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

NOVEMBER 20, 2025

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

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Sparks, MD 21152-9451
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HEALTH & WELFARE

AGENDA

November 20, 2025

I. **CALL TO ORDER**

II. **MINUTES**

- Regular meeting – August 12, 2025

III. **FINANCIAL REPORT**

- Investment Performance Services

IV. **AUDITOR'S REPORT – 2024 FINANCIAL STATEMENTS**

V. **CONSULTANT'S REPORT**

- Bolton – 3rd Quarter 2025
- Medicare Advantage Renewal – 2026
- Retiree Co-Pay Rates and COBRA Rates

VI. **ATTORNEY'S REPORT**

VII. **ADMINISTRATIVE MANAGER'S REPORT**

- Gain/Loss Reports – September 2025

VIII. **PARTICIPANT APPEALS**

IX. **OTHER FUND BUSINESS**

- Zelis Out Of Network Savings July-Sep 2025
- Summary Annual Report
- Conifer 3rd Quarter Report

X. **NEXT MEETING DATE AND LOCATION**

- February 10, 2026

XI. **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
AUGUST 12, 2025

The following Trustees were present:

UNION TRUSTEES	**EMPLOYER TRUSTEES**
J. VanDyke	John Knowles (via Zoom)
S. Faulkner	B. Horne
B. Gilroy – Local 77	B. Mazzella
J. Ventura	

ALSO PRESENT:

C. Fuller – McChesney & Dale, P.C.
D. Jensen – Associated Administrators, LLC
J. Mink – Investment Performance Services, LLC
R. Devlin – Bolton

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 13, 2025, 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 13, 2025 as written.**

III. FINANCIAL REPORTS

Investment Performance Services

The Trustees welcomed Ms. Jennifer Mink from Investment Performance Services (IPS) to the meeting. Ms. Mink reviewed the investment performance analysis for the Second quarter 2025. The report indicated assets of $39,823,873 as of June 30, 2025 compared to $37,894,278 as of June 30, 2024, producing a gain of $1,929,595. The report further indicated the total return for the quarter ending June 30, 2025 was 3.5%. For domestic large cap equity, the returns were 12.7%; for investment grade fixed income, the returns were 36.6%; for short duration high yield fixed income, the returns were 34.6%; and for real estate, the returns were 7.3% for the quarter ending June 30, 2025.

Asset Allocation

Policy was adopted February 2025. Cash Equivalents includes, $32,282 income distribution from real-estate – value add Boyd Watterson State Government Fund, LP that was reinvested in July 2025 via the Dividend Reinvestment Program (DRIP).

IV. CONSULTANT'S REPORT

Bolton - Second Quarter Financial Update

The Trustees welcomed Mr. Ryan Devlin of Bolton Partners to the meeting. Mr. Devlin distributed a report comparing the projected benefit cost to the actual benefit cost for the period January 1, 2025 through June 30, 2025. Total revenue through the second quarter of 2025 was $9,724,639. Disbursements were $1,512,421, resulting in a surplus of $650,114. Mr. Devlin stated the Fund currently has an estimated 22.2 net months in reserve.

Labor First 2026 MAPD Renewal and Marketing Analysis

Mr. Ryan Devlin presented the 2026 Renewal package for Labor First. This report included the 2026 incumbent renewal and market analysis. For the incumbent carrier Aetna, the price increased 29.42%. The 2025 MAPD pricing is $236.90 pmpm. For 2026 the cost would increase to $306.59 pmpm.

V. ATTORNEY'S REPORT

Transitional Reassurance File

Fund Counsel reported that oral argument was before the U.S. Court of Appeals for the Federal Circuit in July. The court had familiarized itself with the facts of the case and it procedural history of the case. The judges appeared interested in the case, observing it was quite different from most cases appearing before it, and posed difficult questions to each side. Overall, counsel representing the Funds presented the arguments well and addressed the court's questions directly. No time frame for a decision was given by the court. Counsel estimated that a decision will not likely be issued before Spring 2026.

Testosterone Injection

A Local 77 member had gone to a doctor who suggested testosterone shots due to low testosterone. CVS denied the claim as this is not covered. The personal health nurse from Conifer called CVS in November and they advised that testosterone injection is not a covered medication. Testosterone is covered in gel form, but his provider advised that since the participant's spouse had breast cancer, she could not get the gel on her. Conifer stated it had no clinical information and had never reviewed any authorization for this incident.

On a motion made and seconded, the Trustees voted unanimous approval of the following

RESOLVED to approve coverage of Testosterone injections for this member.

VI. ADMINISTRATIVE MANAGER'S REPORT

Gain/Loss Reports

Mr. Jensen presented the Administrative Manager's Report for the period January 1, 2025 through June 30, 2025. Such report indicated total contributions of $7,501,651, self-payments of $10,750, COBRA income of $26,976, net reciprocity income of $151,649, retiree self-pay income of $369,420, prescription subsidy of $0, liquidated damages of $3,938, miscellaneous income of $137, interest income of $13,489. Total income was 9,811,349. There were expenses totaling $9,151,838 for the period, producing a net gain for the period of $659,511.

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, 2025 through June 30, 2025 as presented.**

VII. PARTICIPANT/PROVIDER APPEALS

Participant Appeal #M25/127-0248

Mr. Fuller presented an appeal from the participant. The participant is appealing for payment of a claim that was denied for untimely filing. The participant states that he doesn't understand nor did he know that the address on the back of his card was "incorrect" until this past year. The participant further states that he called numerous times about the bill and was told it was never received, so he called the emergency room and had them send it again.

Fund records indicate Emergency Service Associates, PC submitted a claim for services rendered on October 21, 2023. CareFirst records indicate it first received this claim on March 10, 2025, and forwarded it to the Fund office at that time. The Fund office does not have any record of receiving this claim prior to March 11, 2025. The claim was denied for untimely filing.

After the appeal was received, letters were mailed to the participant on June 3, 2025 and June 18, 2025 requesting complete billing notes including a record of all submissions, a copy of an electronic receipt showing proof of acceptance of the claim by CareFirst (if applicable), all address(es) used to submit the claim, and asking if he was billed by the provider. To date, there has been no response to these requests.

Note: The Fund office has received numerous other claims, timely, on and around this date of service.

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

RESOLVED to approve the appeal for payment of the claim.

Participant Appeal #M25/125-9481

The participant's daughter is appealing for coverage of the Skyla IUD (intrauterine device). The participant's daughter states that the Skyla IUD is medically necessary to help with her mood regulations and irregular periods, and that she has been on Skyla before.

Note: IUD's are not a covered benefit under the Plan. Oral contraceptives are covered under the prescription drug benefit, with a medical diagnosis.

After the appeal was received, letters were mailed to the participant's daughter on June 9, 2025 and June 24, 2025 requesting a letter of medical necessity from the ordering physician, and any supporting medical records, for review. To date, there has been no response to these request

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

RESOLVED to deny the appeal for coverage.

Participant Appeal #M25/129-8893

The provider, Naveris, Inc., is appealing for payment of a laboratory claim for the participant's spouse that was denied. The provider states, in summary, that this NavDx test is a highly specific and sensitive cancer biomarker used routinely in the treatment of patients with HPV driven cancers, and the ordering physician determined that this test was medically necessary in determining the best course of treatment.

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

RESOLVED to deny the appeal for payment of claim

Participant Appeal #M25/122-9677

The provider, Orange County Detox, LLC, is appealing for coverage of residential treatment services rendered from April 8, 2025 through April 15, 2025 that were deemed not medically necessary by Conifer Health Solutions.

Fund records indicate the participant began receiving detox services at Orange County Detox, LLC on March 18, 2025 with a diagnosis of "Alcohol dependence, uncomplicated." Orange County Detox, LLC submitted claims to the Plan for services rendered from March 18, 2025 through April 7, 2025. Conifer Health Solutions advised that the services were medically necessary and those claims were paid, up to the limits of the Plan. Orange County Detox, LLC requested an extension of certification from Conifer on or about April 7, 2025 for residential treatment continuing from April 8, 2025 through April 15, 2025. Conifer conducted a peer-to-peer review with the provider, and subsequently determined that the extension was not medically necessary, stating in summary, "There is no indication of any severe psychiatric, functional impairments, and there is no severe psychosis Romania that require continue[d] treatment at this level of care. While there is indication, the patient is continuing to have some cravings present, there is no indication the patient is an immediate risk of relapse of treatment as attempted at a lower level of care. The patient also does not demonstrate any acute mental instability. […] The recommended level of care is several days per week intensive outpatient (IOP) level of care with the use of medication assisted treatment." The provider's appeal was received on April 29, 2025.

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

> **RESOLVED to table the appeal in order to obtain more information from Conifer.**

Participant Appeal #M24/135-9804

The provider, Shawn Marhamati, MD, is appealing for coverage of a surgical procedure (CPT 0619T - "Cystourethroscopy with transurethral anterior prostate commissurotomy and drug delivery, including transrectal ultrasound and fluoroscopy"), which was deemed not medically necessary by Conifer Health Solutions. The Fund Office notes that CPT codes with a "T" modifier, such as this one, are considered "Category III CPT codes" for "emerging technology" by the

American Medical Association. Dr. Marhamati states, in summary, that the procedure is medically necessary and the participant meets all of the requirements.

Fund records indicate Shawn Marhamati, MD initially requested authorization from Conifer for this surgical procedure. Conifer advised that the procedure was not medically necessary, stating in summary, "While promising, the level of evidence does not support medical necessity. […] The recommended treatment plan could include the patient being treated with a transurethral resection of the prostate (TURP), photoselective vaporization of the prostate (PVP), Orolift, Aquablation, or a water vapor thermal therapy (WVTT)."

After the appeal was received, the Fund Office contacted Conifer, and Conifer conducted an appeal level of reconsideration. Conifer upheld the original recommendation that the procedure is not medically necessary or standard of care, stating in summary, "The alternate treatment plan for this would be any of the recommended procedures in the AUA Guidelines, including transurethral resection of the prostate, transurethral incision of the prostate, photo vaporization of the prostate, and prostate urethral lift, to name a few."

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

RESOLVED to deny the appeal for payment of claim

VIII. OTHER FUND BUSINESS

Out of Network Savings – Zelis

Mr. Jensen presented a performance overview from Zelis for the second quarter of 2025. The total net saving for each month were: April 2025 - $268.86; May 2025 – $2,138.87; and June 2025 – $1,678.06.

Conifer

Mr. Jensen presented the Plan Performance Report for the 2nd quarter of 2025 from Conifer Health Solutions. **Cost Drivers, Category of Care:** Inpatient Hospital remains the highest cost driver but has decreased 32% compared to 2024 due to less demand. Facility costs increased 10% through the second quarter, with the second quarter boing 42% higher than the first quarter. Medicine costs increased 20% in 2025, mainly due to increases in expenses for chemotherapy and dialysis. Expenses related to procedures increased 50% in the first two quarters of 2025, mainly due to increases in costs and demand for the Respiratory System category.

IX. NEXT MEETING DATE AND LOCATION

After discussion, the Trustees decided that the next meeting will be held November 20, 2025, beginning at 9:00 a.m. and will be held at the Landover Office of Associated Administrators, LLC.

X. ADJOURNMENT

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

Respectfully submitted,

John Knowles - Chairman

FINANCIAL REPORT

CONSULTANT’S REPORT

Bolton

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

Consultant's Report
Ryan Devlin, Senior Consultant

November 20, 2025

Projected vs. Actual

Operating Engineers Local 77 Trust Fund

Projected vs. Actual Results

For the Nine Months Ended September 30, 2025

	Projected Annual '25	Projected Monthly	Projected 1/25 - 9/25	Actual 1/25 - 9/25	Actual Monthly	Variance 1/25 - 9/25
Receipts						
Total Contributions	$ 18,175,262	$ 1,514,605	$ 13,631,447	$ 13,158,248	$ 1,462,028	$ (473,199)
Investment Earnings (net)	1,489,976	124,165	1,117,482	2,405,227	267,247	1,287,745
Total Revenue	**$ 19,665,238**	**$ 1,638,770**	**$ 14,748,929**	**$ 15,563,475**	**$ 1,729,275**	**$ 814,546**
Disbursements						
Benefit Expense	$ 17,314,243	$ 1,442,854	$ 12,985,682	$ 13,030,713	$ 1,447,857	$ 45,031
Administrative Expense	1,208,965	100,747	906,723	896,252	99,584	(10,471)
Total Disbursements	**$ 18,523,208**	**$ 1,543,601**	**$ 13,892,406**	**$ 13,926,965**	**$ 1,547,441**	**$ 34,559**
Surplus/(Deficit)	**$ 1,142,031**	**$ 95,169**	**$ 856,523**	**$ 1,636,510**	**$ 181,834**	**$ 779,987**
Estimated net months in reserve:				***22.3***		

2026 Medicare Advantage Renewal

LaborFirst

2026 Incumbent Renewal and Market Analysis

PRODUCT: **Medicare Advantage with Prescription Drug Plan**
MAPD Incumbent: **Aetna**

	MAPD - Aetna - IUOE Local 77 - 2025	MAPD - Aetna - IUOE Local 77 - 2026 Firm	MAPD - Carefirst - IUOE Local 77 - 2026	MAPD - Humana - IUOE Local 77 - 2026	United HealthCare
Total Rate PMPM	$236.90	$317.00	$478.65	$305.47	DNQ
Annualized *	$1,327,587.60	$1,776,468.00	$2,682,354.60	$1,711,853.88	-
Annualized Change	-	$448,880.40	$1,354,767.00	$384,266.28	-
% Change	-	33.81%	102.05%	28.94%	-

* Annualized amounts are based on 467 retirees

- Plans are quoted with robust formularies to minimize disruption.
- Please note that medications can change tiers between carriers and between plan years.

COBRA Rates

	Current	2026	% Change
Single	$346.62	$580.51	67.5%
Family	$901.21	$1,509.31	67.5%

- COBRA rates have not been updated in several years.
- Based on recent claims experience, the projection model estimates a 67.5% increase is needed.

Retiree Co-Pay Rates

AA LLC Associated Administrators — *Benefit Operations* *Eligibility*

Name of Procedure: Retiree Medical Rates

Applicable Funds: 77 effective 1/1/2023

NON-MEDICARE:

Eligible retiree only - $550 a month
Eligible retiree and spouse - $650.00 a month.

If one is Medicare & the other non-Medicare - ~~$650~~ **$630** a month.

MEDICARE:

If retired and already on Medicare prior to 1/1/2022:
Medicare eligible retiree only - $~~100~~ per month **$80**
Medicare eligible retiree and Medicare eligible spouse -- $~~200.00~~ **$160** a month
Individual Medicare spouse -$~~100~~ per month **$80**

If not retired as of 1/1/2022 or retired but not yet on Medicare as of 1/1/2022:
Medicare eligible retiree only - $~~125~~ **$105** per month
Medicare eligible retiree and Medicare eligible spouse - $~~250~~ **$210** per month
Individual Medicare spouse -~~$125~~ **$105** per month

Additional children $100 per child per month above the Retiree rate or Retiree/Spouse rate

Please note that these rates are effective 1/1/2023.

