

**UA LOCAL 350 HEALTH, WELFARE
AND VACATION TRUST FUNDS**

*445 Apple Street * P.O. Box 11337 * Reno, Nevada 89510 * (775) 826-7200*

February 1, 2020

To: All Plan Participants and Dependents, including COBRA beneficiaries, under the UA Local 350 Health, Welfare and Vacations Trust Funds

This Participant Notice will advise you of recent changes that have been made to the Summary Plan Description and Rules and Regulations as restated June 1, 2013 of the UA Local 350 Health, Welfare and Vacations Trust Funds (“Plan”). **This information is VERY IMPORTANT to you and your dependents.** Please take the time to read it carefully.

**PHYSICAL EXAM BENEFIT
EFFECTIVE FEBRUARY 1, 2020**

At this time, the Physical Examination Benefit includes expenses incurred for a routine physical examination performed by a physician, including expenses for radiology and laboratory testing, once per calendar year for the Employee and Spouse only. We are pleased to advise you that beginning for exams on or after February 1, 2020, this will include a coronary calcium scoring CT scan. Charges from a PPO provider will be covered at no charge, and charges from a Non-PPO provider are subject to the scheduled allowance.

**MENTAL HEALTH CLARIFICATIONS
EFFECTIVE FEBRUARY 1, 2020**

Smoking cessation: The plan currently provides coverage for smoking cessation programs and drug therapies to help our Participants stop smoking. Should you need to see your healthcare practitioner during this process, effective for claims incurred on or after February 1, 2020, the office visits will also be covered at normal plan benefits.

Eating disorders: A diagnosis of an eating disorder (such as anorexia or bulimia) is considered as a mental health diagnosis. Available benefits may include (but are not limited to) outpatient services such as psychotherapy, partial day hospitalization, and medically necessary nutritional counseling, as well as inpatient treatment. Benefits for eating disorders are payable the same as any other illness.

Self-inflicted injuries: At this time, the Plan excludes injuries an individual inflicts on himself during an attempted suicide, unless arising as a result of a physical or mental health condition. This notice is to confirm that the Fund will not require history of a physical or mental health condition in its record before approving a claim for payment of medically necessary treatment for injuries incurred during an attempted suicide.

**TELEMEDICINE – RENOWN HEALTH
EFFECTIVE FEBRUARY 1, 2020**

There are times when Renown Health may not have a specialist available for a certain diagnosis in certain rural geographic areas. In that type of situation, your Renown healthcare provider or clinic may perform an

exam, do necessary diagnostic testing, and connect to another provider or specialist via telemedicine rather than having the travel to that provider. This notice is to inform you that effective February 1, 2020, these services will be covered, subject to normal plan benefits and based upon the provider providing the telemedicine services, when initiated through a Renown Telehealth location.

**OCCUPATIONAL THERAPY CLARIFICATION
EFFECTIVE FEBRUARY 1, 2020**

The Plan currently excludes occupational therapy other than rehabilitation treatment following a stroke or injury. However, there are times that a licensed occupational therapist may perform physical therapy services for patients. This is not a change in your benefits, just a clarification that if an occupational therapist performs otherwise covered physical therapy, it will be covered under the Plan’s physical therapy benefit.

NOTICE OF STATUS AS A GRANDFATHERED PLAN

Because this medical Plan is a “grandfathered health plan,” we are required by law to provide this notice to you:

This group health plan believes the UA Local 350 Health, Welfare and Vacations Trust Funds medical 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 Administrative Office at (775) 826-7200. You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at (866) 444-3272 or www.dol.gov/agencies/ebsa. This website has a table summarizing which protections do and do not apply to grandfathered health plans.

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Please keep this important notice with your Rules and Regulations/Summary Plan Description (SPD) for easy reference to all Plan provisions. If you have any questions, you may call the Administrative Office at (775) 826-7200 or Toll Free at (877) 826-5053.

Sincerely,

Board of Trustees

Receipt of this notice does not constitute a determination of your eligibility. If you wish to verify eligibility, or if you have any questions regarding this Plan change, please contact the Fund Office.

In accordance with ERISA reporting requirements, this document serves as your Summary of Material Modifications to the Plan.