

2260 S. Grove Street Chicago, Illinois 60616 (312) 372-9870 Office (312) 842-0291 Fax www.iuoe399.org

## **IMPORTANT NOTICE for PLAN PARTICIPANTS**

March 2021

**Dear Participant:** 

The Board of Trustees of the International Union of Operating Engineers Local 399 Health and Welfare Plan ("Local 399 Health Plan") are pleased to announce the following changes to the plan of benefits.

## **COVID-19 Vaccine Coverage**

Effective January 1, 2021, the Plan will cover the COVID-19 vaccine under the Major Medical Benefit and Prescription Drug Benefit at 100% (PPO and Non-PPO).

# **Hearing Aid Benefit**

Effective January 1, 2021, the Plan will cover hearing aids up to a maximum of \$2,000 per ear, every third calendar year. Covered services also include the hearing examination, consultation, initial fitting and follow-up appointments for adjustments.

#### **Nutritional Counseling**

Effective January 1, 2020, the Plan will provide nutritional counseling sessions by a registered dietician immediately following a diabetes diagnosis or mental or nervous disorder. The Plan will provide coverage for up to two (2) nutritional counseling sessions per person.

# **Genetic Testing**

Effective January 1, 2021, the Plan will cover genetic testing at 90% (PP0) and 70% (Non-PP0) under the Major Medical Benefit. The maximum benefit available is \$2,500 per person per calendar year and \$10,000 per lifetime. Please note these benefit maximums do not apply to BCRA genetic tests, which will continue to be covered by the Plan.

Genetic testing services are covered under the Plan, provided the services are Medically Necessary and the following conditions are met:

- 1. The testing is (a) necessary to diagnose an existing medical condition; or (b) in connection with an actual treatment plan for a diagnosed illness. *These services must be pre-certified by the Review Organization*, OR
- 2. The tests are performed prenatally within the recommendations established by the American College of Obstetrics and Gynecology (ACOG):
  - a. First or second trimester screening tests for fetal aneuploidy disorders (e.g., Down Syndrome), or specific inherited disorders such as cystic fibrosis and sickle cell disease; and
  - Follow-up diagnostic tests for the same conditions if an initial screening indicates a likelihood of a genetic defect.



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Prenatal tests may be performed and billed as a "panel" that screens for several diseases at once. When a covered test is included in a panel of tests that includes other non-covered tests, only the reasonable and customary amount (or the negotiated amount if the lab is in-network) for the covered test will be allowed.

Genetic testing excludes screening and testing of the following: (a) of family members, (b) by multiple methods for the same disorder(s), (c) multigene panels for diseases such as cancer, (d) tests to determine the child's gender or hereditary predispositions (predictive tests) and (e) home testing kits.

Please keep this important notice with your Summary Plan Description ("SPD") booklet for future reference. If you have any questions, please call the Fund Office at (312) 372-9870 Option #3.

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## **Required Notice: Notice Regarding Grandfathered Status**

The Trustees of the IUOE Local 399 Health and Welfare Plan have determined that the Plan is a "grandfathered health plan" under the Patient Protection and Affordable Care Act (the "Affordable Care Act"). As permitted by the Affordable Care Act, 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 Affordable Care Act that apply to other plans, for example, the requirement to cover preventive health services without any cost sharing. However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, 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 Local 399 Health and Welfare Plan, 2260 S. Grove Street, Chicago, IL 60616-1823, telephone (312) 372-9870, fax (312) 842-0291. 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.