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CO-PAY RATES FOR RETIREES EFFECTIVE JANUARY 1, 2024	
Retiree Under Age 65 Not Medicare-Eligible (Single)	$550
Retiree and Spouse Not Medicare-Eligible	$650
Additional $100 per month for each covered child	
Retiree on Medicare (Single)	$100
Retiree and Spouse on Medicare	$200
Additional $100 per month for each covered child	
Medicare-Covered but Not Retired (Single) or Medicare-Eligible Retiree (Single)	$125
Medicare-Covered and Spouse or Medicare Eligible and Spouse	$250
Additional $100 per month for each covered child	

ATTORNEY’S REPORT

ADMINISTRATIVE MANAGER'S REPORT

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

2025	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL	AVERAGE
INCOME														
CONTRIBUTIONS	1,373,303	1,059,883	1,361,208	1,170,540	1,127,211	1,409,506	1,549,582	1,467,720	1,522,571				12,041,524	1,337,947
CONTRI-SELF PAY	1,500	1,500	2,000	2,050	1,850	1,850	2,353	1,850	2,850				17,803	1,978
COBRA-SELF PAY	3,120	4,369	4,925	4,162	1,595	8,805	3,537	1,941	2,981				35,434	3,937
RECIPROCITY INCOME	68,631	66,972	60,289	135,553	86,054	57,388	78,032	112,055	87,609				752,584	83,620
RECIPROCITY PAYMENTS	(34,716)	(21,414)	(21,446)	(31,391)	(22,695)	(19,986)	(32,989)	(26,045)	(32,607)				(243,291)	(27,032)
RETIRED-SELF PAY	62,055	61,505	62,065	64,605	56,865	62,325	61,055	58,465	60,899				549,839	61,093
LIQUIDATED DAMAGES	0	1,141	741	320	1,735	0	0	0	0				3,938	438
INTEREST INCOME	2,533	3,207	2,472	3,079	1,136	1,061	1,938	2,933	1,393				19,754	2,195
INTER.INC-AMER.CORE REALTY	0	0	26,649	0	0	27,432	0	0	25,828				79,909	8,879
INT ON DELINQUENCY	34	75	81	7	57	15	0	0	271				540	60
WEDGE LG CAP - INTEREST INCOME	176	182	121	209	161	120	213	194	137				1,513	168
WEDGE LG CAP - DIVIDEND INCOME	2,432	1,659	4,307	2,983	1,702	4,497	3,367	2,101	4,593				27,641	3,071
WEDGE FIXED- INTEREST ON INVEST.	18,182	38,894	37,146	44,051	45,874	28,850	20,264	42,355	44,108				319,725	35,525
CHART - INTEREST ON INVESTM.	47,795	38,914	81,702	63,567	46,073	88,974	50,258	27,957	90,560				535,800	59,533
VANGUARD - INTEREST ON INVESTMENT	0	0	0	0	0	2,804	0	0	2,390				5,194	577
WEDGE LG CAP - GAIN & LOSS	104,483	(96,634)	(122,036)	(18,170)	149,291	125,296	24,063	78,283	58,395				302,969	33,663
WEDGE FIXED - GAIN & LOSS	41,329	184,039	10,658	93,426	(87,997)	125,878	(59,593)	145,114	33,738				486,591	54,066
AMER CORE REALTY - GAIN & LOSS	0	0	5,317	0	0	7,780	0	0	5,752				18,848	2,094
VANGUARD - GAIN & LOSS	45,242	(71,661)	(194,562)	46,513	195,090	141,964	93,572	21,848	111,420				389,427	43,270
CHART - GAIN & LOSS	74,692	12,757	(52,410)	6,204	67,511	88,841	(25,685)	56,499	(2,881)				225,530	25,059
BOYD WATTERSON - GAIN & LOSS	0	0	23,185	0	0	0	35,494	0	64,106				122,785	13,643
RETIREE DRUG SUBSIDY INTERIM PAYMENT	0	0	0	0	0	0	0	0	0				0	0
MISC.INCOME	0	0	0	77	60	0	279	0	0				416	46
TOTAL INCOME	**1,810,790**	**1,285,388**	**1,292,411**	**1,587,786**	**1,671,574**	**2,163,401**	**1,805,740**	**1,993,271**	**2,084,113**				**15,694,473**	**1,743,830**
EXPENSES														
ADMIN.FEE	45,122	45,122	45,122	45,122	45,122	45,122	45,122	46,476	46,476				408,806	45,423
ACTUARIAL FEES	0	0	12,600	0	0	0	0	6,300	0				18,900	2,100
AUDITING	0	0	0	2,250	0	0	900	10,100	4,800				18,050	2,006
BANK CHARGES	0	0	0	0	23	474	448	562	529				2,035	226
BENEFITS PAID	979,309	609,025	1,224,821	1,164,886	1,475,087	853,752	1,005,529	1,447,026	782,332				9,541,767	1,060,196
PRESCRIPT BEN PAID	326,863	296,308	31,958	477,744	517,223	127,314	150,237	453,046	459,186				2,839,879	315,542
FIDUC.RESPONSIB.INSUR.	0	0	0	0	0	2,846	0	0	0				2,846	316
INVEST COUNSEL FEE	28,738	0	7,981	29,155	0	8,056	12,249	17,365	8,120				111,664	12,407
INVEST CUSTODIAN FEE	1,521	0	0	1,552	0	0	1,575	0	0				4,648	516
INV PERF EVAL FEE	0	0	4,835	0	0	4,869	0	0	4,978				14,682	1,631
LEGAL FEES	0	0	0	0	0	0	0	0	0				0	0
MEETING EXPENSE	123	0	0	0	0	109	0	0	85				316	35
PAYROLL AUDIT FEE	1,283	0	0	0	0	5,738	0	0	6,300				13,320	1,480
POSTAGE	0	0	0	0	2,595	0	0	0	2,842				5,437	604
CARE FIRST FEE	19,763	16,154	15,850	15,866	16,265	15,734	16,325	16,199	16,234				148,390	16,488
CONIFER CASE MANAGEMENT	20,351	21,632	22,687	0	16,750	43,735	20,958	21,084	22,317				189,514	21,057
HEALTHCARE COST MANAGEMENT	1,000	1,908	1,010	0	2,020	1,010	1,010	1,010	1,010				9,976	1,108
ZELIS CLAIMS ADMIN.FEE	0	0	0	4,109	4,363	917	719	0	0				10,107	1,123
PRINT & STATIONERY	459	3,168	0	0	3,036	377	0	438	15,728				23,206	2,578
REGISTRATION FEE	0	0	0	0	0	0	0	0	3,225				3,225	358
TELEPHONE EXP	0	103	0	121	0	0	0	0	247				471	52
TRAVEL EXP	0	0	0	0	0	0	0	0	0				0	0
HIPAA	339	267	324	321	257	306	281	248	347				2,691	299
SWIFTMD MONTHLY MEMBERSHIP FEE	3,474	3,432	3,420	3,369	3,387	0	3,432	3,414	3,432				27,360	3,040
OFFICE SUPPLIES & EXP.	0	0	0	261	0	0	0	0	0				261	29
TRUSTEE EXPENSES	0	0	0	0	0	0	0	0	0				0	0
DUES & SUBSCRIPTIONS	0	0	0	0	0	0	0	0	800				800	89
DENTAL INSURANCE	61,544	66,352	56,224	51,261	82,518	40,314	77,575	48,212	62,680				546,679	60,742
VISION BENEFITS PAID	9,902	9,401	14,137	9,036	13,344	9,884	10,667	14,334	11,682				102,386	11,376
TAX RETURN FORM 720(PCORI)	0	0	0	0	0	0	10,536	0	0				10,536	1,171
MISC.EXPENSE	0	0	0	0	0	0	0	0	0				0	0
TOTAL EXPENSE	**1,499,790**	**1,072,873**	**1,440,968**	**1,805,052**	**2,181,989**	**1,160,554**	**1,357,563**	**2,085,813**	**1,453,350**				**14,057,953**	**1,561,995**
GAIN/LOSS	**311,000**	**212,515**	**(148,557)**	**(217,266)**	**(510,415)**	**1,002,847**	**448,177**	**(92,543)**	**630,763**				**1,636,520**	**181,836**

OE Loc 77 Trust Fund of Wash. DC
Balance Sheet
September 30, 2025

ASSETS

Current Assets		
Cash Basis Accounts Receivable	$ 5.00	
PNC - Cash General 5501371443	717,859.24	
H&W Cash 20-46-002-6809064	1,729,283.82	
PNC - 5501371451 Benefit Acc.	545,751.96	
Due from Others	1,726.74	
Interest Receivable	245,168.21	
Dividend Receivable	1,509.49	
Prepaid Insurance	948.67	
Prepaid exp.	800.00	
Total Current Assets		3,243,053.13
Property and Equipment		
Accum.Depreciation	(1,558.33)	
Property & Equipment	1,558.33	
Total Property and Equipment		0.00
Other Assets		
Due from Broker	64,555.98	
VANGUARD	1,129,665.54	
Vanguard - Market Value	1,190,045.22	
Wedge - MM	46,885.28	
Wedge - Govt.Bonds	9,358,929.52	
WEDGE Gov.Bonds -Market Value	85,683.45	
Wedge - Corp.Bonds	4,734,000.70	
WEDGE Corp.Bonds-Market Value	(11,326.30)	
WEDGE LG CAP-MM	37,700.45	
WEDGE LG CAP-EQUITIES	1,886,874.83	
WEDGE LG CAP-Market Value	502,160.38	
American Core Realty	2,944,708.72	
BOYD WATTERSON STATE GOV.FUND	2,902,685.00	
CHART - MM - 4782656	585,604.78	
CHART - Corp.Bonds - 4782656	12,980,755.10	
CHART - Corp.Bonds- Mark.Val.	227,162.91	
Total Other Assets		38,666,091.56
Total Assets		$ 41,909,144.69

LIABILITIES AND CAPITAL

Current Liabilities		
Contractors Deposits	$ 3,420.73	
Due to OE Training Fund	227.60	
Due to OE Pension Fund	2,361.35	
Due to Check-Off Dues	106,473.45	
Due to Annuity	17,434.00	
Total Current Liabilities		129,917.13
Long-Term Liabilities		
Total Long-Term Liabilities		0.00
Total Liabilities		129,917.13
Capital		
Retained Earnings	4,959,179.98	
Equity - Retained Earnings	36,593,428.68	
Net Income	226,618.90	
Total Capital		41,779,227.56
Total Liabilities & Capital		$ 41,909,144.69

OE Loc 77 Trust Fund of Wash. DC
Income Statement
For the Nine Months Ending September 30, 2025

	Current Month		Year to Date	
Revenues				
Contributions - Pavers	$ 288,758.56	13.86	$ 2,250,968.57	15.95
ER Contributions	1,233,812.36	59.20	8,339,525.25	59.10
Self-Pay Contributions	2,850.00	0.14	17,803.38	0.13
Cobra Self-Pay EE	2,980.93	0.14	35,434.32	0.25
Reciprocity Income	87,609.16	4.20	554,657.42	3.93
Reciprocity Payments	(32,607.48)	(1.56)	(176,264.63)	(1.25)
Retired Self-Pay	60,899.00	2.92	549,839.00	3.90
Liquidated Damages	0.00	0.00	2,055.31	0.01
Interest Income	1,392.84	0.07	19,753.50	0.14
Interest American Core Realty	25,828.04	1.24	79,909.03	0.57
VANGUARD Interest Income	2,390.20	0.11	5,194.21	0.04
Interest Income-Wedge LG CAP	137.29	0.01	1,512.99	0.01
Dividend Income-Wedge LG CAP	4,593.16	0.22	27,641.43	0.20
Interest on Delinquency	271.26	0.01	351.32	0.00
G/L on Invest. Vanguard	111,420.12	5.35	389,426.64	2.76
WEDGE(PNC) - Int. on Inv	44,108.01	2.12	319,725.10	2.27
CHART - Inter. on Investm.	90,560.09	4.35	535,799.77	3.80
Realized Gain/Loss - CHART	(15,033.81)	(0.72)	(21,806.83)	(0.15)
Unrealized Gain/Loss - CHART	12,152.64	0.58	247,336.35	1.75
Realized G/L- Wedge LG CAP	11,995.69	0.58	198,834.58	1.41
Unrealized G/L- Wedge LG CAP	46,399.38	2.23	104,134.32	0.74
Unrealized Gain/loss WEDGE	(4,317.26)	(0.21)	482,190.28	3.42
Realized Gain/Loss WEDGE-001	38,054.90	1.83	4,400.48	0.03
Unrealiz.Gain/Loss-Amer.Core R	31,135.15	1.49	43,092.06	0.31
Realiz.Gain/Loss Amer. Core Re	(25,383.28)	(1.22)	(24,243.88)	(0.17)
Realiz.Gain/Loss Boyd Watterso	64,106.00	3.08	122,785.63	0.87
Litigation Proceeds	0.00	0.00	416.03	0.00
Total Revenues	2,084,112.95	100.00	14,110,471.63	100.00
Cost of Sales				
Total Cost of Sales	0.00	0.00	0.00	0.00
Gross Profit	2,084,112.95	100.00	14,110,471.63	100.00
Expenses				
Actuarial Fee	0.00	0.00	12,600.00	0.09
Administration Fee	46,476.00	2.23	408,806.00	2.90
Audit Fee	4,800.00	0.23	18,050.00	0.13
Health Care Cost Containment	0.00	0.00	897.75	0.01
Bank Charges	528.95	0.03	2,035.30	0.01
Benefits Paid	305,965.33	14.68	3,347,025.33	23.72
Prescription Benefits Paid	459,185.60	22.03	2,682,678.52	19.01
CVS - Admin fee	0.00	0.00	11,618.10	0.08
Vision Benefits Paid - claims	11,681.76	0.56	82,866.05	0.59
Vision Benefits Paid-admin fee	0.00	0.00	9,618.07	0.07
Dues & Subscriptions	(885.63)	(0.04)	(885.63)	(0.01)

	Current Month		Year to Date	
Inv.Performance Eval.Fee	4,977.98	0.24	14,681.79	0.10
Invest.Mngmnt Fee	8,120.28	0.39	82,925.80	0.59
Invest.Custodian Fee	0.00	0.00	3,127.41	0.02
Office Supplies & Exp.	0.00	0.00	261.00	0.00
Meeting Exp.	84.91	0.00	193.58	0.00
Postage Exp.	2,841.67	0.14	5,437.10	0.04
Printing & Stationary Exp.	15,728.09	0.75	23,206.07	0.16
Payroll Audit Fee	6,300.00	0.30	13,320.00	0.09
Registration Fee	3,225.00	0.15	3,225.00	0.02
Fiduciary Resp.Insurance	0.00	0.00	2,846.66	0.02
Case Mngmnt	22,317.40	1.07	169,162.75	1.20
Zelis Claims Admin Fee	0.00	0.00	6,847.52	0.05
Healthcare Cost Management	1,009.80	0.05	8,578.40	0.06
Telephone Exp.	247.45	0.01	367.99	0.00
HIPAA Charges	347.34	0.02	1,760.64	0.01
IFEBP - Membership Dues	0.00	0.00	912.50	0.01
Dental Insurance - admin fee	5,827.50	0.28	52,882.50	0.37
Dental Insurance - claims	56,852.76	2.73	479,034.29	3.39
SwiftMD Monthly Membership fee	3,432.00	0.16	30,834.00	0.22
CareFirst - flexlink - admin	12,559.19	0.60	123,262.02	0.87
CareFirst - flexlink - claims	366,188.36	17.57	5,126,725.13	36.33
Care First - network lease fee	3,674.98	0.18	33,746.70	0.24
PCORI fee	0.00	0.00	10,535.79	0.07
Labor First Limited Liability	110,178.00	5.29	1,114,668.60	7.90
Total Expenses	1,451,664.72	69.65	13,883,852.73	98.39
Net Income	$ 632,448.23	30.35	$ 226,618.90	1.61

