

For Your Benefit

Operating Engineers Local No. 77

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Your January 2024 401(k) Enrollment Option

If you have not enrolled in the 401(k) Option and are interested in doing so, **now is the time!** This Option is a provision of the Individual Account Plan (Annuity Fund). It allows your savings to go further because the money is saved on a **pre-tax** basis.

How Does A 401(k) Work?

Saving in a 401(k) Option is easy and is processed via a payroll deduction. Because your 401(k) contribution is deducted before your paycheck is taxed, it's worth more to you in the 401(k) than it would be in your paycheck, where it would be reduced by income taxes.

How Do I Enroll In The 401(k) Option?

Call the Fund Office at (877) 850-0977 and request a Participant New Deferral form. Once you have completed the form, return it to your employer, not the Fund Office.

How Much Can I Put Into The 401(k)?

Participants are able to do the following deferral for their 401(k):

- For participants who are **under age 50**, you are eligible to defer .50 to \$7.00 per hour, in .50 increments, each pay period for deposit to your Deferral Salary Account.
- For participants who are **over age 50**, you are eligible to defer .50 to \$9.00 per hour, in .50 increments, each pay period for deposit to your Deferral Salary Account.

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How Do I Know How Well My Investments Are Doing?

Effective January 4, 2021, [Empower Retirement](#) officially acquired the retirement business of Mass Mutual. Participants who have not been receiving their quarterly statements are encouraged to direct their inquiries/requests directly to Empower Retirement's Participant Services by calling (855)-756-4738 or emailing Participant_services@empower-retirement.com.

Participation In The 401(k)

Participation in this Option is **totally voluntary**. You may stop making contributions or change the amount every six months (January 1st and July 1st) by completing a Participant Deferral Change form.

Available Retirement Benefits Under the Pension Plan

You may qualify for one of several types of benefits under the Pension Plan, depending upon your eligibility factors. Below are the optional forms of retirement benefits:

- **Normal Retirement**

If you are an active participant in the Plan when you reach Normal Retirement Age (age 65), and you meet the minimum service requirements, you may retire from employment under the Fund and become eligible for a Normal Retirement.

- **Early Retirement**

If you are an active participant in the Plan and you are between 55 and 65 years old with at least 5 years of Vesting Service, you may retire from employment under the Fund and become eligible for an Early Retirement pension. An Early Retirement pension is reduced based upon your age at early retirement.

- **Unreduced Early Pension**

If you are age 60 and have at least one hour of service on or after January 1, 1989, and have at least 35 years of Adjusted Vesting Service, you may retire from employment under the Fund and become eligible for an unreduced Early Retirement Pension at any time after age 60.

- **Disability Benefit**

Regardless of your age, if you have at least 15 years of Vesting Service and become Totally and Permanently Disabled by Social Security while an active participant in the Plan, you may retire and become eligible for a disability retirement pension at any age, if you stopped working for your employer under the Fund as a result of the disability.

