OPERATING ENGINEERS TRUST FUND
OF WASHINGTON, D.C.
HEALTH AND WELFARE PROGRAM
LOCAL NO. 77
BOARD OF TRUSTEES MEETING

NOVEMBER 14, 2023

Operating Engineers Local No. 77
Health & Welfare and Pension Funds

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HEALTH & WELFARE

AGENDA

November 14, 2023

I. CALL TO ORDER

II. MINUTES

- Regular meeting – August 8, 2023

III. FINANCIAL REPORT

- 2022 – Year End Audit
- Investment Performance Services

IV. CONSULTANT'S REPORT

- Labor First
- CVS/Caremark
- Delta Dental
- Bolton – 3rd Quarter 2023

V. ATTORNEY'S REPORT

VI. ADMINISTRATIVE MANAGER'S REPORT

- Gain/Loss Reports – September 2023

VII. PARTICIPANT APPEALS

VIII. OTHER FUND BUSINESS

IX. NEXT MEETING DATE AND LOCATION

- February 13, 2024

X. ADJOURNMENT

MINUTES

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MINUTES OF THE MEETING OF THE
BOARD OF TRUSTEES OF THE
OPERATING ENGINEERS LOCAL 77 HEALTH & WELFARE TRUST FUND
TUESDAY, AUGUST 8, 2023

The following Trustees were present:

UNION TRUSTEES	**EMPLOYER TRUSTEES**
J. VanDyke	C. Burke
R. Dennison	B. Mazzella
S. Faulkner	
T. Johnson	

ALSO PRESENT:

T. Bell – LaborFirst
W. Chambers – Associated Administrators, LLC
R. Devlin – Bolton (Part of the Meeting)
J. Dulczak – LaborFirst
C. Fuller – McChesney & Dale, P.C.
B. Gilroy – Training Coordinator
J. Linville – CVS Health
D. Melloh – Investment Performance Services, LLC (Part of the Meeting)
T. Mullarkey – LaborFirst
A. Sims – Associated Administrators, LLC

I. CALL TO ORDER

The Chairman called the meeting to order.

II. MINUTES

The Trustees, each having previously received a copy of the minutes of the regular meeting held on May 9, 2023, waived the reading, and,

Upon a motion made and seconded, the Trustees voted unanimous approval of the following resolution:

RESOLVED to approve the minutes of the regular meeting held on May 9, 2023 as written.

III. <u>FINANCIAL REPORTS</u>

<u>Investment Performance Services</u>

The Trustees welcomed Ms. Jennifer Mink from Investment Performance Services to the meeting. Ms. Mink reviewed the investment performance analysis for the second quarter 2023. The report indicated assets of $349,977,953 as of June 30, 2023 compared to $33,628,622 as of December 31, 2023, producing a gain of $697,439 for the quarter. The report further indicated the total return for the quarter ending June 30, 2023 was positive 1.1%. For domestic large cap equity the returns were 9.8%; for investment grade fixed income the returns were negative 0.6%; for short duration high yield fixed income the returns were 1.4%; and for real estate the returns were negative 2.2% for the quarter ending June 30, 2023.

<u>Asset Allocation</u>

Ms. Mink recommended rebalancing cash to the investment grade fixed income and short duration high yield fixed income allocations if not needed for benefit/expenses.

The Trustees thanked Ms. Mink for her report and she was excused from the meeting.

IV. <u>CONSULTANT'S REPORT</u>

<u>Bolton – Consultant's Report</u>

The Trustees welcomed Mr. Ryan Devlin of Bolton Partners to the meeting. Mr. Devlin distributed the Consultant's Report dated August 8, 2023. His report provided a financial update through June 30, 2023 and showed total revenue was 0.2% below projections; total contributions were 3.3% below projections; investment results were 41.8%, and total disbursements; benefit expense was 12.7% below projection, and administrative expenses were 11.3% above what Bolton had previously projected. Mr. Devlin reported that net assets in months (estimated through June 2023 were 20.4 (approximately $29.2 million). He provided an overview of the projected versus actual results for the six months ended June 30, 2023.

Labor First

Mr. Devlin reported on the Fund's recent move from a Retiree Drug Subsidy (RDS) to an Employer Group Waiver Plan (EGWP) through Aetna Medicare Advantage Part D (MAPD) effective January 1, 2023. He noted that the Trustees requested that Bolton solicit a proposal from RetireeFirst (formerly LaborFirst) to provide specialized services to the retirees enrolled in the Medicare Advantage market.

Mr. John Dulczak, Ms. Theresa Bell and Ms. Tricia Mullarkey from Labor First, a division of RetireeFirst were welcomed to the meeting. Mr. Dulczak distributed a copy of their report titled "LaborFirst Overview" and provided a summary of the firm's background, how LaborFirst works, and their partnerships with major national Medicare insurance carriers. Ms. Bell reviewed LaborFirst's customer service models and advocate profile view which is designed to proactively help improve the retiree healthcare experience and to serve as an extension of the Plan sponsors team. She said that Labor First would manage all CMS filings; late enrollment penalty, opt-outs and low income subsidies attestation; manage all eligibility maintenance in CMS's approved format, Medicare age-ins, dis-enrollments and retirees returning to work, and provide onsite client/retiree meetings.

The Trustees thanked Mr. Dulczak, Ms. Bell and Ms. Mullarky for their report and they were excused from the meeting.

Upon a motion made and seconded, the Trustees voted unanimous approval of the following resolution:

> **RESOLVED to engage LaborFirst, effective January 1, 2024 and terminate KTP effective December 31, 2023.**

Mr. Burke reported that the Fund would send a letter of authorization appointing LaborFirst to work with Aetna directly as it related to the Fund's Medicare Advantage renewal for 1/1/2024 and to provide administrative and advocacy services to the Fund to Aetna as soon as practicable.

<u>High-Cost Gene Therapy</u>

Mr. Devlin reported that gene-therapy is a therapeutic approach that is currently being investigated for the treatment of multiple diseases through early research or clinical trials. He noted that Gene-Therapy comes with significant cost and many risks; however, the US Food and Administration ("FDA") has already approved multiple gene-therapies. Mr. Devlin provided a summary of three approaches the Trustees could consider: (1) Exclusion - exclude gene therapy treatments from Fund coverage. This would protect the Fund from the significant negative financial impact and would not be a covered service for the member; (2) Bundled-pricing approach – continue to cover gene therapy treatments through a vendor who supports "bundled' pricing for these treatments. This approach would allow the member to get treatment and the Fund can achieve significant savings but the "bundled" price would still be a significant cost, and (3) Do nothing – pay the full discounted costs of the treatments if it occurs.

Upon a motion made and seconded, the Trustees voted unanimous approval of the following resolution:

> **RESOLVED to exclude gene-therapy treatments as a covered service and handle upon appeal. Draft an amendment to the Plan document and update the Summary Plan Description accordingly with this exclusion.**

<u>CVS Formulary Update</u>

Mr. Devlin stated that all Pharmacy Benefit Managers ("PBMs") are starting to roll out their options related to the new proposed government mandates involving limiting the price of insulin. He provided an overview of the two options that CVA is providing all clients for 2024: (1) the Fund pays lower up-front costs now that insulin will cost less but will receive less in rebates. This option means no disruption for membership as they can continue to take their current medications and CVS estimates this option will save the fund $707 based on 56-impacted brand scripts; (2) the Fund switches to a new choice formulary that allows the fund to continue to pay the higher upfront costs and therefore receive the higher rebate payments. This option would mean that members would be disrupted, as they would need to take new drugs that still achieve the higher rebate amounts. Mr. Devlin noted that CVS is implementing Option 1 for all Aetna's fully insured business that does provide a response by the August 15, 2023 deadline.

Upon a motion made and seconded, the Trustees voted unanimous approval of the following resolution:

RESOLVED to approve Option 1.

<u>PBM Market Update</u>

Mr. Devlin reported that the IUOE PBM Coalition contract with Optum Rx is expiring at the end of 2024 and IUOE is conducting a PBM Request for Proposal ("RFP") and expect to have their new contract for 2025 through 2027 in place by March 2024. He stated that the IUOE is willing to provide a quote to the Fund based on the new pricing once available. Mr. Devlin reviewed the current HCCCC/CVS pricing versus the IUOE/Optum Rx pricing.

Upon a motion made and seconded, the Trustees voted unanimous approval of the following resolution:

RESOLVED to solicit a quote based on the new pricing available from the IUOE.

V. <u>ATTORNEY'S REPORT</u>

Mr. Fuller reported that he continues to monitor the status of the transitional reinsurance fee litigation.

Mr. Fuller distributed the final draft of the Summary Plan Description dated August 2023 and reviewed additional language changes with the Trustees. After review with the Trustees, Mr. Fuller stated that these changes discussed by the Trustees would be incorporated and presented for final approval before printing.

VI. <u>ADMINISTRATIVE MANAGER'S REPORT</u>

<u>Gain/Loss Reports</u>

Ms. Chambers presented the Administrative Manager's Report for the period January 1, 2023 through June 30, 2023. Such report indicated total contributions of $7,821,461, self-payments of $9,450, COBRA income of $6,847, net negative reciprocity income of $329,778, retiree self-pay income of $394,189, prescription subsidy of $0, interest on delinquent contributions of $11,463, liquidated damages of $7,115, miscellaneous income of $2,918, interest income of $9,442, interest on investments in the American Core Realty account of $50,061, interest on investments in the Wedge fixed Capital Management account of $169,762, interest on investments in the Wedge LG Capital Management account of $1,478, dividend on investments in the Wedge LG Capital Management account of $21,005, interest on investments in the Chartwell Investment account of $265,930, interest on investments in the Vanguard account of $0, a loss in investments in the American Realty account of $338,832, a gain on investments in the Boyd Watterson account of $2,741, a gain in investments in the Wedge LG Capital Management account of $137,538, a gain on investments in the Vanguard account of $595,181, a gain on the investment in the Chartwell account of $27,671, a gain in the Wedge fixed income account of $54,822. There were expenses totaling $8,195,576 for the period, producing a net gain for the period of $1,134,075.

Upon a motion made and seconded, the Trustees voted unanimous approval of the following resolution:

> **RESOLVED to accept the Administrative Manager's Report for the period January 1, 2023 through June 30, 2023 as presented.**

VII. <u>PARTICIPANT/PROVIDER APPEALS</u>

<u>Participant Appeal #M23/143-4963</u>

Mr. Fuller presented an appeal from the billing agent for the provider. Charles Regional Medical Center is appealing for payment of an emergency room claim that was denied.

Fund records indicate that Charles Regional Medical Center submitted a claim for emergency room facility charges with a diagnosis of "Cellulitis and abscess of mouth." Emergency Medicine Associates also submitted a claim for emergency room physician's charges with the same diagnosis. The physician's charges were paid, up to the limits of the Plan. The facility charges were denied because the visit was not considered emergency treatment within the extent of the Plan based on the billing diagnosis.

Medical records, received with the appeal, indicate the participant was seen in the emergency room on Wednesday, September 21, 2022 at 9:23 AM with a chief complaint of a sore throat that started one week before. It was noted that his sore throat went away and then felt worse on Saturday, leading to a foreign body sensation in his throat and left ear pain. The participant was evaluated, given a prescription for an antibiotic, and subsequently discharged at 10: 48 AM. After review, the claim remained denied because the visit was not considered emergency treatment within the extent of the Plan.

Upon a motion made and seconded, the Trustees voted unanimous approval of the following resolution:

> **RESOLVED to deny the appeal for payment of an emergency room claim that was denied.**

Participant Appeal # M23/145-9950

Mr. Fuller presented an appeal from a provider, Washington DC VA Medical Center, for payment of an emergency room claim that was partially denied.

Fund records indicate that Washington DC VA Medical Center submitted claims for emergency room charges with a primary diagnosis of "Unilateral primary osteoarthritis, right hip." The emergency room physician, radiology, and ancillary charges were processed and the allowed amounts were applied to the participant's annual deductible, which was satisfied with the processing of these claims. The balance of the allowed amount(s) were paid, up to the limits of the Plan. The emergency room facility charges were denied because the visit was not considered emergency treatment within the extent of the Plan based on the billing diagnosis.

Medical records, received with the appeal, indicate the participant was seen in the emergency room on Tuesday, February 7, 2023 at 5:52 PM with a chief complaint of pain in his right side, buttocks, and leg for the past two weeks, and that ibuprofen was not helpful. It was noted that the pain started years ago. The participant was evaluated and an x-ray was performed which showed arthritis but no fractures or dislocations. The participant was given a prescription for a muscle relaxant, instructions on managing pain, stiffness, and swelling at home, and subsequently discharged at 8:27 PM. After review, the facility charges remained denied because the visit was not considered emergency treatment within the extent of the Plan.

Upon a motion made and seconded, the Trustees voted unanimous approval of the following resolution:

> **RESOLVED to deny the appeal for payment of an emergency room claim that was denied.**

Participant Appeal # M23/155-2446

Mr. Fuller presented an appeal from a participant for payment of a laboratory claim that was partially denied. The participant states in summary that he has a very significant family history of the Factor V blood disorder (a gene mutation that results in thrombophilia, which is an increased tendency to form abnormal blood clots) affecting his mom, brother, sister, and aunt. The participant further states that his brother had a very severe blood clot when he was in his 20's which resulted in permanent damage. Lastly, the participant states that he would rather know now if he is at risk of developing a clot as opposed to after it happening. Included with the appeal was a letter from Caitlyn Morrell, FNP-C. Ms. Morrell states in summary that this testing was medically necessary in her opinion and that they needed to know if he has the gene mutation as to best determine appropriate medical care.

Fund records indicate that Hagerstown Medical Laboratory submitted a claim including charges for genetic testing (CPT 81241), related to the Factor V blood disorder, on April 26, 2023. The charges for the genetic testing were denied because genetic testing is not a covered benefit of the Plan.

Upon a motion made and seconded, the Trustees voted unanimous approval of the following resolution:

RESOLVED to deny the appeal for payment of a genetic testing claim that was denied.

Participant Appeal # M23/156-7164

Mr. Fuller presented an appeal from a provider, Warren Memorial Hospital, for payment of an emergency room claim for the participant's spouse that was denied. The provider states in summary that they believe the services were medically necessary.