OE Loc 77 Trust Fund of Wash. DC

GENERAL JOURNAL

For the Period From Sep 1, 2025 to Sep 30, 2025

Date	Account ID	Reference	Trans Description	Debit Amt	Credit Amt
9/2/25	1260	TO BENEFIT1	Transfer from H&W Cash Benefit Acct. Check Run 9/2/25	17,337.01	
9/2/25	1120	TO BENEFIT1	Transfer from H&W Cash Benefit Acct. Check Run 9/2/25		17,337.01
9/3/25	1120	TRANSFDDA1	Transferred from Cash General to H&W Cash for dep. 08/29/25	242,464.27	
9/3/25	1110	TRANSFDDA1	Transferred from Cash General to H&W Cash for dep. 08/29/25		242,464.27
9/5/25	1260	A&S1	Transfer from H&W Cash Benefit Acct. Check Run 9/5/25	2,699.96	
9/5/25	1120	A&S1	Transfer from H&W Cash Benefit Acct. Check Run 9/5/25		2,699.96
9/9/25	5150	941 Tax WH Paid	A&S Tax W/H	442.62	
9/9/25	1260	941 Tax WH Paid	A&S Tax W/H		442.62
9/9/25	5150	945 DB WH Paid	A&S DB WH	750.00	
9/9/25	1260	945 DB WH Paid	A&S DB WH		750.00
9/9/25	1120	TRANSFDDA2	Transferred from Cash General to H&W Cash for dep. 09/02/25;09/05/25; checks issued 09/05/25	130,486.40	
9/9/25	1110	TRANSFDDA2	Transferred from Cash General to H&W Cash for dep. 09/02/25;09/05/25; checks issued 09/05/25		130,486.40
9/10/25	1260	TO BENEFIT2	Transfer from H&W Cash Benefit Acct. Check Run 9/10/25	87,876.65	
9/10/25	1120	TO BENEFIT2	Transfer from H&W Cash Benefit Acct. Check Run 9/10/25		87,876.65
9/11/25	1120	FROM PAYROLL	Transferred from Payroll Acct. to H&W Cash Acct	4,000.00	
9/11/25	2014	FROM PAYROLL	Transferred from Payroll Acct. to H&W Cash Acct		4,000.00
9/11/25	1120	FROM VANGUARD	Transferred from Vanguard - to H&W Cash	400,000.00	
9/11/25	1855	FROM VANGUARD	Vanguard - Gain on Investment 04/25		400,000.00
9/11/25	2014	TO APPRENT.	Transferred from H&W Cash Acct to Appent.Cash General	26,900.00	
9/11/25	1120	TO APPRENT.	Transferred from H&W Cash Acct to Appent.Cash General		26,900.00
9/12/25	1260	A&S2	Transfer from H&W Cash Benefit Acct. Check Run 9/12/25	450.00	
9/12/25	1120	A&S2	Transfer from H&W Cash Benefit Acct. Check Run 9/12/25		450.00
9/12/25	1120	FROM APPRENT.	Transferred from Appr.Trust Cash Acct to H&W Cash	22,900.00	
9/12/25	2014	FROM APPRENT.	Transferred from Cash General to H&W Cash for dep. 08/29/25		22,900.00
9/16/25	1120	FROM PENSION	Transferred from Pension to H&W Cash	300,000.00	
9/16/25	1303	FROM PENSION	Transferred from Pension to H&W Cash		300,000.00
9/16/25	1303	FROM PENSION	Transferred from Pension to H&W Cash	300,000.00	
9/16/25	1405	FROM PENSION	Transferred from Pension to H&W Cash		300,000.00
9/16/25	1120	FROM WEDGE	Transferred from Wedge to H&W Cash	500,000.00	
9/16/25	1865	FROM WEDGE	Transferred from Wedge to H&W Cash		500,000.00
9/16/25	1120	TRANSFDDA3	Transferred from Cash General to H&W Cash for dep. 09/08/25-09/12/25; checks issued 09/12/25	90,713.73	
9/16/25	1110	TRANSFDDA3	Transferred from Cash General to H&W Cash for dep. 09/8/25-09/12/25; checks issued 09/12/25		90,713.73
9/17/25	1260	TO BENEFIT3	Transfer from H&W Cash Benefit Acct. Check Run 9/17/25	111,568.09	
9/17/25	1120	TO BENEFIT3	Transfer from H&W Cash Benefit Acct. Check Run 9/17/25		111,568.09
9/19/25	1260	A&S3	Transfer from H&W Cash Benefit Acct. Check Run 9/19/25	450.00	
9/19/25	1120	A&S3	Transfer from H&W Cash Benefit Acct. Check Run 9/19/25		450.00
9/19/25	1120	TRANSFDDA4	Transferred from Cash General to H&W Cash for dep. 09/15/25-09/17/25; checks issued 09/17/25;09/18/25	71,734.96	
9/19/25	1110	TRANSFDDA4	Transferred from Cash General to H&W Cash for dep. 09/15/25-09/17/25; checks issued 09/17/25;09/18/25		71,734.96
9/24/25	1260	TO BENEFIT4	Transfer from H&W Cash Benefit Acct. Check Run 9/24/25	84,267.01	
9/24/25	1120	TO BENEFIT4	Transfer from H&W Cash Benefit Acct. Check Run 9/24/25		84,267.01
9/24/25	1120	TRANSFDDA5	Transferred from Cash General to H&W Cash for dep. 09/19/25;09/22/25	329,422.82	
9/24/25	1110	TRANSFDDA5	Transferred from Cash General to H&W Cash for dep. 09/19/25;09/22/25		329,422.82
9/26/25	1260	A&S4	Transfer from H&W Cash Benefit Acct. Check Run 9/26/25	450.00	
9/26/25	1120	A&S4	Transfer from H&W Cash Benefit Acct. Check Run 9/26/25		450.00
9/30/25	5150	A&S Net	A & S Net	3,740.12	
9/30/25	1260	A&S Net	A & S Net		3,740.12
9/30/25	1895	AMER.CORE REALTY	American Core Realty - Interest Income 09/25	25,828.04	
9/30/25	4635	AMER.CORE REALTY	American Core Realty - Interest Income 09/25		25,828.04
9/30/25	5370	AMER.CORE REALTY	American Core Realty - Investment Mngmnt Fee 09/25	8,120.28	
9/30/25	1895	AMER.CORE REALTY	American Core Realty - Investment Mngmnt Fee 09/25		8,120.28
9/30/25	1895	AMER.CORE REALTY	American Core Realty - Realized Loss 09/25		25,383.28
9/30/25	4885	AMER.CORE REALTY	American Core Realty - Realized Loss 09/25	25,383.28	
9/30/25	1895	AMER.CORE REALTY	American Core Realty - Unrealized Gain 09/25	31,135.15	
9/30/25	4880	AMER.CORE REALTY	American Core Realty - Unrealized Gain 06/25		31,135.15
9/30/25	1110	BANK CHARGES	Service Charge		239.33
9/30/25	5130	BANK CHARGES	Service Charge	239.33	
9/30/25	1896	BOYD WATTERSON GOV.	Boyd Watterson Government - Gain on Investment 09/25	31,824.00	
9/30/25	4886	BOYD WATTERSON GOV.	Boyd Watterson Government - Gain on Investment 09/24		31,824.00
9/30/25	1896	BOYD WATTERSON GOV.	Boyd Watterson Government - Reinvestment 09/24	32,282.00	
9/30/25	4886	BOYD WATTERSON GOV.	Boyd Watterson Government - Reinvestment 09/24		32,282.00
9/30/25	1896	BOYD WATTERSON GOV.	Boyd Watterson Government - To Broker		32,274.00
9/30/25	1405	BOYD WATTERSON GOV.	Boyd Watterson Government - To Broker	32,274.00	
9/30/25	1260	Benefits Paid	Benefit Paid per Claims Check Registers		301,048.76
9/30/25	5150	Benefits Paid	Benefit Paid per Claims Check Registers	301,048.76	
9/30/25	1915	CHART	Chart-Corp. Bonds-Purchases 09/25	591,164.00	
9/30/25	1910	CHART	Chart-Corp. Bonds-Purchases 09/25		591,164.00
9/30/25	1910	CHART	Chart-Corp. Bonds-Sales Proceeds 09/25	704,800.27	
9/30/25	1915	CHART	Chart-Corp. Bonds-Sales at Cost 09/25		719,834.08
9/30/25	4810	CHART	Chart-Corp. Bonds-Realized Loss 09/25	15,033.81	
9/30/25	1916	CHART	Chart-Corp. Bonds-MV- Unrealized Gain 09/25	12,152.64	
9/30/25	4820	CHART	Chart-Corp. Bonds-MV- Unrealized Gain 09/25		12,152.64
9/30/25	1910	CHART	Chart-Corp. Bonds-MM -Interest Income 09/25	90,560.09	
9/30/25	4730	CHART	Chart-MM -Interest Income 09/25		1,903.16
9/30/25	4730	CHART	Chart-Corp. Bonds-MM -Interest Income 09/25		88,656.93
9/30/25	1303	IFEBP Credit	IFEBP Credit from 2022 on Wendy Chambers-former AE Amex Refund for year 2022 meeting		800.00
9/30/25	1620	IFEBP Credit	2026 IFEBP Dues Paid using IFEBP Credit from 2022 on Wendy Chambers-former AE Amex Refund for year 2022 meeting	800.00	
9/30/25	1303	IFEBP Credit	IFEBP Credit from 2022 on Wendy Chambers-former AE Amex Refund for year 2022 meeting	885.63	
9/30/25	5290	IFEBP Credit	IFEBP Credit from 2022 on Wendy Chambers-former AE Amex Refund for year 2022 meeting		885.63
9/30/25	1120	INTEREST INCOME	Interest Income	1,392.84	
9/30/25	4630	INTEREST INCOME	Interest Income		1,392.84
9/30/25	1260	PNC Bank Fee	PNC Bank Fee		289.62
9/30/25	5130	PNC Bank Fee	PNC Bank Fee	289.62	
9/30/25	1120	TRANSFDDA6	Transferred from Cash General to H&W Cash for dep. 09/23/25-09/26/25; checks issued 09/25/25;09/26/25	207,400.26	
9/30/25	1110	TRANSFDDA6	Transferred from Cash General to H&W Cash for dep. 09/23/25-09/26/25; checks issued 09/25/25;09/25/26		207,400.26
9/30/25	1855	VANGUARD	Vanguard - Income Dividend 09/25	2,390.20	
9/30/25	4636	VANGUARD	Vanguard - Income Dividend 09/25		2,390.20
9/30/25	1856	VANGUARD	Vanguard - Gain on Investment 09/25	111,420.12	

Date	Account ID	Reference	Trans Description	Debit Amt	Credit Amt
9/30/25	4696	VANGUARD	Vanguard - Gain on Investment 09/25		111,420.12
9/30/25	1870	WEDGE	Wedge-Gov. Bonds -Purchases 09/25	930,493.57	
9/30/25	1865	WEDGE	Wedge-Gov. Bonds -Purchases 09/25		930,493.57
9/30/25	1865	WEDGE	Wedge-Gov. Bonds -Sales Proceeds 09/25	1,277,475.31	
9/30/25	1870	WEDGE	Wedge-Gov. Bonds -Sales at Cost 09/25		1,240,958.28
9/30/25	4875	WEDGE	Wedge-Gov. Bonds -Realized Gain 09/25		36,517.03
9/30/25	1870	WEDGE	Wedge-Gov. Bonds - Adjustment- Remove Fractional Units 09/25		0.01
9/30/25	4860	WEDGE	Wedge-Gov. Bonds - Adjustment- Remove Fractional Units 09/25	0.01	
9/30/25	1871	WEDGE	Wedge-Gov. Bonds -MV-Unrealized Loss 09/25		14,044.88
9/30/25	4860	WEDGE	Wedge-Gov. Bonds -MV-Unrealized Loss 09/25	14,044.88	
9/30/25	1865	WEDGE	Wedge-Corp. Bonds - Sales Proceeds 09/25	104,686.60	
9/30/25	1875	WEDGE	Wedge-Corp. Bonds - Sales at Cost 09/25		103,148.73
9/30/25	4875	WEDGE	Wedge-Corp. Bonds - Realized Loss 09/25		1,537.87
9/30/25	1876	WEDGE	Wedge-Corp. Bonds -MV- Unrealized Gain 09/25	9,727.63	
9/30/25	4860	WEDGE	Wedge-Corp. Bonds -MV- Unrealized Gain 09/25		9,727.63
9/30/25	1865	WEDGE	Wedge-MM- Interest Income 09/25	44,108.01	
9/30/25	4720	WEDGE	Wedge-MM- Interest Income 08/25		226.99
9/30/25	4720	WEDGE	Wedge-MM-Gov. Bonds- Interest Income 08/25		35,382.62
9/30/25	4720	WEDGE	Wedge-MM-Corp. Bonds- Interest Income 08/25		8,498.40
9/30/25	1878	WEDGE LG CAP	WEDGE LG CAP- Equities Purchases 09/25	87,276.07	
9/30/25	1877	WEDGE LG CAP	WEDGE LG CAP- Equities Purchases 09/25		87,276.07
9/30/25	1877	WEDGE LG CAP	WEDGE LG CAP- Equities Sales Proceeds 09/25	95,076.34	
9/30/25	1878	WEDGE LG CAP	WEDGE LG CAP- Equities Sales at Cost 09/25		83,080.65
9/30/25	4830	WEDGE LG CAP	WEDGE LG CAP- Equities- Realized Gain 09/25		11,995.69
9/30/25	1879	WEDGE LG CAP	WEDGE LG CAP- Equities- MV-Unrealized Gain 09/25	46,399.38	
9/30/25	4835	WEDGE LG CAP	WEDGE LG CAP- Equities- MV-Unrealized Gain 09/25		46,399.38
9/30/25	1877	WEDGE LG CAP	WEDGE LG CAP- MM- Interest Income 09/25	137.29	
9/30/25	4646	WEDGE LG CAP	WEDGE LG CAP- MM- Interest Income 09/25		137.29
9/30/25	1877	WEDGE LG CAP	WEDGE LG CAP- Equities- Dividend Income 09/25	4,593.16	
9/30/25	4656	WEDGE LG CAP	WEDGE LG CAP- Equities- Dividend Income 09/25		4,593.16
		Total		**7,569,096.21**	**7,569,096.21**

OE Loc 77 Trust Fund of Wash. DC
NON-PAVERS CONTRIBUTIONS
For the Period From Sep 1, 2025 to Sep 30, 2025

