

This letter serves as a summary of material modifications of the Plan.  
Please keep this with your Summary Plan Description.

**\* Important Welfare Benefit Changes \***

March 2022

To All Participants of the  
Indiana Laborers Welfare Fund

<b>SUMMARY OF MODIFICATION TO THE PLAN</b>
--

The Trustees of the Indiana Laborers Welfare Fund wish to announce the following changes to the Plan:

**Dental Benefits**

**Preventive Benefits**

Effective January 1, 2022, the Plan will cover up to two routine dental exams, bitewings x-rays and cleanings per calendar year at 100% of the Allowed Amount. Prior to this change, these services were covered at 90% of the Allowed Amount. All other preventive services will continue to be covered at 90% of the Allowed Amount.

**Restorative Benefits**

Effective January 1, 2022, the Plan will cover crowns (porcelain and resin) and bridges at 70% of the Allowed Amount. Prior to this change, crowns and bridges were not a covered benefit.

*All Dental Benefits are limited to \$750 per calendar year.*

**Specialty Drug Cost Savings Program**

Effective January 24, 2022, the Specialty Drug Program is mandatory for certain specialty medications to (1) ensure that these often high cost medications are being prescribed for an appropriate patient and condition at an acceptable dose and quantity and (2) ensure that the high cost medications are provided through the PBM pricing program only.

Providers that require “medical buy and bill” will not be covered under the Plan. Medical buy and bill is when a provider will not participate in this mandatory program, either by not filing for patient assistance or by not accepting SavRx distribution and pricing. Dispensing certain specialty medications through the Plan’s PBM is the only available option. A list of these certain specialty medications can be provided by calling the PBM directly. Any new or continued specialty medications received on or after this date must use this program.

If you are currently receiving a specialty medication included under this program and your provider will not utilize the SavRx Mandatory Cost Savings Program, you will be temporarily grandfathered for coverage, however, the Plan will only continue covering your current specialty medication through November 30, 2022. This temporary grandfathering provision will allow you time to find a new provider that will utilize the SavRx Mandatory Cost Savings Program. SavRx and the Fund’s Utilization Management vendor, Hines & Associates, will assist you in locating a provider that will comply with this program. If you do not find a new provider, your specialty medication that is included in this program will not be covered by the Plan after November 30, 2022. Please note that this temporary grandfathering provision only applies to certain specialty medication that are included under this program you are currently taking as of January 24, 2022. If your current specialty medication changes and the new specialty medication is included under this program, it will not be covered under this temporary grandfathering provision and must utilize the SavRx Mandatory Cost Savings Program.

Prior to this change, the Mandatory Cost Savings Program was a voluntary program.

Please keep this SMM with your Summary Plan Description (SPD)/Plan Rules and Regulations for easy reference to all Plan provisions. If you have any questions regarding this notice or any other benefits covered by the Plan, you can contact the Fund Office at (800) 962-3158.

If you have any questions regarding these changes, please contact the Fund Office at 1-800-962-3158.

Sincerely,

Board of Trustees

## STATEMENT REGARDING STATUS AS A GRANDFATHERED HEALTH PLAN

This group health plan believes this 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 for the provision of 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 Fund Office at 1-800-962-3158. You may also contact the Participant Benefits Security Administration, U.S. Department of Labor at 1-866-444-3272 or [www.dol.gov/ebsa/healthreform](http://www.dol.gov/ebsa/healthreform). This website has a table summarizing which protections do and do not apply to grandfathered health plans.

## IMPORTANT REMINDER ABOUT YOUR TELEHEALTH BENEFIT

The use of the telehealth option is at NO COST to you. You can access this Telehealth Benefit at [www.livehealthonline.com](http://www.livehealthonline.com) or search for "LiveHealth Online" on a smart phone or tablet to download our app for free.

The LiveHealth Online program gives covered non-Medicare persons the capability to speak with a certified physician online (with a webcam) or through a smartphone in order to get quick access to certain prescriptions or other advice regarding a medical situation. This online doctor visit benefit is available 24 hours a day, 7 days a week.

Classes C & D Medicare Retirees and their Eligible Dependents will need to pay the full cost of the visit using a credit card through the website or smartphone application at the time of service. You can then submit a claim to the Fund Office for a full reimbursement of the fee.

Class CP Medicare Retirees and Eligible Dependents should call the Labor First Advocacy team at (812) 238-2551 or (800) 962-3158 using Option 5 for more information on telehealth benefits.

The information on the following page is an illustrative example of the types of providers and typical conditions that are treated as well as the average cost of care for each type of medical provider. As you can see if you do not have a true emergent medical condition you can be treated at a much lower cost than the Emergency Room.