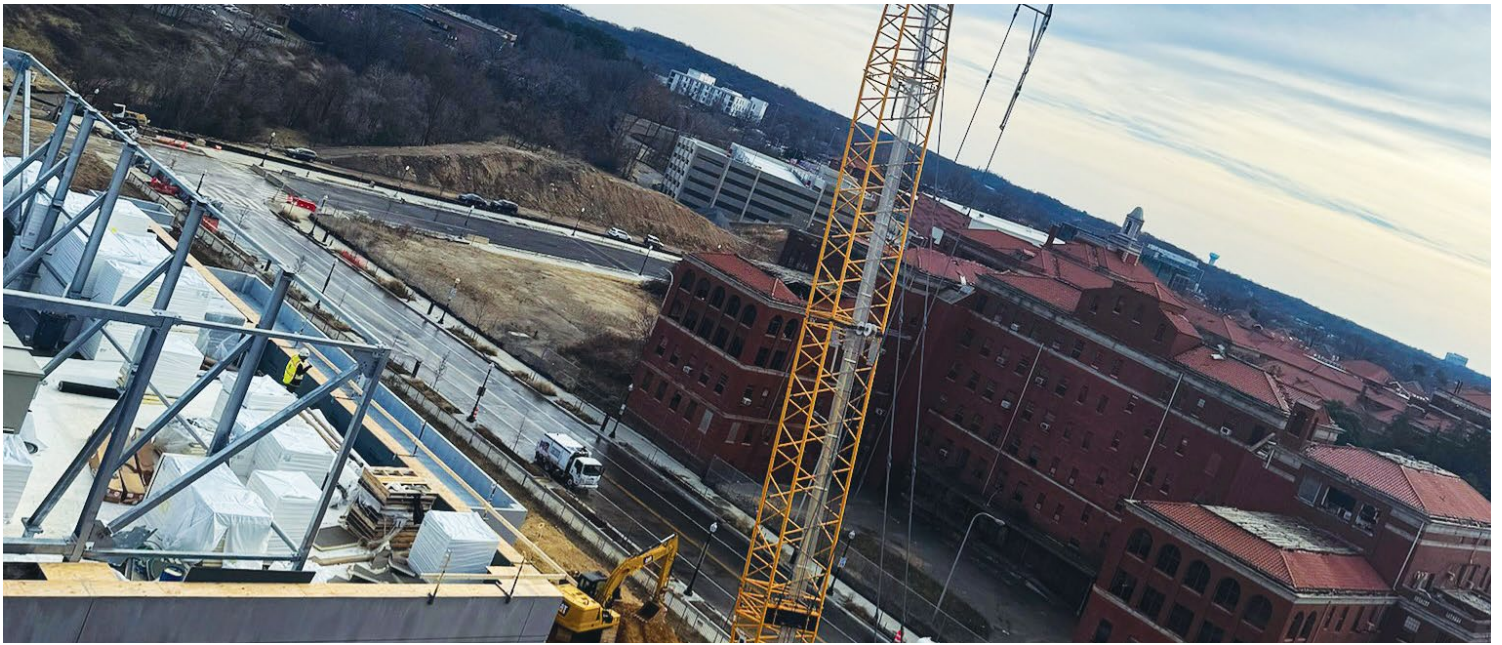
- You can receive the Disability Retirement Pension for your lifetime, but your eligibility for Disability Retirement ends if you cease being totally and permanently disabled before Normal Retirement Age, or if you return to work under the Fund or in the industry, with some limited exceptions. The Trustees may require you to be reexamined by a physician periodically (but not more often than twice a year) to verify your continued disability and eligibility.

- **Occupational Disability Benefit**

If you have at least 15 years of Vesting Service, and after January 1, 1993, while an active participant in the Plan, you become unable to perform bargaining unit employment due to a physical or mental condition that arises as a result of bodily injury or disease, you may become eligible for an Occupational Disability Pension at any age. The determination of whether you are eligible for occupational disability retirement will be made at the discretion of the Trustees, based upon all information available, including a certification from your doctor. The Trustees may require that you submit to a medical examination by a doctor selected by the Fund in order to prove your eligibility or continuing eligibility for this benefit. In the event the Trustees later find that you again become capable of performing bargaining unit work, your Occupational Disability benefits will cease.

- **Deferred Vested Pension**

If you have at least 5 years of Vesting Service and are no longer an active participant (employed under the Fund), you will be eligible to retire at your Normal Retirement Age of 65, under a Deferred Vested Retirement pension.



Reminder: Once Pension Benefits Begin, You May Not Make a Change

There are three forms of payment options for receiving your Pension, depending on your marital status at retirement: the 36-Month Payment Guarantee Benefit if you are single or married, the 50% Joint and Survivor Annuity if you are married, and the 75% Joint and Survivor Annuity if you are married.

If you are married, you are required to elect a Joint and Survivor Annuity option, as required by law, unless both you and your spouse choose another method before your pension begins.

You cannot make a change to your pension option once you begin receiving your pension benefit.

For example, if you are collecting your pension under the 36-Month Payment Guarantee option and you later get married, you are not able to change to a Joint and Survivor option. Likewise, if you elect a Joint and Survivor Annuity and you later get divorced, you cannot change to a 36-Month Payment Guarantee option.

