



For Your Benefit

Operating Engineers Local No. 77

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www.associated-admin.com

The International Training & Education Center



World-Class Training Available to Active Participants

Looking to improve or advance your skills? Active IUOE participants may receive free training, paid for by the National Training Fund (“NTF”) at the International Training & Education Center in Crosby, Texas, located just outside Houston.

Comprehensive training at this world-class facility includes virtually anything heavy equipment operators and stationary engineers need to become a skilled operator.

Attendees have access to the newest cranes and heavy equipment, 17 classrooms and labs, advanced simulators, and a first-class mechanics shop. From apprentices to journeymen, the International Training Center is the best place to improve skills and receive hands-on instruction utilizing the most technologically advanced equipment available.

The IUOE established the NTF in 2006 to support a multitude of activities beneficial to its members. It serves as an umbrella organization for all of IUOE’s training programs, coordinating policies, strategies and activities, relying on extensive support and input from local unions.

The IUOE has training agreements with the U.S. Department of Labor and Agriculture to administer training programs at various Job Corps training centers across the United States.

Additionally, there is a broad range of safety and health training programs offered. Shuttle service to Houston area airports is provided.



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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.

Register online at www.iuoe-itrs.org

Failure to Meet Certain Conditions May Result in Eligibility Termination

Participants may have their eligibility terminated for various reasons. If contributions are not paid, for any reason, or if you have not worked 400 hours in the last three months or 1,200 hours in the last 12 months, then coverage will stop immediately. If you lose coverage, you can become eligible again when you have worked 400 hours and your employer has paid contributions for 400 hours in the last three-month period.

You become eligible for health coverage for yourself and your dependent(s) once you have worked 400 hours and your employer has paid contributions for 400 hours in a three-month period for initial eligibility, or 1,200 hours during the previous 12-month period.

If you are terminated from employment, you may still continue eligibility by making self-payments, which was detailed in your April 2019 FYB newsletter. The Fund offers self-payment as an alternative to COBRA or USERRA. Details regarding self-payments may be found on page 40 of your Summary Plan Description book.

Employer Contributions

Your employer's contributions are made the month after you have performed work. Because of this, the three-month "look back" period for each eligibility month is shown below.

Eligibility Month	Look-Back Period
January	September, October, November
February	October, November, December
March	November, December, January
April	December, January, February
May	January, February, March
June	February, March, April
July	March, April, May
August	April, May, June
September	May, June, July
October	June, July, August
November	July, August, September
December	August, September, November

Formulary Drug Plan May Lower Your Prescription Costs

Prescriptions can be expensive. Generics are great, but what if you require a drug that doesn't have a generic equivalent? Your Plan includes coverage for prescription medications through Caremark's Formulary Plan that will help you save money.

Your pharmacist may recommend using a formulary drug due to its lower cost. Before accepting, please talk to your doctor to ensure it is appropriate for you.

Drug formularies are designed to make sure you get the right prescription for your condition.

To see a comprehensive list of prescriptions available through Caremark's Formulary Drug Plan, please visit www.caremark.com/portal/asset/Value_Formulary.pdf.



Moving? Let Us Know!

It's important that you tell the Fund Office when your contact information changes. Often the Fund Office sends out important information about your benefits, coverage change notices, Plan booklets, and even this *For Your Benefit* newsletter. If we don't have the correct information, we may not reach you and that may affect your benefits.

Call the Fund Office at (877) 850-0877 to let us know where you've re-located to so we can keep you updated on your benefits.

Carrying More Weight than Healthy? Your Plan Covers Bariatric Surgery

When dieting, healthy eating, and exercise prove ineffective at helping you shed pounds, you have the option to have bariatric surgery under your Plan.

If you suffer severe obesity and have not been able to lose enough weight to improve your health using other methods or have serious obesity-related health problems, then it could be time to discuss bariatric surgery with your doctor. The surgery makes the stomach smaller and sometimes changes the small intestine.



Your Plan covers the cost of Bariatric Surgery, subject to all other appropriate Plan provisions, provided the surgery is determined to be medically necessary, and consists of one of the following types:

- Gastric Bypass (Roux-en-Y)
- Adjustable Silicone Gastric Banding
- Biliopancreatic Diversion with Duodenal Switch
- Vertical Gastrectomy (Sleeve Gastrectomy)

For more information, including requirements, please see pp. 71-72 of your Summary Plan Description book.



