



For Your Benefit

Operating Engineers Local No. 77

July 2022 Vol. 22, No. 3

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Notice of Creditable coverage.
Cut and Keep. See Page 2.

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Retiree Information Forms Have Been Mailed



In an effort to maintain up-to-date information, the Fund Office mails out Retiree Information Forms (“RIFs”) to all pensioners in the Plan.

The RIF contains questions regarding your current residence, your beneficiary, and employment status. You can fill in any updated information that may have changed since last year. Remember, you must still complete, sign, date and return the RIF to the Fund Office even if nothing has changed.

Failure to return a completed RIF may result in a suspension of your benefits.

Your RIF will be returned to you if you do not answer all of the questions. Please take the time to thoroughly complete and return the RIF as soon as possible to ensure no interruptions in your pension benefit.



No one but the Retiree can sign the RIF, unless it is signed by an individual who holds a Power of Attorney for the Retiree and a copy of the document must be on file with the Fund Office. If there is no Power of Attorney on file and the Retiree is unable to sign the form, the Retiree must sign an “X” on the RIF and have it notarized by a Notary Public.

The purpose of this newsletter is to explain your benefits in easy, uncomplicated language. It is not as specific or detailed as the formal Plan documents. Nothing in this newsletter is intended to be specific medical, financial, tax, or personal guidance for you to follow. If for any reason, the information in this newsletter conflicts with the formal Plan documents, the formal Plan documents always govern.

Important Notice about Your Prescription Drug Coverage and Medicare

Important!

The following Notice of Creditable Coverage applies to all Medicare-eligible participants, retirees, and/or spouses.

Please read this notice carefully and keep it where you can find it for future reference. This notice has information about your current prescription drug coverage with the Operating Engineers Local No. 77 Health and Welfare Fund and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

There are two important things you need to know about your current coverage and Medicare's prescription drug coverage:

1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.
2. The Operating Engineers Local No. 77 Health and Welfare Fund has determined that the prescription drug coverage offered by the Fund is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage. Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

When Can You Join A Medicare Drug Plan?

You can join a Medicare drug plan when you first become eligible for Medicare and each year thereafter from October 15th to December 7th.

However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two (2)-month Special Enrollment Period (SEP) to join a Medicare drug plan.



What Happens To Your Current Coverage If You Decide to Join A Medicare Drug Plan?

If you decide to join a Medicare drug plan, your current coverage under the Operating Engineers Local No. 77 Health and Welfare Fund will be affected. **If you join an outside Medicare drug plan, you will cease to be eligible for prescription benefits under the Operating Engineers Local No. 77 Health and Welfare Fund.** See below for more information about what happens to your current coverage if you join a Medicare drug plan.

You cannot have both Medicare prescription drug coverage and prescription drug coverage through the Fund at the same time. If you do decide to join a Medicare drug plan and drop your Operating Engineers Local No. 77 Health and Welfare prescription drug coverage, be aware that you and your dependents may not be able to get the same coverage back.

When Will You Pay A Higher Premium (Penalty) To Join A Medicare Drug Plan?

You should also know that if you drop or lose your current coverage with Operating Engineers Local No. 77 Health and Welfare Fund and don't join a Medicare drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later.

If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up by at least 1% of the Medicare base beneficiary

premium per month for every month that you did not have that coverage. For example, if you go 19 months without creditable coverage, your premium may consistently be at least 19% higher than the Medicare base beneficiary premium. You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

For More Information about This Notice or Your Current Prescription Drug Coverage

Contact the Fund Office for further information at (877) 850-0977. **NOTE:** You'll get this notice each year. You will also get it before the next period you can join a Medicare drug plan, or if this coverage through the Operating Engineers Local No. 77 Health and Welfare Fund changes. You also may request a copy of this notice at any time.

For More Information about Your Options under Medicare Prescription Drug Coverage

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare drug plans.

For more information about Medicare prescription drug coverage:

Visit www.medicare.gov

- Call your State Health Insurance Assistance Program

(see the inside back cover of your copy of the "Medicare & You" handbook for their telephone number) for personalized help

- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at www.socialsecurity.gov, or call them at 1-800-772-1213 (TTY 1-800-325-0778).