Please be aware that you must be married at the time you apply for retirement and commence your benefit in order to be eligible for a Joint and Survivor Pension Benefit, except where a Joint and Survivor Pension Benefit is required under a court order that has been qualified by the Plan, such as a Qualified Domestic Relations Order.



When an Ambulance Is Needed

If you or an eligible dependent have a medical emergency and need ambulance transportation to a hospital, your Plan of benefits will offer coverage. The coverage is up to \$100 per incident at 100% with no deductible. When it is determined that medically necessary life support services are provided while you are being transported, 50% of the remaining cost of the ambulance service will be paid under Major Medical. You must satisfy the annual deductible before the additional 50% payment will apply.



When Home Health Care Services Are Necessary

Home Health Care services are covered **following a hospital confinement only**. The home health care must have been recommended by your doctor and must have been approved by the Fund Office. You must certify Home Health Care services with Conifer Health Solutions in order to be covered. Services are subject to Fund approval. Services under Home Health Care include:

- Registered nurse services and licensed practical nurse services;
- Physical, respiratory and occupational therapist services;
- Rental of durable medical equipment;
- Hemodialysis services and equipment;
- Medical/surgical supplies;
- Professional ambulance services to or from a hospital, up to the limit set forth in the Schedule of Benefits for Ambulance Services.
- Amputation Therapy
- Colostomy Care

Reconstructive Surgery Covered Following Mastectomy

The Women's Health and Cancer Rights Act ("WHCRA") provides protections for individuals who elect breast reconstruction after a mastectomy. Under federal law related to mastectomy benefits, the Plan is required to provide coverage for the following:

1. Reconstruction of the breast on which a mastectomy is performed;
2. Surgery and reconstruction of the other breast to produce a symmetrical appearance;
3. External breast prostheses; and
4. Physical complications at all stages of mastectomy, including lymphedemas.



Such benefits are subject to the Plan's annual deductibles and co-insurance provisions. Federal law requires that all participants be notified of this coverage annually.

When Rehabilitative Care Is Necessary

Your Plan of benefits allows inpatient rehabilitative care if certified by Conifer Health Solutions, except as otherwise required by law. Outpatient rehabilitation does not require pre-authorization.

If you obtain inpatient preauthorization, the Plan covers acute intensive physical rehabilitation services such as physical, occupational, speech or cognitive therapy when medically necessary for coordinated interdisciplinary rehabilitative services. Services may be provided by a free-standing hospital, a distinct unit of an acute hospital, or skilled nursing facility.

Rehabilitation due to an injury or sickness will be covered only to the extent of restoration to the pre-trauma level. Speech therapy will be covered only to the extent of restoration to the level of the pre-trauma, pre-sickness, or pre-condition speech function. Rehabilitative care is to be terminated when further progress toward the established

rehabilitation goal is unlikely or it is appropriate to assume progress can be achieved in a less intensive setting. Treatment will only be covered as long as sustainable, measurable progress is demonstrated. Treatment to maintain an existing level of function is not covered.

• Short Term Rehabilitative Therapy Coverage

Short-term therapy is defined as inpatient and/or outpatient services which, in the opinion of the Fund, can be expected to result in significant improvement of the participant's condition. If therapy is determined to be short-term, based upon diagnosis, services are covered as long as sustainable, measurable progress is demonstrated. Short-term speech therapy is covered when determined necessary to correct an impairment of organic origin due to an injury or sickness, or following surgery to correct a congenital defect. Therapy performed to correct impairment resulting from a functional nervous disorder is not covered.

Avoid the Blue Light Blues!

With so much screen time in today's world, our eyes are being exposed to an unprecedented amount of blue light emitted from devices like smartphones, tablets, and TVs. The blue light emitted from our favorite screens can be difficult for the human eye to focus on, which causes our eyes to work overtime to process it. This may lead to headaches, tired eyes, and blurry vision.