Fund records indicate that Warren Memorial Hospital submitted claims for emergency room physician and facility charges with a primary diagnosis of "Dizziness and giddiness." The physician's charges were allowed and applied to the participant's spouse's annual deductible. The facility charges were denied because the visit was not considered emergency treatment within the extent of the Plan based on the billing diagnosis. Note: Medical necessity was not a factor in the claim denial.

Medical records, received with the appeal, indicate the participant's spouse was seen in the emergency room on Monday, February 20, 2023 at 5:03 PM with a chief complaint of dizziness. The participant's spouse was evaluated, and blood tests and an ECG were performed. The participant's spouse was subsequently discharged at 9:44 PM. After review, the claim remained denied because the visit was not considered emergency treatment within the extent of the Plan.

Upon a motion made and seconded, the Trustees voted unanimous approval of the following resolution:

RESOLVED to grant the appeal for payment of an emergency room claim that was denied.

Participant Appeal # M23/158-1809

Mr. Fuller presented an appeal from a provider, Children's National Medical Center, for payment of an emergency room claim for the participant's one year-old daughter that was denied.

Fund records indicate that Children's National Medical Center submitted claims for emergency room physician and facility charges with the diagnosis "Acute nasopharyngitis." The physician's charges were allowed and paid, up to the limits of the Plan. The facility charges were denied because the visit was not considered emergency treatment within the extent of the Plan based on the billing diagnosis.

Medical records, received with the appeal, indicate the participant's daughter was seen in the emergency room on Sunday, September 5, 2021 at 5:33 PM with a chief complaint of a fever for four days, and a cough for three days. The participant's daughter was evaluated, a COVID test was performed, and she was subsequently discharged at 7:01 PM with a prescription for ibuprofen. After review, the claim remained denied because the visit was not considered emergency treatment within the extent of the Plan.

Upon a motion made and seconded, the Trustees voted unanimous approval of the following resolution:

> **RESOLVED to grant the appeal for payment of an emergency room claim that was denied.**

Participant Appeal # M23/161-8250

Mr. Fuller presented an appeal from a billing agent for the provider. Charles Regional Medical Center is appealing for payment of an emergency room claim that was partially denied. The billing agent states that they disagree with the denial.

Fund records indicate that Charles Regional Medical Center submitted a claim for emergency room facility and ancillary charges with a primary diagnosis of "Epigastric pain." Emergency Medicine Associates also submitted a claim for emergency room physician's charges with the same diagnosis. The ancillary and physician's charges were paid, up to the limits of the Plan. The facility charges were denied because the visit was not considered emergency treatment within the extent of the Plan based on the billing diagnosis.

Medical records, received with the appeal, indicate the participant was seen in the emergency room on Monday, March 27, 2023 at 5:06 PM with a chief complaint of intermittent episodes of epigastric abdominal pain as well as lower abdominal pain "unrelated to his epigastric pain" that radiated to the lower back. The participant was evaluated, lab tests were performed, and he was subsequently discharged at 7:42 PM with prescriptions for Pepcid and Protonix. After review, the claim remained denied because the visit was not considered emergency treatment within the extent of the Plan.

Upon a motion made and seconded, the Trustees voted unanimous approval of the following resolution:

> **RESOLVED to grant the appeal for payment of an emergency room claim that was denied.**

Participant Appeal # RX23/157-5939

Mr. Fuller presented an appeal from a provider, Dr. Sharon Peake, who is appealing on behalf of the participant for coverage of Wegovy, which is an injectable prescription drug used for weight loss. It was noted that a Prior Authorization for Wegovy was denied by CVS/Caremark because anti-obesity medications are not covered under the Plan.

Dr. Peake states in the appeal that the participant has a BMI (Body Mass Index) over 30 and "needs assistance in his weight loss journey."

Upon a motion made and seconded, the Trustees voted unanimous approval of the following resolution:

> **RESOLVED to table the appeal for additional medical information.**

Participant Appeal RX23/162-4020

Mr. Fuller presented an appeal from a provider, Dr. Ahmed Kafaji, who is appealing on behalf of the participant for coverage of Ajovy, which is an injectable prescription drug that is used to prevent migraine headaches.

Ajovy requires a Prior Authorization under the Plan. It was noted that a Prior Authorization for Ajovy was denied by CVS/Caremark on July 5, 2023 because it did not meet its criteria for coverage. CVS/Caremark stated, **"Your plan covers this drug when you have tried any of the following for 8 weeks and it did not work for you, or you cannot take them: Antiepileptic drugs (AED) (e.g., divalproex sodium, topiramate, valproate sodium), Beta-adrenergic blocking agents (e.g., metoprolol, propranolol, timolol, atenolol, nadolol), Antidepressants (e.g., amitriptyline, venlafaxine)."**

Documentation received with the appeal indicates that the participant cannot take antiepileptic drugs because of potential side effects such as dizziness and insomnia; the participant cannot take beta-adrenergic blocking agents because of potential side effects such as fatigue, dizziness, weight gain, and sexual dysfunction; and the participant cannot take antidepressants because of potential side effects such as drowsiness and weight gain; and that these potential side effects could affect him as a crane operator.

Upon a motion made and seconded, the Trustees voted unanimous approval of the following resolution:

> **RESOLVED to table the appeal for additional medical history information.**

Participant Appeal RX23/170-5285

Mr. Fuller presented an appeal from a provider, Dr. Tanvi Beri, who is appealing on behalf of the participant for coverage of Wegovy, which is an injectable prescription drug used for weight loss. It was noted that a Prior Authorization for Wegovy was denied by CVS/Caremark because anti-obesity medications are not covered under the Plan.

Dr. Beri states in the appeal that the participant has been "thinking about medication intervention to lose weight." Dr. Beri further states that the participant has a BMI (Body Mass Index) of 54.42 and that Wegovy "is necessary to the patient's plan of treatment."

Upon a motion made and seconded, the Trustees voted unanimous approval of the following resolution:

RESOLVED to table the appeal for additional medical history information.

VIII. <u>NEXT MEETING DATE AND LOCATION</u>

After discussion, the Trustees selected November 14, 2023 as the next meeting date at the offices of Associated Administrators in Landover, Maryland following the Pension Fund meeting.

IX. <u>ADJOURNMENT</u>

There being no further business to come before the Trustees, the meeting was adjourned.

Respectfully submitted,

John Knowles - Chairman

FINANCIAL REPORT

CONSULTANTS' REPORT

Operating Engineers Trust Fund of Washington, D.C. Health & Welfare Fund Local No. 77

Consultant's Report

November 14, 2023

Ryan Devlin, Consultant

Bolton

Agenda

- Financial Update
  - Projected vs. Actual
- CVS Utilization Review
- Delta Dental
  - Fee Renewal
  - Utilization Review
- Update on LaborFirst Implementation

Financial Update

- Financial Update through September 2023:
  - Total Revenue: 5.2% below projected
    - Total Contributions: 4.1% below projected
    - Investment Result: 32.7% below projected
  - Total Disbursements: 17.4% below projected
    - Benefit Expense: 15.9% below projected
    - Administrative Expense: 38.1% below projected
  - Net Assets in Months:
    - Current estimate (through September 2023): 22.5 (approximately $30.5 million)

Projected vs. Actual

Operating Engineers Local 77 Trust Fund

Projected vs. Actual Results

For the Nine Months Ended September 30, 2023

	Projected Annual '23	Projected Monthly	Projected 1/23 - 9/23	Actual 1/23 - 9/23	Actual Monthly	Variance 1/23 - 9/23
Receipts						
Total Contributions	$ 17,215,163	$ 1,434,597	$ 13,050,161	$ 12,508,975	$ 1,389,886	$ (541,186)
Investment Earnings (net)	1,303,072	108,589	977,304	657,469	73,052	(319,835)
Total Revenue	**$ 18,518,235**	**$ 1,543,186**	**$ 13,888,676**	**$ 13,166,444**	**$ 1,462,938**	**$ (722,232)**
Disbursements						
Benefit Expense	$ 17,015,883	$ 1,417,990	$ 12,761,912	$ 10,738,012	$ 1,193,112	$ (2,023,900)
Administrative Expense	1,240,225	103,352	930,168	575,919	63,991	(354,249)
Total Disbursements	**$ 18,256,108**	**$ 1,521,342**	**$ 13,692,081**	**$ 11,313,932**	**$ 1,257,104**	**$ (2,378,149)**
Surplus/(Deficit)	**$ 262,127**	**$ 21,844**	**$ 196,596**	**$ 1,852,512**	**$ 205,835**	**$ 1,655,917**
Estimated net months in reserve				***22.5***		

CVS Utilization

Eligibility	Jan-Jun 22	% Change	Jan-Jun 23	Employer†	Peer*
Average Eligible Members Per Month	3,495	-3.2%	3,382		
Average Utilizers as % of Members	29.8%	-27.6%	21.6%	34.2%	32.8%
Average Member Age	40	-4.3%	39	36	38
Cost with Rebates**					
Total Gross Cost	$2,475,727	-23.6%	$1,891,872		
Gross Cost w/ Rebates**	$1,805,119	-23.6%	$1,379,887		
Total Net Cost w/ Rebates**	$1,390,461	-18.4%	$1,133,979		
Gross Cost w/ Rebates** PMPM	$86.08	-21.0%	$68.00		
Net Cost w/ Rebates** PMPM	$66.31	-15.7%	$55.88		
% Total Member Cost Share	16.7%	-22.4%	13.0%	9.7%	6.4%
% Non-Specialty Member Cost Share	25.5%	-2.2%	24.9%	14.2%	9.7%
Drug Mix					
% Single Source Brands	10.5%	-12.3%	9.2%	13.2%	12.1%
% Multi Source Brands	1.2%	-23.2%	0.9%	1.1%	1.1%
Generic Dispensing Rate	88.3%	1.8%	89.9%	85.7%	86.8%
Generic Substitution Rate	98.7%	0.3%	99.0%	98.7%	98.8%
Utilization					
Total Prescriptions	16,065	-40.6%	9,540		
% Retail Prescriptions	54.8%	21.6%	66.7%	80.0%	74.3%
% Mail Prescriptions	3.7%	-39.6%	2.2%	5.2%	7.3%
% Maintenance Choice® Prescriptions	41.5%	-25.0%	31.1%	14.8%	18.4%
Days' Supply PMPM	39.60	-48.5%	20.41	34.92	37.00
Specialty					
Specialty Total Gross Cost	$1,112,552	0.0%	$1,112,870		
Specialty Avg. Utilizers as % of Members	0.6%	5.2%	0.6%	1.1%	0.9%
Specialty Gross Cost PMPM	$53.05	3.4%	$54.84	$83.12	$74.07
Specialty % of Total Gross Cost	44.9%	30.9%	58.8%	48.6%	44.6%
Specialty % of Total Prescriptions	0.9%	69.5%	1.6%	1.6%	1.3%
% Specialty Member Cost Share	6.1%	-23.2%	4.7%	4.9%	2.3%

*Peer: Union

** Rebates represent client share of invoiced rebates (less: point of sale rebates) as of report run date of 08-17-2023 and may not reconcile with rebate guarantees or rebates paid to date. Rebates included for this time period: 2023Q1 - 2023Q2. Prior period rebates include the same number of quarters as current period.

†Employer information is based on the most recent six months ending Jun 30, 2023.

- Net Cost w/ Rebates Trend: -15.7%
- 40.6% less prescriptions
- Overall membership dropped 3.2%, but utilizers dropped 27.6%
- Total Specialty Gross Cost remained the same: $1.1M

Specialty Utilization

Your specialty utilization metrics

	Jan-Jun 22	% Change	Jan-Jun 23	Jan-Jun 23	Jan-Jun 23
Specialty Prescriptions	152	0.7%	153	Employer	Peer*
Specialty Rx as % of Total Prescriptions	0.9%	69.5%	1.6%	1.6%	1.3%
% CVS Specialty Pharmacy Prescriptions	92.8%	3.6%	96.1%		
Specialty Utilizers	42	-19.0%	34		
Specialty Utilizers as % of Utilizers	2.2%	3.8%	2.3%		
Average Age Per Specialty Utilizer	48.7	-3.9%	46.8		

Your specialty cost metrics

	Jan-Jun 22	% Change	Jan-Jun 23	Jan-Jun 23	Jan-Jun 23
Specialty Gross Cost	$1,112,552	0.0%	$1,112,870	Employer	Peer*
Specialty % of Total Gross Cost	44.9%	30.9%	58.8%	48.6%	44.6%
Specialty Net Cost	$1,044,946	1.5%	$1,060,931		
Specialty % of Total Net Cost	50.7%	27.1%	64.5%	51.2%	46.5%
Specialty Member Cost	$67,606	-23.2%	$51,938		
% Specialty Member Cost Share	6.1%	-23.2%	4.7%	4.9%	2.3%
Gross Cost Per Specialty Utilizer	$26,489	23.6%	$32,731		
Specialty Avg. Utilizers as % of Members	0.6%	5.2%	0.6%	1.1%	0.9%

*Peer: Union

Price inflation
5.7%

Utilization
-0.2%

Drug mix
-2.1%

Specialty gross trend
3.4%

Delta Dental Renewal

Delta Dental Fee			
	Current	Initial Renewal	Negotiated Renewal
PUMPM Fee	$3.75	$3.86	$3.75
Monthly Total	$5,854	$6,025	$5,854
Annual Total	$70,245	$72,306	$70,245

*PUMPM = Per Union Member Per Month

*Annual Total is based on September 2023 enrollment = 1,561 union members

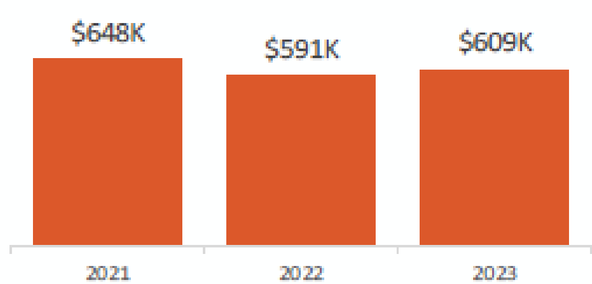
- Current fee was effective January 1, 2022 (2-year deal).
- Renewal fee is also a 2-year deal effective January 1, 2024 for both 2024 and 2025 calendar years.
- Delta Dental initially proposed a 3% fee increase, but after negotiation, they were willing to hold the current fee for 2 additional years.

