



North Atlantic States Carpenters
Health Benefits Fund

Long Island Office
270 Motor Pkwy
Hauppauge, NY 11788-5150
Phone: (631) 952-9700
Toll Free: 1(877) 372-3236
Fax: (631) 952-9813
www.carpentersfund.org

February 2023

SUMMARY OF MATERIAL MODIFICATIONS

Dear Plan Participant:

On behalf of the North Atlantic States Carpenters Health Benefits Fund, you are receiving this notice to inform you of changes to your Health Benefits Plan made by the Board of Trustees.

Delta Dental – New dental provider as of 4/1/23

The Board of Trustees selected Delta Dental as the dental insurance provider for all participants within the North Atlantic States Carpenters Health Benefits Fund. This plan has been in place in the Legacy New England area for years and New York participants may elect to enroll as of April 1, 2023. This PPO Plus Premier plan offers a more substantial plan of benefits than previous providers, which may result in less out of pocket expenses necessary for reimbursement through your HRA. Enclosed you will find the Delta Dental summary of benefits and an informational booklet for you to use when considering enrolling in the plan. You can also go to deltadentalma.com for more information and to find a participating dentist under the PPO Premier Plus plan, which encompasses both the PPO Plan and the Premier Plan.

KGA – Employee Assistance Program (EAP)

Effective April 1, 2023, KGA will provide support for everyday challenges to Health Plan participants and adult dependents. Their goal is to help and provide resources for participants to support them at home and at work. It is a benefit available 24/7 to you and your adult household members. There is no cost to you to obtain these services. The EAP provides free and confidential access to a wide variety of employee assistance and work-life programs. Enclosed you'll find a flyer from KGA that details the support and services offered and how to access these benefits.

Durable Medical Equipment under Prescription Coverage

Effective December 1, 2022, OmniPod 5 insulin pumps and supplies will be made available under your Express Scripts Prescription Drug Brand Coverage.

Life Insurance – MetLife

Effective April 1, 2023, the life insurance benefit will be fully insured and administered by MetLife. Previously this benefit was self-insured and administered by the Health Fund. Moving to a fully insured arrangement allows the Fund to offer tax-free benefits, including accidental death and dismemberment and coverage for spouses. General coverage amounts are as follows:

Active Participant - The amount of coverage for the death of an Active participant will be \$25,000. A participant must be actively working, eligible for coverage under the Health Plan, and not collecting a pension under the North Atlantic State Carpenters Pension Fund at the time of their death for the participant's beneficiary to receive payment.

Spouse of Participant - The amount of coverage for the death of a legal spouse of an Active participant will be \$2,000. A participant must be actively working, eligible for coverage under the Health Plan, and not collecting a pension under the North Atlantic State Carpenters Pension Fund at the time of the qualifying spouse's death to receive payment.

Participants under the HRA-based Health Plan are eligible for life insurance benefits once they have accumulated a \$4,000 balance in their HRA (\$2,000 for shop participants) and remain eligible for life insurance benefits as long as they are eligible for medical coverage under the Health Plan, regardless of whether they are enrolled in medical coverage.

Participants under the hours-based Health Plan are eligible for life insurance benefits as long as they are eligible for medical coverage under the Health Plan at time of death.

Participants on COBRA at time of death are not eligible for life insurance benefits.

Accidental Death and Dismemberment (“AD&D”)

- Spouses and dependents are not covered under the AD&D benefit.
- The AD&D benefit is payable in addition to and separate from the life insurance benefit. Benefits are payable if the loss is a direct result of any injury caused by an accident.
- Please refer to your Summary Plan Description and SMMs for detailed information regarding rules and eligibility.

You will also receive a mailing with important information regarding these benefits.

ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE FOR PARTICIPANT ONLY	Plan I
Loss of life or loss of movement of both upper and lower limbs (quadriplegia). Loss of both hands or both feet or sight of both eyes	\$25,000
Loss of one hand, one foot, speech or hearing in both ears, or either one hand or one foot and sight of one eye	\$25,000
Loss of movement of three limbs (Triplegia) or both lower limbs (Paraplegia)	\$18,750
Loss of a hand, a foot, an eye, speech, or hearing. Loss of movement of both upper and lower limbs on one side of the body (hemiplegia)	\$12,500
Loss of thumb and index finger on either hand or loss of movement of one limb (uniplegia)	\$6,250

HRA Reimbursements for Government Plans

Effective January 5, 2023, participants eligible under an HRA-based plan will no longer be eligible for reimbursements from their HRA of premiums paid, for Medicaid, CHIP, or any other state or federal government provided health plan, with the exception of Medicare. Participants must be enrolled in the Carpenters Health Plan or another employer sponsored group health plan that meets the minimum value standards of the Affordable Care Act to be eligible for reimbursement of premiums and out-of-pocket expenses from their HRA.

