

**Summary of Material Modifications  
Midwest Operating Engineers Welfare Fund**

February 1, 2017

**TO: All Eligible Members**

This Summary of Material Modifications (SMM) advises you of changes to the information contained in your Midwest Operating Engineers Welfare Fund Summary Plan Description (SPD). Please read this notice, keep this notice with your SPD, and if you have any questions, contact the Fund Office.

**The following changes will be effective April 1, 2017:**

**Prescription Drug Program Changes**

The Prescription Drug Program will change from a two-tier copay structure, which includes generic and preferred brand medications, to a four-tier structure by adding non-preferred brand and specialty medications. The prescription drug copays will change as follows:

<b>Tier</b>	<b>Retail* Copay (30-Day Supply)</b>	<b>Maintenance Choice** Copay (90-Day Supply)</b>
<b>Generic</b>	\$5	\$15
<b>Preferred Brand</b>	\$10	\$30
<b>Non-Preferred Brand</b>	\$25	\$45
<b>Specialty***</b>	\$100	N/A

\* Maximum of up to two 30-day fills (excluding specialty drugs) before a member is required to obtain a 90-day supply.

\*\* Must be purchased at CVS or Target retail pharmacy stores or through the Caremark Mail Service Pharmacy only.

\*\*\* Applies to all new users of specialty medications or existing users who are prescribed a different specialty medication starting on or after April 1, 2017.

In addition, the following prescription drug out-of-pocket maximums will apply. The prescription drug out-of-pocket maximum is the most you pay for covered prescription drug expenses during a Plan Year. Once you reach the out-of-pocket maximum, the Plan will pay the balance of your covered prescription drug expenses for the rest of the Plan Year.

	<b>In-Network Prescription Drug Expenses</b>	<b>Out-of-Network Prescription Drug Expenses</b>
<b>Per Person</b>	\$2,000	\$4,000
<b>Per Family</b>	\$4,000	\$8,000

The in-network and out-of-network out-of-pocket maximums will be maintained separately and cannot cross apply.

**Most MinuteClinic™ Services Available Free of Charge**

We are pleased to announce that each Plan will provide 100% coverage for most services provided by MinuteClinics in CVS or Target retail stores. MinuteClinics can be used as an alternative to a physician's office visit for treatment of certain non-emergency/unscheduled illnesses or injuries. These services are similar to those offered by the Operators' Health Center. The goal is for you to use the Operators' Health Center (OHC) as your patient-centered medical home with a MinuteClinic as another means for after-hours care to avoid emergency room visits. Please note, cash payment will be required for certain

services. For a current list of covered and cash-pay services, visit [www.moefunds.com](http://www.moefunds.com). These services are subject to change.

### Additional Plan Changes

Due to the change in the prescription drug program, all Plans have lost grandfathered status under the Affordable Care Act (ACA). Grandfathered plans are health plans that were in place before the ACA was signed into law. Losing grandfathered status means that the Plans will change as follows:

- The Plans’ medical deductible amounts and out-of-pocket maximum amounts will be the same for both in-network and out-of-network providers, as follows:

<b>Plans A-2, A-3, A-4 and A-5</b>				
	<b>In-Network Medical Deductible</b>	<b>Out-of-Network Medical Deductible</b>	<b>In-Network Medical Out-of-Pocket Maximum</b>	<b>Out-of-Network Medical Out-of-Pocket Maximum</b>
<b>Per Person</b>	\$300	\$300	\$2,500	\$2,500
<b>Per Family</b>	\$700	\$700	\$6,000	\$6,000

<b>Plans B-1, C-1, E-1 and F-1</b>				
	<b>In-Network Medical Deductible</b>	<b>Out-of-Network Medical Deductible</b>	<b>In-Network Medical Out-of-Pocket Maximum</b>	<b>Out-of-Network Medical Out-of-Pocket Maximum</b>
<b>Per Person</b>	\$100	\$100	\$2,500	\$2,500
<b>Per Family</b>	\$300	\$300	\$6,000	\$6,000

Note that your out-of-pocket maximum includes what you pay for deductibles and coinsurance (including durable medical equipment).

- The Plans’ deductibles and out-of-pocket maximums will be maintained separately and cannot cross apply. If you meet your in-network deductible or out-of-pocket maximum (for medical expenses) during the 2017/2018 Plan Year then use an out-of-network provider, you will have to meet the separate out-of-network deductible and out-of-pocket maximum for your out-of-network expenses.
- The Plans will cover ACA-mandated preventive care services and prescription drugs at 100% with no deductible when you visit in-network providers. For the current list of these services, visit [www.healthcare.gov/coverage/preventive-care-benefits/](http://www.healthcare.gov/coverage/preventive-care-benefits/). For details on ACA-mandated preventive care prescription drugs, visit [www.caremark.com/portal/asset/NoCost\\_Preventive\\_List\\_OE.pdf](http://www.caremark.com/portal/asset/NoCost_Preventive_List_OE.pdf). This information is also posted on [www.moefunds.com](http://www.moefunds.com). These lists may change annually.
- If your initial claim for health care benefits has been denied, in whole or in part, and you are dissatisfied with the outcome of the Plan’s internal claims and appeals process, you may (under certain circumstances) be able to seek external review of your claim by an Independent Review Organization (IRO). This process provides an independent and unbiased review of eligible claims in compliance with the Affordable Care Act.

If you have any questions about these changes, please contact the Fund Office at 708.482.7300.

*The Board of Trustees*

The Midwest Operating Engineers Welfare Fund

*This announcement, which serves as a Summary of Material Modifications, contains only highlights of recent changes to the Midwest Operating Engineers Health and Welfare Plan. Full details are contained in the documents that establish the Plan provisions. If there is a discrepancy between the wording here and the documents that establish the Plan, the document language will govern. The Trustees reserve the right to amend, modify, or terminate the Plan at any time.*