Delta Dental: Claims Update

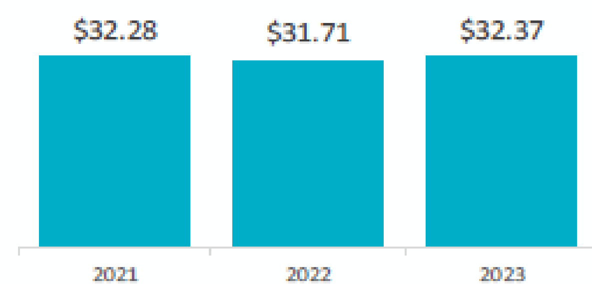
Paid Period: Oct 2022 - Sep 2023 compared to prior years

	Prior year		Current year	
Claims paid	$590,514	89.5%	$609,447	89.6%
Administration	$69,126	10.5%	$70,646	10.4%
Total expenses	**$659,640**	**100.0%**	**$680,094**	**100.0%**
Average primary enrollees	1,552		1,569	
Average total members	3,509		3,528	

Claims Paid

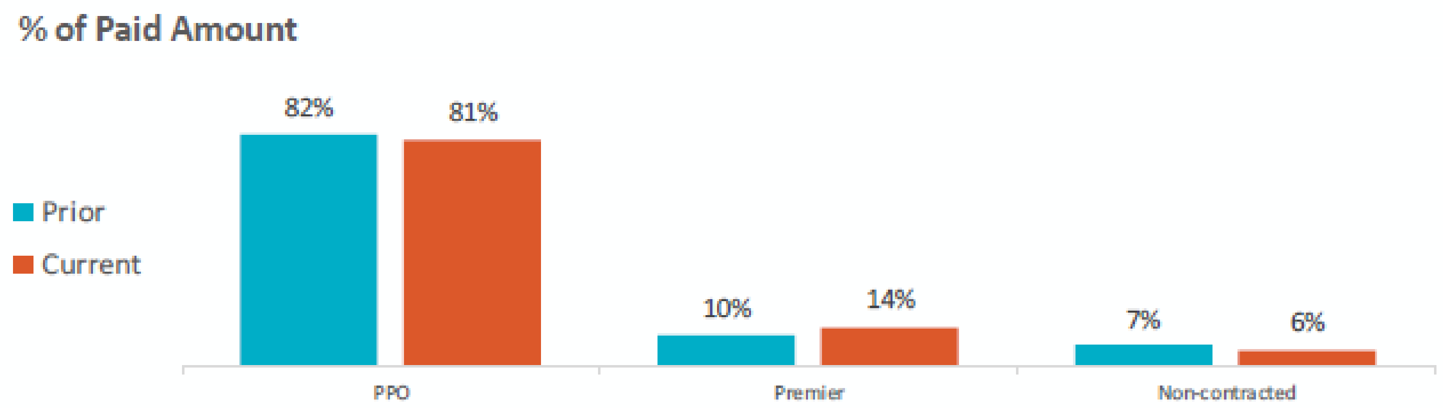


Paid PEPM



- The 2023 Paid Claims PUMPM has increased 2.1% but is only 0.3% more than the 2021 Paid Claims PUMPM.

Delta Dental: Network Utilization

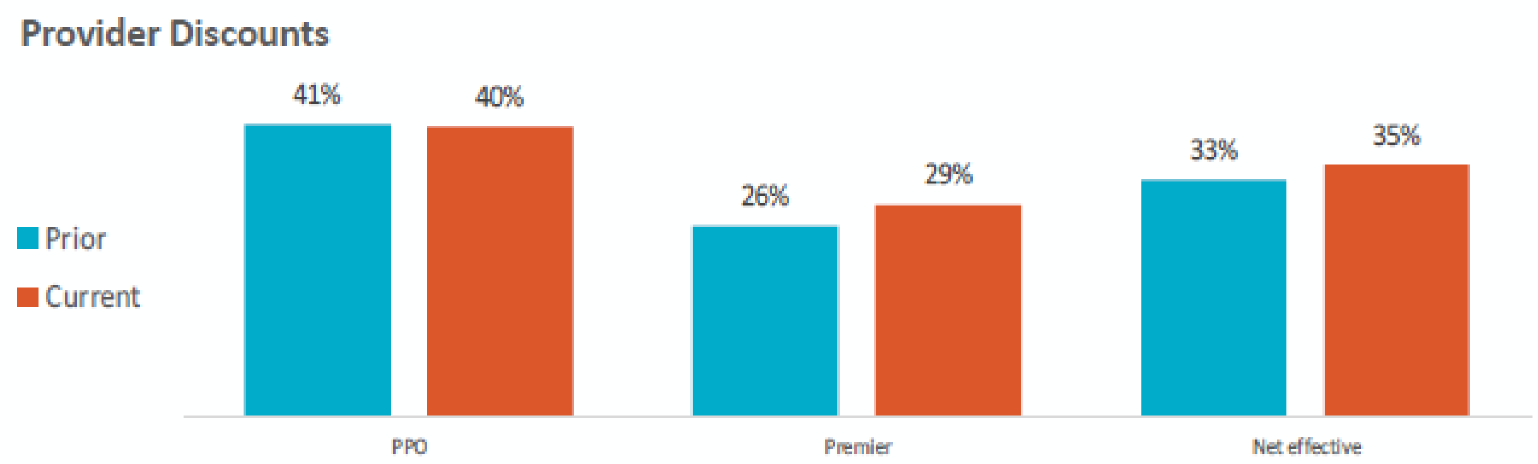


Network Utilization by Paid Amount

Network	Prior year	Current year
PPO	82.4%	80.7%
Premier	10.5%	13.7%
Non-contracted	7.1%	5.6%

- Both of Delta's PPO and Premier networks comprise their in-network providers.
- 94.4% of the dental paid claims are flowing through in-network providers in the most recent 12 months (Oct 2022 – Sep 2023). 92.9% were in-network in the prior period (Oct 2021 – Sep 2022).

Delta Dental: Provider Discounts



Current Year

	PPO		Premier		Non-contracted		Total	
Total submitted	$1,757,318	100.0%	$353,928	100.0%	$218,631	100.0%	$2,329,877	100.0%
Provider discounts	$707,973	40.3%	$104,404	29.5%	$0	0.0%	$812,377	34.9%
Other savings	$209,799	11.9%	$27,000	7.6%	$52,038	23.8%	$288,837	12.4%
Plan pays	$474,653	27.0%	$80,484	22.7%	$32,783	15.0%	$587,920	25.2%
Patient liability	$364,892	20.8%	$142,040	40.1%	$133,810	61.2%	$640,742	27.5%

- 85.9% of the dental submitted charges are flowing through in-network providers in the most recent 12 months (Oct 2022 – Sep 2023).

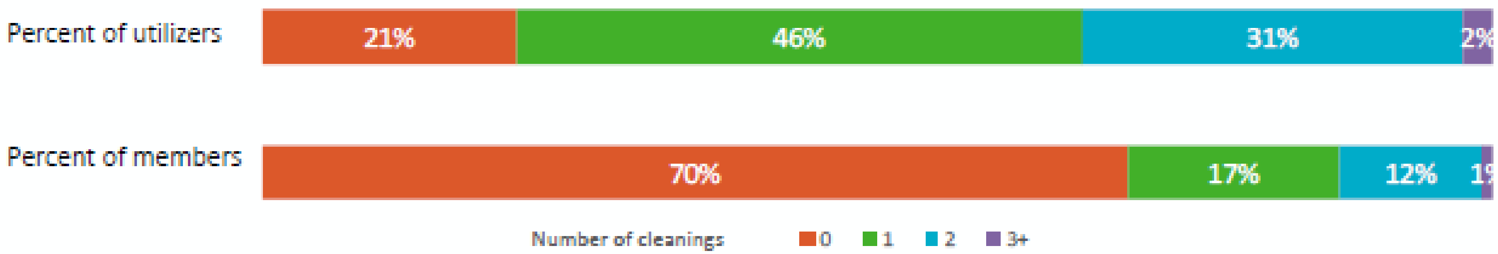
Delta Dental: Cleanings

Submitted Cleanings by Unique Members

Cleanings	Prior year		Current year	
No utilization	2,510	62.4%	2,484	62.6%
0*	282	7.0%	306	7.7%
1	680	16.9%	683	17.2%
2	506	12.6%	458	11.5%
3+	42	1.0%	37	0.9%
Total	**4,020**	**100.0%**	**3,968**	**100.0%**

*Procedure count of 0 represents enrollees who utilized procedures other than cleanings.

Current Year



- 70.3% of the Local 77 membership did not have a dental cleaning in the current period (Oct 2022 – Sep 2023).

LaborFirst Update

- Weekly implementation calls with LaborFirst, Associated Administrators and Bolton.
- Communication materials and 2024 Aetna ID Cards to be mailed shortly.
- 2024 Premium Rate to be lowered by $2.00 PMPM (per member per month):

Aetna MAPD Premium		
	2023	**2024**
PMPM Rate	$230.90	$228.90
Monthly Total	$124,686	$123,606
Annual Total	$1,496,232	$1,483,272
% Difference		-0.9%
$ Difference		($12,960)

*PMPM = Per Member Per Month

*Annual Total is based on 540 members

- 2024 benefits to remain the same as current.

ATTORNEY'S REPORT

ADMINISTRATIVE MANAGER’S REPORT

OPERATING ENGINEERS TRUST FUND OF WASHINGTON D.C.
STATEMENT OF GAIN OR LOSS

2023	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL	AVERAGE
INCOME														
CONTRIBUTIONS	1,158,246	1,075,436	1,591,655	1,264,310	1,381,824	1,349,990	1,331,818	1,037,155	1,593,604				11,784,037	1,309,337
CONTRI-SELF PAY	500	2,400	2,000	1,850	1,850	850	1,350	500	850				12,150	1,350
COBRA-SELF PAY	2,704	2,352	1,791	0	1,248	347	347	347	347				9,482	1,054
RECIPROCITY INCOME	49,927	54,364	53,746	47,004	48,892	75,845	47,495	42,632	53,271				473,176	52,575
RECIPROCITY PAYMENTS	(44,791)	(41,786)	(31,208)	(53,398)	(45,124)	(33,165)	(42,580)	(49,607)	(29,284)				(370,944)	(41,216)
RETIRED-SELF PAY	79,675	75,570	41,084	66,970	65,645	65,245	65,530	67,070	66,740				593,529	65,948
***LIQUIDATED DAMAGES**	368	4,847	511	293	1,456	(361)	0	0	0				7,115	791
INTEREST INCOME	1,304	1,111	1,313	1,660	1,568	2,486	2,664	4,845	8,444				25,395	2,822
INTER.INC-AMER.CORE REALTY	0	0	26,593	0	0	23,468	0	0	24,872				74,933	8,326
INT ON DELINQUENCY	4,550	101	374	11	45	6,382	0	0	8				11,470	1,274
WEDGE LG CAP - INTEREST INCOME	194	208	128	225	592	130	137	221	219				2,055	228
WEDGE LG CAP - DIVIDEND INCOME	3,049	3,769	4,792	2,268	2,809	4,319	1,888	2,644	3,591				29,128	3,236
WEDGE FIXED- INTEREST ON INVEST.	16,511	36,866	31,652	37,799	27,937	18,998	16,962	37,295	26,097				250,116	27,791
CHART - INTEREST ON INVESTM.	21,187	28,086	66,827	27,843	54,780	67,207	32,875	35,867	75,538				410,211	45,579
VANGUARD - INTEREST ON INVESTMENT	0	0	0	0	0	0	0	0	0				0	0
WEDGE LG CAP - GAIN & LOSS	143,314	(60,809)	(53,565)	(10,492)	(32,107)	151,197	72,634	(60,342)	(75,703)				74,127	8,236
WEDGE FIXED - GAIN & LOSS	217,852	(213,566)	203,733	35,151	(94,252)	(94,096)	(5,951)	(21,158)	(151,264)				(123,551)	(13,728)
AMER CORE REALTY - GAIN & LOSS	0	0	(208,507)	0	0	(130,325)	26,480	0	(152,279)				(464,631)	(51,626)
VANGUARD - GAIN & LOSS	213,845	(32,885)	155,755	19,664	97,579	141,224	71,662	(24,282)	(127,101)				515,459	57,273
CHART - GAIN & LOSS	101,193	(103,422)	27,218	53,001	(97,326)	47,006	43,206	(20,026)	(75,272)				(24,421)	(2,713)
BOYD WATTERSON - GAIN & LOSS	0	0	(1,890)	0	0	4,631	0	0	(20,095)				(17,354)	(1,928)
****RETIREE DRUG SUBSIDY INTERIM PAYMENT**	0	0	0	0	0	(2,490)	0	0	0				(2,490)	(277)
*****MISC.INCOME**	0	0	0	0	0	2,918	0	0	0				2,918	324
TOTAL INCOME	**1,969,627**	**832,645**	**1,914,002**	**1,494,158**	**1,417,415**	**1,701,805**	**1,666,517**	**1,053,160**	**1,222,580**	**0**	**0**	**0**	**13,271,909**	**1,105,992**
EXPENSES														
ADMIN.FEE	42,532	42,532	42,532	42,532	42,532	42,532	42,532	43,808	43,808				385,340	42,816
ACTUARIAL FEES	0	0	6,300	0	0	6,300	0	0	6,300				18,900	2,100
AUDITING	0	0	0	0	4,000	0	0	12,559	1,800				18,359	2,040
BANK CHARGES	405	150	148	111	106	160	155	11	0				1,247	139
BENEFITS PAID	781,288	851,387	1,307,022	1,266,652	1,170,063	802,686	808,907	895,125	905,850				8,788,979	976,553
******PRESCRIPT BEN PAID**	274,006	309,532	(121,947)	359,341	344,960	(208,537)	203,909	301,739	(15,399)				1,447,604	160,845
FIDUC.RESPONSIB.INSUR.	0	0	0	2,933	0	0	0	0	0				2,933	326
INVEST COUNSEL FEE	24,732	0	10,144	13,057	0	21,870	11,499	14,431	9,316				105,049	11,672
INVEST CUSTODIAN FEE	1,184	0	0	2,423	0	0	1,292	0	0				4,899	544
INV PERF EVAL FEE	0	0	4,204	0	0	4,298	0	0	4,372				12,874	1,430
LEGAL FEES	(1,400)	0	0	0	9,717	12,114	0	11,986	9,422				41,839	4,649
MEETING EXPENSE	140	0	122	(18)	106	0	0	0	73				424	47
PAYROLL AUDIT FEE	0	0	0	0	0	0	0	0	2,205				2,205	245
POSTAGE	0	0	204	702	640	0	0	0	0				1,547	172
CARE FIRST FEE	27,778	28,564	27,076	15,090	15,410	15,559	(429,986)	15,471	15,336				(269,701)	(29,967)
CONIFER CASE MANAGEMENT	19,107	20,241	19,478	13,508	19,968	19,875	18,754	19,294	20,078				170,304	18,923
PRINT & STATIONERY	0	860	34	700	6,210	0	507	557	573				9,441	1,049
REGISTRATION FEE	0	0	0	0	0	0	0	0	0				0	0
TELEPHONE EXP	52	112	0	198	0	0	196	0	0				558	62
TRAVEL EXP	0	0	0	0	0	0	0	0	0				0	0
HIPAA	354	423	319	364	278	393	240	322	348				3,041	338
SWIFTMD MONTHLY MEMBERSHIP FEE	6,735	3,444	3,444	3,444	0	6,885	3,441	3,480	3,480				34,353	3,817
OFFICE SUPPLIES & EXP.	0	0	0	0	0	0	0	0	0				0	0
TRUSTEE EXPENSES	0	0	0	0	0	0	0	0	0				0	0
DUES & SUBSCRIPTIONS	800	0	0	0	0	0	0	0	0				800	89
DENTAL INSURANCE	57,907	57,233	57,017	58,698	43,271	60,836	65,220	73,466	41,658				515,306	57,256
VISION BENEFITS PAID	9,336	16,751	11,816	8,556	12,297	7,748	11,992	12,411	9,719				100,624	11,180
TAX RETURN FORM 720(PCORI)	0	0	0	0	0	0	10,518	0	0				10,518	1,169
*******MISC.EXPENSE**	910	0	0	0	0	0	0	0	28,403				29,313	3,257
TOTAL EXPENSE	**1,245,866**	**1,331,229**	**1,367,913**	**1,788,292**	**1,669,558**	**792,719**	**749,176**	**1,404,659**	**1,087,343**	**0**	**0**	**0**	**11,436,755**	**953,063**
GAIN/LOSS	**723,762**	**(498,584)**	**546,089**	**(294,134)**	**(252,143)**	**909,086**	**917,341**	**(351,499)**	**135,237**	**0**	**0**	**0**	**1,835,155**	**152,930**