Additionally, please note that in certain, uncommon situations, participants cannot receive reimbursement of Medicare premiums paid. This rule will only apply to situations where (1) Medicare would be 'secondary' to major medical coverage offered by the HRA-based plan, and (2) the participant is not enrolled in major medical coverage with the HRA-based plan. For example, this rule would apply to the 65-year-old spouse of a member who is still working in covered employment, or to a 65-year-old member who is still working. *Please note: this will not apply to the vast majority of Medicare recipients where the participant has retired from employment.*

Maternity Benefits

Effective April 1, 2023, actively working participants who are currently pregnant or become pregnant may be eligible to receive the following benefits under the Health Plan.

Crediting of hours – Participants will receive credit for up to 40 hours per week for the period of leave or disability due to pregnancy-related medical and mental health leave, regardless of whether the participant is receiving state-sponsored paid family leave benefits. The participant does not need to be eligible under the Health Plan to receive credited hours, but must be working or have worked a minimum of 40 hours for a contributing employer in either the current month or in the previous month.

Extended health coverage – For a pregnant participant who is eligible under the hours-based Health Plan but is at risk of losing coverage due to a reduction of hours due to pregnancy-related medical leave, the Health Plan will credit hours to continue health coverage. In the event that credited hours are not enough to maintain eligibility, a maternity medical extension may be provided for up to two benefit periods per pregnancy.

For a pregnant participant who is eligible under the HRA-based Health Plan, health coverage will be continued.

Monthly wage replacement – For a pregnant participant who is eligible under the hours-based Health Plan or the HRA-based plan with no Wage Replacement Account (WRA) available (Union Locals 291 and 277) the Health Fund will provide a weekly wage replacement by calculating the average of the highest 8 consecutive week wage periods from the previous 52-week period and deducting what a state-sponsored program has paid, if the participant is eligible for state-sponsored paid family leave benefits. The Health Fund will pay up to a maximum of \$1,200.00 weekly, in addition to any state-sponsored benefits, the total of which will not exceed the participant's average weekly wage. For a pregnant HRA participant with a Wage Replacement Account (WRA) (Local 276) the requirement to be on the out of work list with your Local Union to receive Loss of Time Benefit withdrawals from their WRA will be waived.

Examples:

- If a pregnant participant's average weekly wage is \$1,500 and the participant is receiving New York State Paid Family Leave of \$1,100 per week, the participant will receive \$400 from the Health Fund.
- If a participant lives in state that does not offer a state-sponsored paid family leave benefits program and the participant's average weekly wage is \$1,000, the participant will receive \$1,000 from the Health Fund.
- If a participant lives in state that does not offer a state-sponsored paid family leave benefits program and the participant's average weekly wage is \$1,400, the participant will receive \$1,200 from the Health Fund.

Length of benefit – All of the provisions detailed above, with the exception of the maternity health extension, will be available for the following duration:

Pre-birth: Up to 20 weeks per pregnancy

Post-birth: Up to 12 weeks per pregnancy

Total: Up to 32 weeks per pregnancy

To be eligible for the benefit, a participant must provide medical documentation from their doctor substantiating the medical leave due to pregnancy, or if the participant is receiving state-sponsored paid family medical leave benefits due to a pregnancy-related medical leave, the Fund can utilize the determination letter from the state-sponsored plan.

Vision Benefit – EyeMed

As a clarification to the Summary of Material Modifications sent in October 2021, eligible participants and dependents under the age of 26 may utilize the Health Fund's vision benefits every 12 months. The previous SMM communication did not specify coverage for participants and spouses under the age of 26.

Vacation Fund

For outstanding vacation checks in excess of \$100.00 and with an issuance date over 18 months, the Health Fund will utilize a locator service in an effort to locate participants to deliver their outstanding check. If a replacement check is generated from this process, a locator fee of \$50.00 will be withheld from the reissued benefit to assist with the administrative costs incurred in doing so.

This is a Summary of Material Modifications regarding the above-named plan ("Plan"). This Summary of Material Modifications supplements the Summary Plan Description ("SPD") previously provided to you. You should retain this document with your copy of the SPD.

If you have any questions concerning this notice or any other matter, please contact your local Fund Office.

Sincerely,

Board of Trustees