Account ID	Account Description	Date	Reference	Customer Name	Credit Amt	Balance
4510	ER Contributions	9/2/25	07/25	MILLER PIPELINE CORP.	66,254.50	
4510	ER Contributions	9/2/25	07/25	Casper Colosimo & Son, Inc.	1,667.25	
4510	ER Contributions	9/2/25	07/25	J. FLETCHER CREAMER & SON, INC	3,988.48	
4510	ER Contributions	9/4/25	05/25;06 25SPLIT	STRITTMATTER COMPANIES	211.25	
4510	ER Contributions	9/4/25	05/25;06 25SPLIT	STRITTMATTER COMPANIES	6,777.88	
4510	ER Contributions	9/4/25	05/25;06 25SPLIT	STRITTMATTER COMPANIES	15,015.00	
4510	ER Contributions	9/4/25	05/25;06 25SPLIT	STRITTMATTER COMPANIES	646.75	
4510	ER Contributions	9/4/25	08/25SPLIT	PETILLO INC	520.00	
4510	ER Contributions	9/4/25	07/25	EXTREME STEEL CRANE & RIG	10,822.00	
4510	ER Contributions	9/4/25	07/25	EXTREME STEEL CRANE & RIG	65,269.75	
4510	ER Contributions	9/4/25	07/25SPLIT	KIRILA EARTHWORKS,INC	5,739.50	
4510	ER Contributions	9/5/25	09/25	STEVEN A. KEESEE	650.00	
4510	ER Contributions	9/5/25	07/25	WILLIAMS EQUIPMENT CO	10,310.63	
4510	ER Contributions	9/5/25	08/25	Norair Engineering Associates,	3,633.50	
4510	ER Contributions	9/5/25	07/25;08/25	KIEWIT POWER CONSTRUCTORS	429.00	
4510	ER Contributions	9/5/25	07/25;08/25	KIEWIT POWER CONSTRUCTORS	7,780.50	
4510	ER Contributions	9/5/25	07/25SPLIT	CONSTRUCTION SUPPORT SERVICES	2,242.50	
4510	ER Contributions	9/5/25	07/25	SR CONSTRUCTION LLC	3,626.48	
4510	ER Contributions	9/5/25	07/25SPLIT	MCVAC	17,626.38	
4510	ER Contributions	9/5/25	07/25	SR CONSTRUCTION LLC	1,040.00	
4510	ER Contributions	9/8/25	07/25	WILLIAMS EQUIPMENT CO	10,310.62	
4510	ER Contributions	9/8/25	08/25	D2 LLC	364.00	
4510	ER Contributions	9/8/25	08/25	B & M CRANE	4,865.25	
4510	ER Contributions	9/8/25	08/25	MID-ATLANTIC STEEL ERECTO	1,203.87	
4510	ER Contributions	9/8/25	08/25	MID-ATLANTIC STEEL ERECTO	778.28	
4510	ER Contributions	9/10/25	08/25	OPER ENGS APPR FUND	5,200.00	
4510	ER Contributions	9/11/25	07/25SPLIT	LOCKED AND LOADED TRANSPORT LLC	1,196.00	
4510	ER Contributions	9/11/25	07/25SPLIT	WOLFE CRANE SERVICES	1,040.00	
4510	ER Contributions	9/11/25	07/25SPLIT	DELTA RAILROAD CONSTRUCTION	6,191.25	
4510	ER Contributions	9/11/25	07/25SPLIT	STRITTMATTER COMPANIES	7,089.88	
4510	ER Contributions	9/11/25	07/25SPLIT	STRITTMATTER COMPANIES	848.25	
4510	ER Contributions	9/11/25	08/25SPLIT	STACY AND WITBECK	4,319.25	
4510	ER Contributions	9/11/25	04/25;08/25SPLIT	PETILLO INC	468.00	
4510	ER Contributions	9/11/25	04/25;08/25SPLIT	PETILLO INC	925.00	
4510	ER Contributions	9/12/25	07/25SPLIT	CELTIC DEMOLITION	30,644.25	
4510	ER Contributions	9/12/25	08/25	GOETTLE EQUIPMENT CO	175.50	
4510	ER Contributions	9/12/25	08/25	BAY CRANE MID-ATLANTIC LLC	2,332.00	
4510	ER Contributions	9/12/25	08/25	BAY CRANE MID-ATLANTIC LLC	56,007.25	
4510	ER Contributions	9/12/25	08/25	BERKEL & COMPANY	29,415.75	
4510	ER Contributions	9/12/25	06/25;07/25	S & J SERVICE, INC.	2,351.30	
4510	ER Contributions	9/12/25	06/25;07/25	S & J SERVICE, INC.	6,338.35	
4510	ER Contributions	9/12/25	08/25	AIW, INC	7,561.13	
4510	ER Contributions	9/12/25	09/25	KELLER NORTH AMERICA	16,149.25	
4510	ER Contributions	9/12/25	08/25	U S PIPELINE, INC.	564.00	
4510	ER Contributions	9/12/25	08/25	INDEPENDENT EXCAVATING,INC	63,011.00	
4510	ER Contributions	9/15/25	08/25	W O GRUBB EQUIPMENT RENTAL	81,048.50	
4510	ER Contributions	9/15/25	08/25	W O GRUBB EQUIPMENT RENTAL	1,792.00	
4510	ER Contributions	9/15/25	08/25	SKANSKA FLATIRON LBN JV	1,420.25	
4510	ER Contributions	9/15/25	08/25	DELTA RAILROAD CONSTRUCTION	1,758.19	
4510	ER Contributions	9/15/25	08/25	INTER UNION LOCAL 77	10,237.50	
4510	ER Contributions	9/15/25	08/25	INTER UNION LOCAL 77	1,137.50	
4510	ER Contributions	9/15/25	08/25	R & LD DEVELOPMENT CO	2,863.25	
4510	ER Contributions	9/15/25	08/25	AMERICAN COMBUSTION INDUSTRIES	1,709.50	
4510	ER Contributions	9/15/25	08/25	ANCHOR CONSTRUCTION CORP.	69,910.43	
4510	ER Contributions	9/15/25	08/25	CLARK CONSTRUCTION GRP	73,183.51	
4510	ER Contributions	9/15/25	08/25	CLARK CONSTRUCTION GRP	18,161.00	
4510	ER Contributions	9/15/25	08/25	FORCE DRILLING LLC	1,004.25	
4510	ER Contributions	9/15/25	08/25	SCHNABEL FOUNDATION CORP	4,082.00	
4510	ER Contributions	9/15/25	08/25	NORTHEAST REMSCO	3,292.25	
4510	ER Contributions	9/15/25	07/25	PAUL MERRIT EXCAVATING	1,040.00	
4510	ER Contributions	9/16/25	08/25	VECTOR SERVICES	24,027.25	
4510	ER Contributions	9/17/25	08/25	Riggs Distler	7,241.00	

Account ID	Account Description	Date	Reference	Customer Name	Credit Amt	Balance
4510	ER Contributions	9/17/25	08/25	MAXIM CRANE WORKS	6,108.00	
4510	ER Contributions	9/18/25	07/25	CBNA-HALMAR CLEAN RIVERS JV	17,205.50	
4510	ER Contributions	9/18/25	08/25SPLIT	MICHELS CONSTRUCTION INC	260.00	
4510	ER Contributions	9/18/25	08/25SPLIT	MICHELS CONSTRUCTION INC	1,495.00	
4510	ER Contributions	9/18/25	08/25SPLIT	MIDWEST MOLE,INC	6,295.25	
4510	ER Contributions	9/18/25	08/25SPLIT	BADGER DAYLIGHTING CORP.	28,007.46	
4510	ER Contributions	9/18/25	08/25SPLIT	W.G.TOMKO, INC	546.00	
4510	ER Contributions	9/19/25	08/25	RYAN INCORPORATED CENTRAL	3,926.00	
4510	ER Contributions	9/19/25	08/25SPLIT	MICHELS CORP	533.40	
4510	ER Contributions	9/19/25	09/25SPLIT	PETILLO INC	520.00	
4510	ER Contributions	9/19/25	07/25;08/25SPLIT	KELLER NORTH AMERICA	130.00	
4510	ER Contributions	9/19/25	07/25;08/25SPLIT	KELLER NORTH AMERICA	21,885.50	
4510	ER Contributions	9/19/25	07/25;08/25SPLIT	KELLER NORTH AMERICA	3,422.25	
4510	ER Contributions	9/19/25	08/25	INTERCON CONSTRUCTION INC	726.15	
4510	ER Contributions	9/19/25	08/25	TRAYLOR SHEA JV	10,700.32	
4510	ER Contributions	9/19/25	08/25	MILLER PIPELINE CORP.	56,338.75	
4510	ER Contributions	9/19/25	08/25	GRUMPY'S CONCRETE PUMPING	4,289.25	
4510	ER Contributions	9/19/25	08/25	DJB CONTRACTING, INC.	1,083.49	
4510	ER Contributions	9/19/25	08/25	SKODA CONTRACTING CO	3,698.50	
4510	ER Contributions	9/22/25	08/25	WILLIAMS EQUIPMENT CO	13,107.27	
4510	ER Contributions	9/22/25	08/25	EAST WEST ERECTION SERVIC	6,097.00	
4510	ER Contributions	9/22/25	08/25	NPL CONSTRUCTION GREAT LA	4,529.66	
4510	ER Contributions	9/22/25	08/25	DGI-MENARD INC	494.00	
4510	ER Contributions	9/23/25	08/25	Lane Construction	35,951.50	
4510	ER Contributions	9/23/25	08/25	MALCOLM DRILLING	364.00	
4510	ER Contributions	9/25/25	08/25	BRAYMAN CONSTRUCTION CO	7,159.75	
4510	ER Contributions	9/25/25	08/25	BRAYMAN CONSTRUCTION CO	1,223.01	
4510	ER Contributions	9/25/25	07/25;08/25SPLIT	SOUTHERN MD HYDRAULICS	3,542.00	
4510	ER Contributions	9/25/25	07/25;08/25SPLIT	SOUTHERN MD HYDRAULICS	4,117.00	
4510	ER Contributions	9/25/25	09/25SPLIT	PETILLO INC	520.00	
4510	ER Contributions	9/25/25	08/25SPLIT	FLAT IRON	3,058.25	
4510	ER Contributions	9/25/25	08/25SPLIT	FLAT IRON	5,115.50	
4510	ER Contributions	9/25/25	08/25SPLIT	CONSTRUCTION SUPPORT SERVICES	2,444.00	
4510	ER Contributions	9/25/25	08/25	JOSEPH B FAY	1,062.75	
4510	ER Contributions	9/25/25	0825SPLIT	CHRISTMAN MID-ATLANTIC CONSTRUCTORS	3,594.50	
4510	ER Contributions	9/25/25	08/25SPLIT	PRO - AIR	2,392.00	
4510	ER Contributions	9/25/25	08/25SPLIT	PRO - AIR	2,060.50	
4510	ER Contributions	9/25/25	08/25SPLIT	PERFORMANCE CONTRACTING INC	2,418.00	
4510	ER Contributions	9/25/25	08/25SPLIT	SECA UNDERGROUND CORPORATION	2,808.00	
4510	ER Contributions	9/25/25	08/25	HOLCIM-MAR, INC	1,120.00	
4510	ER Contributions	9/25/25	08/25	HOLCIM-MAR, INC	9,425.70	
4510	ER Contributions	9/26/25	09/25	Norair Engineering Associates,	3,844.75	
4510	ER Contributions	9/26/25	07/25	D2 LLC	754.00	
4510	ER Contributions	9/26/25	08/25SPLIT	METRO CRANE &RIGGING LLC	17,889.63	
4510	ER Contributions	9/29/25	08/25	CRANE SERVICE CO	99,892.00	
4510	ER Contributions	9/29/25	08/25	CRANE SERVICE CO	2,966.00	
4510	ER Contributions	9/29/25	08/25	J. FLETCHER CREAMER & SON, INC	4,910.75	
4510	ER Contributions	9/29/25	07/25;08/25	CS SERVICES, LLC	1,628.25	
4510	ER Contributions	9/29/25	07/25;08/25	CS SERVICES, LLC	2,080.00	
4510	ER Contributions	9/29/25	10/25	STEVEN A. KEESEE	650.00	
4510	ER Contributions	9/29/25	08/25SPLIT	MIGHTY FOUR ENTERPRISE	7,017.60	
4510	ER Contributions	9/29/25	08/25SPLIT	STRITTMATTER COMPANIES	66.63	
4510	ER Contributions	9/29/25	08/25SPLIT	STRITTMATTER COMPANIES	5,653.38	
4510	ER Contributions	9/30/25	08/25	DIGMASTER	19,175.00	
4510	ER Contributions				1,233,812.36	1,233,812.36
		9/30/25				**1,233,812.36**

OE Loc 77 Trust Fund of Wash. DC
PAVERS CONTRIBUTIONS
For the Period From Sep 1, 2025 to Sep 30, 2025

Account ID	Account Description	Date	Reference	Customer Name	Credit Amt	Balance
4500	Contributions - Pavers	9/19/25	08/25	CIVIL CONSTRUCTION, LLC	1,300.00	
4500	Contributions - Pavers	9/22/25	08/25	EUROVIA ATLANTIC COAST	8,632.00	
4500	Contributions - Pavers	9/22/25	08/25	EUROVIA ATLANTIC COAST	1,985.75	
4500	Contributions - Pavers	9/25/25	08/25	FORT MYER	5,200.00	
4500	Contributions - Pavers	9/25/25	08/25	FORT MYER	645.13	
4500	Contributions - Pavers	9/25/25	08/25	FORT MYER	107,674.19	
4500	Contributions - Pavers	9/25/25	08/25	FORT MYER	29,995.90	
4500	Contributions - Pavers	9/29/25	07/25;08/25SPLIT	BELTWAY PAVING OF SOUTNER	9,160.94	
4500	Contributions - Pavers	9/29/25	07/25;08/25SPLIT	BELTWAY PAVING OF SOUTNER	10,966.88	
4500	Contributions - Pavers	9/30/25	08/25	CAPITAL PAVING OF DC	99,513.64	
4500	Contributions - Pavers	9/30/25	08/25	CAPITAL PAVING OF DC	13,684.13	
4500	Contributions - Pavers				288,758.56	288,758.56
		9/30/25				**288,758.56**

OE Loc 77 Trust Fund of Wash. DC
SELF-PAYMENTS
For the Period From Sep 1, 2025 to Sep 30, 2025

Account ID	Account Description	Date	Reference	Customer Name	Credit Amt	Balance
4530	Self-Pay Contributions	9/5/25	09/25	CEDRIC LEWIS	500.00	
4530	Self-Pay Contributions	9/9/25	09/25	HAROLD C CROSS	500.00	
4530	Self-Pay Contributions	9/9/25	09/25	DANIEL JOHNSON	500.00	
4530	Self-Pay Contributions	9/23/25	10/25	HAROLD C CROSS	500.00	
4530	Self-Pay Contributions	9/23/25	10/25	WANDA BERRY	350.00	
4530	Self-Pay Contributions	9/29/25	10/25	CEDRIC LEWIS	500.00	
4530	Self-Pay Contributions				2,850.00	2,850.00
		9/30/25				**2,850.00**

OE Loc 77 Trust Fund of Wash. DC
RETIREE SELF-PAYMENTS
For the Period From Sep 1, 2025 to Sep 30, 2025

Account ID	Account Description	Date	Reference	Customer Name	Credit Amt	Balance
4580	Retired Self-Pay	9/2/25	09/25	OE PENSION TRUST FUND	57,955.00	
4580	Retired Self-Pay	9/8/25	04/25-06/25	CRISSIE YOW	240.00	
4580	Retired Self-Pay	9/8/25	10/25-12/25	HELEN D ANGLIN	240.00	
4580	Retired Self-Pay	9/9/25	10/25-12/25	CALVIN E JOHNSON	480.00	
4580	Retired Self-Pay	9/15/25	09/25	NORMAN L BOWIE	160.00	
4580	Retired Self-Pay	9/15/25	09/25	BONITA LEE CROSTON	80.00	
4580	Retired Self-Pay	9/15/25	10/25	INGRID E HERSHEY	240.00	
4580	Retired Self-Pay	9/15/25	09/25	FLORENCE M CURTIN	80.00	
4580	Retired Self-Pay	9/23/25	09/25	CHERYL PENCE	550.00	
4580	Retired Self-Pay	9/23/25	11/25	BETTY LOU WHARAM	80.00	
4580	Retired Self-Pay	9/23/25	03/26	PAUL MCMAHAN	210.00	
4580	Retired Self-Pay	9/29/25	04/26	PAUL MCMAHAN	210.00	
4580	Retired Self-Pay	9/29/25	10/25-02/26	RUFUS ROMINE	294.00	
4580	Retired Self-Pay	9/29/25	10/25	FLORENCE M CURTIN	80.00	
4580	Retired Self-Pay				60,899.00	60,899.00
		9/30/25				**60,899.00**

OE Loc 77 Trust Fund of Wash. DC
COBRA SELF-PAYMENTS
For the Period From Sep 1, 2025 to Sep 30, 2025