***LIQUIDATED DAMAGES** Reclass to ER Contributions
****RETIREE DRUG SUBSIDY INTERIM PAYMENT** RDS Overpayment Refund
*****MISC.INCOME** Litigation Settlement
******PRESCRIPT BEN PAID** CVS Caremark Prescription Rebate
*******MISC.EXPENSE** Part D Advisors

OE Loc 77 Trust Fund of Wash. DC
Balance Sheet
September 30, 2023

ASSETS

Current Assets		
Cash Basis Accounts Receivable	$ 1,675.76	
PNC - Cash General 5501371443	1,025,363.35	
H&W Cash 20-46-002-6809064	2,006,528.75	
Accounts Receivable	5,705.55	
PNC - 5501371451 Benefit Acc.	445,575.18	
Due from Other Fund	43,431.23	
Contrib Receiv. - Pavers	(74,433.87)	
Interest Receivable	180,481.14	
Dividend Receivable	1,902.62	
Prepaid Insurance	977.67	
Prepaid exp.	842.50	
Total Current Assets		3,638,049.88
Property and Equipment		
Accum.Depreciation	(1,558.33)	
Property & Equipment	1,558.33	
Total Property and Equipment		0.00
Other Assets		
VANGUARD	1,840,716.85	
Vanguard - Market Value	236,520.66	
Wedge - MM	33,392.64	
Wedge - Govt.Bonds	7,513,467.52	
WEDGE Gov.Bonds -Market Value	(435,910.64)	
Wedge - Corp.Bonds	4,443,715.93	
WEDGE Corp.Bonds-Market Value	(553,383.48)	
WEDGE LG CAP-MM	44,671.05	
WEDGE LG CAP-EQUITIES	1,740,832.17	
WEDGE LG CAP-Market Value	203,516.99	
American Core Realty	3,327,559.42	
BOYD WATTERSON STATE GOV.FUND	3,341,342.00	
CHART - MM - 4782656	475,630.63	
CHART - Corp.Bonds - 4782656	11,643,903.37	
CHART - Corp.Bonds- Mark.Val.	(569,194.04)	
Total Other Assets		33,286,781.07
Total Assets		$ 36,924,830.95

LIABILITIES AND CAPITAL

Current Liabilities		
Accounts Payable	($ 14,214.19)	
Contractors Deposits	200.00	
Due to OE Training Fund	8,165.45	
Due to OE Pension Fund	52,032.10	
Due to Check-Off Dues	118,668.41	
Due to Annuity	35,034.50	
Total Current Liabilities		199,886.27
Long-Term Liabilities		
Total Long-Term Liabilities		0.00
Total Liabilities		199,886.27
Capital		
Retained Earnings	(3,980,098.18)	
Equity - Retained Earnings	40,460,594.36	
Net Income	244,448.50	
Total Capital		36,724,944.68
Total Liabilities & Capital		$ 36,924,830.95

OE Loc 77 Trust Fund of Wash. DC
Income Statement
For the Nine Months Ending September 30, 2023

	Current Month		Year to Date	
Revenues				
Contributions - Pavers	$ 463,271.46	37.89	$ 2,070,829.57	17.66
ER Contributions	1,130,332.21	92.45	8,123,647.42	69.27
Self-Pay Contributions	850.00	0.07	12,150.00	0.10
Cobra Self-Pay EE	346.62	0.03	9,481.57	0.08
Reciprocity Income	53,271.00	4.36	344,960.18	2.94
Reciprocity Payments	(29,284.12)	(2.40)	(281,407.42)	(2.40)
Retired Self-Pay	66,740.00	5.46	600,053.98	5.12
Liquidated Damages	0.00	0.00	1,388.87	0.01
Interest Income	8,443.93	0.69	25,394.79	0.22
Interest American Core Realty	24,871.65	2.03	74,932.85	0.64
Interest Income-Wedge LG CAP	219.01	0.02	2,055.30	0.02
Dividend Income-Wedge LG CAP	3,590.76	0.29	29,128.16	0.25
Interest on Delinquency	7.69	0.00	6,445.79	0.05
G/L on Invest. Vanguard	(127,101.36)	(10.40)	515,458.62	4.40
WEDGE(PNC) - Int. on Inv	26,096.51	2.13	250,116.21	2.13
CHART - Inter. on Investm.	75,538.02	6.18	410,210.75	3.50
Retiree Drug Subsidy	0.00	0.00	29,562.11	0.25
Realized Gain/Loss - CHART	(3,122.13)	(0.26)	(108,971.61)	(0.93)
Unrealized Gain/Loss - CHART	(72,149.76)	(5.90)	84,550.74	0.72
Realized G/L- Wedge LG CAP	(5,505.99)	(0.45)	95,107.04	0.81
Unrealized G/L- Wedge LG CAP	(70,197.01)	(5.74)	(20,979.97)	(0.18)
Unrealized Gain/loss WEDGE	(140,405.54)	(11.48)	12,035.21	0.10
Realized Gain/Loss WEDGE-001	(10,858.64)	(0.89)	(135,586.38)	(1.16)
Unrealiz.Gain/Loss-Amer.Core R	(101,643.69)	(8.31)	(351,646.56)	(3.00)
Realiz.Gain/Loss Amer. Core Re	(50,635.17)	(4.14)	(56,189.40)	(0.48)
Realiz.Gain/Loss Boyd Watterso	(20,095.00)	(1.64)	(17,354.00)	(0.15)
Litigation Proceeds	0.00	0.00	2,918.09	0.02
Total Revenues	1,222,580.45	100.00	11,728,291.91	100.00
Cost of Sales				
Total Cost of Sales	0.00	0.00	0.00	0.00
Gross Profit	1,222,580.45	100.00	11,728,291.91	100.00
Expenses				
Actuarial Fee	6,300.00	0.52	18,900.00	0.16
Administration Fee	43,808.00	3.58	385,340.00	3.29
Audit Fee	1,800.00	0.15	18,358.75	0.16
Health Care Cost Containment	0.00	0.00	909.75	0.01
Bank Charges	0.00	0.00	1,246.88	0.01
Benefits Paid	483,103.36	39.52	4,514,284.48	38.49
Prescription Benefits Paid	(15,399.19)	(1.26)	1,438,250.52	12.26
CVS - Admin fee	0.00	0.00	9,353.73	0.08
Vision Benefits Paid - claims	9,718.59	0.79	81,521.54	0.70
Vision Benefits Paid-admin fee	0.00	0.00	9,766.68	0.08
Inv.Performance Eval.Fee	4,372.24	0.36	12,874.26	0.11

	Current Month		Year to Date	
Invest.Mngmnt Fee	9,315.65	0.76	80,316.66	0.68
Invest.Custodian Fee	0.00	0.00	3,715.15	0.03
Legal Fees	9,422.10	0.77	41,839.43	0.36
Meeting Exp.	73.45	0.01	283.96	0.00
Postage Exp.	0.00	0.00	1,546.93	0.01
Printing & Stationary Exp.	573.31	0.05	9,271.33	0.08
Payroll Audit Fee	2,205.00	0.18	2,205.00	0.02
Fiduciary Resp.Insurance	0.00	0.00	2,933.33	0.03
Case Mngmnt	20,077.94	1.64	151,196.69	1.29
Part D Advisors Expenses	28,403.36	2.32	28,403.36	0.24
Telephone Exp.	0.00	0.00	393.60	0.00
HIPAA Charges	348.39	0.03	1,945.44	0.02
IFEBP - Membership Dues	0.00	0.00	800.00	0.01
Dental Insurance - admin fee	5,887.50	0.48	41,535.00	0.35
Dental Insurance - claims	35,770.99	2.93	473,770.70	4.04
SwiftMD Monthly Membership fee	3,480.00	0.28	34,353.00	0.29
CareFirst - flexlink - admin	11,669.10	0.95	(223,566.96)	(1.91)
CareFirst - flexlink - claims	311,794.71	25.50	2,708,255.05	23.09
Care First - network lease fee	3,667.11	0.30	32,580.30	0.28
PCORI fee	0.00	0.00	10,518.00	0.09
AETNA	110,951.50	9.08	1,088,287.40	9.28
Total Expenses	1,087,343.11	88.94	10,981,389.96	93.63
Net Income	$ 135,237.34	11.06	$ 746,901.95	6.37

OE Loc 77 Trust Fund of Wash. DC
GENERAL JOURNAL
For the Period From Sep 1, 2023 to Sep 30, 2023

Date	Account ID	Reference	Trans Description	Debit Amt	Credit Amt
9/1/23	1260	A&S1	Transfer from H&W Cash Benefit Acct. Check Run 9/1/23	250.00	
9/1/23	1120	A&S1	Transfer from H&W Cash Benefit Acct. Check Run 9/1/23		250.00
9/1/23	1260	TO BENEFIT1	Transfer from H&W Cash Benefit Acct. Check Run 8/31/2:	59,023.44	
9/1/23	1120	TO BENEFIT1	Transfer from H&W Cash Benefit Acct. Check Run 8/31/23		59,023.44
9/6/23	1260	TO BENEFIT2	Transfer from H&W Cash Benefit Acct. Check Run 8/6/23	57,086.71	
9/6/23	1120	TO BENEFIT2	Transfer from H&W Cash Benefit Acct. Check Run 8/6/23		57,086.71
9/6/23	1120	TRANSFDDA1	Transferred from Cash General to H&W Cash for dep. 8/31	476,568.85	
9/6/23	1110	TRANSFDDA1	Transferred from Cash General to H&W Cash for dep. 7/19/23;7/26/23-07/:		476,568.85
9/8/23	5150	941 WH Tax Paid	A&S Tax W/H	226.78	
9/8/23	1260	941 WH Tax Paid	A&S Tax W/H		226.78
9/8/23	5150	945 Med WH Backup PD	Med Backup only this month	22.58	
9/8/23	1260	945 Med WH Backup PD	Med Backup only this month		22.58
9/12/23	1120	TRANSFDDA2	Transferred from Cash General to H&W Cash for dep. 9/5/	80,506.19	
9/12/23	1110	TRANSFDDA2	Transferred from Cash General to H&W Cash for dep. 9/5/23/23;9/8/23;che		80,506.19
9/13/23	1260	TO BENEFIT3	Transfer from H&W Cash Benefit Acct. Check Run 8/6/23	202,694.29	
9/13/23	1120	TO BENEFIT3	Transfer from H&W Cash Benefit Acct. Check Run 8/6/23		202,694.29
9/15/23	1260	A&S2	Transfer from H&W Cash Benefit Acct. Check Run 9/15/2:	500.00	
9/15/23	1120	A&S2	Transfer from H&W Cash Benefit Acct. Check Run 9/15/23		500.00
9/15/23	1120	TRANSFDDA3	Transferred from Cash General to H&W Cash for dep. 9/11	88,164.34	
9/15/23	1110	TRANSFDDA3	Transferred from Cash General to H&W Cash for dep. 9/5/23/23;9/8/23;che		88,164.34
9/18/23	1110	TRANSF1	Transferred from H&W Cash to Cash General for checks is	294,143.02	
9/18/23	1120	TRANSF1	Transferred from H&W Cash to Cash General for checks issued 08/10/23;c		294,143.02
9/20/23	1260	TO BENEFIT4	Transfer from H&W Cash Benefit Acct. Check Run 9/20/2:	121,472.57	
9/20/23	1120	TO BENEFIT4	Transfer from H&W Cash Benefit Acct. Check Run 9/20/23		121,472.57
9/22/23	1260	A&S3	Transfer from H&W Cash Benefit Acct. Check Run 9/22/2:	5,250.00	
9/22/23	1120	A&S3	Transfer from H&W Cash Benefit Acct. Check Run 9/22/23		5,250.00
9/26/23	1110	Expense Transfer	Expense Checks Issued 9/18-9/25/23	39,440.21	
9/26/23	1120	Expense Transfer	Expense Checks Issued 9/18-9/25/23		39,440.21
9/27/23	1260	TO BENEFIT5	Transfer from H&W Cash Benefit Acct. Check Run 9/27/2:	62,176.44	
9/27/23	1120	TO BENEFIT5	Transfer from H&W Cash Benefit Acct. Check Run 9/27/23		62,176.44
9/29/23	1260	A&S4	Transfer from H&W Cash Benefit Acct. Check Run 9/29/2:	500.00	
9/29/23	1120	A&S4	Transfer from H&W Cash Benefit Acct. Check Run 9/29/23		500.00
9/29/23	1303	FROM BOYD WATTERSON	Transferred from Boyd Watterson to Broker	43,396.23	
9/29/23	1896	FROM BOYD WATTERSON	Transferred from Boyd Watterson to Broker		43,396.23
9/29/23	1120	RETURN CK	H&W Cash -Return ck#1068 Southern Renovation ER#77-5048		1,540.19
9/29/23	4510	RETURN CK	H&W Cash -Return ck#1068 Southern Renovation ER#77-	1,344.00	
9/29/23	2016	RETURN CK	H&W Cash -Return ck#1068 Southern Renovation ER#77-	183.68	
9/29/23	4660	RETURN CK	H&W Cash -Return ck#1068 Southern Renovation ER#77-	12.51	
9/29/23	1120	TRANSFDDA4	Transferred from Cash General to H&W Cash for dep. 9/1!	471,440.55	
9/29/23	1110	TRANSFDDA4	Transferred from Cash General to H&W Cash for dep. 9/15/23-9/27/23;che		471,440.55
9/30/23	5150	A&S, DB Net	A & S, DB Net	5,885.23	
9/30/23	1260	A&S, DB Net	A & S, DB Net		5,885.23
9/30/23	1895	AMER.CORE REALITY	American Core Reality - Interest Income 09/23	24,871.65	
9/30/23	4635	AMER.CORE REALITY	American Core Reality - Interest Income 09/23		24,871.65
9/30/23	5370	AMER.CORE REALITY	American Core Reality - Investment Mngmnt Fee 09/23	9,315.65	
9/30/23	1895	AMER.CORE REALITY	American Core Reality - Investment Mngmnt Fee 09/23		9,315.65
9/30/23	1895	AMER.CORE REALITY	American Core Reality - Unrealized Loss 09/23		101,643.69
9/30/23	4880	AMER.CORE REALITY	American Core Reality - Unrealized Loss 09/23	101,643.69	
9/30/23	1895	AMER.CORE REALITY	American Core Reality - Available for Reinvestment 09/23		50,635.17
9/30/23	4885	AMER.CORE REALITY	American Core Reality - Available for Reinvestment 09/23	50,635.17	
9/30/23	1896	BOYD WATTERSON GOV.	Boyd Watterson Government - Loss on Investment 09/23		20,095.00
9/30/23	4886	BOYD WATTERSON GOV.	Boyd Watterson Government - Loss on Investment 06/23	20,095.00	
9/30/23	1915	CHART	Chart - Corp.Bonds - Purchases 09/23	179,500.55	
9/30/23	1910	CHART	Chart - Corp.Bonds - Purchases 09/23		179,500.55

