



For Your Benefit

Operating Engineers Local No. 77

July 2024 Vol. 24, No. 3

www.associated-admin.com



Retiree Information Forms Sent: Return to Avoid Suspension of Pension Benefits

The Fund Office recently sent all retirees (and beneficiaries who are collecting a benefit) a Retiree Information Form (“RIF”) to be completed and returned to the Fund Office. The form asks questions about your current address, your beneficiary, whether you are currently employed, and current employment information, if any.

It is very important that you review all sections of this form to be certain the information is correct. Mark any corrections on the form and promptly send it back to the Fund Office. It is critical that the Fund Office receives your completed RIF to avoid any interruption of your monthly benefits. To assist you, the Fund Office will include a postage-paid return envelope with the 1st RIF.

Helpful Reminders

- Do not attach checks or claims to the RIF.
- Retirees need to complete the employment section.
- Let us know if you or your spouse has other health coverage.
- Be sure to sign and date the RIF.

The only person who can sign the RIF form is the Retiree or Beneficiary named on the RIF form, unless another individual holds legal authority to sign on the individual's behalf, such as a Power of Attorney or legal guardian. A copy of any such Power of Attorney or other legal document must be submitted to the Fund Office and verified before a RIF will be accepted with a representative's signature. If, for health reasons, the individual is unable to sign the form and there is no Power of Attorney or legal authority on file, then the individual must sign an “X” on the RIF and have it notarized by a Notary Public.

We appreciate your cooperation!

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.

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UnitedHealth Group – Change Healthcare Cyberattack Announcement to Potentially Impacted Individuals



On February 21, 2024, Change Healthcare (“CHC”), a vendor of Associated Administrators, LLC, experienced a cyberattack and immediately took steps to stop the activity and investigate the extent of the attack. CHC engaged cybersecurity experts and law enforcement to assist in the investigation. CHC provides services to the Health and Welfare Plan in which you participate, including processing and mailing Explanation of Benefits letters and mailing claims payments. To fulfill these services, your

personal data is shared with CHC. In light of the recent CHC cyberattack, United Health Group (“UHG”), the parent company of CHC, recently announced that their initial analysis of affected data shows that a substantial proportion of the American population may have been affected by this cyberattack. Given the ongoing complexity of the data review, it will likely be several months before UHG will be able to identify which individuals and data were affected. UHG states that they understand the concern this cyberattack has caused potentially affected individuals, and while they are not able to confirm a breach of any one individual’s information, UHG is offering two years of free credit monitoring and identity protection services to any individual who is concerned that they may have been affected by this cyberattack. If you would like to take advantage of UHG’s free credit monitoring and identity protection services, you can contact UHG’s dedicated call center at 1-866-262-5342 to opt-in. The call center cannot provide any specifics on whether any individual’s data has been impacted. Additional details, including UHG’s recommendations for safeguarding your information, can be found on their website at:

<http://changeybersupport.com/>

Personal Health Management Services Provided by Conifer Health Solutions

If you have an acute or chronic health care need, you likely have questions about your condition as well as your overall care. When faced with these situations, your focus should be on healing and recovery rather than on navigating the complex maze of health care. Many of you have told the Fund Office about the pitfalls you encounter in these circumstances. The Fund Office has listened to your concerns, and that is why the Local 77 Operating Engineers Trust Fund offers resources to help you stay informed and proactive in leading a healthier life.

Your Personal Health Manager and Partner in Health Conifer Health Solutions will provide personal health management services to Local 77 Operating Engineers members. The program supports members who are experiencing an acute episode, as well as those living with a chronic condition such as diabetes, breathing problems, heart conditions, and more. **This free and confidential service** will educate you on services you

may need through one-on-one access to a Personal Health Nurse (PHN). **Be sure to open any mail that you receive from the Trust and/or Conifer Health Solutions.** Conifer Health Solutions’ logo is below for your reference:



While you may not be in need of these services at this time, you have received this information to let you know about this program should you have a need in the future. Conifer Health Solutions will reach out to specific members who may benefit most from the program. If you do not receive a call but believe you could benefit from the service, you may contact Conifer Health Solutions directly using the information at the end of this article.

Retirees: If You Go Back to Work, Your Pension Benefits May Be Suspended

Under the rules of the Operating Engineers Local No. 77 Pension Plan, you must notify the Fund Office about your re-employment after you retire. Under the rules of the Plan, if you engage in certain employment as a retiree, your pension benefits may be suspended while you are working. You are required to report when you are working to the Fund Office. Failure to provide such notification may result in a suspension of your pension benefits.

