



# FOX VALLEY & VICINITY LABORERS

## HEALTH AND WELFARE AND PENSION FUNDS

DATE: June 23, 2020  
TO: Eligible Participants  
FROM: Board of Trustees  
SUBJECT: Fox Valley Laborers Health and Welfare Fund  
Summary of Material Modifications

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This letter is a Summary of Material Modifications to the Plan Document. Please read this letter carefully and keep it with your copy of the January 2019 Edition of the Summary Plan Description booklet. The letter contains information on temporary benefit coverage changes and new benefits provided by your Health and Welfare Plan.

On March 18, 2020, the President signed the Families First Coronavirus Response Act into law, and on March 27, 2020 the President signed the Coronavirus Aid, Relief, and Economic Security Act into law. Both are designed to help Americans affected by the coronavirus outbreak. These Acts requires health plans to cover certain services in regard to the coronavirus (COVID-19).

**Therefore, in response to the current COVID-19 pandemic, the following temporary benefit coverage changes are effective March 18, 2020:**

- **COVID-19 Testing:**
  - FDA approved COVID-19 diagnostic testing products, including items and services associated with a provider visit (office, urgent care and emergency room) that relates to the evaluation, are covered at 100% without deductible, coinsurance or copays to participants and dependents.
  - There is no prior authorization required.
  - Telehealth services related to the screening for COVID-19 are a covered benefit when offered by providers.

After diagnosis, follow-up care is covered under the normal plan benefit level.

This coverage is in place until the Secretary of Health and Human Services determines that the public health emergency has expired.

- **Telemedicine / Telehealth:** Effective March 18, 2020, the Trustees amended the plan of benefits to include telemedicine / telehealth visits for non-COVID-19 conditions where in-person office visits are not available. The benefit will be covered at normal cost sharing (deductibles and coinsurance applicable). This will allow video and audio visits with your in-network PPO-provider in real time on your smart phone, i-Pad, tablet, or computer.

This benefit will sunset effective December 31, 2020.

- **Prescription Refills:** CVS will approve one-time emergency refills of a 30-day supply of medication during this event through June 14, 2020. Also, CVS Pharmacy will waive charges for home delivery of prescription medication in an effort to encourage individuals at higher risk for COVID-19 complications to stay home as much as possible. Certain restrictions apply. Visit [www.info.caremark.com/covid-19](http://www.info.caremark.com/covid-19) for additional details.

**The Board of Trustees is providing the following new benefit to the Plan:**

- **Contraceptive Coverage:** Effective July 1, 2020, the Plan will cover all forms of contraceptive coverage listed under the preventive care guidelines of the Affordable Care Act (ACA) for participants, spouses, and dependent children. The new coverage applies to oral contraceptives, patches, shots, long acting reversible products such as the IUD, implanted devices, and diaphragms. Coverage will be at the regular participant cost sharing (coinsurance and deductibles when covered under the medical benefit) and retail and mail order (generic or brand) copays will apply when covered under the prescription drug benefit.

**Statement of Grandfathered Plan Status:** The Fox Valley Laborers Health and Welfare Fund believes this plan is a “grandfathered health plan” under the Patient Protection and Affordable Care Act (PPACA). As permitted by PPACA, a grandfathered health plan can preserve certain basic health coverage that was already in effect when the law was enacted. Being a grandfathered health plan means that your plan may not include certain consumer protections of PPACA 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 PPACA, 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 Plan Administrator at (847) 742-0900. You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at (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

**Board of Trustees effective January 1, 2020:**

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Mr. John P. Bryan  
Geneva Construction Company  
1350 Aurora Avenue  
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Mr. Steven E. Lamp  
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Mr. Brian T. Rausch  
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Employee Trustees

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Laborers Local 582  
2400 Big Timber Road, Suite 112A  
Elgin, IL 60124

Mr. Martin D. Dwyer  
Laborers Local 582  
2400 Big Timber Road, Suite 112A  
Elgin, IL 60124

If you have any questions reading this notice, please contact the Fund Office.

*SUMMARY OF MATERIAL MODIFICATIONS – June 2020 – EIN: 36-6219639 – PLAN NO. 501. This announcement contains highlights of certain features of the Fox Valley Laborers Health and Welfare Plan. Full details are contained in the documents that establish the Plan provisions. If there is a discrepancy between the language contained in this announcement and the documents that establish the Plan, the document language will govern and control. The Trustees reserve the right to amend, modify or terminate the Plan at any time. Receipt of this announcement does not guarantee eligibility.*



# FOX VALLEY & VICINITY LABORERS

English	ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-877-696-6775.
Arabic	ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-877-696-6775
Chinese	注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-877-696-6775。
French	ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-877-696-6775.
German	ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-877-696-6775.
Greek	ΠΡΟΣΟΧΗ: Εάν μιλάτε αγγλικά, οι υπηρεσίες γραμματείας, δωρεάν, είναι διαθέσιμες σε εσάς. Καλέστε 1-877-696-6775.
Gujarati	સાવધાન: જો તમે ઇંગલિશ બોલતા હો, ભાષા સહાય સેવાઓ, નિ:શુલ્ક, તમારા માટે ઉપલબ્ધ છે. 1-877-696-6775 પર કોલ કરો
Hindi	सावधानी: यदि आप अंग्रेजी बोलते हैं, तो भाषा सहायता सेवाएं नि:शुल्क, आपके लिए उपलब्ध हैं। 1-877-696-6775 पर कॉल करें।
Italian	ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-877-696-6775.
Korean	주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-877-696-6775 번으로 전화해 주십시오.
Polish	UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-877-696-6775.
Russian	ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-877-696-6775.
Spanish	ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-877-696-6775.
Tagalog	PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-877-696-6775.
Urdu	لئے کے آپ، چارج مفت، خدمات یک مدد یک زبان، تو ییہ بولتے انگلش آپ اگر: انتباه ییہ ابی دست ییہ کال کو 1-877-696-6775.
Vietnamese	CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-877-696-6775.