Date	Account ID	Reference	Trans Description	Debit Amt	Credit Amt
9/30/23	1910	CHART	Chart - Corp.Bonds - Sales Proceeds 09/23	97,000.00	
9/30/23	1915	CHART	Chart - Corp.Bonds - Sales at Cost 09/23		100,122.13
9/30/23	4810	CHART	Chart - Corp.Bonds - Realized Loss 09/23	3,122.13	
9/30/23	1916	CHART	Chart - Corp.Bonds - MV - Unrealized Loss 09/23		72,149.76
9/30/23	4820	CHART	Chart - Corp.Bonds - MV - Unrealized Loss 09/23	72,149.76	
9/30/23	1910	CHART	Chart - MM - Interest Income 09/23	75,538.02	
9/30/23	4730	CHART	Chart - MM - Interest Income 09/23		2,073.73
9/30/23	4730	CHART	Chart - Corp.Bonds - MM - Interest Income 09/23		73,464.29
9/30/23	1120	INTEREST INCOME	Interest Income	8,443.93	
9/30/23	4630	INTEREST INCOME	Interest Income		8,443.93
9/30/23	1856	VANGUARD	Vanquard - Loss on Investment 09/23		127,101.36
9/30/23	4696	VANGUARD	Vanquard - Loss on Investment 09/23	127,101.36	
9/30/23	1870	WEDGE	Wedge - Gov.Bonds - Purchases 09/23	222,129.45	
9/30/23	1865	WEDGE	Wedge - Gov.Bonds - Purchases 09/23		222,129.45
9/30/23	1865	WEDGE	Wedge - Gov.Bonds - Sales Proceeds 09/23	100,283.20	
9/30/23	1870	WEDGE	Wedge - Gov.Bonds - MV - Sales at Cost 09/23		106,370.41
9/30/23	4875	WEDGE	Wedge - Gov.Bonds - Realized Loss 09/23	6,087.21	
9/30/23	1865	WEDGE	Wedge - Gov.Bonds - Return of Principal 09/23	74,148.31	
9/30/23	1870	WEDGE	Wedge - Gov.Bonds - Return of Principal 09/23		77,057.74
9/30/23	4875	WEDGE	Wedge - Gov.Bonds - Return of Principal - Realized Loss	2,909.43	
9/30/23	1871	WEDGE	Wedge - Gov.Bonds - MV - Unrealized Loss 09/23		79,680.44
9/30/23	4860	WEDGE	Wedge - Gov.Bonds - MV - Unrealized Loss 09/23	79,680.44	
9/30/23	1865	WEDGE	Wedge - Corp.Bonds - Sales Proceeds 09/23	25,000.00	
9/30/23	1875	WEDGE	Wedge - Corp.Bonds - Sales at Cost 09/23		26,862.00
9/30/23	4875	WEDGE	Wedge - Corp.Bonds - Realized Loss 09/23	1,862.00	
9/30/23	1876	WEDGE	Wedge - Corp.Bonds - MV - Unrealized Loss 09/23		60,725.10
9/30/23	4860	WEDGE	Wedge - Corp.Bonds - MV - Unrealized Loss 09/23	60,725.10	
9/30/23	1865	WEDGE	Wedge - MM - Interest Income 09/23	26,096.51	
9/30/23	4720	WEDGE	Wedge - MM - Interest Income 09/23		255.97
9/30/23	4720	WEDGE	Wedge - MM - Gov.Bonds - Interest Income 09/23		10,068.56
9/30/23	4720	WEDGE	Wedge - MM - Corp.Bonds - Interest Income 09/23		15,771.98
9/30/23	1878	WEDGE LG CAP	Wedge LG Cap - Corp.Bonds - Purchases 09/23	77,199.12	
9/30/23	1877	WEDGE LG CAP	Wedge LG Cap - Corp.Bonds - Purchases 09/23		77,199.12
9/30/23	1877	WEDGE LG CAP	Wedge LG Cap - Corp.Bonds - Sales Proceeds 09/23	72,066.33	
9/30/23	1878	WEDGE LG CAP	Wedge LG Capt - Corp.Bonds - Sales at Cost 09/23		77,572.32
9/30/23	4830	WEDGE LG CAP	Wedge LG Cap - Corp.Bonds - Realized Loss 09/23	5,505.99	
9/30/23	1879	WEDGE LG CAP	Wedge LG Cap - Corp.Bonds - MV - Unrealized Loss 09/23		70,197.01
9/30/23	4835	WEDGE LG CAP	Wedge LG Cap - Corp.Bonds - MV - Unrealized Gain 09/2:	70,197.01	
9/30/23	1877	WEDGE LG CAP	Wedge LG Cap - Corp.Bonds - MM - Interest Income 09/2:	219.01	
9/30/23	4646	WEDGE LG CAP	Wedge LG Cap - Corp.Bonds - MM - Interest Income 09/23		219.01
9/30/23	1877	WEDGE LG CAP	Wedge LG Cap - Corp.Bonds - MM - Dividend Income 09/2	3,590.76	
9/30/23	4656	WEDGE LG CAP	Wedge LG Cap - Corp.Bonds - MM - Dividend Income 09/23		3,590.76
		Total		**3,607,404.40**	**3,607,404.40**

OE Loc 77 Trust Fund of Wash. DC
NON-PAVERS CONTRIBUTIONS
For the Period From Sep 1, 2023 to Sep 30, 2023

Account ID	Account Description	Date	Reference	Customer Name	Debit Amt	Credit Amt	Balance
4510	ER Contributions	9/1/23	8/23SPLIT	PETILLO INC		4,998.00	
4510	ER Contributions	9/1/23	7/23	DIGMASTER		12,144.00	
4510	ER Contributions	9/1/23	7/23	LANE CONSTRUCTION		4,179.00	
4510	ER Contributions	9/1/23	07/23	CLARK CONSTRUCTION GRP		3,294.00	
4510	ER Contributions	9/1/23	07/23	CLARK CONSTRUCTION GRP		57,654.00	
4510	ER Contributions	9/1/23	07/23	CLARK CONCRETE CONTRACTORS		192.00	
4510	ER Contributions	9/1/23	07/23	CLARK CONCRETE CONTRACTORS		4,458.00	
4510	ER Contributions	9/1/23	07/23	SIN NEBT-JV		29,496.00	
4510	ER Contributions	9/1/23	07/23SPLIT	MIGHTY FOUR ENTERPRISE		6,425.10	
4510	ER Contributions	9/1/23	07/23	EXTREME INC		5,757.50	
4510	ER Contributions	9/1/23	07/23	EXTREME INC		51,365.63	
4510	ER Contributions	9/5/23	07/23	Casper Colosimo & Son, Inc.		3,271.80	
4510	ER Contributions	9/5/23	07/23	PAUL MERRIT EXCAVATING		2,415.00	
4510	ER Contributions	9/5/23	06/23SPLIT	KIRILA EARTHWORKS,INC		1,932.00	
4510	ER Contributions	9/5/23	07/23SPLIT	S & J SERVICE, INC.		5,276.70	
4510	ER Contributions	9/5/23	07/23SPLIT	METRO CRANE &RIGGING LLC		8,799.00	
4510	ER Contributions	9/5/23	07/23SPLIT	MCVAC		26,221.50	
4510	ER Contributions	9/5/23	08/23SPLIT	MICHELS CONSTRUCTION INC		5,247.00	
4510	ER Contributions	9/6/23	8/23	KELLER NORTH AMERICA		9,798.00	
4510	ER Contributions	9/7/23	7/23SPLIT	CONSRUCTION SUPPORT SERVI		2,847.00	
4510	ER Contributions	9/7/23	07/23SPLIT	BELTWAY PAVING OF SOUTNER		9,596.70	
4510	ER Contributions	9/8/23	08/23	OPER ENGS APPR FUND		6,000.00	
4510	ER Contributions	9/8/23	07/23	HOLLERBACH EQUIPMENT CO.		42.13	
4510	ER Contributions	9/8/23	08/23	ALL CRANE RENTAL OF PA		490.00	
4510	ER Contributions	9/8/23	08/23	ALL CRANE RENTAL OF PA		1,168.75	
4510	ER Contributions	9/8/23	07/23	JOHN DRIGGS CO		942.00	
4510	ER Contributions	9/8/23	08/23	AMERICAN COMBUSTION INDUSTRIES		2,376.00	
4510	ER Contributions	9/8/23	8/23	CLARK CONSTRUCTION GRP		48.00	
4510	ER Contributions	9/8/23	8/23	CLARK CONSTRUCTION GRP		61,143.00	
4510	ER Contributions	9/8/23	08/23	CLARK CONCRETE CONTRACTORS		5,157.00	
4510	ER Contributions	9/11/23	08/23	SCHNABEL FOUNDATION CORP		11,196.00	
4510	ER Contributions	9/11/23	08/23	Norair Engineering Associates,		2,388.00	
4510	ER Contributions	9/11/23	07/23SPLIT	NEW YORK GEOMATICS INC		2,466.00	
4510	ER Contributions	9/11/23	07/23	NEW YORK GEOMATICS INC		427.44	
4510	ER Contributions	9/11/23	08/23	CS SERVICES, LLC		1,681.25	
4510	ER Contributions	9/11/23	08/23	BOWEM ENGINEERING		1,804.00	
4510	ER Contributions	9/11/23	08/23SPLIT	PETILLO INC		4,434.00	
4510	ER Contributions	9/11/23	08/23SPLIT	MIDWEST MOLE,INC		3,531.00	
4510	ER Contributions	9/11/23	07/23SPLIT	KIRILA EARTHWORKS,INC		1,788.00	
4510	ER Contributions	9/11/23	08/23SPLIT	BARNHART CRANE AND RIGGIN		1,375.00	
4510	ER Contributions	9/11/23	08/23SPLIT	BARNHART CRANE AND RIGGIN		392.50	
4510	ER Contributions	9/11/23	3-6/23 Avery King	EXTREME INC		1,292.50	
4510	ER Contributions	9/12/23	08/23	ANCHOR CONSTRUCTION CORP.		56,312.23	
4510	ER Contributions	9/13/23	08/23	HUTCHINSON INTERNATIONAL CORP.		972.00	
4510	ER Contributions	9/13/23	08/23	PRICE GREGORY INTERNATION		504.00	
4510	ER Contributions	9/14/23	08/23SPLIT	CLEARSITE INDUSTRIAL		8,559.00	
4510	ER Contributions	9/14/23	08/23SPLIT	DELTA RAILROAD CONSTRUCTION		3,537.00	
4510	ER Contributions	9/14/23	6/23 & 3/23 intSPI	SOUTHERN RENOVATION LLC		1,344.00	
4510	ER Contributions	9/14/23	07/23	A&F SITEWORKS LLC		960.00	
4510	ER Contributions	9/15/23	08/23	AIW, INC		1,579.50	
4510	ER Contributions	9/15/23	08/23	INTER UNION LOCAL 77		7,290.00	
4510	ER Contributions	9/15/23	08/23	INTER UNION LOCAL 77		840.00	
4510	ER Contributions	9/15/23	08/23	SKODA CONTRACTING CO		6,804.98	
4510	ER Contributions	9/18/23	08/23	LANE CONSTRUCTION		888.00	
4510	ER Contributions	9/18/23	08/23	CRANE RENTAL CO, INC		2,323.75	
4510	ER Contributions	9/18/23	08/23	CRANE RENTAL CO, INC		38,765.63	
4510	ER Contributions	9/18/23	08/23	GOETTLE EQUIPMENT CO		5,373.00	
4510	ER Contributions	9/18/23	08/23	MIDLANTIC PILING INC		1,080.00	
4510	ER Contributions	9/19/23	08/23	UNITED CRANE & RIGGING		5,396.00	
4510	ER Contributions	9/19/23	08/23	TRAYLOR SHEA JV		45,205.24	
4510	ER Contributions	9/19/23	08/23	NICHOLSON CONSTRUSTRUCTION		2,808.00	
4510	ER Contributions	9/19/23	08/23	EAST WEST ERECTION SERVIC		4,331.60	
4510	ER Contributions	9/19/23	08/23	BADGER DAYLIGHTING CORP.		24,635.94	
4510	ER Contributions	9/19/23	08/23SPLIT	CELTIC DEMOLITION		31,755.00	
4510	ER Contributions	9/19/23	08/23split	SOUTHERN MD CRANE RENTAL		6,228.13	
4510	ER Contributions	9/19/23	09/23SPLIT	PETILLO INC		5,265.00	
4510	ER Contributions	9/19/23	08/23	MAXIM CRANE WORKS		2,778.16	
4510	ER Contributions	9/19/23	08/23	MILLER PIPELINE CORP.		52,998.00	