The American Society for Nutrition says the global obesity epidemic currently affects over 2 billion people worldwide. Obesity poses several health risks including, but not limited to: strokes, heart disease, diabetes, infertility, sleep apnea, and osteoarthritis.

Obesity is traditionally measured by one's Body Mass Index ("BMI") and there are several online calculators you can access to determine your BMI. Go to Google and type in "What is my BMI?" A simple calculator will appear where you enter your weight and height. However, this does not take into account your age, gender, nationality or other factors. A more comprehensive BMI calculator may be found online at www.smartbmiccalculator.com.

The American Society for Metabolic and Bariatric Surgery (ASMBS) has published findings showing that while some patients (approximately 5%) do regain weight following bariatric surgery, the vast majority do not. The ASMBS has a FAQ (<http://asmbs.org/patients/bariatric-surgery-faqs>) for those interested in learning more about this surgery.

Critically Important Forms for Retirees Mailed

Once a year, in an effort to maintain up-to-date information, the Fund Office mails out Retiree Information Forms ("RIF") to all retirees in the Plan.

The form asks for your current address, your beneficiary, and whether you are employed. If anything has changed since last year, you can fill in the correct information. If nothing has changed, you still need to complete, sign and date the form, and return it to the Fund Office.

Failure to return a completed RIF may result in a suspension of your benefits.

If you mail in your RIF and have not answered all questions, it will be returned to you to complete.

To avoid having your benefits interrupted, take the time now to complete and return the RIF as soon as possible.

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 have it notarized by a Notary Public.



Important Notice about Your Prescription Drug Coverage and Medicare

The following Notice of Creditable Coverage applies to all Medicare-eligible participants, retirees, and/or spouses.

Please read this notice carefully and keep it where you can find it for future reference. This notice has information about your current prescription drug coverage with the Operating Engineers Local No. 77 Health and Welfare Fund and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

There are two important things you need to know about your current coverage and Medicare's prescription drug coverage:

1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.
2. The Operating Engineers Local No. 77 Health and Welfare Fund has determined that the prescription drug coverage offered by the Fund is, on average for

all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage. Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

When Can You Join A Medicare Drug Plan?

You can join a Medicare drug plan when you first become eligible for Medicare and each year thereafter from October 15th to December 7th.

However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two (2)-month Special Enrollment Period (SEP) to join a Medicare drug plan.

What Happens To Your Current Coverage If You Decide to Join A Medicare Drug Plan?

If you decide to join a Medicare drug plan, your current coverage under the Operating Engineers Local No. 77 Health and Welfare Fund will be affected. **If you join an outside Medicare drug plan, you will cease to be eligible for prescription benefits under the Operating Engineers Local No. 77 Health and Welfare Fund.** See below for more information about what happens to your current coverage if you join a Medicare drug plan.



You cannot have both Medicare prescription drug coverage and prescription drug coverage through the Fund at the same time. If you do decide to join a Medicare drug plan and drop your Operating Engineers Local No. 77 Health and Welfare prescription drug coverage, be aware that you and your dependents may not be able to get the same coverage back.

When Will You Pay A Higher Premium (Penalty) To Join A Medicare Drug Plan?

You should also know that if you drop or lose your current coverage with Operating Engineers Local No. 77 Health and Welfare Fund and don't join a Medicare drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later.

If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up by at least 1% of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go 19 months without creditable coverage, your premium may consistently be at least 19% higher than the Medicare base beneficiary premium. You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.



For More Information about This Notice or Your Current Prescription Drug Coverage

Contact the Fund Office for further information at (877) 850-0977. **NOTE:** You'll get this notice each year. You will also get it before the next period you can join a Medicare drug plan, or if this coverage through the Operating Engineers Local No. 77 Health and Welfare Fund changes. You also may request a copy of this notice at any time.

For More Information about Your Options under Medicare Prescription Drug Coverage

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare drug plans.

For more information about Medicare prescription drug coverage:

- Visit www.medicare.gov
- Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the "Medicare & You" handbook for their telephone number) for personalized help
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at www.socialsecurity.gov, or call them at 1-800-772-1213 (TTY 1-800-325-0778).

