Questions about Your Benefits? Call the Fund Office at (877) 850-0977. Press "1" to reach the Automated Benefit Information System or Press "2" to speak with a representative.

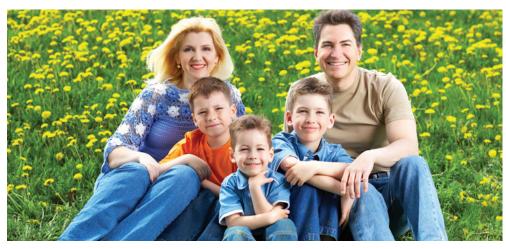


## For Your Benefit

Operating Engineers Local No. 77

April 2017 Vol. 17, No. 2

www.associated-admin.com



### Landover Fund Office Has New Address

On April I, 2017, Associated Administrators, LLC, moved its Landover office from 4301 Garden City Drive to 8400 Corporate Drive, just a quarter mile from the old location. The new address is:

Landover Fund Office 8400 Corporate Drive, Suite 430 Landover: MD 20785-2361

The Landover telephone number has not changed. It remains toll-free (877) 850-0977. Associated's office in Sparks, Maryland, is not moving.



# CVS Health's "Transform Diabetes Care" Approved by Board of Trustees

The following is a Summary of Material Modification (change) made to your Plan.

At the Board of Trustees meeting on Feb. 14, 2017, a motion was approved to implement a new program from CVS Health called *Transform Diabetes Care* ("TDC").

Depending on the source (American Diabetes Association, WebMD, Mayo

Continued on page 2

The purpose of this newsletter is to explain your benefits in easy, uncomplicated language. It is not as specific or detailed as the formal Plan documents. Nothing in this newsletter is intended to be specific medical, financial, tax, or personal guidance for you to follow. If for any reason, the information in this newsletter conflicts with the formal Plan documents, the formal Plan documents always govern.

Summary of Material Modifications (Changes)
This Issue!

Operating Engineers Union Local No. 77 Health and Welfare Fund

Operating Engineers Union Local No. 77 Pension Fund

Operating Engineers Union Local No. 77 Individual Account Fund

#### This issue—

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Application....

Clinic), the total number of Americans with diabetes is close to 30 million. Type 2 diabetes is the most common, while type I afflicts mostly children and juveniles.

Diabetics' bodies have problems properly utilizing insulin, which is necessary to maintain a normal blood glucose level. Glucometers are used to monitor blood glucose levels. These would be provided to each eligible participant under the TDC program.

The American Diabetes Association strongly recommends diabetics keep a log of their blood glucose levels, and offers an online tool, Diabetes 24/7 (https://247. diabetes.org/Default.aspx) to help them accomplish this. A Microsoft account is required; if you don't have an account, creating one is free.

CVS' new program focuses on "medication adherence, AIC control and lifestyle management." AIC is a blood test that measures a person's average levels of blood glucose over 3 months/120 days.

A December 13, 2016, CVS press release (cvshealth. com/newsroom/press-releases/cvs-health-introducesnew-transform-diabetes-care-program-improve-health) describes TDC as:

... a new program available to help the company's pharmacy benefit management (PBM) clients improve the health outcomes of their members, lower pharmacy costs through aggressive trend management and decrease medical costs by improving medication adherence, AIC control and lifestyle management. This program ... emphasizes tailored support for members with diabetes and incorporates both clinical care and cost management solutions, including a single-digit client trend guarantee for medicines in the antidiabetic category.

Diabetes has no cure, as reported on WebMD (www. webmd.com/diabetes/). Thus it is a disease that requires lifelong care, which can prove very costly. The TDC program could, according to CVS officials present at the February Board meeting, save Plan participants anywhere from \$3,000 - \$5,000 per year.





## Material SwiftMD Telemedicine Benefits Modifications **Now Available to Participants**

The following is a Summary of Material Modification (change) made to your Plan.

When you're very sick and/or extremely suffering, you want immediate, quality care. To the emergency room! After all, there isn't any other option, right?

Wrong.

The Operating Engineers Local 77 Health and Welfare Fund recently added (effective February 1, 2017) an innovative, alternative benefit service that has significantly diminished those frantic and costly trips to the ER.



SwiftMD allows participants to communicate with board-certified, emergency medicine and family practice doctors who are experts in dealing with a wide range of medical conditions.

