

PENSION TRUST FUND • WELFARE FUND • RETIREE WELFARE PLAN VACATION SAVINGS PLAN • RETIREMENT ENHANCEMENT FUND

6150 JOLIET ROAD, COUNTRYSIDE, IL 60525-3994 - PHONE (708) 579-6600 CLAIMS FAX (708) 482-7687 - ELIGIBILITY FAX (708) 352-3310 - PENSION FAX (708) 354-7732

JAMES M. SWEENEY, CHAIRMAN / DAVID M. SNELTEN, SECRETARY-TREASURER

Midwest Operating Engineers Retiree Welfare Plan Annual Notices October 2017

The enclosed annual notices are for <u>informational purposes only</u> related to the Midwest Operating Engineers Retiree Welfare Plan (RWP).

Specifically, the Fund must provide you with the following information:

- Annual Breast Reconstruction Notice This notice is required under the Women's Health and
 Cancer Rights Act (WHCRA) and must be sent to members of group health plans that provide for
 mastectomy benefits. This notice provides a description of benefits under WHCRA and any
 deductibles and coinsurance limits applicable to such benefits.
- Notice of Creditable Coverage This notice must be sent to members of group health plans that provide prescription drug coverage to Part D eligible individuals. The plan must provide written notice stating whether a group health plan's prescription drug coverage is, on average, at least as good as standard prescription drug coverage under Medicare Part D.
- Notice Under Section 1557 of the Affordable Care Act The Department of Health and Human Services (HHS), through the Office of Civil Rights (OCR), recently issued comprehensive final regulations titled Nondiscrimination in Health Programs and Activities. The regulations implement Section 1557 of the Affordable Care Act (ACA) which prohibits exclusion from participation, denial of benefits or discrimination on the basis of race, color, national origin, sex, age or disability, in certain health care programs or activities.

If you have any questions pertaining to the enclosed notices, please contact the Fund Office at (708) 482-7300.

Sincerely,

The Board of Trustees
Midwest Operating Engineers Retiree Welfare Plan

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ANNUAL BREAST RECONSTRUCTION NOTICE

October 2017

This annual notice is required under the federal Women's Health and Cancer Rights Act, first effective October 21, 1998. Please review this information carefully. This notice is provided to you for informational purposes only, no action is required on your part. Please keep this information with your other group health plan documents.

The Plan will consider charges for the following services and supplies to be covered medical expenses when the charges are incurred by an eligible member or an eligible dependent who is receiving Plan benefits for a mastectomy, and when the person elects (in consultation with her physician) breast reconstruction in connection with the mastectomy:

- Reconstruction of the breast on which the mastectomy has been performed;
- Surgery and reconstruction of the other breast to produce a symmetrical appearance; and
- Prostheses and physical complications relating to all stages of the mastectomy, including lymphedemas.

Plan benefits payable for these services and supplies are subject to the Plan deductibles, co-payment percentages and maximum benefit limitations applicable to covered services for other covered medical conditions.

If you have any questions regarding this notice, please contact the Fund Office at (708) 482-7300.

Sincerely,

The Board of Trustees
Midwest Operating Engineers Retiree Welfare Plan



Notice of Prescription Drug Creditable Coverage Midwest Operating Engineers Retiree Welfare Plan

October 2017

Important Information about Your Benefits and Medicare Prescription Drug Coverage

This Notice has information about:

- Medicare Prescription Drug Coverage (Medicare Part D) that is available to everyone with Medicare.
- How the Midwest Operating Engineers Retiree Welfare Plan's (the "Plan") existing prescription drug benefits for all retired Plan participants and their dependents are, on average, at least as good as standard Medicare Prescription Drug Coverage.
- What your choices are and what happens to your coverage under the Midwest Operating Engineers Retiree Welfare Plan if you elect Medicare Prescription Drug Coverage.
- Where to find more information to help you make decisions about your prescription drug coverage.

The Midwest Operating Engineers Retiree Welfare Plan provides prescription drug coverage for all participants. You do **not** need to enroll for Medicare Prescription Drug Coverage since you have creditable coverage available under the Midwest Operating Engineers Retiree Welfare Plan.

This Notice explains the options you have under Medicare Prescription Drug Coverage and can help you decide if you want to enroll. Please read this Notice carefully and keep it in a safe place for future reference.