Below are some recommendations to help to reduce your exposure:

1. Ask The Expert

At your next annual eye exam, talk to your eye doctor about your lifestyle and the best options for combating digital eye strain. Blue light coatings are available for non-prescription eyewear.

2. Unplug Before Bed

Power down your devices before heading to bed. Consider lowering the brightness of your screen or enabling blue light filters such as night mode to help reduce glare.

3. Give Your Eyes A Break

Whenever you find yourself spending time looking at a digital device, be sure to take frequent breaks. Get up, stretch, and give your eyes a rest.

From the classroom to the office, and nearly everywhere in between, digital devices are becoming more and more prevalent in our lives. Are you aware of blue light and its impact on vision? Schedule an annual eye exam for you and your family members.

The above article was provided by Vision Service Plan (VSP).



Who Should Get The Shingles Vaccine?

Your plan of benefits covers the shingles vaccine for participants age 60 and older when administered through your doctor's office or a CVS Caremark pharmacy. Who should get the shingles vaccine? According to the Centers for Disease Control and Prevention ("CDC"), whether you've had shingles or not, adults age 60 and older should get the shingles vaccine (Zostavax). Although the vaccine is also approved for use in people ages 50 to 59 years, the CDC isn't recommending the shingles vaccine until you reach age 60.

According to James M. Steckelberg, M.D. the shingles vaccine protects your body from reactivation of a virus — the chickenpox (varicella-zoster) virus — that most people are exposed to during childhood. When you recover from chickenpox, the virus stays latent in your body. For unknown reasons, the latent virus sometimes becomes reactivated years later, causing shingles. The shingles vaccine helps prevent this reactivation.

The shingles vaccine isn't fail-safe; some people develop shingles despite getting the vaccination. Even when it fails to suppress the virus completely, the shingles vaccine may reduce the severity and duration of shingles. Although there's hope that the vaccine will reduce your risk of

severe, lingering pain after shingles (postherpetic neuralgia), studies haven't yet found strong evidence of that effect.

The shingles vaccine is a live vaccine given as a single injection, usually in the upper arm. The most common side effects of the shingles vaccine are redness, pain, tenderness and swelling at the injection site, and headaches.

The shingles vaccine isn't recommended if you:

- Have ever had a life-threatening allergic reaction to gelatin, the antibiotic neomycin or any other component of the shingles vaccine
- Have a weakened immune system due to HIV/AIDS, lymphoma or leukemia
- Are receiving immune system-suppressing drugs, such as steroids, adalimumab (Humira), infliximab (Remicade), etanercept (Enbrel), radiation or chemotherapy
- Have active, untreated tuberculosis
- Are pregnant or trying to become pregnant

The above article is from MayoClinic.com.

Privacy Statement Available Upon Request

In accordance with federal law, the Fund has established a Notice of Privacy Practices, which are the rules concerning how personally identifiable health information (“PHI”) about you or your dependents may be used and disclosed by the Fund to other parties, and how you or your dependents can limit or grant access to this information.

This statement was given to you when you first became eligible for benefits. If you would like another copy of the

Notice of Privacy Practices, call the Fund Office toll free at (877) 850-0977 or write to:

PrivacyOfficer@associated-admin.com

or

HIPAA Privacy Officer
Operating Engineers Local No. 77
911 Ridgebrook Road
Sparks, MD 21152

Genetic Testing Not Covered

It is important to remember that genetic testing is excluded from coverage under the Plan. This includes any medical procedures, services, treatment, drugs or supplies related to genetic testing, including but not limited to gene therapy. Please refer to the EXCLUSIONS AND LIMITATIONS section of the Plan for items and services that are excluded from coverage under the Plan.

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February is American Heart month!

There are so many things that you can do to live a heart-healthy life. These include exercising at least 2.5 hours a week, consuming a heart healthy diet, reducing stress in your life and sleeping 7-8 hours at night.

Take care of your heart together!

Your Personal Health Nurse (PHN) with Conifer Health Solutions' Personal Health Management program can work with you and your family to find ways to stay heart healthy all year round. To get started, call your PHN, Lindsey Luma , at 410-919-0520.

Operating Engineers Local No. 77 Funds

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