

HEALTH AND WELFARE AND PENSION FUNDS

DATE: September 15, 2024

TO: Eligible Participants

FROM: Board of Trustees

SUBJECT: Fox Valley Laborers Health and Welfare Fund

Summary of Material Modifications

BOARDS OF TRUSTEES

WELFARE FUND

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John P. Bryan, Chairman

Steven E. Lamp

Brian T. Rausch

Employee Trustees

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Brian M. Urso, Secretary

this letter carefully and keep it with your copy of the January 2019 Edition of the Summary Plan Description booklet. This letter contains information on benefit improvements and clarifications provided by your Health and Welfare Plan.

This letter is a Summary of Material Modifications to the Plan Document. Please read

Hearing Benefit Network

Effective November 1, 2024, the Welfare Fund is partnering with EPIC Hearing Healthcare to enhance the hearing benefit. You can obtain a hearing exam with a consultation and hearing aids at discounted prices if you use an EPIC Hearing Healthcare network provider. Call EPIC Hearing Healthcare at (866) 956-5400 or visit www.epichearing.com to receive a referral and find a provider in your area. See enclosed flyer for more information.

The Plan's coverage of hearing aids remains the same for participants and dependents at \$3,000 benefit per ear every 24 months. In addition, a no-cost hearing exam is available every 24 months through an EPIC Hearing provider.

You have a choice of providers, and this new network will not affect the benefit and relationship you may have established with a provider outside of this network. However, the new network can provide savings for you and the Plan.

Retired Participants and Dependents

You and your eligible dependents may continue participation in the Welfare Fund upon your retirement if you meet the eligibility requirements and you are receiving a pension benefit from the Fox Valley and Vicinity Laborers Pension Fund. The welfare benefits include medical, prescription drugs, dental, vision, member assistance program, and a death benefit.

The dependents who are covered under the Plan and listed on your application for retiree welfare benefits on the pension application at the time you commence your pension benefit are the dependents eligible for coverage until they no longer meet the definition of a dependent, you no longer make the welfare self-payment premium, or you choose to terminate their coverage. No new or additional dependents can be covered following your dependent designation on the approved pension application.





Center of Excellence

"Center of Excellence" is a facility that specializes in a particular medical area or condition (such as transplants or cancer treatment), offering high-quality cost-effective care designated by the Preferred Provider Organization or other vendor selected by the Board of Trustees. These facilities may be called a Center of Excellence, Blue Distinction Center, or some other name. Please note that some procedures are only covered if performed at a facility with this distinction.

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 a participant annual out-of-pocket maximum spend amount. 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 Administrative Manager 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. This website has a table summarizing which protections do and do not apply to grandfathered health plans.

If you have any questions regarding this notice, please contact the Administrative Office.

SUMMARY OF MATERIAL MODIFICATIONS—September 2024 — 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 6775-696-877-1 |
| 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 સહ્યય સેવાઓ, નિ:શુલ્ક, તમારા માટે ઉપલબ્ધ છે. 1-877-696-6775 પર કૉલ કરો |
| Hindi | सावधानीः यदि आप अंग्रेजी बोलते हैं, तो भाषा सहायता सेवाएं निःशुल्क, 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 | ${\rm B} \; {\rm H} \; {\rm H} \; {\rm M} \; {\rm A} \; {\rm H} \; {\rm H} \; {\rm E}$: 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 ری، بسولتے انگلش آپ اگر :انتباہ ںیکر کال کو 6775-696-877-1 . ری، ابیدست |
| 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. |





Hearing Benefit Plan

Hearing Plan Name:

Fox Valley Laborers

Effective Date: 11/1/2024

Hearing exam frequency:

Every 24 months through an

EPIC provider

Hearing aid benefit:

\$3,000 per ear, every 24

months

Be sure to have your plan name handy when you call to request your appointment.

Get started with two easy steps:

Call EPIC at 1-866-956-5400 to request an appointment

Visit **EPICHearing.com** to learn more about your hearing health

EPIC Hearing Healthcare is here to make it easier

1 Contact EPIC to request an initial hearing exam and consultation.

Treat hearing loss and protect your hearing health. Call 1-866-956-5400 to request an appointment.

Your provider will help you find the perfect solution.

2 At your consultation and exam, your provider will assess your hearing and provide a personalized recommendation. Plus, they'll be able to answer any questions you have.







Hearing loss is common. Addressing it is essential.

Across the nation, millions are experiencing hearing loss. But only a small percentage opt for hearing aids as a solution, even though these devices may prevent serious health problems.¹

Your overall wellness is affected by your hearing — now and into the future. Your EPIC benefits are here to help you safeguard your health, simply by catching and addressing hearing loss as soon as possible. Learn more about the connections between hearing and overall wellness at **epichearing.com/read.**



Good-to-know details:

- You have 60 days to try out hearing aids purchased from a provider
- Your plan includes a 3-year extended warranty for repairs and a one-time loss or damage replacement²
- Schedule up to 3 follow-up visits at no cost,3 with additional support available



Ready to go?



Call 1-866-956-5400

8 a.m. to 8 p.m. CT, Monday through Friday Be sure to have your plan name handy.



Visit EPICHearing.com to learn more



Scan QR code using your smartphone's camera

Hearing aids must be ordered through the Ear Professionals International Corporation (EPIC) Hearing Healthcare provider network. Price per hearing aid, based on suggested manufacturer pricing. Hearing aids ordered through providers outside of the EPIC Hearing Healthcare provider network will not be covered. Home delivery may not be available on all plans. EPIC Hearing Healthcare complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex.





¹ Journal of the American Medical Association, Hearing Loss and Dementia Prevalence in Older Adults in the US. 1/10/2023

² One-time professional fee may apply.

³ Hearing aids purchased in the Silver technology level will receive 1 follow-up visit.

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