

Mahoning & Trumbull County Building Trades Insurance Fund

3660 Stutz Drive, Suite 101

• Canfield, Ohio 44406

Phone: (330) 779-8861

Toll Free: 800-435-2388

December 2022

Dear Participant:

Included in this mailing is the following information

- Annual Notice of Creditable Prescription Drug Coverage
- September 30, 2021 Summary Annual Report
- Annual Notification regarding:
 - * Women's Health and Cancer Rights Act of 1998
 - * Newborns' and Mothers' Health Protection Act of 1996
 - * Notice of Privacy Practices
- Information regarding accessing Anthem's LiveHealth Online program which is available to you at a \$0 cost share until 08/31/2023.

Please contact us with any questions once you have reviewed the information.

Sincerely,

Board of Trustees

Mahoning & Trumbull County Building Trades Insurance Fund

3660 Stutz Drive, Suite 101

Canfield, Ohio 44406

Phone: (330) 270-0453

Toll Free: 800-435-2388

Important Notice from Mahoning & Trumbull County Building Trades Insurance Fund About Your Prescription Drug Coverage and Medicare

Who Does This Notice Apply To:

Any Active Members, Early Retirees, and/or Dependents covered under the Mahoning & Trumbull County Building Trades Insurance Fund who are eligible for Medicare. These persons will need this notice to consider enrolling in Medicare Part D prescription drug coverage.

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with Mahoning & Trumbull County Building Trades Insurance Fund and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

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

1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.
2. Mahoning & Trumbull County Building Trades Insurance Fund has determined that the prescription drug coverage offered to Active Employees and Early Retirees by the Mahoning & Trumbull County Building Trades Insurance Fund is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage. Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

When Can You Join A Medicare Drug Plan?

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

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

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

If you decide to join a Medicare drug plan, your current Mahoning & Trumbull County Building Trades Insurance Fund coverage may be affected. See the following for more information about what happens to your current coverage if you join a Medicare prescription drug plan.

Options Available to Early Retiree Members and/or their Dependents with Medicare:

- You can keep your current medical and prescription drug coverage with Mahoning & Trumbull County Building Trades Insurance Fund and you do not have to enroll in a Medicare prescription drug plan. You may, in the future, enroll in a Medicare prescription drug plan during Medicare's annual enrollment period (October 15th – December 7th of each year).
- You can enroll in a Medicare prescription drug plan. You cannot keep your current prescription drug coverage with Mahoning & Trumbull County Building Trades Insurance Fund if you enroll in a Medicare prescription drug plan. If you enroll in a Medicare prescription drug plan, you will lose your prescription drug coverage under the Fund. Your medical coverage will continue. Your contribution for coverage will remain unchanged but you will no longer have prescription drug coverage under the Fund. If you lose coverage, you will not be permitted re-enrollment for prescription drug coverage under the Fund.

If you do decide to enroll in a Medicare prescription drug plan and drop your Mahoning & Trumbull County Building Trades Insurance Fund prescription drug coverage, be aware that you and your dependents will not be permitted to get this coverage back.

Options Available to Active Members and/or their Dependents with Medicare:

- You can keep your current medical and prescription drug coverage with Mahoning & Trumbull County Building Trades Insurance Fund, and you do not have to enroll in a Medicare prescription drug plan. You may, in the future, enroll in a Medicare prescription drug plan during Medicare's annual enrollment (October 15th – December 7th of each year).
- You can enroll in a Medicare prescription drug plan and keep your current medical and prescription drug coverage with Mahoning & Trumbull County Building Trades Insurance Fund. If you do this, Mahoning & Trumbull County Building Trades Insurance Fund will pay primary to the Medicare prescription drug plan.

For all Active Members, Early Retirees and/or their Dependents with Medicare:

You can keep your current coverage with Mahoning & Trumbull County Building Trades Insurance Fund and not enroll in a Medicare prescription drug plan. It is important that you compare your current coverage, including which drugs are covered, with the coverage and cost of the plans offering Medicare prescription drug coverage in your area before making any decision to enroll in a Medicare prescription drug plan. The Mahoning & Trumbull County Building Trades Insurance Fund currently provides prescription drug benefits through a retail pharmacy and mail order program. Under the Fund's retail program, you pay \$10 co-pay for generic drugs with a 25% co-pay for preferred brand name drugs and a 50% co-pay for non-preferred brand name drugs. Under the Fund's mail order program, you pay \$20 co-pay for generic drugs with a 20% co-pay for preferred brand name drugs, and 35% co-pay for non-preferred brand name drugs.

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

You should also know that if you drop or lose your current coverage with Mahoning & Trumbull County Building Trades Insurance Fund and don't join a Medicare drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later. If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up by at least 1% of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go nineteen months without creditable coverage, your premium may consistently be at least 19% higher than the Medicare base beneficiary premium. You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

Contact the Fund Office for further information at (800) 435-2388. NOTE: You'll get this notice each year. You will also get it if this coverage through Mahoning & Trumbull County Building Trades Insurance Fund changes. You also may request a copy of this notice at any time.

For More Information About Your Options Under Medicare Prescription Drug Coverage...

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

- Visit www.medicare.gov
- Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the "Medicare & You" handbook for their telephone number) for personalized help
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

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

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

Date:	October 2022
Name:	Mahoning & Trumbull County Building Trades Insurance Fund
Contact:	Fund Administrator
Address:	3660 Stutz Drive, Suite 101, Canfield, Ohio 44406
Phone Number:	(330) 7270-0453

SUMMARY ANNUAL REPORT

MAHONING AND TRUMBULL COUNTY BUILDING TRADES INSURANCE FUND

This is a summary of the annual report for the Mahoning and Trumbull County Building Trades Insurance Fund, (EIN #34-0746419 PN 501) for the year ended September 30, 2021. The annual report has been filed with the Internal Revenue Service, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

INSURANCE INFORMATION

The plan has a contract with an insurance carrier to pay excess medical claims incurred under the plan up to the maximum amount allowed by the policy. Total premiums paid during the plan year were \$580,057.