Account ID	Account Description	Date	Reference	Customer Name	Debit Amt	Credit Amt	Balance
4510	ER Contributions	9/19/23	08/23	RYAN INCORPORATED CENTRAL		2,808.00	
4510	ER Contributions	9/19/23	08/23SPLIT	KELLER NORTH AMERICA		5,349.00	
4510	ER Contributions	9/19/23	08/23SPLIT	KELLER NORTH AMERICA		19,383.00	
4510	ER Contributions	9/20/23	08/23SPLIT	MICHELS TRENCHLESS CROSSI		7,578.00	
4510	ER Contributions	9/20/23	08/23SPLIT	MICHELS CORP		3,714.00	
4510	ER Contributions	9/20/23	08/23SPLIT	MICHELS CORP		544.72	
4510	ER Contributions	9/20/23	08/23SPLIT	INDEPENDENT EXCAVATING,INC		76,675.50	
4510	ER Contributions	9/20/23	08/23	KIEWIT INFRASTRUCTURE 16TH ST BRIDGE		756.00	
4510	ER Contributions	9/20/23	08/23	WMATA 6-KIEWIT INFRASTRUC		2,170.64	
4510	ER Contributions	9/20/23	08/23	DJB CONTRACTING, INC.		969.72	
4510	ER Contributions	9/22/23	08/23SPLIT	JOSEPH B FAY		621.00	
4510	ER Contributions	9/22/23	08/23SPLIT	MIGHTY FOUR ENTERPRISE		4,026.75	
4510	ER Contributions	9/22/23	08/23SPLIT	CONSRUCTION SUPPORT SERVI		2,322.00	
4510	ER Contributions	9/22/23	08/23	ACCURATE CRANE RENTAL		1,000.00	
4510	ER Contributions	9/22/23	07/22	DYNAMIC CONCEPTS, INC		20,000.00	
4510	ER Contributions	9/25/23	09/23SPLIT	PETILLO INC		4,750.50	
4510	ER Contributions	9/25/23	08/23	W O GRUBB EQUIPMENT RENTAL		76,874.38	
4510	ER Contributions	9/25/23	08/23SPLIT	SOUTH CAPITAL BRIDGE BUIL		342.00	
4510	ER Contributions	9/25/23	08/23	LEONARDO'S GRADAL RENTAL, LLC		1,917.00	
4510	ER Contributions	9/25/23	08/23	MALCOM DRILLING		13,065.00	
4510	ER Contributions	9/25/23	08/23	AGGREGATE INDUSTRIES MNGMN		1,040.00	
4510	ER Contributions	9/25/23	08/23	AGGREGATE INDUSTRIES MNGMNT		7,398.85	
4510	ER Contributions	9/25/23	08/23	POTOMAC YARD CONTRACTORS		1,266.00	
4510	ER Contributions	9/25/23	08/23SPLIT	BALTIMORE PILE DRIVING &		1,641.00	
4510	ER Contributions	9/26/23	08/23	GRUMPY'S CONCRETE PUMPING		6,128.50	
4510	ER Contributions	9/26/23	08/23	LANE CONSTRUCTION		6,780.00	
4510	ER Contributions	9/26/23	08/23	Lane Construction		27,942.00	
4510	ER Contributions	9/27/23	08/23	WILLIAMS EQUIPMENT CO		10,991.14	
4510	ER Contributions	9/27/23	08/23	SIN NEBT-JV		42,963.00	
4510	ER Contributions	9/28/23	09/23SPLIT	PETILLO INC		4,018.50	
4510	ER Contributions	9/29/23	7/23 & 8/23SPLIT	SOUTHERN MD HYDRAULICS		4,185.60	
4510	ER Contributions	9/29/23	7/23 & 8/23SPLIT	SOUTHERN MD HYDRAULICS		4,142.00	
4510	ER Contributions	9/29/23	08/23	DIGMASTER		14,694.00	
4510	ER Contributions	9/29/23	08/23	EXTREME INC		62,581.25	
4510	ER Contributions	9/29/23	08/23	EXTREME INC		6,992.50	
4510	ER Contributions	9/29/23	RETURN CK		1,344.00		
4510	ER Contributions				1,344.00	1,131,676.21	-1,130,332.21
		9/30/23					**-1,130,332.21**

OE Loc 77 Trust Fund of Wash. DC
PAVERS CONTRIBUTIONS
For the Period From Sep 1, 2023 to Sep 30, 2023

Account ID	Account Description	Date	Reference	Customer Name	Credit Amt	Balance
4500	Contributions - Pavers	9/1/23	7/23	CAPITAL PAVING OF DC	15,429.00	
4500	Contributions - Pavers	9/1/23	7/23	CAPITAL PAVING OF DC	81,017.46	
4500	Contributions - Pavers	9/1/23	07/23	FORT MYER	114,814.50	
4500	Contributions - Pavers	9/1/23	07/23	FORT MYER	30,859.50	
4500	Contributions - Pavers	9/1/23	07/23	FT Myer Construction	456.00	
4500	Contributions - Pavers	9/15/23	08/23	EUROVIA ATLANTIC COAST	1,302.00	
4500	Contributions - Pavers	9/15/23	08/23	EUROVIA ATLANTIC COAST	5,280.00	
4500	Contributions - Pavers	9/18/23	08/23	RUSSELL PAVING CO., INC.	2,880.00	
4500	Contributions - Pavers	9/21/23	08/23	CIVIL CONSTRUCTION, LLC	1,449.00	
4500	Contributions - Pavers	9/26/23	08/23SPLIT	BELTWAY PAVING OF SOUT	13,446.00	
4500	Contributions - Pavers	9/28/23	08/23	FORT MYER	4,800.00	
4500	Contributions - Pavers	9/28/23	08/23	FORT MYER	36,561.00	
4500	Contributions - Pavers	9/28/23	08/23	FORT MYER	154,977.00	
4500	Contributions - Pavers				463,271.46	463,271.46
		9/30/23				**463,271.46**

OE Loc 77 Trust Fund of Wash. DC
SELF-PAYMENTS
For the Period From Sep 1, 2023 to Sep 30, 2023

Account ID	Account Description	Date	Reference	Customer Name	Credit Amt	Balance
4530	Self-Pay Contributions	9/12/23	09/23	ANTHONY T WOOD	500.00	
4530	Self-Pay Contributions	9/19/23	08/23	BRISCOE STERLING	350.00	
4530	Self-Pay Contributions				850.00	850.00
		9/30/23				**850.00**

OE Loc 77 Trust Fund of Wash. DC
RETIREE SELF-PAYMENTS
For the Period From Sep 1, 2023 to Sep 30, 2023

Account ID	Account Description	Date	Reference	Customer Name	Credit Amt	Balance
4580	Retired Self-Pay	9/5/23	10/23	OE PENSION TRUST FUND	62,645.00	
4580	Retired Self-Pay	9/6/23	09/23;10/23	NORMAN L BOWIE	160.00	
4580	Retired Self-Pay	9/6/23	07/23-09/23	RUFUS ROMINE	240.00	
4580	Retired Self-Pay	9/11/23	10/23	JAMES T GARDNER JR	105.00	
4580	Retired Self-Pay	9/12/23	09/23	CHERYL PENCE	550.00	
4580	Retired Self-Pay	9/12/23	10/23-12/23	CALVIN E JOHNSON	480.00	
4580	Retired Self-Pay	9/14/23	10/23-12/23	CRISSIE YOW	240.00	
4580	Retired Self-Pay	9/19/23	10/23-12/23	INGRID E HERSHEY	240.00	
4580	Retired Self-Pay	9/19/23	10/23	DAVID CORBETT	80.00	
4580	Retired Self-Pay	9/22/23	12/23-12/24	ANNIS MARIE HEATH	960.00	
4580	Retired Self-Pay	9/22/23	10/23-12/23	REBA JEARLINE DENNISON	240.00	
4580	Retired Self-Pay	9/25/23	10/23-12/12	HELEN D ANGLIN	240.00	
4580	Retired Self-Pay	9/25/23	8/23-9/23	RANDOLPH M COFFEY	80.00	
4580	Retired Self-Pay	9/25/23	8/23-9/23	RANDOLPH M COFFEY	80.00	
4580	Retired Self-Pay	9/25/23	10/23	ROBERT A CROSTON	80.00	
4580	Retired Self-Pay	9/25/23	12/23-2/24	BETTY LOU WHARAM	240.00	
4580	Retired Self-Pay	9/25/23	10/23	FLORENCE M CURTIN	80.00	
4580	Retired Self-Pay				66,740.00	66,740.00
		9/30/23				**66,740.00**

OE Loc 77 Trust Fund of Wash. DC
COBRA SELF-PAYMENTS
For the Period From Sep 1, 2023 to Sep 30, 2023

Account ID	Account Description	Date	Reference	Customer Name	Credit Amt	Balance
4540	Cobra Self-Pay EE	9/6/23	09/23	SARAH D YOW	346.62	
4540	Cobra Self-Pay EE				346.62	346.62
		9/30/23				**346.62**

OE Loc 77 Trust Fund of Wash. DC
INTEREST ON DELINQUENCY
For the Period From Sep 1, 2023 to Sep 30, 2023

Account ID	Account Description	Date	Reference	Customer Name	Debit Amt	Credit Amt	Balance
4660	Interest on Delinquency	9/11/23	Interest 04/23	NEW YORK GEOMATICS INC		7.69	
4660	Interest on Delinquency	9/14/23	6/23 & 3/23 intSPLIT	SOUTHERN RENOVATION LLC		12.51	
4660	Interest on Delinquency	9/29/23	RETURN CK		12.51		
4660	Interest on Delinquency				12.51	20.20	-7.69
		9/30/23					**-7.69**

OE Loc 77 Trust Fund of Wash. DC
LIQUIDATED DAMAGES
For the Period From Sep 1, 2023 to Sep 30, 2023

Account ID	Account Description	Date	Reference	Customer Name	Debit Amt	Credit Amt	Balance
4620	Liquidated Damages	9/1/23					-1,388.87
		9/30/23					**-1,388.87**

OE Loc 77 Trust Fund of Wash. DC
RECIPROCITY INCOME
For the Period From Sep 1, 2023 to Sep 30, 2023

Account ID	Account Description	Date	Reference	Customer Name	Credit Amt	Balance
4550	Reciprocity Income	9/1/23	06/23	TENNESSEE VALUE OE HEA	3,422.40	
4550	Reciprocity Income	9/5/23	04/23-06/23	OE TRUST FUND LOC 542 P/	2,495.59	
4550	Reciprocity Income	9/15/23	7/23	OE Local 147	1,326.14	
4550	Reciprocity Income	9/15/23	07/23	SOUTHERN OPERATORS HE	1,605.00	
4550	Reciprocity Income	9/15/23	05/23;06/23	IUOE LOCAL 181,320	5,424.75	
4550	Reciprocity Income	9/15/23	07/23	IUOE LOC.487	90.60	
4550	Reciprocity Income	9/18/23	08/23	OE Local 37	1,134.20	
4550	Reciprocity Income	9/25/23	08/23	MIDWEST OE H&W FUND	3,978.60	
4550	Reciprocity Income	9/25/23	07/23	IUOE Pipe Line H&W Fund	26,231.40	
4550	Reciprocity Income	9/25/23	07/23	IUOE Pipe Line H&W Fund	3,063.90	
4550	Reciprocity Income	9/25/23	07/23	TENNESSEE VALUE OE HEA	4,034.40	
4550	Reciprocity Income	9/25/23	07/23	LOC.18 - OHIO OPERATING E	464.02	
4550	Reciprocity Income				53,271.00	53,271.00
		9/30/23				**53,271.00**

OE Loc 77 Trust Fund of Wash. DC
RECIPROCITY EXPENSE
For the Period From Sep 1, 2023 to Sep 30, 2023

Account ID	Account Description	Date	Reference	Vendor Name	Debit Amt	Balance
4560	Reciprocity Payments	9/18/23	9050	IUOE Loc.132 - H&W Fund	972.00	
4560	Reciprocity Payments	9/18/23	9051	IUOE Loc.147 - H&W Fund	4,061.25	
4560	Reciprocity Payments	9/18/23	9052	Loc.18 - Ohio Operat.Engineers	299.00	
4560	Reciprocity Payments	9/18/23	9053	IUOE Local 181	2,316.13	
4560	Reciprocity Payments	9/18/23	9054	OE Loc.37 - H&W Fund	14,216.74	
4560	Reciprocity Payments	9/18/23	9055	OE Loc.66 Welf.Fund	3,648.00	
4560	Reciprocity Payments	9/18/23	9056	IUOE & Pipe Line Employers H&W	3,771.00	
4560	Reciprocity Payments				29,284.12	29,284.12
		9/30/23				**29,284.12**

OE Loc 77 Trust Fund of Wash. DC
CHECK REGISTER
For the Period From Sep 1, 2023 to Sep 30, 2023