Remember: Keep this Creditable Coverage notice. If you decide to join one of the Medicare drug plans, you may be required to provide a copy of this notice when you join to show whether or not you have maintained creditable coverage and, therefore, whether or not you are required to pay a higher premium (a penalty).

Date:	July 2022
Name of Entity /Sender:	Fund Office Operating Engineers Local No. 77 Health and Welfare Fund 911 Ridgebrook Road Sparks, Maryland 21152-9451
Phone Number:	(877) 850-0977



Your Right to Request an Annual Pension Statement

Active Participants in the Operating Engineers Local No. 77 Pension Plan have the right to request pension benefit statements on an annual basis. **You are entitled to one (1) benefit statement per 12-month period.**

To receive a statement of your estimated pension benefit, call the Fund Office at (877) 850-0977 and request a pension estimate. It will take approximately 4-6 weeks for the Fund Office to prepare and send your statement. The statement is provided free of charge. Written benefit statements are provided only via postal mail to the address on file with the Fund office. The Fund Office does not provide estimates or statements over the phone.

Your statement will tell you whether you are eligible to receive a pension at normal retirement age. If eligible, it will also detail what your estimated monthly benefit would be upon attaining normal retirement age, based on your current accrued service as of the date of your request. If not eligible, the statement will explain how many more years of service you must earn before you are eligible for a benefit, or at what age you will become eligible for a benefit.

The right to receive your statement is covered under the Employee Retirement Income Security Act of 1974 ("ERISA"), Section 105.

Self-Payments Allow Continuation of Health & Welfare Benefits

The Self-Payment Option is a voluntary benefit offered by the Plan as an alternative to COBRA. If you meet the criteria for Self-Payments described in your Summary Plan Description (SPD) booklet, you may maintain your eligibility for Health and Welfare benefits by making payments yourself. Self-Payments allow you to protect your benefits if you lose eligibility due to layoff or because of reduction in hours.

Pointers

- You are eligible to maintain your coverage by making self-payments for a maximum of 18 months.
- You may self-pay when your eligibility ends if you are disabled or if you are unemployed. Unless you are disabled and unable to work, you must remain available for immediate employment in the jurisdiction of Local No. 77 (“covered employment”) during the entire time you are making Self-Payments.
- If you are not disabled and not available for work in covered employment or if you decline covered employment, you are no longer eligible to make self-payments.
- When you leave work and have a period of self-payments, you will be credited with the number of employer-paid hours you have in your bank **on the date you stopped working**. The months for which you make self-payments do not add to your “bank” of hours. Instead, the hours in your “bank” remain frozen until such time as you are no longer making self-payments (when you return to work, for example).
- During the period of self-payment, you will be credited with one month’s eligibility for Health and Welfare benefits for each month that you make a self-payment.
- When you do return to work, you will be credited for the hours of service for the **12 months immediately preceding the month in which you began making self-payments**, whatever that amount may be. You must continue to self-pay when you return to work in order to maintain your Health and Welfare benefits until you have accrued enough employer-paid hours to equal **400 hours in the last three-month period**.

If you become eligible for the Self-Payment Option, the Fund Office will send you a letter describing the program in detail and giving you the cost.



Remember the Deadline When Filing an Appeal

If you have a claim denied, the Fund office will send you a written denial that includes the reason for the denial and a reference to the Plan provision or rule on which it is based. If you have a claim that has been denied, in part or in full, you have the right to appeal the decision to the Board of Trustees. But be sure to file your appeal on time.

When are the deadlines?

You have **180 days** to file an appeal for **Weekly Accident & Sickness Claims** and **Medical Claims**.

You have **60 days** to file appeals for non-medical/non-disability claims such as **Pension Claims and Death Benefit Claims**.

How do I file an appeal?

To file an appeal, you must make a written request to the Board of Trustees at the address below:

Operating Engineers Local No. 77
911 Ridgebrook Road
Sparks, MD 21152-9451

Include the participant’s name, Social Security Number, the patient’s name (if different from the participant’s), the dates of service and the reasons why you think your claim should be reconsidered.

Remember, your letter of appeal for either Medical Claims or Weekly Accident & Sickness Claims must be received by the Fund office **within 180 days after your claim has been denied** for the filing deadline to be met. Otherwise, the appeal will be considered late.