Remember: Keep this Creditable Coverage notice. If you decide to join one of the Medicare drug plans, you may be required to provide a copy of this notice when you join to show whether or not you have maintained creditable coverage and, therefore, whether or not you are required to pay a higher premium (a penalty).

Date: July 2019

Name of Entity/ Fund Office
Sender: Operating Engineers Local No. 77
 Health and Welfare Fund
 911 Ridgebrook Road
 Sparks, Maryland 21152-9451

Phone Number: (877) 850-0977



CONIFER: A new healthcare benefit for you!

Get the help you need with the support of a Personal Health Nurse.

Introducing a new enhancement to your Local 77 benefits!

Conifer Health Solutions has been selected to provide Personal Health Management services to members and their families who may be facing acute illness or chronic medical conditions. This free advocacy program provides one-on-one access to a Personal Health Nurse who can help you on your path to recovery and good health.

Your Personal Health Nurse works with you and your physician to set goals, help you build healthy habits and ensure you receive the right care when you need it. All discussions with your Personal Health Nurse are strictly confidential.



**Contact your Personal Health Nurse today:
Angie: 410-919-4653 OR 800-459-2110 x2950**



SPOT THE CLUES *to Heart Disease*

You could go for years without realizing you have clogged arteries that leave you a heartbeat from a heart attack.

In the early stages of heart disease, symptoms may be absent or easily missed. Even a full-blown heart attack may not have the sudden, severe chest pain you see in the movies. Some heart attacks cause symptoms so mild people mistake them for indigestion.

Could It Be Heart Disease?

Symptoms of chronic heart disease may include:

- **Angina**—This discomfort usually signals that the heart isn't getting enough blood to meet increased demand, often caused by physical exertion, stress, or digestion. You may feel pressure or squeezing pain in the chest, sometimes radiating to the arms, shoulders, neck, jaw, or back. The discomfort may be aching, heavy, exhausting, sharp, or burning. It may come and go. See a doctor promptly—especially if you have chest pain at rest, which could signal a heart attack.
- **Shortness of breath**—This possible heart-attack symptom can also warn of heart failure, in which the heart fails to pump enough blood to the body. If you're unusually breathless during physical activity, while at rest, or in combination with chest pain, seek medical aid.
- **Arrhythmia**—If you regularly have skipped or quickened heartbeats or a fluttering feeling in your chest, talk with your doctor. Something besides heart disease could cause these symptoms. And even without symptoms, you could be at risk for heart trouble.

Are You At Risk?

You can't do anything about some heart disease risk factors. They include advancing age, male gender, a family history of heart disease, and ethnicity (for example, being African-American). But you can avoid lifestyle risks such as smoking, physical inactivity, and being overweight.

A medical checkup can find "hidden" risk factors such as high blood cholesterol, high blood pressure, or diabetes, which is strongly linked to heart disease.

When in doubt, talk with your doctor. A heart attack can be your first sign of heart disease. If you have a hunch something might be wrong, don't second-guess yourself—get prompt medical care.

**Questions? Contact your
Conifer Personal Health Nurse:
Angie: 410-919-4653 Or
1-800-459-2110 x2950**

CONIFER
HEALTH SOLUTIONS®



Keep Your Breath Fresh

Halitosis. Dragon breath. Whatever you call it, bad breath is not pleasant. Here's how to avoid this condition affecting 80 million Americans.

- **Brush and floss regularly.** Maintaining a proper oral health routine helps prevent bad breath at the source.
- **Drink water.** Stay hydrated by sipping plain water throughout the day. Sugary drinks are not a substitute! Choose fluoridated tap water when possible.
- **Eat properly.** Maintain a healthy diet with regular meals to keep your breath in check. Don't forget to brush after eating!

- **Gargle with warm salt water.** To loosen plaque and kill bacteria, mix one tablespoon of salt in eight ounces of warm water. Wait for the salt to dissolve, then gargle normally.
- **Avoid antiseptics.** Swap out your antibacterial mouthwash for a fluoride rinse. Check the label to make sure it doesn't include any alcohol.
- **Visit your dentist.** If your bad breath doesn't go away, consult your dentist. Halitosis can be a symptom of a more serious condition.

The above article is provided by Delta Dental.

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