Account ID	Account Description	Date	Reference	Customer Name	Credit Amt	Balance
4540	Cobra Self-Pay EE	9/5/25	08/25	FELIX MERINO ACEVEDO	346.62	
4540	Cobra Self-Pay EE	9/9/25	09/25	ANDRES ALVAREZ	346.62	
4540	Cobra Self-Pay EE	9/9/25	09/25	SARAH D YOW	346.62	
4540	Cobra Self-Pay EE	9/23/25	10/25;11/25	JAMES PLOTTS	693.24	
4540	Cobra Self-Pay EE	9/23/25	10/25	WILLIAM R ARGUETA-DELCII	901.21	
4540	Cobra Self-Pay EE	9/29/25	10/25	CHRISTOPHER GRAIG	346.62	
4540	Cobra Self-Pay EE				2,980.93	2,980.93
		9/30/25				**2,980.93**

OE Loc 77 Trust Fund of Wash. DC
INTEREST ON DELINQUENCY
For the Period From Sep 1, 2025 to Sep 30, 2025

Account ID	Account Description	Date	Reference	Customer Name	Credit Amt	Balance
4660	Interest on Delinquency	9/25/25	Inter.05/25;06/25SPL	STRITTMATTER COMPANIES	220.52	
4660	Interest on Delinquency	9/25/25	Inter.05/25;06/25SPL	STRITTMATTER COMPANIES	50.74	
4660	Interest on Delinquency				271.26	271.26
		9/30/25				**271.26**

OE Loc 77 Trust Fund of Wash. DC
RECIPROCITY INCOME
For the Period From Sep 1, 2025 to Sep 30, 2025

Account ID	Account Description	Date	Reference	Customer Name	Debit Amt	Credit Amt	Balance
4550	Reciprocity Income	9/8/25	07/25	Upstate New York Engineers Benefit Fund		1,901.93	
4550	Reciprocity Income	9/9/25	07/25	IUOE LOCAL 841		2,172.73	
4550	Reciprocity Income	9/15/25	07/25	OE Local 37		20,978.87	
4550	Reciprocity Income	9/15/25	07/25	LOC.18 - OHIO OPERATING E		8,758.73	
4550	Reciprocity Income	9/18/25	9713	Local 400 Montana OE	1,343.75		
4550	Reciprocity Income	9/19/25	07/25	IU OE LOC. 478		2,717.58	
4550	Reciprocity Income	9/22/25	08/25	OKLAHOMA OE(LOC.627)		687.38	
4550	Reciprocity Income	9/22/25	05/25-07/25	IUOE Pipe Line H&W Fund		30,741.19	
4550	Reciprocity Income	9/22/25	07/25	LOC 302 & 612 IUOE CONSTR		1,653.60	
4550	Reciprocity Income	9/22/25	07/25	LOC 302 & 612 IUOE CONSTR		1,548.30	
4550	Reciprocity Income	9/22/25	04/25;07/25	OE Local 66 Health & Welf.Fund		448.80	
4550	Reciprocity Income	9/22/25	07/25	TENNESSEE VALUE OE HEALTH FUND		3,951.84	
4550	Reciprocity Income	9/29/25	07/25	IUOE LOCAL 841		1,315.75	
4550	Reciprocity Income	9/29/25	07/25	SOUTHERN OPERATORS HEALTH F		3,985.94	
4550	Reciprocity Income	9/29/25	07/25	OE Local 147		8,090.27	
4550	Reciprocity Income				1,343.75	88,952.91	87,609.16
		9/30/25					**87,609.16**

OE Loc 77 Trust Fund of Wash. DC
RECIPROCITY PAYMENTS
For the Period From Sep 1, 2025 to Sep 30, 2025

Account ID	Account Description	Date	Reference	Vendor Name	Debit Amt	Balance
4560	Reciprocity Payments	9/17/25	9706	IUOE Loc.132 - H&W Fund	2,811.25	
4560	Reciprocity Payments	9/17/25	9707	IUOE Loc.147 - H&W Fund	7,088.25	
4560	Reciprocity Payments	9/17/25	9708	Loc.18 - Ohio Operat.Engineers	1,138.25	
4560	Reciprocity Payments	9/17/25	9709	IUOE Local 181	1,456.00	
4560	Reciprocity Payments	9/17/25	9710	OE Loc.37 - H&W Fund	14,976.78	
4560	Reciprocity Payments	9/17/25	9711	IUOE Local 542 Welfare Fund	1,264.25	
4560	Reciprocity Payments	9/17/25	9712	IUOE & Pipe Line Employers H&W	3,872.70	
4560	Reciprocity Payments				32,607.48	32,607.48
		9/30/25				**32,607.48**

OE Loc 77 Trust Fund of Wash. DC
CHECK REGISTER
For the Period From Sep 1, 2025 to Sep 30, 2025

Check #	Date	Payee	Amount
CVS 08/16-31/25	9/2/25	CVS Caremark	131,159.68
Delta 8/23-29/25	9/3/25	Delta Dental of Pennsylvania	9,708.20
CareFirst8/23-29/25	9/3/25	CareFirst Blue Cross Blue Shield	73,690.89
9700	9/5/25	Telemedicine Mngmnt, Inc.	3,432.00
9696	9/5/25	OE Apprenticeship Fund	8,556.02
9697	9/5/25	OE Annuity Fund	20,649.35
9698	9/5/25	OE Loc 77 Pension Fund	67,467.33
9699	9/5/25	Doyle Printing & Offset Co.,Inc.	17,854.24
9701	9/5/25	Calibre CPA Group, PLLC	11,100.00
9702	9/5/25	NCAS	3,674.98
3Q25 Inv#21335	9/5/25	Investment Performance Services, LLC	4,977.98
Delta 8/30/25-9/5/25	9/9/25	Delta Dental of Pennsylvania	13,501.30
8/30/25-9/5/25	9/10/25	CareFirst Blue Cross Blue Shield	110,734.70
9703	9/12/25	AA, LLC	47,871.22
9704	9/12/25	VSP VISION CARE, INC	11,681.76
9705	9/12/25	Conifer Value-Based Care, LLC	22,317.40
9706	9/17/25	IUOE Loc.132 - H&W Fund	2,811.25
9707	9/17/25	IUOE Loc.147 - H&W Fund	7,088.25
9708	9/17/25	Loc.18 - Ohio Operat.Engineers	1,138.25
9709	9/17/25	IUOE Local 181	1,456.00
9710	9/17/25	OE Loc.37 - H&W Fund	14,976.78
9711	9/17/25	IUOE Local 542 Welfare Fund	1,264.25
9712	9/17/25	IUOE & Pipe Line Employers H&W Fund	3,872.70
Delta9/6/25-9/12/25	9/17/25	Delta Dental of Pennsylvania	9,230.90
CVS9/1/25-9/15/26	9/17/25	CVS Caremark	328,025.92
CareFirst9/6-12/25	9/18/25	CareFirst Blue Cross Blue Shield	89,545.88
9713	9/18/25	MOEC	1,343.75
9714	9/18/25	IFEBP	3,225.00
9715	9/18/25	OE Loc.77 Check Off Dues	283,369.95
9716	9/18/25	OE Apprenticeship Fund	6,841.45
9717	9/18/25	OE Annuity Fund	21,627.00
9718	9/18/25	OE Loc 77 Pension Fund	460.00
Delta9/13/25-9/19/25	9/24/25	Delta Dental of Pennsylvania	10,625.95
9719	9/25/25	Green Light	1,009.80
CareFirst9/13-19/25	9/26/25	CareFirst Blue Cross Blue Shield	92,216.89
9720	9/26/25	CareFirst Blue Cross Blue Shield	12,559.19
Delta9/20-26/25;9/25	9/29/25	Delta Dental of Pennsylvania	19,613.91
LaborFirst 10/25	9/29/25	Labor First Limited Liability	110,178.00
Total			**1,580,858.12**

PARTICIPANT APPEALS

NAME: **SS#:**
REGARDING: **BENEFICIARY SS#:**

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

EMPLOYER: Fluor-Lane, LLC **LOCAL:** 77
STATUS: Deceased, October 6, 2018

ISSUE: Prescription – Prior Authorization #Rx25/149-2926

FUND RULE:

SUMMARY: Appeal Received: September 29, 2025

The **provider,** Joseph Hashem, MD, is appealing on behalf of the participant's spouse for coverage of Xeljanz XR 22mg, which is a prescription drug that is used to treat inflammatory and autoimmune conditions.

Xeljanz requires a Prior Authorization under the Plan. It was noted that Caremark approved a Prior Authorization for Xeljanz XR 11mg for the participant's spouse. Caremark denied a Prior Authorization for Xeljanz XR 22mg because it did not meet its criteria for coverage. Caremark stated, **"We have denied your request because it is: A) For a higher amount than the amount your plan covers (dosing limit), or B) To take this drug more often than the amount your plan covers (dosing limit). Your plan covers up to: A) Two 5 milligram (mg) immediate release tablets per day or B) One 11 mg extended release tablet per day for your health condition."**

Dr. Hashem states in the appeal that the participant's spouse has been diagnosed with rheumatoid arthritis and has had excellent benefits on the 11mg, but it has slowly become less effective. Dr. Hashem states that the higher dose of 22mg would be highly beneficial for her.

After the appeal was received, letters were mailed to Dr. Hashem and the participant's spouse on October 6, 2025 and October 21, 2025, requesting complete medical records to support the necessity of the higher dose. To date, there has been no response to these requests.

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

NAME: **SS#:**
REGARDING:

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

EMPLOYER: Bay Crane Mid-Atlantic **STATUS:** Active

ISSUE: Prescription – Excluded Drug #Rx25/146-5575

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). […]

25. 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, January 2025, Page 98, #25)

SUMMARY: Appeal Received: September 10, 2025

The **provider,** Kimberly H. Combs, MD, is appealing on behalf of the participant's spouse 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 on April 25, 2025 because weight loss medications are not covered under the Plan.

Dr. Combs states in the appeal, "This patient has a bulging disk and stenosis and needs to lose weight before neurosurgery. [The participant's spouse] has other comorbidities which includes: morbid obesity, cardiomyopathy and moderate mitral valve regurge, OSA (Obstructive Sleep Apnea) and cannot use CPAP."

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 **LOCAL:** 77
STATUS: Active

ISSUE: Hospital/Medical – Late Claim Filing #M25/148-7975

FUND RULE:
"Claims Filing and Appeals Information and Procedures

Important Note: You must file all claims within 365 days from the date of an event, except Weekly Accident and Sickness claims, which must be file within 60 days from your disability determination date or before you return to work, whichever is later.

An 'event' is defined as the accrual of charges for medical care, the date of injury, disease or illness, the date of disability, date of accident or sickness or date of death or injury which causes dismemberment."
(Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 SPD, January 2025, Page 111)

SUMMARY:

Date(s) of Service:	April 23, 2024
Claim(s) Received:	July 3, 2025 **(255 days late)**
Claim(s) Denied:	July 14, 2025
Appeal Received:	September 16, 2025

The **provider,** Specialized Orthopaedic Services, Inc., is appealing for payment of a claim for the participant's spouse that was denied for untimely filing. The provider states that the claim was filed electronically to "NCAS CareFirst" on February 26, 2025, and it was denied for "invalid payer." Included with the appeal were billing notes indicating the claim was filed on February 26, 2025, and "received by the payer" (unknown details) on February 27, 2025. It is noted that the participant's spouse's last name is different in the provider's records. There is no indication that the claim was accepted by CareFirst, or that the provider followed up on the claim after February 27, 2025.

Fund records indicate Specialized Orthopaedic Services, Inc. submitted a claim for the purchase of a hand/wrist brace on April 23, 2024. CareFirst records indicate it first received this claim on July 2, 2025, and forwarded it to the Fund Office at that time. The Fund Office does not have any record of receiving this claim prior to July 3, 2025. The claim was denied for untimely filing.

After the appeal was received, letters were mailed to the provider and the participant's spouse on September 25, 2025 and October 8, 2025, requesting complete billing notes including a record of all submissions, a copy of an electronic receipt showing proof of acceptance of the claim by CareFirst, all address(es) used to submit the claim, and asking if the participant's spouse was billed by the provider. To date, there has been no response to these requests.

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

NAME: **SS#:**
REGARDING:

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

EMPLOYER:	W.O. Grubb Equipment Rental	**LOCAL:**	77
		STATUS:	Active

ISSUE:	Hospital/Medical – Excluded Services	#M25/151-2743

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). […]

5. The Plan does not cover any medical care, including examinations, procedures and treatments, which are not recommended or approved by a legally qualified physician or surgeon and which are not approved by the Board of Trustees. All treatment must be medically necessary unless covered under preventive or otherwise specified as being covered in the booklet. […]

11. The Plan does not cover any services, treatments, drugs, or supplies which are experimental or investigational in nature, including any services, treatment, drugs or supplies which are not recognized as acceptable medical practice. A determination of whether service, care, or treatment is experimental in nature or not considered a generally accepted medical practice shall be solely within the discretion of the Board of Trustees, whose determination on that issue shall be final and binding on all concerned. […]"
(Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 SPD, Pages 85-86, #5, #11)

"The Trustees have restated their longstanding interpretation of Exclusion Number 11 under the EXCLUSIONS AND LIMITATIONS section of the Plan. The Trustees have consistently interpreted this provision to exclude coverage for genetic testing, including any medical procedures or treatment related to genetic testing, including but not limited to gene therapy, because they were services, treatment, drugs, or supplies experimental and/or investigational in nature on March 23, 2010. […]"
(Quoted from the Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 Summary of Material Modifications)

SUMMARY:	Date(s) of Service:	December 2, 2024
	Claim(s) Received:	April 8, 2025
	Claim(s) Denied:	April 9, 2025
	Appeal Received:	September 29, 2025

The **participant** is appealing for payment of a laboratory claim for his spouse that was denied. Included with the appeal were medical records dated September 18, 2024, December 9, 2024, and February 3, 2025, indicating the participant's spouse is being treated for anemia.

Fund records indicate LabCorp submitted a claim for genetic testing (CPT 81257) performed on December 2, 2024 with the diagnoses, "Anemia - unspecified, and Other iron deficiency anemias." The claim was denied because genetic testing is not a covered benefit 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: International Union Local 77 **LOCAL:** 77
STATUS: Retired

ISSUE: Hospital/Medical – Excluded Services, Late Appeal #M25/153-8572

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). […]

5. The Plan does not cover any medical care, including examinations, procedures and treatments, which are not recommended or approved by a legally qualified physician or surgeon and which are not approved by the Board of Trustees. All treatment must be medically necessary unless covered under preventive or otherwise specified as being covered in the booklet. […]

11. The Plan does not cover any services, treatments, drugs, or supplies which are experimental or investigational in nature, including any services, treatment, drugs or supplies which are not recognized as acceptable medical practice. A determination of whether service, care, or treatment is experimental in nature or not considered a generally accepted medical practice shall be solely within the discretion of the Board of Trustees, whose determination on that issue shall be final and binding on all concerned. […]"
(Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 SPD, Pages 85-86, #5, #11)

"The Trustees have restated their longstanding interpretation of Exclusion Number 11 under the EXCLUSIONS AND LIMITATIONS section of the Plan. The Trustees have consistently interpreted this provision to exclude coverage for genetic testing, including any medical procedures or treatment related to genetic testing, including but not limited to gene therapy, because they were services, treatment, drugs, or supplies experimental and/or investigational in nature on March 23, 2010. […]"
(Quoted from the Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 Summary of Material Modifications)

"**Appealing a Denied Claim**
2. Time to Appeal. You have 180 days following receipt of a notification of an adverse benefit determination within which to appeal the determination."
(Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 SPD, Page 122, #2)

SUMMARY:

	Date(s) of Service:	October 10, 2024
	Claim(s) Received:	October 23, 2024
	Claim(s) Denied:	October 25, 2024
	Appeal Received:	June 27, 2025 **(65 days late)**

The **participant's spouse** is appealing for payment of laboratory claims that were denied. The participant's spouse states, "I respectfully request reconsideration based on the medical necessity of this testing in my case, which directly affects diagnostic clarity, disease management, and future treatment decisions. These tests were specifically ordered to evaluate, diagnose and manage both conditions that may have serious long-term implications if left undiagnosed or mismanaged. After six months of various tests, this one identified part of the problem, so treatment could provide relief. I'm still undergoing more tests to determine the underlying cause of the internal bleeding." Included with the appeal was a letter of medical necessity from Keisha Ritter, NP.

