

U.A. LOCAL 350 HEALTH, WELFARE & VACATION AND RETIREMENT
TRUST FUND
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April 2, 2021

To: All Plan Participants and Dependents

Re: SUMMARY OF MATERIAL MODIFICATIONS/TEMPORARY PLAN CHANGES

This Notice known as the Summary of Material Modifications (“SMM”) will advise you that during the ongoing public health emergency period certain temporary material modifications have been made to the Summary Plan Description which is also the Plan Document for the U.A. Local 350 Health, Welfare, and Vacation Plan (“Plan”) and U.A. Local 350 Defined Contribution and Variable Defined Benefit Plans (“Retirement Plans”). **This information is VERY IMPORTANT to you and your dependents.** Please take the time to read it carefully and contact the Trust Fund Office to determine your individual situation.

**Temporary Extensions for Certain Special Enrollment, COBRA,
and Claims and Appeals Deadlines**

Temporary Extension of Deadlines. Due to the COVID-19 pandemic and the ongoing public health emergency, the Plan has already been temporarily providing individuals additional time to meet certain deadlines if you need extra time. The Plan will disregard the period from March 1, 2020 until 60 days after the announced end of the public health emergency due to COVID-19 to determine the following COBRA election, COBRA payment, special enrollment, and claims and appeals deadlines:

- The period to request special enrollment (ex. enrolling new dependent upon marriage, birth, adoption or placement for adoption),
- The 60-day election period for COBRA Continuation Coverage,
- The date for making COBRA Continuation Coverage premium payments,
- The date for individuals to notify the Plan of a qualifying event or the determination of disability,
- The date within which individuals may file a benefit claim under the Plan’s claims procedures (this also applies to the Retirement Plans), and
- The date within which claimants may file an appeal of an adverse benefit determination under the Plan’s claims procedures. (This also applies to the Retirement Plans)

Please further note the claims and appeals extended deadlines also apply to the Retirement Plans.

Expiration of Extended Deadlines. The temporary deadline extensions have a limited duration and expire. The duration of these deadline extensions applies on a case-by-case basis. Specifically, an individual’s deadline extension expires **the earlier of:**

- One year from the date the individual was first eligible for relief (i.e., one year from their original deadline); or
- 60 days after the announced end of the public health emergency due to COVID-19.

However, under no circumstances will a deadline extension last longer than (1) ONE year. To ensure you promptly receive the benefits you need, we encourage you to provide the notice, election or payment by the original deadline when practicable.

Example: For example, if an individual's original deadline for electing COBRA Continuation Coverage was April 1, 2020, they will have until April 1, 2021 (which is one year from the original deadline) to make that election. If an individual's original deadline for electing COBRA Continuation Coverage was September 1, 2020, they will have until September 1, 2021 (which is one year from the original deadline) to make that election (or 60 days after the National Emergency Concerning COVID-19 ends, if that date occurs before September 1, 2021).

Please contact the Trust Fund Office if you have questions about how the temporary deadline extensions apply to your individual and/or your families circumstances.

GRANDFATHERED PLAN STATUS REMINDER

As a reminder, the Board of Trustees believes that the U.A. Local 350 Health, Welfare & Vacation Plan is a "grandfathered health plan" under the Affordable Care Act ("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 Act was enacted. Being a grandfathered health plan means that your Plan is not required to include certain consumer protections of the Act that apply to other plans, for example, requiring the provision of preventive health services without any cost sharing. Grandfathered health plans must comply, however, with certain other consumer protections in the Act, such as the elimination of annual and lifetime limits on Plan 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 Office at (775) 826-7200. You may also contact the Employee Benefits Security Administration, U.S. Department of Labor (DOL) at 1-866-444-3272 or www.dol.gov/ebsa/healthreform. This website has a table summarizing which protections do and do not apply to grandfathered health plans.

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

IN ACCORDANCE WITH THE REQUIREMENTS OF THE EMPLOYEE RETIREMENT INCOME SECURITY ACT OF 1974, AS AMENDED ("ERISA"), THIS DOCUMENT SERVES AS A SUMMARY OF MATERIAL MODIFICATIONS ("SMM") TO THE PLAN AND SUPPLEMENTS THE RESTATED SUMMARY PLAN DESCRIPTION/PLAN DOCUMENT THAT HAS BEEN SEPARATELY PROVIDED TO YOU. YOU SHOULD RETAIN THIS DOCUMENT WITH YOUR COPY OF THE RESTATED SUMMARY PLAN DESCRIPTION/PLAN DOCUMENT.

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Sincerely,

Board of Trustees