Follow the Rules

- You are required to notify the Fund Office immediately if you return to work or expect to return to work in any capacity including self-employment. This includes work for a non-contributing employer to the Plan.
- If you return to work but fail to notify the Fund Office and/or the union office and if the Fund Office discovers that you are working, your pension benefits will be immediately suspended.

Under the so-called presumption rule, adopted by this Plan in accordance with federal regulations, it is presumed that a retiree who fails to notify the Fund Office about his return to work is working under circumstances that should result in a suspension of his benefits.

The suspension of benefits will be continued by the Plan until you provide the Fund Office with sufficient information to prove that you are or were not engaged

in work that permits a suspension of benefits under the Plan's rules.

- If your benefits are suspended, you must notify the Fund office as soon as you stop working (or work less than 40 hours a month if you are between the ages 65 and 70 ½).
- Benefit payments will **not** be resumed until the requested information is received by the Fund Office and the accuracy of the information has been checked by the Fund Office. You may be required to submit a letter from your employer on the employer's letterhead.
- If you receive a pension payment for a month in which you were working and your benefits should have been suspended, you are liable to repay the total amount of any overpayment(s). You should return this pension payment to the Fund Office immediately.
- Any overpayment(s) will be recovered under the Plan's offset rule. Under the offset rule, future pension payments will be reduced until the full amount of any overpayment is recovered.
- If you feel that an error was made in any decision to suspend your pension benefits or to recover overpayments, you may ask the Trustees to review the decision in accordance with the Plan's claims review procedures, as set forth in your Plan Booklet.

Don't Ignore Your Snore

Snoring is extremely common. In fact, roughly 50% of men, 40% of women, and 20% of children in the U.S. snore! All that snoring can range from harmless light rumbling to full-blown roars, but sometimes, the noise can also be an indicator of more serious health issues.

Why do people snore?

Snoring occurs when your airway is partially blocked while you sleep. As you breathe, the air is forced through the blockage, causing a noisy vibration. The more blocked you are, the louder the noise can be.

What does it mean for my oral health?

Because snoring causes you to breathe with your mouth open, dry mouth can be a concern. This occurs when the protective saliva in your mouth dries, which can lead to a variety of oral health problems. Snoring can also cause you to grind your teeth, increasing your risk for headaches, chipped teeth, and jaw pain.

Speaking with your dentist if you wake up often with headaches or a sore jaw. They may refer you to a specialist to evaluate.

You should see your physician immediately if you snore often and suffer from:

- Frequent morning headaches
- Gasping, coughing, and choking at night

If you do have sleep apnea, your physician may recommend a sleep study to see if you need a continuous positive airway pressure (CPAP) machine. This is a mask connected to a tube that gently blows pressured air through your airway. The air keeps your throat open so you can sleep soundly.

The Article Above was provided by *Delta Dental*.

Participants Encouraged to Use Website for Valuable Benefit Information

Benefits change frequently, but you can find the most up-to-date information regarding your Plan online at www.associated-admin.com. Simply click “Your Benefits” (at top or at left) and choose *Operating Engineers Local 77*.

Checking eligibility or status of claims is provided through the MemberXG Benefit System.

Along with important notices, the website includes various forms available for download, such as an enrollment form, change of address form, change in beneficiary form (Health & Welfare and Pension), and more.

Your Summary Plan Description (“SPD”) booklet is available, as well as any modifications (*Insert to SPD*) that have occurred since the book’s print date.

Every *For Your Benefit* newsletter, dating back to January 2011, is archived for quick access by participants. Simply click on the month and year of the issue you’d like to access (for example, “January 2023”) and a PDF of that issue will open in another tab in your browser. You may download the file for reading offline. Phone numbers for Plan Providers are listed as well.

SwiftMD Telemedicine Benefits Available to Participants

Did you know that you have access to immediate, quality health care from the comfort of your home?

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

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Your Right to Request an Annual Pension Statement

Active Participants in the Operating Engineers Local No. 77 Pension Plan have the right to request pension benefit statements on an annual basis. **You are entitled to one (1) benefit statement per 12-month period.**

To receive a statement of your estimated pension benefit, call the Fund Office at (877) 850-0977 and request a pension estimate. It will take approximately 4-6 weeks for the Fund Office to prepare and send your statement. The statement is provided free of charge. Written benefit statements are provided only via postal mail to the address on file with the Fund office. The Fund Office does not provide estimates or statements over the phone.