While the list of maladies covered by SwiftMD continuously expands, here are a few of the most common:

- Back pain
- Insect bites and stings
- Earache
- Rashes and allergies
- Fever/flu
- Sore throat
- Headache
- Stomach pain

For more information, visit www.SwiftMD.com. Please see the following page for instructions on how you can take advantage of the many benefits of SwiftMD.

### More information about your SwiftMD membership

Request a consultation 24/7 at **no cost to you** simply by calling toll free 877-999-7943

To access your membership online (optional):

- So to www.mySwiftMD.com and click "Activate Your Account"
- Click "No" to the username and password question
- » Click "Yes" to "Did you receive a Group Passcode?"
- Enter Group Passcode: IUOE77, name, birth date and email address
- SwiftMD will email your username and password; be sure to log on to complete activation

- Take a few minutes to enter your Medical History
- After consulting with a SwiftMD doctor, you can view and print the visit notes from your Personal Health Record to share with family and other providers
- Each adult family member can use this process to obtain a username and password to log on at mySwiftMD.com



#### **SwiftMD Physicians**

SwiftMD Physicians are emergency medicine and family practice doctors, expert in dealing with a range of common medical conditions. From the information you provide, SwiftMD doctors can diagnose many illnesses and injuries, order prescriptions, make appropriate referrals to specialists, and know immediately if you need to be referred to in-person emergency care.

#### **Family Members**

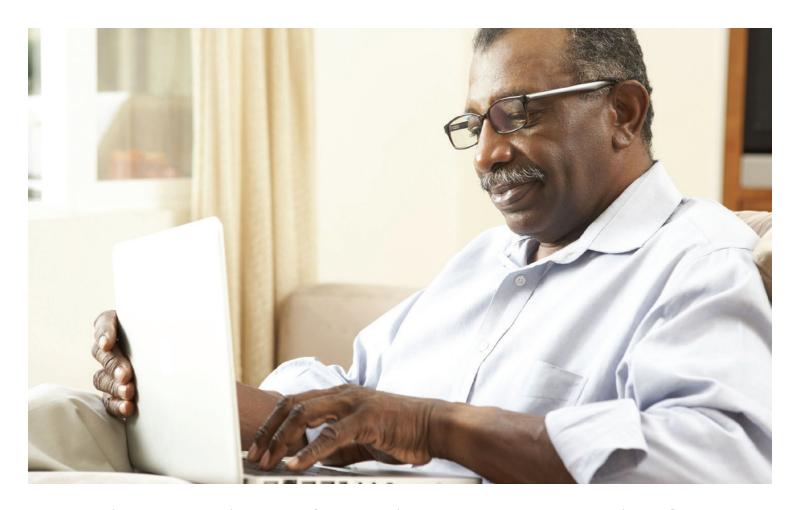
Each adult family member (age 18 and older) enrolled in SwiftMD will have an individual profile with a unique SwiftMD username and password. Parents or guardians are required to oversee the telemedicine consultations of dependents under the age of 18.

#### **Your Privacy**

All SwiftMD systems and processes are HIPAA-compliant. Your SwiftMD Personal Health Record is maintained on secure servers, and encryption technology is used to protect your personal information during transmission. SwiftMD is committed to protecting the privacy, security, and integrity of individually identifiable health information received on behalf of our members. You should also protect your privacy by safeguarding your username and password, utilizing SwiftMD services from a private location, and avoiding emailing personal health information to SwiftMD.

#### SwiftMD Terms of Use

The SwiftMD Terms of Use and other policies are posted online at www.mySwiftMD.com for your reference. It is your responsibility to familiarize yourself with these policies before using the SwiftMD service.



## Retirees: Retiree Information Forms Are Being Sent. Return Promptly to Avoid Suspension of Pension Benefits

The Fund Office will soon be sending Retiree Information Forms (RIFs) to be completed and returned to the Fund Office. The form asks questions about your current address, beneficiary information, and employment information (if you are employed after retirement).

Even if you completed this form last year, you still must complete and return this year's RIF. It is <u>very important</u> that you review all sections of this form to be certain the information is correct. If necessary, mark corrections on the form and promptly send it back to the Fund Office. If we don't receive your RIF, your pension benefits may be suspended until it is received. To assist you, the Fund Office will include a postage-paid, return envelope with the first mailing.

## For Disabled Pensions – A Letter Required From Doctor – Once Every Three Years

This year the Board of Trustees requires a letter from your physician to verify you are still disabled or unable to work. Return both the letter from your physician and the RIF to the Fund Office.