Medicare Prescription Drug Coverage

Medicare Prescription Drug Coverage is available to anyone entitled to Medicare (including individuals eligible for Medicare due to being age 65 or older or due to disability or end-stage renal disease). Most people will have to pay a monthly premium for Medicare Prescription Drug Coverage. For people with limited resources, extra help paying for Medicare Prescription Drug Coverage is available. Medicare Prescription Drug Coverage is insurance provided by private companies that have been approved by Medicare. Medicare Prescription Drug Coverage is available through Medicare Advantage Plans (like an HMO or PPO) and Medicare Prescription Drug Plans. All Medicare plans will provide at least a standard level of coverage as set by Medicare. Some Medicare plans might offer better coverage for a higher monthly premium.

Eligible individuals who are entitled to Medicare Part A or enrolled in Part B can enroll for Medicare Prescription Drug Coverage when they first become eligible for Medicare and each year from October 15th through December 7th. If a Medicare eligible individual loses or drops prescription drug coverage under the Midwest Operating Engineers Retiree Welfare Plan, the individual may be eligible for a two-month Special Enrollment Period to sign up for Medicare Prescription Drug Coverage. More detailed information about Special Enrollment Periods can be found in the *Medicare & You* booklet sent to Medicare eligible individuals each fall.

Existing Coverage as Good as Standard Medicare Prescription Drug Coverage

The Midwest Operating Engineers Retiree Welfare Plan has determined that existing Plan prescription drug benefits are, on average, "creditable coverage," which means coverage under the Plan is expected to pay as much (or more in some cases) in claims for all eligible participants as standard Medicare Prescription Drug Coverage.

Because your current prescription drug benefits under the Midwest Operating Engineers Retiree Welfare Plan are, on average, as good as Medicare standard coverage, you can choose to stay covered under the Midwest Operating Engineers Retiree Welfare Plan and join a Medicare plan later and not be subject to the higher premium penalty.

Keep this Notice. If you enroll for Medicare Prescription Drug Coverage, you will need a copy of this Notice when you enroll. This Notice verifies that you have creditable coverage and that you are not required to pay the higher premium penalty.

Your Choices and the Consequences

If you are eligible for Medicare, you can compare your current coverage, including which medications are covered, with the coverage and cost of the Medicare plans in your area. Remember that for most people there is a monthly premium for Medicare Prescription Drug Coverage.

If you **do not** enroll for Medicare Prescription Drug Coverage, you will continue to receive benefits under the Midwest Operating Engineers Retiree Welfare Plan (as long as you are otherwise eligible to continue Plan coverage). Remember that the Plan also provides medical and other benefits, in addition to prescription drug benefits. You will continue to receive all current benefits for which you are eligible.

Non-Medicare Eligible Retirees and Their Dependents

If you are a Non-Medicare eligible retiree, you and your non-Medicare eligible dependents will continue to receive prescription drug coverage under the Plan.

Medicare-Eligible Retirees and/or their Medicare-Eligible Dependents

If you are a Medicare-eligible retiree or Medicare-eligible dependent of a retiree **and enroll in** Medicare Prescription Drug Coverage, **you will no longer receive** prescription drug benefits under the Midwest Operating Engineers Retiree Welfare Plan. You will continue to be eligible to receive medical benefits under the Plan. However, your monthly premium for coverage under the Plan will not be reduced.

Note to Medicare-Eligible Individuals: If you drop or lose your coverage under the Midwest Operating Engineers Retiree Welfare Plan and do not enroll for Medicare Prescription Drug Coverage after your current coverage ends, you may pay more for Medicare Prescription Drug Coverage later. If you go 63 days or longer without prescription drug coverage that is at least as good as Medicare Prescription Drug Coverage, your monthly premium for Medicare Prescription Drug Coverage will increase. The increase is at least 1% per month for every month after you are eligible for but did not have Medicare coverage. For example, if you go 19 months without coverage, your monthly premium will always be at least 19% higher than what most other people pay. You will have to pay this higher premium penalty as long as you have Medicare Prescription Drug Coverage. In addition, you may have to wait until the next open enrollment period (October 15th through December 7th each year) to enroll.

For More Information about Medicare Prescription Drug Coverage

More detailed information about Medicare plans that offer prescription drug coverage is available in the *Medicare & You* booklet that Medicare publishes each fall and sends to Medicare beneficiaries. You may also be contacted directly by Medicare Prescription Drug Plans. Additional information about Medicare Prescription Drug Coverage is available by:

- Visiting www.medicare.gov for personalized help.
- Calling your State Health Insurance Assistance Program (the telephone number is included in the *Medicare & You* booklet).
- Calling 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

For people with limited resources, extra help paying for Medicare Prescription Drug Coverage is available. Additional information is available from the Social Security Administration by:

- Visiting www.socialsecurity.gov.
- Calling 1-800-772-1213. TTY users should call 1-800-325-0778.