Check #	Date	Payee	Amount
Delta 8/26-9/1/23	9/5/23	Delta Dental of Pennsylvania	10,416.39
CareFirst 8/26-9/1/2	9/5/23	CareFirst Blue Cross Blue Shield	78,714.38
9039	9/8/23	AA, LLC	44,365.65
9040	9/8/23	NCAS	3,667.11
9041	9/8/23	PART D ADVISORS, INC.	28,403.36
9042	9/8/23	Telemedicine Mngmnt, Inc.	3,480.00
9043	9/8/23	Calibre CPA Group, PLLC	2,677.50
Delta 9/2-9/8/23	9/13/23	Delta Dental of Pennsylvania	4,637.50
CareFirst 9/2-8/23	9/14/23	CareFirst Blue Cross Blue Shield	40,679.74
9044	9/15/23	McChesney & Dale, P.C.	9,422.10
9045	9/15/23	Conifer Value-Based Care, LLC	20,077.94
9046	9/15/23	OE Apprenticeship Fund	12,030.38
9047	9/15/23	OE Annuity Fund	38,335.25
9048	9/15/23	OE Loc 77 Pension Fund	45,843.55
Aug-Oct '23 Retainer	9/15/23	Bolton Partners, Inc.	6,300.00
9049	9/18/23	OE Loc.77 Check Off Dues	235,358.86
9050	9/18/23	IUOE Loc.132 - H&W Fund	972.00
9051	9/18/23	IUOE Loc.147 - H&W Fund	4,061.25
9052	9/18/23	Loc.18 - Ohio Operat.Engineers	299.00
9053	9/18/23	IUOE Local 181	2,316.13
9054	9/18/23	OE Loc.37 - H&W Fund	14,216.74
9055	9/18/23	OE Loc.66 Welf.Fund	3,648.00
9056	9/18/23	IUOE & Pipe Line Employers H&W Fund	3,771.00
Delta9/9-9/15/23	9/18/23	Delta Dental of Pennsylvania	9,304.80
Aetha 10/23	9/18/23	AETNA	110,951.50
CareFirst 9/9-15/23	9/19/23	CareFirst Blue Cross Blue Shield	145,457.51
9057	9/22/23	Visionmark	437.50
9058	9/22/23	VSP VISION CARE, INC	9,718.59
Qtr End 9/30/23	9/22/23	Investment Performance Services, LLC	4,372.24
CareFirst 9/16-9/22	9/29/23	CareFirst Blue Cross Blue Shield	46,943.08
Delta 9/16-22/23;9/2	9/29/23	Delta Dental of Pennsylvania	17,299.80
9059	9/29/23	Calibre CPA Group, PLLC	1,327.50
9060	9/29/23	CareFirst Blue Cross Blue Shield	11,669.10
Total			**971,175.45**

PARTICIPANT APPEALS

NAME: **SS#:**
REGARDING:

Operating Engineers Local No. 77 Trust Fund of Washington, D.C. Health and Welfare Program

EMPLOYER: Crane Rental Co., Inc. **LOCAL:** 77
STATUS: Full Time

ISSUE: Hospital/Medical – Pre-Service, Exception to Annual Maximum Benefit #M23/203-5815

FUND RULE:

Benefit		Persons Eligible
[…]		
Major Medical Benefit	Fund pays 80% of eligible medical/hospital expenses up to the UCR after satisfying annual deductible. There is a $4,000 out-of-pocket cost per person, per year. Eligible expenses are covered at 100% after participant payment of annual out-of-pocket maximum in a calendar year, **up to $200,000, subject to the annual maximum benefit. Payment for Essential Health Benefits covered at 50% after $200,000 has been paid.**	Participants & Dependents

(Quoted from the Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 SPD, Page 11)

SUMMARY: Appeal Received: October 13, 2023

The **provider,** Dr. Michael Eberlein, is appealing on behalf of the participant's spouse for an exception to the Plan's annual maximum benefit and co-insurance provisions with respect to a proposed lung transplant. It was noted that a pre-service appeal for coverage of a lung transplant was approved by the Board of Trustees on September 21, 2023.

Dr. Eberlein states in the current appeal that due to the cost of the lung transplant, they cannot move forward based on the Plan's $200,000 annual maximum benefit and that for them to consider proceeding with the transplant, they need to ensure that the annual maximum benefit is "unlimited."

Under the terms of the Plan, eligible expenses are covered at 100% after the participant satisfies payment of their annual out-of-pocket maximum in a calendar year, up to $200,000, subject to the annual maximum benefit. Payment for "Essential Health Benefits" are covered at 50% after $200,000 has been paid. In this case, otherwise eligible transplant expenses incurred beyond the participant's spouse's $200,000 annual maximum benefit would be payable at a 50% co-insurance rate.

After the appeal was received, the Fund office requested from the provider on October 19, 2023 a detailed itemization of the anticipated transplant surgery-related expenses including CPT codes, provider network status with CareFirst, and anticipated reimbursement rates. The provider responded on October 26, 2023 with a quote dated 2021 indicating that a lung consult and evaluation would bill at $10,000 and a single lung transplant "through day 60" would bill at $650,000. No further information was received. The Fund office requested further clarification from the provider on October 27, 2023. To date, there has been no response from the provider.

ACTION: **Approved** ☐ **Denied** ☐ **Tabled** ☐
COMMENTS:

NAME: **SS#:**

Operating Engineers Local No. 77 Trust Fund of Washington, D.C. Health and Welfare Program

EMPLOYER: Extreme Steel Crane & Rigging **STATUS:** Active

ISSUE: Prescription – Excluded Drug #Rx23/179-2915

FUND RULE:
"**Exclusions and Limitations**

The following charges/expenses are excluded from payment under any benefit category (unless otherwise specified as being covered elsewhere in this SPD). […]

26. Treatment of obesity is not covered, nor are weight reduction or physical fitness programs."
(Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 SPD, Page 87, #26)

"**Prescription Drug Benefit**

Exclusions
The following drugs/supplies are excluded under your prescription benefit: […]

2. Vitamins, minerals, dietary supplements, dietary drugs, etc."
(Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 SPD, Page 106, #2)

SUMMARY: Appeal Received: August 21, 2023

The **provider,** Erin Stewart, NP, is appealing on behalf of the participant for coverage of Wegovy, which is an injectable prescription drug used for weight loss. It was noted that a Prior Authorization for Wegovy was denied by CVS/Caremark because anti-obesity medications are not covered under the Plan.

Ms. Stewart stated that the participant needs Wegovy because he has a BMI (Body Mass Index) of 48.55.

ACTION: **Approved** ☐ **Denied** ☐ **Tabled** ☐

COMMENTS:

NAME: **SS#:**

Operating Engineers Local No. 77 Trust Fund of Washington, D.C. Health and Welfare Program

EMPLOYER: Crane Service Co., Inc. **STATUS:** Active

ISSUE: Prescription – Excluded Drug #Rx23/180-7141

FUND RULE:

SUMMARY: Appeal Received: August 21, 2023

The **provider,** Southern Maryland Dermatology, is appealing on behalf of the participant for coverage of Ciclopirox, which is a topical, antifungal prescription drug. The provider states in the appeal that the participant is being treated for onychomycosis (a fungal infection of the nails), has failed over-the-counter nail fungal treatment, and will need to use Ciclopirox for one year to achieve maximum results.

After the appeal was received, the Fund office contact CVS/Caremark. CVS/Caremark advised that it denied a pharmacy claim for Ciclopirox because topical medications are not covered under the Plan.

ACTION: **Approved** ☐ **Denied** ☐ **Tabled** ☐

COMMENTS:

NAME: **SS#:**

Operating Engineers Local No. 77 Trust Fund of Washington, D.C. Health and Welfare Program

EMPLOYER: Fort Myer **STATUS:** Active

ISSUE: Hospital/Medical – Emergency Treatment #M23/163-8396

FUND RULE:
"**Emergency Room Visits**
The Fund covers visits to the emergency room provided that your (or your dependent's) condition required immediate care. Examples of medical emergencies include heart attack, severe chest pains, cardiovascular accidents, poisoning, loss of consciousness or respiration, convulsions and other acute conditions. The diagnosis or the symptoms, and the degree of severity, must be such that immediate medical care would normally be required.

Medical emergencies do not include less acute medical conditions, which your own physician or other outpatient provider could treat during regular office hours. If you use the emergency room for a condition which did not require immediate medical care and which could have been treated during regular office hours, it will not be covered.

Always remember that the Fund will NOT cover any services provided in an emergency setting if the care was not of an emergency nature and could have been provided by your physician or other provider in an outpatient or other alternative care setting."
(Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 SPD, Page 74)

SUMMARY:	Date(s) of Service:	November 11, 2022
	Claim(s) Received:	November 29, 2022
	Claim(s) Denied:	December 6, 2022
	Appeal Received:	June 28, 2023

The **participant** is appealing for payment of an emergency room claim that was partially denied. The participant states in summary that he had heat stroke symptoms prompting this visit. The participant further states that he rarely uses his health insurance, he almost never visits the doctor unless it is an emergency, and that his income is not enough to cover this bill.

Fund records indicate that Holy Cross Hospital submitted a claim for emergency room facility and ancillary charges with a diagnosis of "Weakness." MEP Health also submitted a claim for emergency room physician's charges with the same diagnosis. The ancillary and physician's charges were allowed, applied to the participant's annual deductible, and paid up to the limits of the Plan. The facility charges were denied because the visit was not considered emergency treatment within the extent of the Plan based on the billing diagnosis.

After the appeal was received, the Fund office mailed letters to the participant and Holy Cross Hospital on July 6, 2023 and July 21, 2023, requesting complete medical records from the emergency room visit in order to verify the nature of the treatment. To date, there has been no response to these requests.

ACTION: **Approved** ☐ **Denied** ☐ **Tabled** ☐
COMMENTS:

NAME: **SS#:**

Operating Engineers Local No. 77 Trust Fund of Washington, D.C. Health and Welfare Program

EMPLOYER: SIHJV/Lane Construction **STATUS:** Active

ISSUE: Hospital/Medical – Emergency Treatment #M23/199-9318

FUND RULE:
"**Emergency Room Visits**
The Fund covers visits to the emergency room provided that your (or your dependent's) condition required immediate care. Examples of medical emergencies include heart attack, severe chest pains, cardiovascular accidents, poisoning, loss of consciousness or respiration, convulsions and other acute conditions. The diagnosis or the symptoms, and the degree of severity, must be such that immediate medical care would normally be required.

Medical emergencies do not include less acute medical conditions, which your own physician or other outpatient provider could treat during regular office hours. If you use the emergency room for a condition which did not require immediate medical care and which could have been treated during regular office hours, it will not be covered.

Always remember that the Fund will NOT cover any services provided in an emergency setting if the care was not of an emergency nature and could have been provided by your physician or other provider in an outpatient or other alternative care setting."
(Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 SPD, Page 74)

SUMMARY:

Date(s) of Service:	July 1, 2023
Claim(s) Received:	July 7, 2023
Claim(s) Denied:	July 10, 2023
Appeal Received:	September 28, 2023

The **provider**, Berkeley Medical Center, is appealing for payment of an emergency room claim that was partially denied. The provider states in summary that the services were medically necessary, in their opinion.

Fund records indicate that Berkeley Medical Center submitted a claim for emergency room facility and ancillary charges with a primary diagnosis of "Urinary tract infection, site not specified." Fayette Physician Network, Inc. also submitted a claim for emergency room physician charges with the same diagnosis. The ancillary and physician's charges were allowed and paid, up to the limits of the Plan. The facility charges were denied because the visit was not considered emergency treatment within the extent of the Plan based on the billing diagnosis.

Medical records received with the appeal indicate that the participant presented to the emergency room on Saturday, July 1, 2023 at 11:45 AM with a chief complaint of vaginal spotting and lower abdominal pain. It was noted that the participant thought she had a urinary tract infection. The participant was evaluated, labs and radiology were performed, and she was subsequently discharged at 2:38 PM with a prescription for an antibiotic and instructions to follow up with a primary care physician. After review, the claim remained denied because the visit was not considered emergency treatment within the extent of the Plan.

ACTION: **Approved** ☐ **Denied** ☐ **Tabled** ☐
COMMENTS:

NAME: **SS#:**
REGARDING:

Operating Engineers Local No. 77 Trust Fund of Washington, D.C. Health and Welfare Program

EMPLOYER: Fort Myer **STATUS:** Active

ISSUE: Hospital/Medical – Emergency Treatment #M23/188-7033

FUND RULE:
"**Emergency Room Visits**
The Fund covers visits to the emergency room provided that your (or your dependent's) condition required immediate care. Examples of medical emergencies include heart attack, severe chest pains, cardiovascular accidents, poisoning, loss of consciousness or respiration, convulsions and other acute conditions. The diagnosis or the symptoms, and the degree of severity, must be such that immediate medical care would normally be required.

Medical emergencies do not include less acute medical conditions, which your own physician or other outpatient provider could treat during regular office hours. If you use the emergency room for a condition which did not require immediate medical care and which could have been treated during regular office hours, it will not be covered.

Always remember that the Fund will NOT cover any services provided in an emergency setting if the care was not of an emergency nature and could have been provided by your physician or other provider in an outpatient or other alternative care setting."
(Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 SPD, Page 74)

SUMMARY:	Date(s) of Service:	July 4, 2023
	Claim(s) Received:	July 19, 2023
	Claim(s) Denied:	July 20, 2023
	Appeal Received:	September 15, 2023

The **provider**, Inova Health System, is appealing for payment of an emergency room claim, for the participant's 22-year old son, that was denied. The provider states, "Based on the patient's presenting symptoms, the services rendered were appropriately billed in accordance with the facilities coding guidelines and were medically necessary to prevent serious impairment."

Fund records indicate that Inova Health System submitted a claim for emergency room facility charges with the diagnoses "Localized enlarged lymph nodes, and Contact with and (suspected) exposure to Covid-19." North East Virginia Emergency Physicians, LLC also submitted a claim for emergency room physician charges with the diagnosis "Acute lymphadenitis of face, head and neck." The physician's charges were allowed and applied to the participant's annual deductible. The facility charges were denied because the visit was not considered emergency treatment within the extent of the Plan based on the billing diagnosis.

Medical records received with the appeal indicate that the participant's son presented to the emergency room on Tuesday, July 4, 2023 at 3:12 PM with a chief complaint of a lump on the left side of his neck that had been present for approximately two weeks. It was noted that he did not attempt to go to a doctor until four days prior to this visit, because the lump was getting bigger and hurting more, however, his doctor did not have any open appointments until August. The participant's son was evaluated, labs were performed, and he was subsequently discharged at 3:48 PM with instructions to follow up with a physician in one week. After review, the claim remained denied because the visit was not considered emergency treatment within the extent of the Plan.