**Important:** If you retired on a disability pension and believe your disability to be "permanent," you do not have to obtain a letter from your physician every three years. You will have to request a waiver from this requirement to the Trustees in care of the Fund Office for consideration. Your request should include a written statement from your physician affirming that your disability is permanent and therefore you will not be eligible to return to work as an Operating Engineer at any time in the foreseeable future.

No one but the Retiree can sign the RIF, unless an individual holds a Power of Attorney for the Retiree. A copy of the Power of Attorney must be on file with the Fund Office. If, for health reasons, the Retiree is unable to sign the form and there is no Power of Attorney on file, then the Retiree must sign an "X" on the RIF and this must be notarized showing the Notary Public seal.

#### **Available Retirement Benefits Under the Pension Plan**

You may qualify for one of several types of benefits under the Pension Plan, depending upon your circumstances. Below are the types of retirement benefits:

#### Normal Retirement

If you are an active participant in the Plan when you reach Normal Retirement Age (age 65), you may retire and become eligible for a Normal Retirement.

#### • Early Retirement

If you are an active participant in the Plan and you are between 55 and 65 years old with at least 5 years of Vesting Service, you may retire with an Early Retirement pension. An Early Retirement pension is reduced based upon your age at early retirement.

#### Unreduced Early Pension

If you are age 60 and have at least one hour of service on or after January 1, 1989, and have at least 35 years of Adjusted Vesting Service, you may receive a pension before Normal Retirement Age in an unreduced amount.

#### Disability Benefit

Regardless of your age, if you have at least 15 years of Vesting Service and become Totally and Permanently Disabled by Social Security while an active participant in the Plan, you may retire and become eligible for a disability retirement pension.

You can receive the Disability Retirement Pension for your lifetime, but ends if you cease being totally and permanently disabled before Normal Retirement Age. The Trustees may require you to be reexamined by a physician periodically (but not more often than twice a year) to determine whether you continue to be totally and permanently disabled.

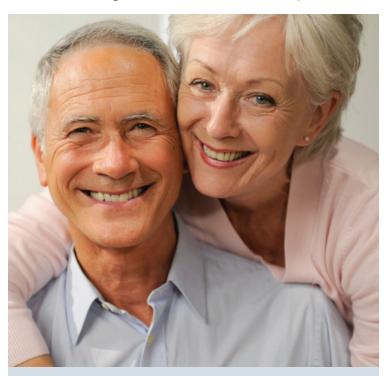
#### Occupational Disability Benefit

If you have at least 15 years of Vesting Service, and after January 1, 1993, while an active participant in the Plan you become unable to perform bargaining unit employment due to a physical or mental condition that arises as a result of bodily injury or disease, you may become eligible for an Occupational Disability Pension. The determination of whether you are eligible for occupational disability retirement will be made at the discretion of the Trustees, based upon all information available to them, including a certification from your doctor. The Trustees may require that you submit to a medical examination by a doctor selected by the Fund in order to prove your eligibility or continuing eligibility for this benefit. In the event the Trustees later find that

you again become capable of performing bargaining unit work, your Occupational Disability benefits will cease.

#### Deferred Pension

If you have at least 5 years of Vesting Service and are no longer an active participant, you may retire at Normal Retirement Age with a deferred retirement pension.



## Reminder: Once Pension Benefits Begin, You May Not Make a Change

You have three payment options for receiving your Pension: the 36-Month Payment Guarantee Benefit, the 50% Joint and Survivor Annuity, and the 75% Joint and Survivor Annuity.

If you are married, a Joint and Survivor option will automatically be chosen for you (as required by law) unless both you and your spouse choose another method before your pension begins.

You cannot make a change to your pension option once you are in pay status. For example, if you are getting paid under the 36-Month Payment Guarantee option and you later get married, you are not able to change to a Joint and Survivor option.

Please be aware that you must be married for one year prior to your retirement before you are eligible to collect.

#### When You Need To Use an Ambulance



If you or an eligible dependent has a medical emergency and need ambulance transportation to a hospital, your Plan of benefits will offer coverage. The Fund will pay for professional ambulance services, when medically necessary, to or from a hospital, up to \$100 per incident at 100% with no deductible. When it is determined that medically necessary life support services are provided while being transported, 50% of the remaining cost of the ambulance service will be paid under Major Medical. You must satisfy the annual deductible before the additional 50% payment will apply.

## What Can Slow Down The Processing of Claims?

The Fund Office uses state-of-the-art benefit systems technology. Despite the tools we employ, claims payment is not simply a matter of feeding information into a computer. It can take as little as a few days or up to 30 days to process a claim.