Fund records indicate LabCorp submitted claims for genetic testing (CPT 81257, 81270, 81279, 81219, and 81338) performed on October 10, 2024 with the diagnoses "Anemia - unspecified, and Thrombocytosis - unspecified." The claims were denied because genetic testing is not a covered benefit 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:	Maxim Crane Works	**LOCAL:**	77
		STATUS:	Active

ISSUE:	Hospital/Medical – Medical Necessity, Late Appeal	#M25/145-1983

FUND RULE:
"**CONIFER HEALTH SOLUTIONS**
UTILIZATION MANAGEMENT (CERTIFICATION OF CARE SERVICE)

You must contact Conifer Health Solutions at (844) 739-8913 to certify all inpatient hospital admissions (and within 24 hours of an emergency admission). This number is also shown on the front of your Fund ID card. […]"
(Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 SPD, January 2025, Page 68)

"**Treatment Must be Medically Necessary**
All treatment must be medically necessary as determined by the Board of Trustees in order to be eligible for coverage. […]"
(Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 SPD, January 2025, Page 78)

"**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). […]

5. The Plan does not cover any medical care, including examinations, procedures and treatments, which are not recommended or approved by a legally qualified physician or surgeon and which are not approved by the Board of Trustees. **All treatment must be medically necessary unless covered under preventive or otherwise specified as being covered in the booklet.**"
(Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 SPD, January 2025, Page 95, #5)

"**Appealing a Denied Claim**

Appeals Procedure for Medical Claims Including Concurrent Care, Pre-Service, and Post-Service Claims. […]

b. Time to Appeal. You have 180 days following receipt of a notification of an adverse benefit determination within which to appeal the determination; […]"
(Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 SPD, January 2025, Pages 134-135)

SUMMARY:	Date(s) of Service:	October 18, 2024 through October 22, 2024
	Claim(s) Received:	November 11, 2024
	Claim(s) Denied:	November 21, 2024
	Appeal Received:	September 10, 2025 **(113 days late)**

The **billing agent for the provider,** Charles Regional Medical Center, is appealing for payment of an inpatient hospital claim for the participant's spouse that was denied. The billing agent states, in summary, that the services were both medically necessary and provided at the appropriate level of care as outlined in the medical records. Included with the appeal were treatment notes.

Fund records indicate Charles Regional Medical Center submitted a claim for a 4-day inpatient admission with a primary diagnosis of "Acute kidney failure, unspecified." A letter was mailed to the participant's spouse and the provider on November 18, 2024, advising that these services require certification from Conifer Health Solutions ("Conifer") in order to be considered for coverage. The claim was denied to the extent that certification was not received.

After the appeal was received, the Fund Office contacted Conifer. Conifer advised that a review was subsequently conducted, and the determination was that the inpatient admission was **not medically necessary.** Conifer stated, **"The inpatient level of care was not met for this patient with acute on chronic kidney disease. She was admitted on 10/18/24; however, a renal biopsy was not performed until at 10/22/24. There was a delay in care as the weekend probably did not allow for procedural interventions. However, a renal biopsy is not an inpatient only designated procedure. Although the patient was on a bicarbonate drip, this could have been provided in a less intensive setting. There was no food/medication intolerance or persistent renal dysfunction necessitating dialysis. There was no hypoxia, hypercapnia, infection, or bleeding. The inpatient level of care was not medically necessary. […] The recommended level of care is observation for 48 hours after which a decision can be made regarding a renal biopsy."**

After review, the claim remained denied because the services were deemed not medically necessary.

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

NAME: **SS#:**

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

EMPLOYER: Independence Excavating **LOCAL:** 77
STATUS: Active

ISSUE: Hospital/Medical – Chiropractic Benefit, Medical Necessity #M25/138-3968

FUND RULE:
"**Chiropractic Care**
Your Plan covers up to 8 visits to a chiropractor per calendar year. More than 8 visits must be certified by Conifer Health Solutions in order to be covered."
(Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 SPD, January 2025, Page 81)

"**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). […]

5. The Plan does not cover any medical care, including examinations, procedures and treatments, which are not recommended or approved by a legally qualified physician or surgeon and which are not approved by the Board of Trustees. **All treatment must be medically necessary unless covered under preventive or otherwise specified as being covered in the booklet.**"
(Operating Engineers Trust Fund of Washington, D.C. Health and Welfare Program Local No. 77 SPD, January 2025, Page 95, #5)

SUMMARY:		
	Date(s) of Service:	July 10, 2025 and August 2, 2025
	Claim(s) Received:	July 15, 2025 through August 6, 2025
	Claim(s) Denied:	August 4, 2025 through August 22, 2025
	Appeal Received:	August 19, 2025

The **provider,** Montpelier Family Chiropractic, appealing for payment of claims for chiropractic services that were denied. The provider states, in summary, that the participant regularly reports that adjustments have helped him feel more mobile, and have less pain in his daily activities, including but not limited to the ability to cut grass, and make it through his day at work as a contractor. The provider further states that it is their clinical recommendation that the participant continue utilizing chiropractic care to avoid further injury and manage musculoskeletal health.

Under the terms of the Plan, up to eight chiropractic visits are covered per calendar year. More than eight visits must be certified by Conifer Health Solutions ("Conifer") in order to be covered. Fund records indicate Montpelier Family Chiropractic submitted claims for eight chiropractic visits rendered between January 14, 2025 and June 10, 2025, and those claims were paid, up to the limits of the Plan. Claims for additional chiropractic visits, including on July 10, 2025 and August 2, 2025, were denied because those services were not certified.

After the appeal was received, the Fund office contacted Conifer. Conifer advised that the additional chiropractic services were **not medically necessary,** stating in summary, **"The provider has described that the patient has been advised to follow up with monthly chiropractic visits to manage his presenting condition, with additional visits as needed with exacerbations. The provider has described treatment as intended to minimize worsening or further degeneration in the spine. As such, additional visits would be considered maintenance at this time and therefore not supported as medically necessary. […] Additional treatment recommendation should only be considered based on documentation of new injury or significant flare-up of the patients complaint and presenting findings at that time."**

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

NAME: **SS#:**

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

EMPLOYER:	Delta Railroad JV	**LOCAL:** **STATUS:**	77 Active

ISSUE:	Hospital/Medical – Medical Necessity	#M25/122-9677

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:	April 8, 2025 through April 15, 2025
	Claim(s) Received:	(pending)
	Claim(s) Denied:	(pending)
	Appeal Received:	April 29, 2025

The **provider,** Orange County Detox, LLC, is appealing for coverage of residential treatment services rendered from April 8, 2025 through April 15, 2025 that were deemed not medically necessary by Conifer Health Solutions.

Fund records indicate the participant began receiving detox services at Orange County Detox, LLC on March 18, 2025 with a diagnosis of "Alcohol dependence, uncomplicated." Orange County Detox, LLC submitted claims to the Plan for services rendered from March 18, 2025 through April 7, 2025. Conifer Health Solutions advised that the services were medically necessary and those claims were paid, up to the limits of the Plan. Orange County Detox, LLC requested an extension of certification from Conifer on or about April 7, 2025 for residential treatment continuing from April 8, 2025 through April 15, 2025. Conifer conducted a peer-to-peer review with the provider, and subsequently determined that the extension was not medically necessary, stating in summary, **"There is no indication of any severe psychiatric, functional impairments, and there is no severe psychosis Romania that require continue[d] treatment at this level of care. While there is indication, the patient is continuing to have some cravings present, there is no indication the patient is an immediate risk of relapse of treatment as attempted at a lower level of care. The patient also does not demonstrate any acute mental instability. […] The recommended level of care is several days per week intensive outpatient (IOP) level of care with the use of medication assisted treatment."** The provider's appeal was received on April 29, 2025.

The provider states, in summary, that the participant has been struggling with chemical dependency for the past couple of years with a severe escalation of alcohol use disorder over the last year. The provider further states that this treatment included safe medical detox, inpatient residential treatment, relapse prevention planning, daily nursing, medical provider/psychiatric evaluation, medication management, MAT (Medication Assisted Treatment) education, aftercare discharge planning, and weekly individual therapy. Lastly, the provider states that this treatment was medically necessary, in their opinion.

Note: To date, the Fund office has not received a claim for the residential treatment services rendered from April 8, 2025 through April 15, 2025.

This appeal was presented to the Board of Trustees at its August 12, 2025 quarterly meeting. The Trustees "tabled" the appeal.

The information received with the appeal was forwarded to Conifer for reconsideration. Conifer upheld its previous determination that the residential treatment from April 8, 2025 through April 15, 2025 was **not medically necessary**, stating in summary, **"There are no severe withdrawal symptoms needing 24-hour care. The patient is not a threat to himself or others. The patient's reported readiness to change was adequate so that he could be treated at a less intensive level. No active suicide ideation or homicidal ideations were present. The patient was not planning to hurt himself or anyone else. No cognitive deficit related to withdrawal with the deficit affecting the patient's ability to recognize alcohol/drug use as a problem was present. He was not agitated or aggressive. The patient has improved with treatment and there are no immediate medical or mental health issues requiring this level of care based on the medical literature and industry standard treatment guidelines. […] The patient could have been managed in partial hospital program (PHP) level of care (LOC), 5 hours per day, 5 days a week along with close follow-up with a psychiatrist for medication assisted treatment (MAT)."**

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

OTHER FUND BUSINESS

Performance Overview

Zenith American Solutions - Associated Administrators - CreateDate - (7/1/2025 - 7/31/2025)	
Total Employee Lives	5,600
Total Gross Savings	$4,253.32
Total Net Savings	$2,977.32

Gross Claims Editing Savings	$0.00
Net Claims Editing Savings	$0.00
Total Billed Submitted	$0.00
Total Allowed Amount Submitted	$0.00
Recommended # of Edits	0
# of Edits Utilized	0
Non-Utilized Savings	$0.00
Overall Savings	0.00%
Gross Expert Claims Review Savings	$0.00
Net Expert Claims Review Savings	$0.00
Total Billed Submitted	$0.00
Total Allowed Amount Submitted	$0.00
Success Rate	0.0%
Average Discount	0.0%
Gross Out of Network Services Savings	$4,253.32
Net Out of Network Services Savings	$2,977.32
Total Billed Submitted	$5,456.00
Total Allowed Amount Submitted	$5,456.00
Success Rate	100.0%
Average Discount	78.0%
Gross NSA Savings	$0.00
Net NSA Savings	$0.00
Total Billed Submitted	$0.00
Total Allowed Amount Submitted	$0.00
Success Rate	0.0%
Average Discount	0.0%
Gross PEPM Savings	$0.76
Net PEPM Savings	$0.53
Total Administrative Allowance	$689.05
PEPM Administrative Allowance	$0.12

NO AUGUST CLAIMS

Performance Overview

Zenith American Solutions - Associated Administrators - CreateDate - (9/1/2025 - 9/30/2025)	
Total Employee Lives	5,600
Total Gross Savings	$17,967.40
Total Net Savings	$12,577.16

Gross Claims Editing Savings	$0.00
Net Claims Editing Savings	$0.00
Total Billed Submitted	$0.00
Total Allowed Amount Submitted	$0.00
Recommended # of Edits	0
# of Edits Utilized	0
Non-Utilized Savings	$0.00
Overall Savings	0.00%
Gross Expert Claims Review Savings	$0.00
Net Expert Claims Review Savings	$0.00
Total Billed Submitted	$0.00
Total Allowed Amount Submitted	$0.00
Success Rate	0.0%
Average Discount	0.0%
Gross Out of Network Services Savings	$17,967.40
Net Out of Network Services Savings	$12,577.16
Total Billed Submitted	$20,835.53
Total Allowed Amount Submitted	$20,835.53
Success Rate	100.0%
Average Discount	86.2%
Gross NSA Savings	$0.00
Net NSA Savings	$0.00
Total Billed Submitted	$0.00
Total Allowed Amount Submitted	$0.00
Success Rate	0.0%
Average Discount	0.0%
Gross PEPM Savings	$3.21
Net PEPM Savings	$2.25
Total Administrative Allowance	$2,910.72
PEPM Administrative Allowance	$0.52

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

911 Ridgebrook Road
Sparks, Maryland 21152-9451
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SUMMARY ANNUAL REPORT
FOR

OPERATING ENGINEERS TRUST FUND OF
WASHINGTON D.C. AND VICINITY

THIS IS A SUMMARY OF THE ANNUAL REPORT FOR THE OPERATING ENGINEERS TRUST FUND OF WASHINGTON D.C. AND VICINITY, (EMPLOYER IDENTIFICATION NO. 52-6038508, PLAN NO. 501) FOR THE PERIOD JANUARY 1, 2024 TO DECEMBER 31, 2024. THE ANNUAL REPORT HAS BEEN FILED WITH THE EMPLOYEE BENEFITS SECURITY ADMINISTRATION, AS REQUIRED UNDER THE EMPLOYEE RETIREMENT INCOME SECURITY ACT OF 1974 (ERISA).

THE VALUE OF PLAN ASSETS, AFTER SUBTRACTING LIABILITIES OF THE PLAN, WAS $39,557,945 AS OF DECEMBER 31, 2024 COMPARE TO $39,558,419 AS OF JANUARY 1, 2024. DURING THE PLAN YEAR THE PLAN EXPERIENCED A DECREASE IN ITS NET ASSETS OF $474. THIS DECREASE INCLUDES UNREALIZED APPRECIATION OR DEPRECIATION IN THE VALUE OF THE PLAN ASSETS; THAT IS, THE DIFFERENCE BETWEEN THE VALUE OF THE PLAN'S ASSETS AT THE END OF THE YEAR AND THE VALUE OF THE ASSETS AT THE BEGINNING OF THE YEAR, OR THE COST OF ASSETS ACQUIRED DURING THE YEAR.DURING THE PLAN YEAR, THE PLAN HAD TOTAL INCOME OF $19,520,300. THIS INCOME INCLUDED EMPLOYER CONTRIBUTIONS OF $16,445,588, EMPLOYEE CONTRIBUTIONS OF $781,845, REALIZED GAINS OF $99,999 FROM THE SALE OF ASSETS AND EARNINGS FROM INVESTMENTS OF $2,170,950. PLAN EXPENSES WERE $19,520,774. THESE EXPENSES INCLUDED $1,424,398 IN ADMINISTRATIVE EXPENSES AND $18,096,376 IN BENEFITS PAID TO PARTICIPANTS AND BENEFICIARIES.

YOUR RIGHTS TO ADDITIONAL INFORMATION

YOU HAVE THE RIGHT TO RECEIVE A COPY OF THE FULL ANNUAL REPORT, OR ANY PART THEREOF, ON REQUEST. THE ITEMS LISTED BELOW ARE INCLUDED IN THAT REPORT:

1. AN ACCOUNTANT'S REPORT;
2. ASSETS HELD FOR INVESTMENT;
3. TRANSACTIONS IN EXCESS OF 5 PERCENT OF THE PLAN ASSETS; AND
4. INSURANCE INFORMATION INCLUDING SALES COMMISSIONS PAID BY INSURANCE CARRIERS.

TO OBTAIN A COPY OF THE FULL ANNUAL REPORT, OR ANY PART THEREOF, WRITE OR CALL THE OFFICE OF OR THE PLAN ADMINISTRATOR:

BOARD OF TRUSTEES, OPERATING ENGINEERS TRUST FUND
C/O ASSOCIATED ADMINISTRATORS, INC.
8400 CORPORATE DRIVE SUITE 430
LANDOVER, MD 20785-2210
54-1826754 (EMPLOYER IDENTIFICATION NUMBER)
301-459-3020

THE CHARGE TO COVER COPYING COSTS WILL BE $8 FOR THE FULL REPORT, OR $0.25 PER PAGE FOR ANY PART THEREOF.

