

**INTERNATIONAL UNION OF OPERATING ENGINEERS
LOCAL 25, MARINE DIVISION**

• MEDICAL PLAN •

**461 STATE ROUTE 33, MILLSTONE TOWNSHIP NEW JERSEY 08535
TELEPHONE (800) 548-6662 • FAX (732) 446-9167**

ADMINISTRATOR

MEGHAN BRODOWSKI

March 2022

SUMMARY OF MATERIAL MODIFICATIONS

This notice contains important information regarding changes to the International Union of Operating Engineers Marine Division Local 25 Medical Plan (the “Medical Plan”). This Summary of Material Modifications (SMM) is issued to notify you of changes to the I.U.O.E. Local 25, Marine Division Medical Plan Summary Plan Description (SPD), which was previously distributed to you. Please take the time to read this carefully and share it with your family. Keep this notice with your Medical Plan documents.

COVERAGE FOR OVER-THE-COUNTER AT HOME COVID-19 DIAGNOSTIC TESTS (effective January 15, 2022)

In accordance with recent guidance from the federal government, the Medical Plan will cover FDA-authorized over the counter (OTC) test kits (“OTC tests”) to diagnose COVID-19, at no cost to you as follows. This coverage is available for OTC COVID at-home tests purchased from a pharmacy or retailer on and after January 15, 2022. OTC tests purchased for home use before January 15, 2022, will not be covered, unless you provide documentation that the test was ordered by your health care provider. Any non-retailer or private party sale of OTC Covid test kits (in person or on a third-party website) will not be covered by this benefit.

The Medical Plan will cover up to eight (8) OTC tests per covered individual per 30-day period. Note that if you purchase a kit with more than one test in the kit, the 8-test limit applies to the number of tests, not the number of kits. For example, if you purchase a kit with two (2) tests in the kit, the Plan will only pay for up to four (4) kits per covered individual per 30-day period.

Coverage will be available only when tests are purchased for personal use, will not be resold or distributed, are not for employment purposes, and have not been and will not be reimbursed by another source. **For tests purchased on or after February 2, 2022, the maximum reimbursement for each OTC test is \$12.00 per test, which is the dollar limit set by the federal regulators.**

You can obtain OTC tests directly from Rite-Aid (including Bartell Drugs), Sam's Club, Walgreens (including Duane Reade) Kinney Drugs or Walmart pharmacies with no out-of-pocket costs by showing your Medical Plan ID Card at the pharmacy counter. If you get your OTC tests from these

pharmacies for diagnosis of COVID-19, you will not need to pay for them or file for reimbursement. As other pharmacies are added to OptumRx's network, they will be listed on the OptumRx website.

OTC tests can also be obtained without any out-of-pocket costs through OptumRx's online website and have them sent directly to your home by signing into your OptumRx account at www.optumrx.com and click on "Get at-home Covid-19 tests with \$0 copay".

The Medical Plan will also cover OTC tests purchased at a pharmacy other than those listed above or from a retailer. In this case, you will need to pay for the tests, get an itemized receipt that indicates the type of tests, number of tests purchased, date purchased and paid amount, and submit a claim for reimbursement. Claims for reimbursement of tests that you already purchased and tests that you purchase at pharmacies other than those listed above can be submitted electronically at www.optumrx.com/testinfo, or they can be mailed to OptumRx. You can download claim forms from the OptumRx website. Follow the instructions on the website for either electronically submitting the form or sending in a paper claim through the mail.

Please note that this is only a very general summary of the reimbursement program. For additional information about the coverage of OTC tests please go to www.optumrx.com/testinfo. Also note that these rules are subject to change if the government changes the requirements applicable to plans such as this one.

PLEASE NOTE: Every home address in America is entitled to four (4) free test kits under a program offered by the U.S. Government. Please visit www.covidtests.gov to get your 4 free test kits mailed to your house with no out-of-pocket costs or claims forms to submit. These tests are provided by the U.S. Government and not by the Medical Plan.

INCREASE IN DENTAL BENEFIT REIMBURSEMENT

We are pleased to announce that, **effective January 1, 2022, the Trustees of the Medical Plan agreed to increase the maximum dental benefit from \$1,350 to \$1,500 for charges incurred on and after January 1, 2022.**

Please refer to the Plan's SPD under "Dental Benefits" for additional information or call the Plan Office with any questions.

INCREASE IN MEDICARE PART B AND PART D PREMIUM REIMBURSEMENT

As set forth in the Plan's SPD regarding "Benefits for Medicare Eligible Pensioners", all eligible Pensioners and their eligible Dependents must enroll in both Medicare Part A (hospital) and Part B (medical) in order for benefits to be payable from the Local 25 Medical Plan. The Plan reimburses Medicare Eligible Pensioners and their Eligible Dependent spouse a set amount towards the cost of the monthly Medicare Part B and Part D premiums. **We are pleased to report that, effective January 1, 2022, the Trustees of the Medical Plan agreed to increase the reimbursement amount to \$85.00 per month, which totals \$1,020.00 per year (\$170.00 per month/\$2,040.00 per year for both Pensioner and their Eligible Dependent spouse).**

Previously, the Plan reimbursed \$52.00 per month and \$624 per year (\$1,248.00 per year for both Pensioner and their Eligible Dependent spouse).

Please refer to the Plan's SPD under "Benefits for Medicare Eligible Pensioners" for additional information or call the Plan Office with any questions.

EXTENSION OF TELEHEALTH BENEFIT

Previously, the Trustees of the Medical Plan agreed to cover telehealth visits for medical and mental health care under the same level of benefits as in-person office visits are covered, for a limited period in recognition of the difficulties in seeing a provider in person during the COVID-19 pandemic. **The Trustees have agreed to continue coverage of telehealth visits until further notice.**

Questions?

If you have any questions or concerns, please feel free to call the Plan Office.

Sincerely,

Meghan Brodowski

Meghan Brodowski
Administrator

Notice of Grandfathered Health Plan Status

This group health plan believes this plan is a "grandfathered health plan" under the ACA. As permitted by the ACA, 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 ACA that apply to other plans, for example, the requirement for the provision of preventive health services without any cost sharing. However, grandfathered health plans must comply with certain other consumer protections in the ACA, 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 the plan administrator at the International Union of Operating Engineers Local 25 Marine Division Medical Plan at 461 State Route #33, Millstone Township, New Jersey, 08535-. Telephone: 800-548-6662. You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at 1-866-444-3272 or www.dol.gov/ebsa/healthreform. This website has a table summarizing which protections do and do not apply to grandfathered health plans.

This Summary of Material Modification (SMM) does not restate all of the terms and provisions of the Medical Plan and does not affect any benefit other than the ones discussed above. All other terms of the Medical Plan, as set forth in the Summary Plan Description remain in effect. The Board of Trustees reserves the right, in its sole and absolute discretion, to interpret and decide all matters under the Plan. The Board also reserves the right in its sole and absolute discretion to amend, modify, or terminate the Plan or any benefits provided under the Plan (or eligibility for such benefits), in whole or in part, for active and retired participants at any time and for any reason.

Current Trustee Roster (effective March 1, 2022):

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