, vision and hearing. We've added educational and coaching programs to help members with chronic conditions such as diabetes. We expanded Medicare Advantage programs in all 50 states to give our Medicare-eligible retirees a greater choice of coverage options while preserving coverage levels and access to doctors and hospitals. We introduced an over-the-counter (OTC) program allowing members an annual allowance to order approved non-prescription medications and health-related items—such as bandages, aspirin, cold and sinus medicine, and vitamins and minerals.

We also work **hard to hold down retiree costs** to make benefits affordable without compromising coverage or benefit levels. **We are pleased that we were able to eliminate monthly contributions, and lower deductibles and out-of-pocket costs for members for all healthcare plans in 2024.**

Finally, we understand that we must **save money whenever possible**, in order to help protect the long-term future of the Trust. Every dollar we save is a dollar we can use to pay for medical benefits. We are proud of our cost-saving efforts.

When it comes to your health care, it's not just about saving money. It's also about spending wisely. Your engagement can help protect the Trust's financial health and ensure that you and your fellow UAW retirees receive good medical benefits for many years into the future. That's why we work so hard to encourage you to take advantage of the office visit, immunization, screening, and other preventive benefits. Thousands of retirees have taken advantage of our vaccine and immunization benefits. Many of whom would have become seriously ill if they had not taken that simple step. By making good choices about your medical care, you can help yourself, your family, and your fellow retirees.

# **SUMMARY ANNUAL REPORT**

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## **FOR UAW GM RETIREES MEDICAL BENEFITS PLAN**

This is a summary of the annual report of the UAW GM Retirees Medical Benefits Plan, EIN 90-0424876, Plan No. 504, for the period January 1, 2022 through December 31, 2022. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

### **Insurance Information**

The plan has contracts with Aetna Life Insurance Co., Blue Care Network of Michigan, Blue Cross Blue Shield of Michigan, Health Alliance Plan, Healthpartners, Kaiser Foundation Health Plan Inc - California, Kaiser Foundation Health Plan of Georgia, Kaiser Foundation Health Plan of Mid-Atlantic States, Inc., Kaiser Foundation Health Plan of Colorado and Kaiser Foundation Health Plan of the Northwest to pay certain health, vision, prescription drug, HMO and PPO claims incurred under the terms of the plan. The total premiums paid for the plan year ending December 31, 2022 were \$149,441,559.

Because they are so called “experience-rated” contracts, the premium costs are affected by, among other things, the number and size of claims. Of the total insurance premiums paid for the plan year ending December 31, 2022, the premiums paid under such “experience-rated” contracts were \$253,996 and the total of all benefit claims paid under these contracts during the plan year was \$276,125.

### **Basic Financial Statement**

The value of plan assets, after subtracting liabilities of the plan, was \$28,825,293,793 as of December 31, 2022, compared to \$32,659,174,886 as of January 1, 2022. During the plan year the plan experienced a decrease in its net assets of \$3,833,881,093. This decrease includes unrealized appreciation and depreciation in the value of plan assets; that is, the difference between the value of the plan's assets at the end of the year and the value of the assets at the beginning of the year or the cost of assets acquired during the year. During the plan year, the plan had total income of (\$1,501,025,499), including employee contributions of \$28,562,929, other contribution of \$539,853,940, realized losses of (\$326,870,030) from the sale of assets, earnings from investments of \$(463,203,260), and other income of (\$2,205,775,598).

Plan expenses were \$2,332,855,594. These expenses included \$304,634,098 in administrative expenses, and \$2,028,221,496 in benefits paid to participants and beneficiaries.

# **Your Rights To Additional Information**

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You have the right to receive a copy of the full annual report, or any part thereof, on request. The items listed below are included in that report:

- An accountant's report
- Financial information
- Information on payments to service providers
- Assets held for investment
- Transactions in excess of 5% of the plan assets
- Insurance information, including sales commissions paid by insurance carriers

To obtain a copy of the full annual report, or any part thereof, submit your check for \$25 payable to "UAW Retiree Medical Benefits Trust" and mail it to UAW Retiree Medical Benefits Trust – GM SAR, P.O. Box 14309, Detroit, MI 48214. If you have questions, call Retiree Health Care Connect at 866-637-7555.

You also have the right to receive from the plan administrator, on request and at no charge, a statement of the assets and liabilities of the plan and accompanying notes, or a statement of income and expenses of the plan and accompanying notes, or both. If you request a copy of the full annual report from the plan administrator, these two statements and accompanying notes will be included as part of that report.

You also have the legally protected right to examine the annual report at the main office of the plan (The Committee of The UAW Retiree Medical Benefits Trust, 1155 Brewery Park Blvd., Suite 400, Detroit, MI 48207) and at the U.S. Department of Labor in Washington, D.C., or to obtain a copy from the U.S. Department of Labor upon payment of copying costs. Requests to the Department should be addressed to: Public Disclosure Room, Room N-1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.

## **Paperwork Reduction Act Statement**

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According to the Paperwork Reduction Act of 1995 (Pub. L. 104-13) (PRA), no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The Department notes that a Federal agency cannot conduct or sponsor a collection of information unless it is approved by OMB under the PRA, and displays a currently valid OMB control number, and the public is not required to respond to a collection of information unless it displays a currently valid OMB control number. See 44 U.S.C. 3507. Also, notwithstanding any other provisions of law, no person shall be subject to penalty for failing to comply with a collection of information if the collection of information does not display a currently valid OMB control number. See 44 U.S.C. 3512.



The public reporting burden for this collection of information is estimated to average less than one minute per notice (approximately 3 hours and 11 minutes per plan). Interested parties are encouraged to send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Office of the Chief Information Officer, Attention: Departmental Clearance Officer, 200 Constitution Avenue, N.W., Room N-1301, Washington, DC 20210 or email [DOL\\_PRA\\_PUBLIC@dol.gov](mailto:DOL_PRA_PUBLIC@dol.gov) and reference the OMB Control Number 1210-0040.

OMB Control Number 1210-0040 (expires 03/31/2026)