Your statement will tell you whether you are eligible to receive a pension at normal retirement age. If eligible, it will also detail what your estimated monthly benefit would be upon attaining normal retirement age, based on your current accrued service as of the date of your request. If not eligible, the statement will explain how many more years of service you must earn before you are eligible for a benefit, or at what age you will become eligible for a benefit.

The right to receive your statement is covered under the Employee Retirement Income Security Act of 1974 (“ERISA”), Section 105.

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):

- » Go 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



| 877-999-7943

| 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.



Is it Safe to Go Swimming in Contacts?

Maybe the following scenario has happened to you? It's a sweltering summer day and nothing sounds better than a cannonball into the swimming pool. With your eyes on the prize, you leap into the air with perfect form. Even the kids are in awe! Just before touch-down you come to the realization: MY CONTACTS ARE STILL IN!

The FDA recommends against swimming in contacts due to the bacteria and chemicals in the water. This includes pools, lakes, oceans, rivers, and hot tubs. The primary concern is a microorganism called *acanthamoeba*, which if attached to the contact lens can cause a corneal infection called *acanthamoeba keratitis*.

Your best bet is always to avoid swimming in contacts. But if you're asking, 'can I swim with contacts and goggles?' The answer is yes.

If you have recently been swimming in contacts and are experiencing eye-related issues, it's important to see your eye doctor right away.

Haven't had your annual eye exam yet? Find a VSP network eye doctor at vsp.com. Choose one who participates in VSP Premier Edge™ to get the most out of your benefits!

Alcohol/Substance Abuse Coverage in Your Plan

Alcohol and substance abuse can have devastating effects on your mental and physical health, leading to debilitating diseases such as diabetes, heart disease and increased risk for certain cancers. Fortunately, your benefits offer help with the treatment of alcohol and substance abuse. You, or your covered dependents, will receive coverage if the following conditions are met:

1. You receive prior approval from Conifer Health Solutions (see *below*), and
2. You submit a letter of medical necessity from a legally qualified physician requesting treatment by a social worker and/or a drug and alcohol counselor. With Fund approval, the Fund will pay for the treatment of drug and alcohol addiction.

The Fund will pay 100% for inpatient and outpatient care up to the Allowable Charge and subject to the other limits of the Plan. No other benefits are payable under the Plan for drug and alcohol addiction. Inpatient treatment (including at a drug and alcohol treatment facility) must be approved prior to your admission.

If you or an eligible dependent needs help with alcohol or substance abuse, contact Conifer Health Solutions at (844) 739-8913 to pre-authorize treatment. You must submit a request in writing prior to undergoing treatment in order to be covered for this benefit.

Identify Yourself on All Fund Office Correspondence

The Fund Office will occasionally need to send you correspondence related to your claims and benefits. For example, if the Fund Office receives a medical claim that suggests that you have sustained an injury to your knee, the Fund Office may send you an “Accident Inquiry Form” with questions about the injury that you must answer in order for the Fund Office to properly process your claim.

If the Fund Office sends you an Accident Inquiry Form for completion, it will include a windowed envelope and a self-addressed insert with the Fund Office's address. The Form will include identifying information such as your

Plan alternate ID and claim number. Be sure to answer all questions directly **on the Form itself** and return the Form to the Fund Office. If you make changes to the information on the Form or supply information to the Fund Office on a separate piece of paper (aside from the Accident Inquiry Form itself), be sure to identify yourself on the paper in some way! The Fund Office cannot match your answers to the Form's question without some kind of identifier such as your alternate ID (from your medical card), your full name, or the claim number. If you aren't sure where or how to reply to a question sent by the Fund Office, call Participant Services at (800) 638-2972 or (410) 683-6500. We can help you.

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. Both new and current participants may access the form on the Associated Administrators LLC Website (www.associated-admin.com). 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



CONIFER
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Conifer Corner

Trouble Sleeping?
Most people have sleep problems from time to time, but when you have trouble sleeping for weeks or months, it can lead to health problems. Changing one or more of your habits may improve how well you sleep.

Take a rest!
Your Personal Health Nurse (PHN) with Conifer Health Solutions can help you to identify changes you can make to help with improve sleep patterns. To get started, call your PHN, Elizabeth Woodrow, BSN, RN, CCM, at 410-919-0488.

Operating Engineers Local No. 77 Funds

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