YOU ALSO HAVE THE RIGHT TO RECEIVE FROM THE PLAN ADMINISTRATOR, ON REQUEST AND AT NO CHARGE, A STATEMENT OF THE ASSETS AND LIABILITIES OF THE PLAN AND ACCOMPANYING NOTES, OR A STATEMENT OF INCOME AND EXPENSES OF THE PLAN AND ACCOMPANYING NOTES, OR BOTH. IF YOU REQUEST A COPY OF THE FULL ANNUAL REPORT FROM THE PLAN ADMINISTRATOR, THESE TWO STATEMENTS AND ACCOMPANYING NOTES WILL BE INCLUDED AS PART OF THAT REPORT. THE CHARGE TO COVER COPYING COSTS GIVEN ABOVE DOES NOT INCLUDE A CHARGE FOR THE COPYING OF THESE PORTIONS OF THE REPORT BECAUSE THESE PORTIONS ARE FURNISHED WITHOUT CHARGE.

YOU ALSO HAVE THE LEGALLY PROTECTED RIGHT TO EXAMINE THE ANNUAL REPORT AT THE MAIN OFFICE OF THE PLAN:

ASSOCIATED ADMINISTRATORS, INC.
8400 CORPORATE DRIVE SUITE 430
LANDOVER, MD 20785-2210

AND AT THE U.S. DEPARTMENT OF LABOR IN WASHINGTON, D.C., OR TO OBTAIN A COPY FROM THE U.S. DEPARTMENT OF LABOR UPON PAYMENT OF COPYING COSTS. REQUESTS TO THE DEPARTMENT SHOULD BE ADDRESSED TO: U.S. DEPARTMENT OF LABOR, EMPLOYEE BENEFITS SECURITY ADMINISTRATION, PUBLIC DISCLOSURE ROOM, 200 CONSTITUTION AVENUE, NW, SUITE N-1513, WASHINGTON, D.C. 20210.

PAPERWORK REDUCTION ACT STATEMENT

ACCORDING TO THE PAPERWORK REDUCTION ACT OF 1995 (PUB. L. 104-13) (PRA), NO PERSONS ARE REQUIRED TO RESPOND TO A COLLECTION OF INFORMATION UNLESS SUCH COLLECTION DISPLAYS A VALID OFFICE OF MANAGEMENT AND BUDGET (OMB) CONTROL NUMBER. THE DEPARTMENT NOTES THAT A FEDERAL AGENCY CANNOT CONDUCT OR SPONSOR A COLLECTION OF INFORMATION UNLESS IT IS APPROVED BY OMB UNDER THE PRA, AND DISPLAYS A CURRENTLY VALID OMB CONTROL NUMBER, AND THE PUBLIC IS NOT REQUIRED TO RESPOND TO THE COLLECTION OF INFORMATION UNLESS IT DISPLAYS A CURRENTLY VALID OMB CONTROL NUMBER. SEE 44 U.S.C. 3507. ALSO, NOTWITHSTANDING ANY OTHER PROVISIONS OF LAW, NO PERSON SHALL BE SUBJECT TO PENALTY FOR FAILING TO COMPLY WITH A COLLECTION OF INFORMATION IF THE COLLECTION OF INFORMATION DOES NOT DISPLAY A CURRENTLY VALID OMB CONTROL NUMBER. SEE 44 U.S.C. 3512.

THE PUBLIC REPORTING BURDEN FOR THIS COLLECTION OF INFORMATION IS ESTIMATED TO AVERAGE LESS THAN ONE MINUTE PER NOTICE (APPROXIMATELY 3 HOURS AND 11 MINUTES PER PLAN). INTERESTED PARTIES ARE ENCOURAGED TO SEND COMMENTS REGARDING THE BURDEN ESTIMATE OR ANY OTHER ASPECT OF THIS COLLECTION OF INFORMATION, INCLUDING SUGGESTIONS FOR REDUCING THIS BURDEN, TO THE U.S. DEPARTMENT OF LABOR, OFFICE OF THE CHIEF INFORMATION OFFICER, ATTENTION: DEPARTMENTAL CLEARANCE OFFICER, 200 CONSTITUTION AVENUE, N.W., ROOM N-1301, WASHINGTON, DC 20210 OR EMAIL DOL_PRA_PUBLIC@DOL.GOV AND REFERENCE THE OMB CONTROL NUMBER
1210-0040

OMB CONTROL NUMBER 1210-0040 (EXPIRES 03/31/2026)

CONIFER HEALTH SOLUTIONS®

Operating Engineers Local 77 Plan Performance Report

3rd Quarter 2025

Today’s Agenda

1. Executive Summary

2. Population Overview
   a. Key Indicators
   b. Risk Stratification
   c. Categories of Care
3. Personal Health Management (PHM)
   a. Outreach
   b. Outcomes
   c. Cost Savings
   d. Case Study
4. Utilization Management (UM)
5. Appendix

Executive Summary

Population Overview

- This report is based on paid claims data from January 1 through September 30, 2025 with historical data from January 1, 2023 through December 31, 2024. This report excludes Medicare Retiree plans.
- 2025 total health care claims (medical & pharmacy) increased 15% in the first three quarters of 2025 when compared to 2024 calendar year results. Medical claims increased 12% while Rx claims increased 21%. Quarter over quarter, total claims have increased each quarter this year.
- There were 6 members that had claims of $250,000 through the first three quarters of 2025, representing 22% of total claims. Although two of the members are now showing inactive on the plan, a new high cost claimant of over $1 million appeared in the third quarter.

Engagement

- **99% engagement** for Q3 2025 is consistently higher than Conifer's Book of Business average.
- PHNs were **able to reach 80**% of members identified for management, which is higher than Conifer's Book of Business average.

Results

- There was a **decrease in all modifiable Priority Risk and High-Risk triggers** for engaged members quarter over quarter indicating improvements in health management and utilization of benefits.
- Medical Management **savings ratio is 5.36:1** for Q3 2025 with the top categories including savings based on improved health related behaviors and averted inpatient admissions.

Today's Agenda

1. Executive Summary
2. **Population Overview**
   a. **Key Indicators**
   b. **Risk Stratification**
   c. **Categories of Care**
3. Personal Health Management (PHM)
   a. Outreach
   b. Outcomes
   c. Cost Savings
   d. Case Study
4. Utilization Management (UM)
5. Appendix

Monitoring Key Indicators

3-Year Review

- **Average enrollment** has remained consistent the past three years. At the end of the third quarter 2025, there were 1,169 employees (2,975 total members) on the plan.
- **Total Medical/Rx PMPM** increased about 15% through the first three quarters of 2025 when compared to the 2024 plan year. Third quarter claims were significantly higher than the previous two quarters due to a high cost claimant.
- **Rx PMPM** increased 21% through September of 2025 when compared to 2024. Expenses averaged $165 pmpm in the second and third quarters of 2025 compared to $114 pmpm in the first quarter; Gattex, Hemlibra, and Skyrizi were the top three drugs by paid claims. Generic drugs represented 90% of total scripts and 18% of total Rx spend. 90-day supplies represented 34% of total scripts and 17% of Rx spend.
- **High-Cost Claimants** – there were 46 claimants that utilized $50,000+ (Medical and Rx) through the third quarter of 2025. These members represented 1.5% of membership and 56% of total paid claims.
    - There were 6 claimants with paid claims over $250,000 through September. Two are showing as inactive on the plan at the end of the quarter. All 6 claimants were outreached by the PHN.

Metric	CY 2023	CY 2024	Thru Q3 2025
Number of Employees (avg)	1,223	1,228	1,212
Number of Members (avg)	3,038	2,990	3,001
Medical PMPM	$261.44	$298.64	$334.95
RX PMPM	$100.36	$118.29	$143.49
Total PMPM	**$361.80**	**$416.93**	**$478.44**
General COC PMPM			
Hospital Related	$149.80	$177.56	$195.15
Professional	$104.99	$113.73	$132.93
Other	$6.65	$7.35	$6.87
Rx	$100.36	$118.29	$143.49
Total	**$361.80**	**$416.93**	**$478.44**
Claimants over $50,000 (Med/Rx)			
Number of Claimants	56	62	46
% of Population	1.9%	2.0%	1.5%
% of Total Paid	54.8%	60.5%	56.2%
Largest Claimant Cost	$451,751	$1,054,523	$1,187,971
Claimant Breakdown:			
$1 million+	0	1	1
$500k - $999k	0	1	0
$250k - $499k	5	7	5
$100k - $249k	22	16	18

Monitoring Key Indicators *(continued…)*

Members eligible at the end of each year and 9.30.2025

Predicted Trend	CY 2023		CY 2024		Q3 2025	
	#	%	#	%	#	%
Number of Members	2,977	n/a	2,990	n/a	2,953	n/a
Priority Risk	9	0.3%	5	0.17%	5	0.17%
High Risk	166	5.6%	176	5.9%	176	5.9%
Predicted to Spend $5,000+ in next 12 Months	657	22.1%	689	23.0%	706	23.9%
~Prevalent Chronic Conditions*	344	52.4%	322	46.7%	337	47.7%
High-Cost Cancers**	15	0.5%	17	0.57%	14	0.47%

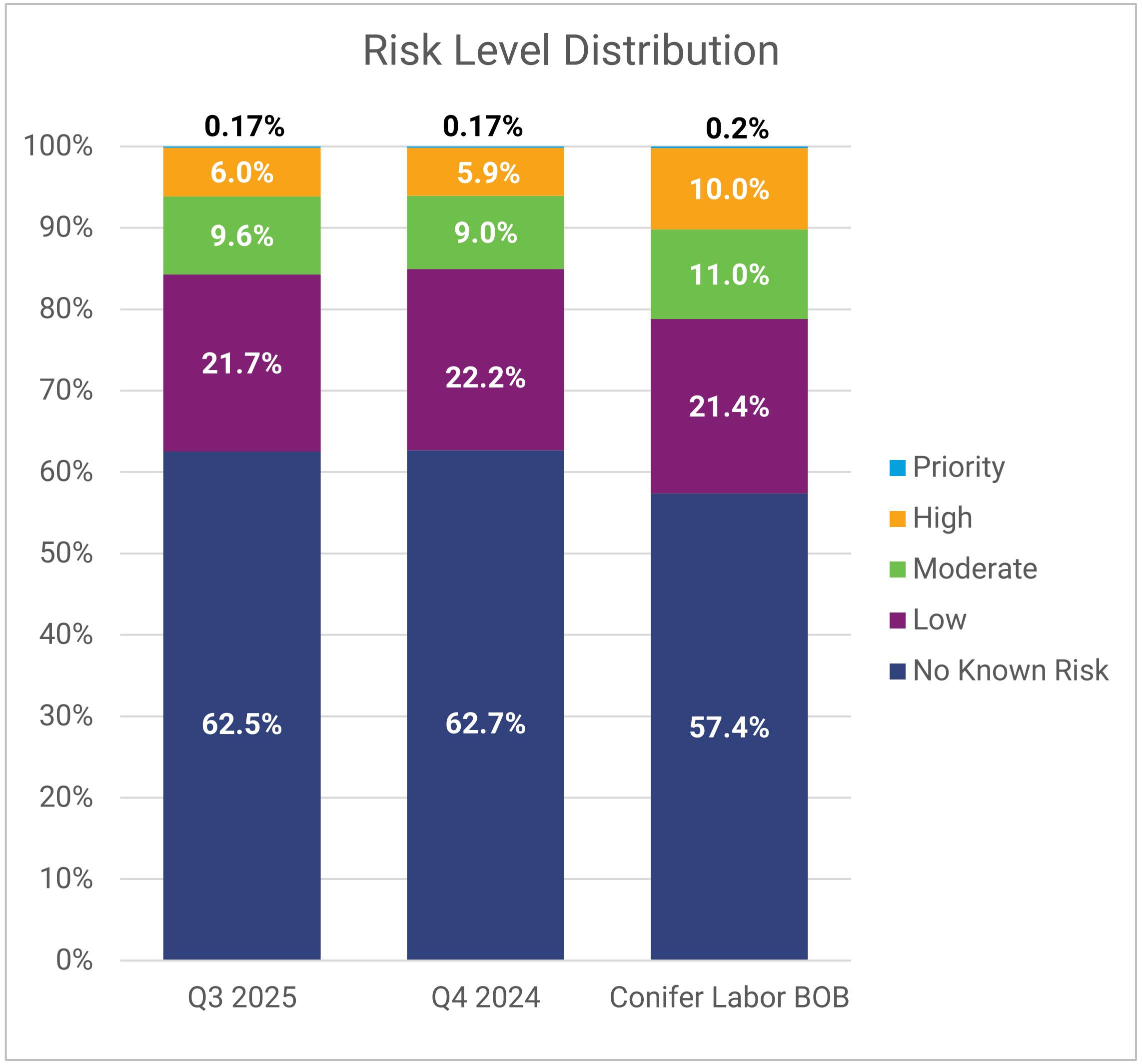
- Priority Risk members continue to represent a small portion of the overall; after increasing to 10 members in the first quarter, the number decreased to 5 at the end of the third quarter. The percentage of members considered High Risk has remained flat.
- Of the participants predicted to spend over $5,000 in the coming year, the main risk markers are screening & preventative care, cardiovascular risk, and metabolic disease. Nearly half of these members have chronic conditions.
- There were 14 high-cost cancers on the plan at the end of the third quarter of 2025. Breast cancer is the most prevalent high-cost cancer.

** Prevalent Chronic Conditions include Diabetes, Hypertension and Ischemic Heart Disease*
*** High-Cost Cancer(s) include breast, soft tissue, lung, leukemia, colon, liver, lymphoma, brain/spinal cord, multiple myeloma, pancreatic and prostate*

Comparing Risk Stratification

Members eligible on 12.31.2024 and 9.30.2025

- **Overall**, 15.7% of the membership is considered to be a moderate risk or higher. This is well below Conifer's Labor Book of Business (LBoB) of approximately 21%.
- **The Priority Risk** population had 5 members at the end of the third quarter of 2025. Examples of this category are readmission risks, newly identified cancer diagnoses, and high-cost prescription drugs.
- Members considered **High Risk** have remained steady in 2025, with 176 identified at the end of the quarter. Examples of this category are members predicted to incur $25,000, members with greater than $25,000 in the past 6 months, members with a high number of provider or prescribing physician interactions, and major illnesses (e.g. cancer, renal failure, congestive heart failure).
- The **Moderate and Low Risk** combined populations are lower than the Conifer LBoB, while the **No Known Risk population** is higher. "No Known Risk" members are participants that have some medical and pharmacy claims (but none that would stratify to a higher risk) or participants with no claim history in the past 12 months. The Fund's overall low average age is a contributing factor to this. Any encouragement to members to see a Primary Care Physician would assist in lowering this number.



Identifying Cost Drivers by Category of Care (COC)

PMPM Year over Year Comparison

- **Overall, the key medical cost drivers** increased 12% through the first three quarters of 2025 when compared to 2024 calendar year results. Quarter over quarter, the third quarter was the highest of the year due to a high cost claimant paid in September.
- **Inpatient Hospital** remains the highest cost driver. Although demand has remained steady this year, a high cost claimant increased the overall PMPM in the third quarter.
- **Facility** costs have increased 15% through the third quarter, with the second quarter being 42% higher than the first quarter. Outpatient Services comprise 90% of this category and have increased in the second and third quarters of 2025.
- **Medicine** expenses have increased 16% so far in 2025, mainly due to increases in expenses for chemotherapy and dialysis. Claims for this category have increased in the second and third quarters of 2025.
- Expenses related to **Procedures** increased 31% overall in the first three quarters of 2025 but were lower in the third quarter. The increase in this category was driven by increases in costs and demand for the Respiratory System category.