## When we don't have all the information, we "pend" the claim.

The Fund Office may send a "pend letter" to you or the provider requesting additional information. If a claim comes to us without a CareFirst discount, and the doctor or hospital shows in our system as a participating provider, we send the claim back to CareFirst to take a second look at the claim.

#### Reasons Why a Claim Is "Pended" or Denied

Below are some of the most common reasons:

#### Need Accident Details

A letter is sent to you when it appears you have had an accident and the accident inquiry section has not been filled out. We need details about <u>any</u> injury (not just car accidents -- injury could be a sprain), including how, when, and where the accident took place, whether other people were involved, and whether another party may be liable. We cannot process a claim for an accidental injury until we have these accident details.

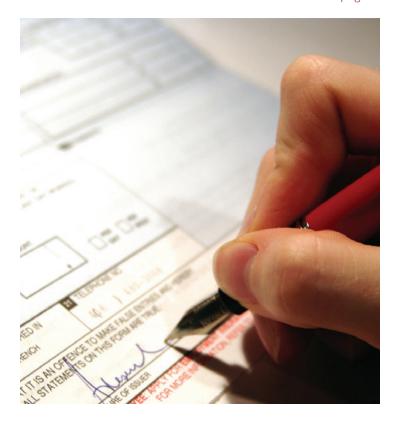
#### Need Current Address

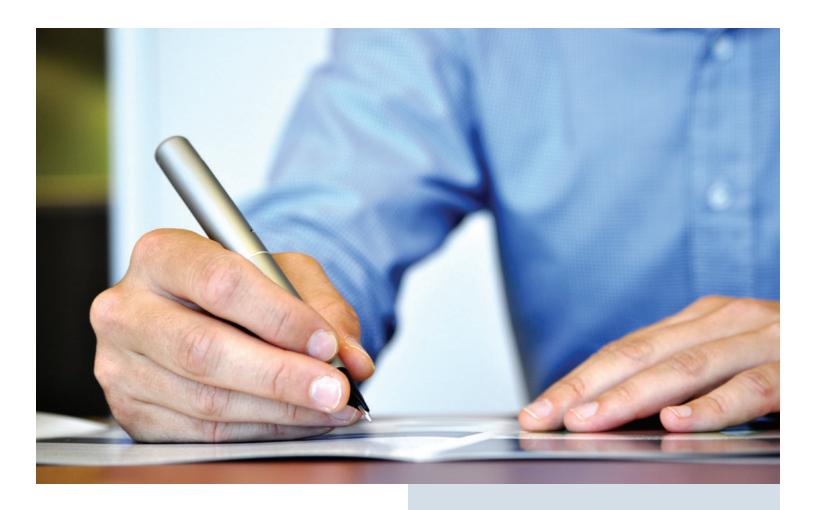
It is very important that we have your current address on file. Without a current address, your claim might be denied because we are unable to gain additional information from you.

#### Need Procedure Code

This notice means we have received a bill but we need a procedure code (CPT code). Procedure codes are the providers' and insurers' way of showing exactly which service was provided. Both you and your doctor's office receive a copy of this letter, but you are ultimately responsible for seeing that we get the information.

Continued on page 7





#### Continued from page 6

#### Need Enrollment for Baby

A letter is sent to you when we get a claim for a newborn, but you have not yet added the baby to your coverage. Call the Fund Office immediately to enroll your newborn. Without enrollment, your baby will not have medical coverage.

#### Need Provider's Tax ID Number

A letter is sent to the provider requesting his or her tax identification number. Without this number, we cannot pay a claim.

#### **Allow Time**

It generally isn't necessary for you to call about your claim. We will correspond with you in writing if it's not complete. The only reason you may have to call is to find out if we received a bill from a provider. Before you do call, please allow ample time for the bill to get to us. Some providers don't bill us right away.

## REMINDER: Complete/ Update Information on Enrollment Application

If you haven't completed an enrollment application or if your information has changed, please take a moment to complete the enrollment. The application may be accessed on the Associated Administrators LLC website (<a href="www.associated-admin.com">www.associated-admin.com</a>). From the homepage click "Your Benefits" on the left side of the screen, select "Operating Engineers Local 77" and choose the "Enrollment Form" from Downloads (Forms). Mail the form to:

Fund Office
Operating Engineers Local No. 77
8400 Corporate Drive, Suite 430
Landover, MD 20785-2361

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