ACTION: **Approved** ☐ **Denied** ☐ **Tabled** ☐
COMMENTS:

NAME: **SS#:**

Operating Engineers Local No. 77 Trust Fund of Washington, D.C. Health and Welfare Program

EMPLOYER:	Kiewit Infrastructure	**LOCAL:**	77
		STATUS:	**Terminated, July 31, 2023**

ISSUE: Hospital/Medical – Medical Necessity #M23/176-9677

FUND RULE:
"**Alcohol and Substance Abuse Benefits**
Treatment of alcohol and substance abuse is covered if the participant/covered dependent meets the following conditions:

1. Prior approval is required.
2. You must submit a letter of medical necessity from the legally qualified physician requesting treatment by a social worker and/or a drug and alcohol counselor. With Fund approval, the Fund will pay for the treatment of drug and alcohol addiction.
3. The Fund will pay 100% for inpatient and outpatient care up to the Usual, Customary and Reasonable ('UCR') charges and subject to the other limits of the Plan. No other benefits are payable under the Plan for drug and alcohol addiction. Inpatient treatment (including at a drug and alcohol treatment facility) must be approved by the Fund Office prior to your admission. Contact American Health Holding* to pre-authorize treatment. You must submit a request in writing prior to undergoing treatment in order to be covered for this benefit."
(Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 SPD, Page 71)

*Effective January 1, 2019, Conifer Health Solutions replaced American Health Holding as the Fund's medical review firm.

SUMMARY:	Date(s) of Service:	December 1, 2022 through January 31, 2023
	Claim(s) Received:	March 16, 2023 through August 17, 2023
	Claim(s) Denied:	April 6, 2023 through September 1, 2023
	Appeal Received:	August 1, 2023

The **provider,** Into The Light, LLC, is appealing for payment of claims for an intensive outpatient program ("IOP") that were deemed not medically necessary by Conifer Health Solutions and therefore denied.

Fund records indicate that Into The Light, LLC initially submitted claims for a partial hospitalization from October 3, 2022 through November 28, 2022 with the diagnoses "Major depressive disorder, recurrent severe without psychotic features, and Alcohol dependence, uncomplicated." Conifer advised the Fund office that the services from October 3, 2022 through November 28, 2022 were medically necessary, and claims received were paid, up to the limits of the Plan.

Into The Light, LLC submitted additional claims for an intensive outpatient program, with the same diagnoses, from December 1, 2022 through January 31, 2023. Those claims were received by the Fund office between March 16, 2023 and August 17, 2023. Under the terms of the Plan, prior approval is required in order for treatment of alcohol and substance use disorders to be covered. The Fund office does not have a record of receiving a request for prior approval of the intensive outpatient program from the participant or the provider prior to these services being rendered. Conifer states that their organization first received a request to review the intensive outpatient program from the provider via a phone call on February 1, 2023, and the provider indicated that the participant was covered under a different policy for the partial hospitalization services, which contradicts the Fund office's claims record. Conifer faxed an authorization form to the provider, for the provider to complete, at that time. Conifer received a completed authorization form from the provider via fax on April 19, 2023.

Upon review, Conifer advised that the intensive outpatient program as of December 1, 2022 was **not medically necessary,** stating, **"The documentation indicates that by December 1, 2022, the patient's clinical presentation was relatively stable. The patient had maintained sobriety and there was no severity of mood related symptoms or PTSD that would support the use of intensive treatment. There was no other symptom severity or impairment of functioning that could not have been appropriately addressed in a less intensive setting, such as continued treatment in the outpatient setting with frequent attendance at 12-step support groups."** The claims for services from December 1, 2022 through January 31, 2023 were denied because those services were deemed not medically necessary.

The provider states, in summary, that any lower level of care would not have been appropriate and that a drop down to a less structured setting "may have been clinically irresponsible." The provider states that the participant consistently exhibited a pattern of mood cycling from manic to depressive episodes which was associated with intermittent periods of suicidal ideation during the depressive episodes, the participant experienced a lack of motivation, diminished frustration tolerance and inability to be productive or tend to daily obligations or programming assignments without direct intervention, and persistently presented with problems tending to activities of daily living including hygiene and grooming. The provider states that the participant experienced impairments to interpersonal relationships associated with significant trauma history, and that his trauma history was also associated with consistent intrusive thoughts of violent imagery and impulses. Lastly, the provider states that the participant was assisted with constant observation and assessment for suicidality to ensure his safety, that he received regular and necessary interventions from the clinical team to address his trauma history and associated psycho-social impairments, and that the participant was regularly evaluated by the attending physician and medication adjustments were made to help manage his symptomology.

After the appeal was received by the Fund office, Conifer advised that an appeal level of review was conducted at their organization with a different physician reviewer, which upheld its previous denial.

ACTION: **Approved** ☐ **Denied** ☐ **Tabled** ☐

COMMENTS:

NAME: **SS#:**

Operating Engineers Local No. 77 Trust Fund of Washington, D.C. Health and Welfare Program

EMPLOYER: Capitol Paving of DC **STATUS:** Active

ISSUE: Hospital/Medical – Benefit Level for Cologuard #M23/193-3734

FUND RULE:
"**MAJOR MEDICAL BENEFITS**

Benefit Amount
Covered medical expenses under Major Medical are payable at 80% up to the Usual, Customary, and Reasonable ('UCR') amount, as determined by the Plan. You must satisfy a $300 annual deductible per person or a $1,000 annual deductible per family before the Fund will begin paying benefits."
(Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 SPD, Page 70)

"**GRANDFATHERED STATUS**

The Trustees believe that the Operating Engineers Local No. 77 Trust Fund of Washington, D.C. is a 'grandfathered health plan' under the PPACA.

The Operating Engineers Local No. 77 Trust Fund of Washington, D.C. uses collectively bargained employer contributions to the Plan, and income from the investment of Plan assets, to provide the most generous health plan that is prudently possible given the assets of the Plan. To avoid the financial and other burdens on the Plan that would be associated with full implementation of the PPACA, the Trustees have decided to operate the Plan as a 'grandfathered health plan' under the PPACA.

A health plan that was in existence on March 23, 2010, the enactment date of the PPACA, is referred to under the PPACA as a 'grandfathered health plan.' As permitted by the PPACA, 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 the Plan may not include certain consumer protections of the PPACA that apply to other plans, for example, the requirement for the provision of preventive health services without any cost sharing. […]"
(Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 SPD, Pages 126-127)

SUMMARY:

Date(s) of Service:	November 24, 2022
Claim(s) Received:	July 17, 2023
Claim(s) Paid:	July 21, 2023
Appeal Received:	September 20, 2023

The **provider**, Exact Sciences Laboratories, is appealing for additional payment on a claim for a Cologuard test. The provider states that there should be no patient cost-sharing for this preventive service under the Affordable Care Act.

Fund records indicate that Exact Sciences Laboratories submitted a claim for Cologuard testing performed on November 24, 2022. The claim was paid, up to the limits of the Plan, at 80% of the CareFirst PPO allowed amount.

Note: As a grandfathered health plan, the Affordable Care Act's requirement for the provision of preventive health services without any cost sharing does not apply.

ACTION: **Approved** ☐ **Denied** ☐ **Tabled** ☐
COMMENTS:

NAME: **SS#:**

Operating Engineers Local No. 77 Trust Fund of Washington, D.C. Health and Welfare Program

EMPLOYER: Capitol Paving of DC **STATUS:** Active

ISSUE: Hospital/Medical – Benefit Level for Cologuard #M23/194-3370

FUND RULE:
"**MAJOR MEDICAL BENEFITS**

Benefit Amount
Covered medical expenses under Major Medical are payable at 80% up to the Usual, Customary, and Reasonable ('UCR') amount, as determined by the Plan. You must satisfy a $300 annual deductible per person or a $1,000 annual deductible per family before the Fund will begin paying benefits."
(Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 SPD, Page 70)

"**GRANDFATHERED STATUS**

The Trustees believe that the Operating Engineers Local No. 77 Trust Fund of Washington, D.C. is a 'grandfathered health plan' under the PPACA.

The Operating Engineers Local No. 77 Trust Fund of Washington, D.C. uses collectively bargained employer contributions to the Plan, and income from the investment of Plan assets, to provide the most generous health plan that is prudently possible given the assets of the Plan. To avoid the financial and other burdens on the Plan that would be associated with full implementation of the PPACA, the Trustees have decided to operate the Plan as a 'grandfathered health plan' under the PPACA.

A health plan that was in existence on March 23, 2010, the enactment date of the PPACA, is referred to under the PPACA as a 'grandfathered health plan.' As permitted by the PPACA, 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 the Plan may not include certain consumer protections of the PPACA that apply to other plans, for example, the requirement for the provision of preventive health services without any cost sharing. […]"
(Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 SPD, Pages 126-127)

SUMMARY:		
	Date(s) of Service:	December 27, 2022
	Claim(s) Received:	July 18, 2023
	Claim(s) Paid:	July 24, 2023
	Appeal Received:	September 20, 2023

The **provider**, Exact Sciences Laboratories, is appealing for additional payment on a claim for a Cologuard test. The provider states that there should be no patient cost-sharing for this preventive service under the Affordable Care Act.

Fund records indicate that Exact Sciences Laboratories submitted a claim for Cologuard testing performed on December 27, 2022. The claim was paid, up to the limits of the Plan, at 80% of the CareFirst PPO allowed amount.

Note: As a grandfathered health plan, the Affordable Care Act's requirement for the provision of preventive health services without any cost sharing does not apply.

ACTION: **Approved** ☐ **Denied** ☐ **Tabled** ☐
COMMENTS:

NAME: **SS#:**

Operating Engineers Local No. 77 Trust Fund of Washington, D.C. Health and Welfare Program

EMPLOYER: Extreme Steel Crane & Rigging **STATUS:** Active

ISSUE: Prescription – Excluded Drug #Rx23/157-5939

FUND RULE:
"**Exclusions and Limitations**

The following charges/expenses are excluded from payment under any benefit category (unless otherwise specified as being covered elsewhere in this SPD). […]

26. Treatment of obesity is not covered, nor are weight reduction or physical fitness programs."
(Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 SPD, Page 87, #26)

"**Prescription Drug Benefit**

Exclusions
The following drugs/supplies are excluded under your prescription benefit: […]

2. Vitamins, minerals, dietary supplements, dietary drugs, etc."
(Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 SPD, Page 106, #2)

SUMMARY: Appeal Received: June 22, 2023

The **provider,** Dr. Sharon Peake, is appealing on behalf of the participant for coverage of Wegovy, which is an injectable prescription drug used for weight loss. It was noted that a Prior Authorization for Wegovy was denied by CVS/Caremark because anti-obesity medications are not covered under the Plan.

Dr. Peake states in the appeal that the participant has a BMI (Body Mass Index) over 30 and "needs assistance in his weight loss journey."

Note: This appeal was presented to the Board of Trustees at its August 8, 2023 quarterly meeting. The appeal was tabled for additional information on the cost of Wegovy.

ACTION: **Approved** ☐ **Denied** ☐ **Tabled** ☐

COMMENTS:

NAME: **SS#:**

Operating Engineers Local No. 77 Trust Fund of Washington, D.C. Health and Welfare Program

EMPLOYER: Capitol Paving of DC, Inc. **STATUS:** Active

ISSUE: Prescription – Excluded Drug #Rx23/170-5285

FUND RULE:

"**Exclusions and Limitations**

The following charges/expenses are excluded from payment under any benefit category (unless otherwise specified as being covered elsewhere in this SPD). […]

26. Treatment of obesity is not covered, nor are weight reduction or physical fitness programs."
(Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 SPD, Page 87, #26)

"**Prescription Drug Benefit**

Exclusions
The following drugs/supplies are excluded under your prescription benefit: […]

2. Vitamins, minerals, dietary supplements, dietary drugs, etc."
(Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 SPD, Page 106, #2)

SUMMARY: Appeal Received: July 21, 2023

The **provider,** Dr. Tanvi Beri, is appealing on behalf of the participant for coverage of Wegovy, which is an injectable prescription drug used for weight loss. It was noted that a Prior Authorization for Wegovy was denied by CVS/Caremark because anti-obesity medications are not covered under the Plan.

Dr. Beri states in the appeal that the participant has been "thinking about medication intervention to lose weight." Dr. Beri further states that the participant has a BMI (Body Mass Index) of 54.42 and that Wegovy "is necessary to the patient's plan of treatment."

Note: This appeal was presented to the Board of Trustees at its August 8, 2023 quarterly meeting. The appeal was tabled for additional information on the cost of Wegovy.

ACTION: **Approved** ☐ **Denied** ☐ **Tabled** ☐

COMMENTS:

NAME: **SS#:**

Operating Engineers Local No. 77 Trust Fund of Washington, D.C. Health and Welfare Program

EMPLOYER: Crane Service Co. **LOCAL:** 77
STATUS: Full Time

ISSUE: Prescription – Prior Authorization #Rx23/162-4020

FUND RULE:

SUMMARY: Appeal Received: August 2, 2023

The **provider,** Dr. Ahmed Kafaji, is appealing on behalf of the participant for coverage of Ajovy, which is an injectable prescription drug that is used to prevent migraine headaches.

Ajovy requires a Prior Authorization under the Plan. It was noted that a Prior Authorization for Ajovy was denied by CVS/Caremark on July 5, 2023 because it did not meet its criteria for coverage. CVS/Caremark stated, **"Your plan covers this drug when you have tried any of the following for 8 weeks and it did not work for you, or you cannot take them: Antiepileptic drugs (AED) (e.g., divalproex sodium, topiramate, valproate sodium), Beta-adrenergic blocking agents (e.g., metoprolol, propranolol, timolol, atenolol, nadolol), Antidepressants (e.g., amitriptyline, venlafaxine)."**

Documentation received with the appeal indicates that the participant cannot take antiepileptic drugs because of potential side effects such as dizziness and insomnia; the participant cannot take beta-adrenergic blocking agents because of potential side effects such as fatigue, dizziness, weight gain, and sexual dysfunction; and the participant cannot take antidepressants because of potential side effects such as drowsiness and weight gain; and that these potential side effects could affect him as a crane operator.

Note: This appeal was presented to the Board of Trustees at its August 8, 2023 quarterly meeting. The appeal was tabled for additional information. Caremark subsequently advised the Fund office that their organization received information allowing the Prior Authorization to be approved. Therefore, this appeal is resolved.

ACTION: **Approved** ☐ **Denied** ☐ **Tabled** ☐

COMMENTS:

OTHER FUND BUSINESS