



THE ROAD
TO A *healthier* YOU

Summary of Material Modification

Dear West River Participant:

November 2016

The Trustees announce the following changes to the Health and Welfare plan of benefits:

New Out-Of-Pocket Maximum Requirements

Effective November 1, 2016:

- The medical Out-of-Pocket Maximum **after deductible is satisfied*** is \$3,550 for a single participant and \$7,100 for a family. Copayments of \$15 for Office Visits and Lab Charges are included in determining the medical Out-of-Pocket
- The prescription drug Out-of-Pocket Maximum is \$2,500 for a single participant and \$5,000 for a family

**The Plan's deductible of \$800 for a single and \$1,600 for a family has not changed and does not count towards the Out-of-Pocket Maximum amounts shown above.*

Retiree Dental Participation

Effective November 1, 2016 participation in the retiree dental program may commence on the dates noted below following the occurrence of any of the 3 below-stated events:

- The first date of participation in the retiree health program
- The first of the month following the loss of dental coverage from a spouse's employer's group dental plan
- The first day a retiree becomes eligible for Medicare

You must request to enroll no later than 30 days following the event by contacting the Fund Administrator, Wilson-McShane Corporation, at (952) 854-0795, toll free at (800) 535-6373.

Health Dynamics Primary Care MD Program

Effective January 1, 2017, participants and spouses who prefer to see their own physician for their annual physical examination versus participating in the Health Dynamics Comprehensive physical program may participate in the Health Dynamics Primary MD program (Primary MD). Primary MD allows participants and spouses to visit their own physician and have their physician fill out a questionnaire, including clinical data, to be supplied back to Health Dynamics for Health Dynamics' wellness consultation and coaching purposes with the participant or spouse. Participants and spouses utilizing the Primary MD program are eligible for EITHER:

- A \$20 per month gym/health club membership reimbursement for up to 12 months (\$240 for the participant and an additional \$240 for their spouse if each participates); or

- Reimbursement for copayments, deductibles and coinsurance out-of-pocket expenses incurred under the medical plan up to \$240 per participant and an additional \$240 for their spouse if each participates.

The Fund continues to offer the Health Dynamics Comprehensive physical program which continues to offer the incentives described above, PLUS a waiver of the following year's deductible.

To schedule your Health Dynamics Comprehensive or Primary MD examination, call (1-866) 443-0164.

Please keep this Summary of Material Modification with your benefit plan booklet so that you will have an up-to-date description of the Fund's benefits. If you have any questions about this benefit change, please contact the Fund Office at the address or telephone number shown above.

Board of Trustees
Operating Engineers Local #49
Health and Welfare Fund

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