

U.A. LOCAL 350 HEALTH, WELFARE & VACATION TRUST FUND

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August 2019

TO: PARTICIPANTS & DEPENDENTS

**RE: SUMMARY OF MATERIAL MODIFICATIONS (“SMM”) for
U.A. Local 350 Health, Welfare and Vacation Plan**

The Board of Trustees of the U.A. Local 350 Health, Welfare, and Vacation Plan (“Plan”) is pleased to provide you with the following summary of change to the Plan. 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.

Please contact the Plan Office at 775-826-7200, if you have any questions.

**PLAN RULE CHANGE - Opt out of Coverage for Medicare Eligible
Spouse**

Effective August 1, 2019, the following change has been made to the Plan SPD and Plan Document (new section 2.04(b) to Article II):

A Participant’s spouse may, upon written request of the Plan, voluntarily opt out of coverage with the Plan when the Spouse is about to become eligible for Medicare (age 65 or if the spouse continues to work a later date if so desired) and Medicare will be the primary payor. This opt-out may take place within two (2) months of the person becoming eligible for Medicare, if desired. This provision is intended to be interpreted narrowly to apply only to the situation of a Spouse becoming eligible for Medicare.

GRANDFATHERED HEALTH PLAN REMINDER

As a reminder, the Board of Trustees believes that the U.A. Local 350 Health and Welfare Plan for 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.

Sincerely,

Plan Administrator