For More Information about this Notice or the Midwest Operating Engineers Retiree Welfare Plan

If you have any questions about this Notice or would like more information about your benefits under the Midwest Operating Engineers Retiree Welfare Plan, please call the Fund Office.

In the future, the Midwest Operating Engineers Retiree Welfare Plan will periodically send you an updated copy of this Notice for your records. You also may request a copy of this Notice at any time by contacting the Fund Office.

Date: October 2017

Entity/Sender: Midwest Operating Engineers Retiree Welfare Plan

Contact: Fund Office

Address: 6150 Joliet Road, Countryside, IL 60525-3994

Telephone Number: 708-482-7300

Benefits under the Midwest Operating Engineers Retiree Welfare Plan are not vested or guaranteed. Full details of the Plan are contained in the documents that establish the Midwest Operating Engineers Retiree Welfare 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 discontinue all or part of the Plan at any time.

Nondiscrimination Notice Under Section 1557 of the Affordable Care Act

Discrimination Is Against the Law

Midwest Operating Engineers Welfare Fund and the Midwest Operating Engineers Retiree Welfare Plan (the "Plans") comply with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Each Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Each Plan:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact Mr. Thomas M. Bernstein, the Civil Rights Coordinator.

If you believe either Plan has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Mr. Thomas M. Bernstein, Civil Rights Coordinator Midwest Operating Engineers Fringe Benefit Funds 6150 Joliet Road Countryside, Illinois 60525-3994 Telephone: 1-708-482-7300 Fax: 1-708-482-3056

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Mr. Thomas M. Bernstein is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services 200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201 1-800-368-1019, 800-537-7697 (TDD)

Illinois/Indiana/Iowa Top Languages

Language	Message About Language Assistance
Spanish	ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-708-482-7300.
Polish	UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-708-482-7300.
Chinese	注意:如果您使用繁體中文,您可以免費獲得語言援助服務。請致電 1-708-482-7300.
Korean	주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-708-482-7300. 번으로 전화해 주십시오.
Russian	ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-708-482-7300.
Italian	ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-708-482-7300.
German	ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-708-482-7300.
Greek	ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε 1-708-482-7300.
French	ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-708-482-7300.
Hindi	ध्यान दा: याद आप ाहदी बोलते हातो आपके िलए मुफ्त मा भाषा सहायता सेवाएं उपलब्ध हा। 1-708-482- 7300. पर कॉल करा।
Gujarati	ાયુના: જો તમે ાજરાતી બોલતા હો, તો િન:ાલ્કુ ભાષા સહાય સેવાઓ તમારા માટા ઉપલબ્ધ છ. ફોન કરો 1-708-482-7300.
Urdu	رادربخ: رگا پاً ودرا عِتلوب مى، وت پاً وك نابز كى ددم كى تامدخ تقىم مى تسدىيا مى ـ لاك الكــــــــــــــــــــــــــــــ
Vietnamese	CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-708-482-7300.
Tagalog	PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-708-482-7300.
Arabic	ركذا ةغللا، ناف تامدخ ةدعاسملا وغللاى قرفاوتت كل ناجملاب. لصتّا مقرب .7300-482-708-1 (مقر . قطوحلم: اذا تنك تُسدحتت
Pennsylvania Dutch	Wann du [Deitsch (Pennsylvania German / Dutch)] schwetzscht, kannscht du mitaus Koschte ebber gricke, ass dihr helft mit die englisch Schprooch. Ruf selli Nummer uff: Call 1-708-482-7300.
Japanese	注意事項:日本語を話される場合、無料の言語支援をご利用いただけます。 1-708-482-7300.まで、お電話にてご連絡ください。
Serbo-Croatian	OBAVJEŠTENJE: Ako govorite srpsko-hrvatski, usluge jezičke pomoći dostupne su vam besplatno. Nazovite 1-708-482-7300.
Lao	ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັງຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທຣ 1-708-482-7300.
Thai	เรียน: ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร 1-708-482-7300.
Karen	ymol.ymo;= erh>uwdRAunD AusdmtCd <aerrm>Ausdmtw>rRpXRvXAwvXmbl.vXmphRAeDwrHRb.ohM. vDRIAud; 1-708-482-7300.</aerrm>
Dutch	AANDACHT: Als u nederlands spreekt, kunt u gratis gebruikmaken van de taalkundige diensten. Bel 1-708-482-7300.
Panjabi	ਿਧਆਨ ਿਦਓ: ਜੇ ਤੁਸ⊪ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤ⊩ਭਾਸ਼ਾ ਿਵੱਚ ਸਹਾਇਤਾ ਸੇਵਾ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਹੈ। 1- 708-482-7300. 'ਤੇ ਕਾਲ ਕਰੋ।