## A GUIDE FOR WHERE TO GO WHEN YOU NEED MEDICAL CARE\*

Telehealth LiveHealth Online	Nurse Practitioner Retail Clinic	Doctor's Office	Urgent Care Center	Emergency Room
Access telehealth services to treat minor medical conditions. Connect with a board-certified doctor via video or phone when, where, and how it works best for you. Go to the following website <a href="http://www.livehealthonline.com">www.livehealthonline.com</a> or call toll-free at (888) 548-3432.	Treats minor medical concerns. Staffed by nurse practitioners and physician assistants. Located in retail stores and pharmacies. Often open nights and weekends.	The place to go for routine or preventive care, to keep track of medications, or for a referral to see a specialist.	For conditions that aren't life threatening. Staffed by nurses and doctors and usually have extended hours.	For immediate treatment of critical injuries or illness. Open 24/7. If a situation seems life-threatening, call 911 or go to the nearest emergency room. "Freestanding" emergency room (ER) locations are becoming more common in many areas. Because these ERs are not inside hospitals, they may look like urgent care centers. When you receive care at an ER, you're billed at a much higher cost than at other health care facilities
<b>Typical Conditions Treated:</b>				
Colds and flu Rashes or skin conditions Sore throats, ear ache, sinus pain Headaches Stomachaches Fever Allergies Acne UTIs and more	Colds and flu Rashes or skin conditions Sore throats, ear ache, sinus pain Minor cuts and burns Pregnancy testing Vaccines	General health issues Preventive care Routine checkups Immunization and screenings	Fever and flu symptoms Minor cuts, sprains, burns, rashes Headaches Lower back pain Joint pain Minor respiratory symptoms UTIs	Sudden numbness, weakness Uncontrolled bleeding Seizure or loss of consciousness Shortness of breath Chest pain Head injury/major trauma Blurry or loss of vision Severe cuts or burns Overdose Broken bones
<b>Your Time:</b>				
No need to leave home or work. Use of mobile device, tablet or computer for virtual visit. Typically answered within minutes.	No appointment needed.	Appointment times required. Shorter wait times than an emergency room.	Walk in scheduling. No appointments taken and wait time will vary.	No appointments taken and wait times can be long and be up to many hours before you are seen.

\* The information provided here is intended to be general information on how you can get the most out of your plan and your health care dollars. It is not intended as medical advice. You should consider all relevant factors and to consult with your treating doctor when selecting a health care professional or facility for care. During a medical emergency, go to the nearest hospital or call 911.

Lower Costs



Higher Costs

Telehealth LiveHealth Online	Nurse Practitioner Retail Clinic	Doctor's Office	Urgent Care Center	Emergency Room
<b>Average Cost per Visit Charged to the Indiana Laborers Welfare Plan:</b>				
\$59 per visit*	\$82 per visit*	\$105 per visit*	\$147 per visit*	\$1,636 per visit*
<b>Your Cost after Health and Welfare Fund Payment (assuming In Network provider and your deductible is met):</b>				
\$0 copayment	\$20.50 co-insurance**	\$26.25 co-insurance**	\$36.75 co-insurance**	\$461.50 co-insurance**

\* Provided by Anthem Blue Cross and Blue Shield.

\*\* This represents the average cost of each visit and will vary by provider.

## Perspectives Member Assistance Program (MAP)

The Trustees have implemented a program to provide professional consultations for a variety of problems that may affect your personal well-being and your job performance. There are many services available to you and they are provided at no cost. This program is called Perspectives and is available to all Participants and members of their household.

### Accessing the Perspectives MAP Program

To access the Perspectives MAP program, Participants and members of their household may call in by phone or through the internet portal 24 hours a day, seven days a week.

- Using your telephone, call the program's toll-free number at 1-800-456-6327
- For web-based services, visit [perspectivesltd.com](http://perspectivesltd.com). The username is: **INLAB** and the password is: **perspectives**

### Perspectives Counseling Services

Perspectives Case Managers, all of whom are licensed masters- or doctorate-level behavioral health clinicians, are available to assist with a variety of concerns, including (but not limited to):

- Alcohol/Addictions/Abuse
- Anger
- Budgeting
- Child Custody
- Depression
- Family Issues
- Grief/Loss
- Mood Swings
- Parenting
- Relationship Issues
- Stress
- Work-Life Balance

At the time of the initial call, the Perspectives Case Manager will gather some preliminary information and assess your situation. After the assessment, the Case Manager will then coordinate an appointment for you to meet with a local counselor, who will work with you to develop a solution-focused plan of action. Short-term counseling, **up to eight sessions** per issue, can be provided by the counselor to assist in resolving the problem. If long term or specialized care is indicated during either the assessment or through the course of face-to-face counseling, a referral will be made to a resource or facility that meets your needs. The Perspectives MAP will coordinate with this Plan and make every effort to provide referrals to treatment providers within the PPO network. If these referrals are necessary, the objective is to recommend the most appropriate level of care for your unique situation.

### Perspectives Legal and Financial Services

Perspectives Legal and Financial Services provides a cost-effective solution to help Participants and members of their household who have legal concerns. The program provides you with phone access to specialists who can help you understand your options and point you in the right direction for the help you need. If you do require an attorney, you will be given a referral to their network that includes a FREE 30 minute consultation and 25% reduction in attorney fees. The following services are included in the Perspectives Legal and Financial Services program:

- College Planning
- Debt Counseling
- Retirement Planning
- Separation/Divorce
- Tax Consultation
- Will Preparation

### Perspectives WorkLife Online

Perspectives WorkLife Online provides Participants and members of their household with online access to services that help with various areas of life and productivity. The following services are included in Perspectives WorkLife Online:

- Career Development/ Training
- Elder Care/ Child Care
- Financial Calculators
- Legal Forms
- Self-Assessments

**Perspectives WorkLife Services** Perspectives WorkLife Services provides Participants and members of their household with access to the relocation center and FREE phone consultations with specialists who assist families with child and eldercare issues, as well as convenience services. Our national network of pre-screened child and eldercare providers offer a time-saving service for you and the people you care about. The following services are included in Perspectives WorkLife Services:

- Adoption
- Day Care
- Nursing Home Care
- Pet Services
- Summer Camps

**Perspectives SPARK Mobile Application**

Available on most smart phone and tablet devices, provides Participants and members of their household with mobile access to secure and confidential counseling, as well as helpful resources on a number of wellbeing and productivity-related topics. The application also contains a summary of Indiana Laborers Welfare Fund's MAP, as well as the ability to connect immediately with one of Perspectives' licensed and experienced behavioral health clinicians.