# IMPORTANT NOTICE REGARDING BENEFIT CHANGES

To All Participants enrolled in the following Teamsters Local 731 Health and Welfare Funds:

- Local No. 731, I.B. of T. Health and Welfare Fund; (Formally known as Private Scavengers and Garage Attendants & Linen and Laundry Health and Welfare Funds)
- Health & Welfare Fund of the Excavating, Grading and Asphalt Craft Local No. 731 (Hereinafter referred to as "Plan or Plans")

#### **■** Prescription Drug Out-of-Pocket Maximum

The co-payment that you pay with regards to out-of-pocket expenses for covered prescription drugs under the Plan apply to the prescription out-of-pocket maximum.

Effective January 1, 2022, the annual out-of-pocket maximum amount will increase as follows:

- Individual from \$5,150.00 to \$5,300.00 per year
- Family from \$9,900.00 to \$10,200.00 per year

The medical plan out-of-pocket maximum remains the same.

The out-of-pocket limits for covered services and prescriptions do not exceed the limit as allowed by the Affordable Care Act (ACA).

<u>Plan Note:</u> The Trustees have adopted innovative programs to minimize your out-of-pocket expenses. For example, prescription drugs requested through the mail order program have a maximum out-of-pocket cost for a non-formulary covered prescription of \$95.00 for a 90-day supply. Kindly contact the Fund office at (630) 887-4150 to learn how you can minimize your out-of-pocket costs.

### ■ Reminder Regarding Wellness Program Enrollment

Enroll in the Wellness Program to receive \$0.00 copays for drugs and services related to:

- Diabetes
- Chronic Obstructive Pulmonary Disease (COPD)
- Coronary Heart Disease (CAD)
- Hypertension

- Hyperlipidemia
- Congestive Heart Failure (CHF)
- Asthma

Enrolling in the Wellness Program means registering with CHC Wellbeing, completing a Health Risk Assessment questionnaire, and providing blood test results and measurements requested by CHC Wellbeing. To enroll, visit <a href="mailto:app.chcw.com">app.chcw.com</a> and use the **2021 Program Code: 4604Tea154**. If you need additional assistance with registration, please call (866) 373-4242.

Please refer to our notice mailed out in September 2021 or visit our website at <a href="https://www.ibt731funds.org">www.ibt731funds.org</a> for more information.

# ■ Questions???

Kindly review our website at <a href="www.ibt731funds.org">www.ibt731funds.org</a>, access the Customer Support section of the Viveka Health mobile application, or contact the Fund Office at (630) 887-4150.

# KINDLY RETAIN THIS NOTICE WITH YOUR SUMMARY PLAN DESCRIPTION BOOKLET FOR FUTURE REFERENCE

Summary of Material Modifications
EIN 36-2392752/PN 501
EIN 36-6073848/PN 501
December 2021