COC	CY 2024	Thru Q3 2025	Δ
Inpatient Hospital	$102.59	$113.27	+10%
Facility	$51.81	$59.36	+15%
Medicine	$42.33	$49.17	+16%
Evaluation & Management	$28.54	$33.29	+17%
Emergency Room	$23.16	$22.52	-3%
Procedures	$16.62	$21.75	+31%
Outpatient Radiology	$12.77	$15.02	+18%
Outpatient Laboratory	$5.78	$5.62	-3%
Anesthesia	$5.16	$5.23	+1%
Other Outpatient Services	$3.44	$4.47	+30%
Outpatient Pathology	$2.53	$2.85	+13%
Ambulance	$3.42	$1.28	-63%
Undefined Services	$0.22	$0.20	-9%
Totals	$298.37	$334.03	+12%

Today's Agenda

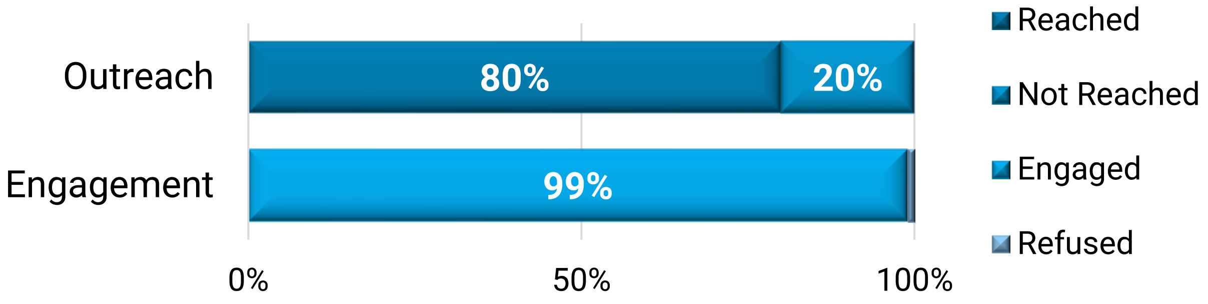
1. Executive Summary
2. Population Overview
    a. Key Indicators
    b. Risk Stratification
    c. Categories of Care
3. **Personal Health Management (PHM)**
    a. **Outreach**
    b. **Outcomes**
    c. **Cost Savings**
    d. **Case Study**
4. Utilization Management (UM)
5. Appendix

Targeting and Engaging Members

Q3 2025

	Total Population	Outreached	Not Reached	Reached	Refused	Engaged
Number of Unique Members	2,953	126	43	85	2	83
Number of Episodes	NA	140	43	97	2	95
Total Healthcare Costs last 12 months	$17.2M	$6.8M	$2.9M	$5.1M	$46.5K	$5.1M
Healthcare Costs/Member last 12 months	$1.6K	$54K	$67.4K	$60K	$23.3K	$61.4K
Average Risk Score	9.91	73.78	75.29	74.51	61.40	74.84

Q3 2025 Member Response Breakdowns



Quarterly Engagement Trend

Q3 2025: 99%

Q2 2025: 100%

Q1 2025: 100%

Q4 2024: 99%

Comparing Outreach Members Who Do Not Engage

Q3 2025

Not reached- 43

Utilization Risk Triggers

- Claims Utilization GT $5K in RX in prior 6 months
- Predicted claims GT $25K
- Unique Prescribing Physician Interactions 9+ in the prior 12 months

Primary Health Conditions

- Diabetes
- Hypertension
- Obesity
- Hyperlipidemia

Average Health Care Costs

- $67.4K per member in the last 12 months

Outreach Results

- 67% No response to outreach (i.e., no answer)
- 33% Unable to locate (i.e. no valid number)

Ongoing Focus

- Utilize providers, pharmacies, and online resources for contact information
- Continue to outreach while inpatient, as applicable
- Updated Conifer Corners for name recognition

Refused- 2

Utilization Risk Triggers

- Claims Utilization- GT $25K in medical in prior 6 months
- Unique Prescribing Physician Interactions 9+ in the prior 12 months

Primary Health Conditions

- Hypertension
- Hyperlipidemia

Average Health Care Costs

- $46.5K per member in the last 12 months

Outreach Results

- 100% Hung up prior to conversation

Ongoing Focus

- Adjusting clinical scripts based on reason for refusal
- Including Conifer updates in newsletters for increased program awareness

Identifying the Most Prevalent High-Risk Triggers

Members Engaged Q3 2024 with High-Risk Triggers for Q3 2024 v. Q3 2025

Readmission Risk
Modifiable
- 80%

Predicted costs GT $25,000
Modifiable
- 30%

Claims GT $25,000 in medical in prior 6 months
Modifiable
- 48%

Claims Utilization-15+ provider interactions in the prior 12 months
Modifiable
- 47%

Claims Utilization-9+ Prescribing provider interactions in the prior 12 months
Modifiable
- 21%

Interventions Driving Change

- Collaboration with In-Network providers
- Education of complex chronic and acute disease management
- Encourage provider and specialist adherence
- Coordination with pharmacies to assist with prescription costs and barriers
- Resource integration addressing social determinants of health

Observations and Next Steps

- Monitor adherence to providers and treatment plan
- Continue to assess risk triggers and provide needed education and resources to modify these triggers
- Gaps in care are identified and coordinated as needed for all members who are outreached

Monitoring Preventive Screening Adherence

Members Engaged Q3 2025 v. Total Population Q3 2025

The Personal Health Nurse impacts compliance to preventive screenings while assisting members with chronic and acute health needs. There is still a potential to impact adherence with the overall population.

Recommendations:

- Focus member education on the importance, benefits, and recommended frequency of preventive screenings
- Assess barriers to completion of recommended screenings and coordinate resources as needed
- Possibly send educational mailings to all members who are nonadherent to recommended screenings i.e. a gaps in care campaign/no claims campaign

+17 pts

Breast Cancer Screening Adherence

50% vs 33%

+42 pts

Adherence to Preventative Ambulatory Services

98% vs 56%

+23 pts

Colorectal Cancer Screening Adherence

58% vs 35%

+15 pts

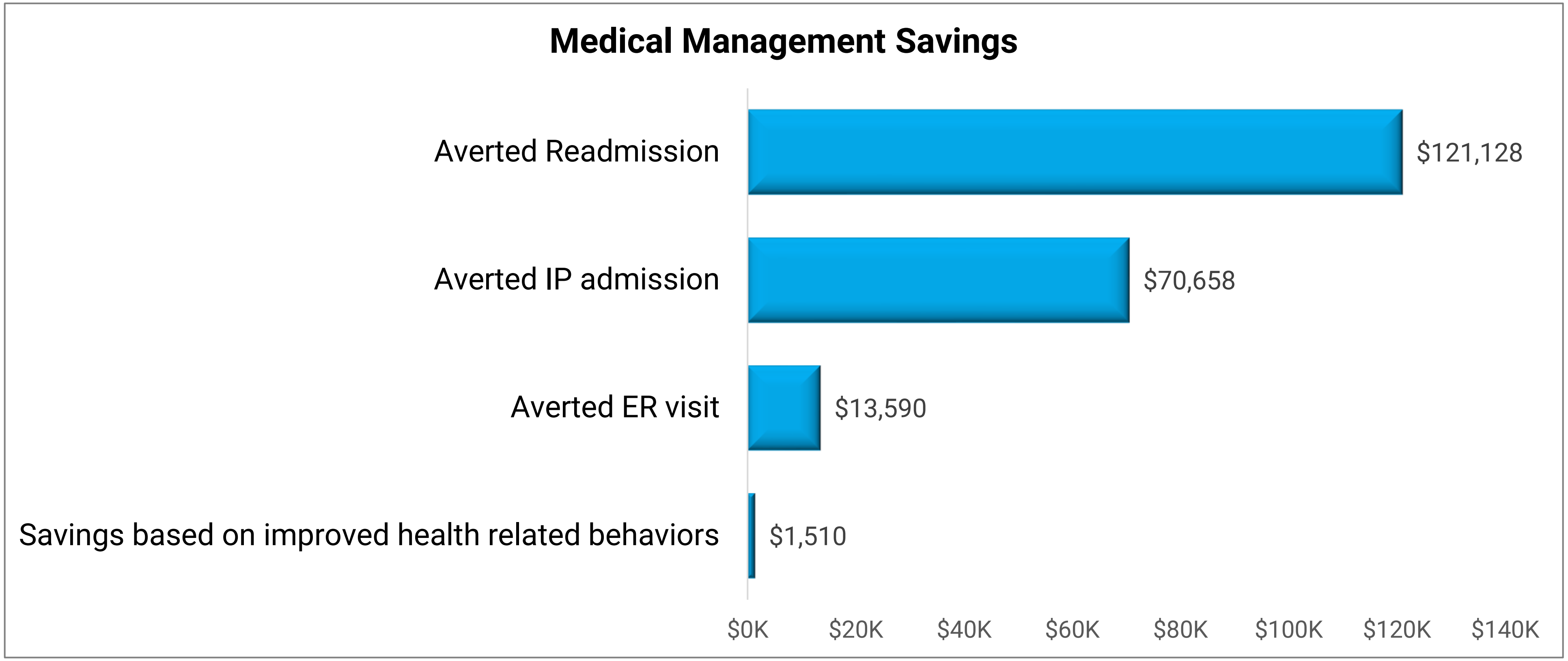
Cervical Cancer Screening Adherence

57% vs 42%

Saving on Services while Helping Members

Q3 2025

Savings Ratio	5.36
Cost of medical management services	$38,520
Savings from medical management services	$206,886



Going the Distance Every Day

Preventing admissions through resource coordination

Member Situation

- 63-year-old male
- Member had a kidney transplant in 2013
- History of high blood pressure, hyperlipidemia, benign prostatic hyperplasia and noncompliance
- Failure of kidney transplant requiring resuming of dialysis
- Member moved to a new town and failed to establish care with new providers.

How a Conifer VBC Personal Health Nurse (PHN) Helped

- PHN educated member on importance of medication compliance and treatment plan adherence
- PHN ensured member was filling his prescriptions on time and adherence to prescription schedule
- PHN educated on care of central venous catheter (CVC) and arteriovenous (AV) fistula to prevent infection and complications
- PHN assisted member with finding new providers and assisted with setting up appointments with Urology and new PCP

Member's Results

- Member has established care with hemodialysis (HD) provider near his new home and sees provider there every 4 weeks
- Member has been able to get his medications at a reduced cost through HD clinic pharmacy
- Member has been adherent to medications, treatment plan, HD schedule and appointment follow ups
- Member advised he is feeling well and has demonstrated proper care of his AV fistula and CVC with no complications of infection

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Utilization Management

Q3 2025

Top Authorizations	Q3 2025
Total UM Referrals	160
Inpatient Acute Care	30
Outpatient Surgery	37
Outpatient Behavioral Health Services/PHP	32
Home Health Care: Skilled Nursing, PT/OT, Infusions	21
Approvals	142
Partial Approvals	4
Denials	14

Adverse Determinations	Category of Care	Reason for Denial
Denials	▪ Bariatric ▪ Chiropractic care ▪ DME: orthotics ▪ Habilitative service ▪ IP Hospital stay ▪ Outpatient surgery ▪ Psychological testing ▪ PT ▪ Behavioral Health	▪ Does not meet standard of practice ▪ Not a covered benefit ▪ Not medically necessary
Partial Approvals	▪ Outpatient surgery ▪ Continued IP stay	▪ Partially not medically necessary ▪ Lack of information

Working Together to Support Your Members

- Partnership to increase awareness and participation
- Chronic condition adherence
- Priority and high-risk member outreach
- Continue to engage members identified from Utilization file feed

- Possible Gaps in Care campaign targeting members without a PCP and/or members without claims utilization.
- Link Gaps in Care letter to Introduction Letters
- Conifer contributions to Newsletters

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Conifer Team Structure

		Interaction	
Regional VP, Client Delivery Population Health	Joe Sears	**Operations** *Weekly/Monthly/Quarterly*	Account Lead, escalation point; manage overall account performance
Manager, Population Health	Lindsey Luma	***Daily***	Direct oversight of clinical operations and PHN team; Only resourced through Client Delivery request
Director, Population Health	Allyson Pierce	**Operations** *Weekly/Monthly/Quarterly*	Operational oversight of PHN teams
Sr Director Clinical Operations	Michele Hamilton	**Operations** *Quarterly/As Needed*	Operational oversight of clinical operations
VP, Population Health	Justin Berry	**Sr. Leadership** *Quarterly/As Needed*	Executive Oversight for Client Delivery

Acronyms

Acronym	Expansion
A1C or HgbA1C	Hemoglobin A1c
ALOS	Average Length of Stay
BMI	Body Mass Index
BOB	Book of Business
CAD	Coronary Artery Disease
CHF	Congestive Heart Failure
COC	Category of Care
CMI	Case Mix Index
EBM	Evidence Based Medicine
ED	Emergency Department
EOS	Episode of Service
ER	Emergency Room
GT	Greater Than
ICD	International Classification of Diseases
IP	Inpatient
LDL	Low Density Lipids

Acronym	Expansion
LOS	Length of Stay
PEPM	Per Employee Per Month
PHM	Personal Health Management
PHN	Personal Health Nurse
UM	Utilization Management

Glossary of Terms

Term	Definition
Case Mix Index (CMI)	a means to measure the relative health of a population where each Episode of Care (EOC) for a patient is assigned an Episode Treatment Grouping (ETG) and each ETG is assigned a relative value or weight to calculate the rate by summing the relative values for the population and then dividing that number by the number of episodes encountered for the population
Eligible	the total unique members who are eligible for medical management
Engaged	the total unique reached members who agreed to engaged in medical management
Hemoglobin A1c (HgbA1C)	Diabetic Control Measurement
ICD-10	patient diagnosis or procedure codes (i.e., ICD-10-CM or ICD-10-PCS, respectively); the 10th revision of the International Statistical Classification of Diseases and Related Health Problems (ICD), a medical classification list by the World Health Organization (WHO)
Not Reached	the total unique members who a personal health nurse (PHN) attempted to reach by phone but were either unable to locate (UTL) because of a bad phone number or were unresponsive and did not pick up the phone
Outreached	the total unique members who a personal health nurse (PHN) attempted to reach by phone and were either reached or not reached
Pending	the total unique triggered members a personal health nurse (PHN) is still attempting to reach by phone
Reached	the total unique triggered members with whom a personal health nurse (PHN) has spoken on the phone and who either agreed to engaged in medical management or refused to participate at the given time

Glossary of Terms

Term	Definition
Refused	the total unique reached members who refused to participate in medical management at the given time
Targeted	the total unique members identified as “Priority” or “High” risk in Conifer’s proprietary “Risk Stratification” application

Cost Savings Definitions

Cost Savings Description	Definition
Averted ER Visit	Averted ER Visit category is appropriate when the Medical Management Nurse directly works with the member/member caregiver to address acute health issue(s) to avoid need for emergent care.
Savings based on improved health related behaviors	After engagement with PHN, member shows improvement in clinical and behavioral outcomes.
Averted IP admission	Medical Management Nurse directly works with member/member caregiver and healthcare team to address acute health issue(s) that would likely result in an inpatient admission without intervention.
Averted Readmission	Averted Readmission category is appropriate when the Medical Management Nurse directly works with member/member caregiver and healthcare team following an acute inpatient admission. MMN is actively involved in the Transitions of Care process. MMN works with healthcare team to ensure instructions are in place, and member safely transitions to home.

Thank You