World-Class Training Available to Active Participants

Looking to improve or advance your skills? Active IUOE participants may receive free training, paid for by the National Training Fund (“NTF”) at the International Training & Education Center in Crosby, Texas, located just outside Houston.

Comprehensive training at this world-class facility includes virtually anything heavy equipment operators and stationary engineers need to become a skilled operator.

Attendees have access to the newest cranes and heavy equipment, 17 classrooms and labs, advanced simulators, and a first-class mechanics shop. From apprentices to journeymen, the International Training Center is the best place to improve skills and receive hand-on instruction utilizing the most technologically advanced equipment available.

The IUOE established the NTF in 2006 to support a multitude of activities beneficial to its members. It serves as an umbrella organization for all of IUOE’s training programs, coordinating policies, strategies and activities, relying on extensive support and input from local unions.

The IUOE has training agreements with the U.S. Department of Labor and Agriculture to administer training programs at various Job Corps training centers across the United States.

Additionally, there is a broad range of safety and health training offered. Shuttle service is available to Houston area airports.



Register online at
www.iuoe-itrs.org

3 Ways to Prevent Cataracts at Any Age

Did you know that cataracts are the most common cause of vision loss for individuals over the age of 40? No matter what your age, there are steps you can take to help prevent cataracts or slow their development.

1. Eat Right

Studies suggest that those with diabetes are at greater risk for developing cataracts. Maintaining healthy blood sugar is so important for both your overall health, and the health of your vision.

Foods high in antioxidants, such as beta-carotene, selenium, and vitamins C and E may also help ward off cataract development.

2. Shade Your Eyes from the Sun

We've said it before, and we'll say it again—protect yourself from UV rays and your eyes will thank you!

3. Visit Your Eye Doctor

Routine visits allow your eye care professional to look for signs of cataracts, glaucoma, macular degeneration, and other vision disorders. Early detection just may save your sight!

The above article was provided by Vision Service Plan.



Lyme Disease Can Harm Your Oral Health



Lyme disease can cause serious problems for both your oral and overall health. When you find yourself working outside your local area, contact the Fund Office (877-850-0977) and request a form to make sure your benefits are properly transferred.

What Are the Symptoms?

Oral symptoms may include pain in your temporomandibular joints (TMJ), the joints connecting your jawbone to your skull, toothaches not related to decay or infection, and facial weakness or paralysis typically on one side of the face.

The majority of people infected with Lyme disease will develop a rash at the site of the tick bite. Arthritis, mental fogginess and numbness in the limbs can become more serious the longer the disease goes untreated.

How Can Tick Bites Be Prevented?

When venturing into grassy, brushy, or wooded areas, make sure to spray yourself with insect repellent. Wear long sleeved shirts and pants whenever possible; check yourself and your pets when returning from your walk, and change clothes immediately.

Should you find a tick bite or are showing symptoms, see a physician immediately. When treated early with antibiotics, the serious issues related to Lyme Disease can be avoided.

The above article was provided by Delta Dental.



Got heartburn?

Eating too much or bending forward after eating sometimes causes heartburn and a sour taste in the mouth. When this happens often, you may have gastroesophageal reflux disease (GERD). You can talk to your provider about diet changes and medication that can help control the symptoms.

Good health can be easy to swallow!

Conifer Health Solutions and its Personal Health Nurses (PHN) can work with you and your family to simplify your health needs. To get started, call your PHN, Lindsey Luma, at 410-919-0520.

Choose Generic Drugs and Save!

Generic medications cost less, but they provide the same therapeutic benefits as their brand-name counterparts because the active ingredients are identical.

Why Do Generics Cost Less?

Makers of brand-name drugs spend millions of dollars on research, development, and clinical studies in order to create new medications and bring them to the market. The prices consumers pay when purchasing them will reflect the high investment costs. Generic drug makers replicate existing formulas so the cost of bringing them to the market is less and the savings are passed on to you.

Are Generics Safe and Effective?

The FDA requires a generic drug to be the same as its brand-name counterpart in:

- Effectiveness
- Safety
- Active ingredients
- Performance (how it works in the body)
- Strength (e.g., 10mg, 20 mg)



Operating Engineers Local No. 77 Funds

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