BASIC FINANCIAL STATEMENT

Benefits under the plan are provided by a Trust Fund. Plan expenses were \$12,043,014, which included \$474,333 in administrative expenses and \$11,568,681 in benefits paid to participants and beneficiaries. A total of 1,028 persons were participants in or beneficiaries of the plan at the end of the plan year.

The value of plan assets, after subtracting liabilities of the plan, was \$25,095,486 as of September 30, 2021, compared to \$22,705,247 as of September 30, 2020. During the plan year, the plan experienced an increase in its net assets of \$2,390,239. This increase includes unrealized appreciation/(depreciation) in the value of 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 assets acquired during the year. The plan had total income of \$14,433,253 including employer contributions of \$11,971,775, participant contributions of \$789,610, income from investments of \$525,641, gains on investments of \$1,098,203, and other income of \$48,024.

YOUR RIGHTS TO ADDITIONAL INFORMATION

You have the right to receive a copy of the full annual report, or any part thereof, upon request. Included in that report is an accountant's report, schedule of assets held for investment purposes, and actuarial information regarding the funding of the plan.

To obtain a copy of the full annual report, or any part thereof, write or call the office of the Mahoning and Trumbull County Building Trades Insurance Fund Trustees, the plan administrator, 3660 Stutz Drive, Suite 101, Canfield, Ohio 44406, phone (330) 270-0453.

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 the report. The charge to cover copying costs given above does not include a charge for copying these portions of the report, which are furnished without charge.

You also have the legally protected right to examine the annual report at the main office of the plan, 3660 Stutz Drive, Suite 101, Canfield, Ohio 44406, and at the U.S. Department of Labor in Washington, D.C., or to obtain a copy from the U.S. Department of Labor on payment of copying costs. Requests to the Department of Labor should be addressed to: Public Disclosure Room, N-1513, Employee Benefits Security Administration, Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.

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October 2022

WOMEN'S HEALTH AND CANCER RIGHTS ACT OF 1998

Do you know that your plan, as required by the Women's Health and Cancer Rights Act of 1998, provides benefits for mastectomy-related services including all stages of reconstruction and surgery to achieve symmetry between the breasts, prostheses, and complications resulting from a mastectomy, including lymphedema? Call your plan administrator at (330) 270-0453 or (800) 435-2388 for more information.

* * *

NEWBORNS' AND MOTHERS' HEALTH PROTECTION ACT OF 1996

The Newborns' and Mothers' Health Protection Act of 1996 (Newborns' Act) requires group health plans that offer maternity hospital benefits for mothers and newborns to pay for at least a 48-hour hospital stay for the mother and newborn following childbirth (or, in the case of cesarean section a 96-hour hospital stay), unless the attending provider, in consultation with the mother, decides to discharge earlier.

* * *

PRIVACY PRACTICES NOTICE

The Notice of Privacy Practices of the Fund is available upon request, at no charge, at the Fund Office, 3660 Stutz Drive, Suite 101, Canfield Ohio 44406. If you would like more information on benefits, call the Fund Office.

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This group health plan believes this plan is a "grandfathered health plan" under the Patient Protection and Affordable Care Act (the Affordable Care Act). As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan mean that your plan may not include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for the provision of preventative health services without any cost sharing. However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, for example, the elimination of lifetime limits on benefits.

Questions regarding which protections apply and which protections do not apply to a grandfathered health plan and what might cause a plan to change from grandfathered health plan status can be directed to the Plan Administrator, 3660 Stutz Drive, Suite 101, Canfield Ohio 44406.

You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at 1-866-444-3272 or www.dol.gov/ebsa/healthreform. This website has a table summarizing which protections do and do not apply to grandfathered health plans.

Please keep this information with your Summary Plan Description. Also, if you have any questions regarding these changes, please contact the Fund Office.

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December 2022

Dear Participant:

The Trustees are pleased to announce that the Plan will continue to offer the telemedicine program through Anthem (LiveHealth Online). The enclosed brochures will answer some of the questions you may have about the program. As described, you can use this service to talk face-to-face with a doctor through your mobile device or computer with a webcam for common health concerns like colds, the flu, fevers, rashes, infections and allergies. The doctor can even send a prescription to your pharmacy if needed. This program is being offered at **No Cost** to participants until August 31, 2023. Please take time to register for this program. If you need additional information please refer to their website at livehealthonline.com or call toll free at 1-888-LiveHealth (548-3432).

Board of Trustees



LiveHealth Online

Answers to common questions about video visits with a doctor, 24/7

What is LiveHealth Online?

Through LiveHealth Online, you can have a video visit with a board-certified doctor using your smartphone, tablet, or computer with a camera. Doctors are available 24/7, and no appointment is needed.

Doctors with LiveHealth Online can evaluate your symptoms and provide a treatment plan for common conditions. These include eye and ear infections, the flu, colds, sinus and allergy problems, and possible signs of COVID-19. When needed, the doctor also can send a prescription to your pharmacy.¹

Why would I use LiveHealth Online instead of going to visit my doctor in person?

LiveHealth Online isn't meant to replace your primary care doctor. Instead, it offers a way to receive nonemergency care when your doctor isn't available or when staying home is a safer or more convenient option. During the COVID-19 pandemic, this also allows you to receive care while limiting your exposure to others.

**LIVEHEALTH ONLINE IS NOT FOR EMERGENCY CARE.
IF YOU HAVE AN EMERGENCY, CALL 911.**



When are doctors available on LiveHealth Online?

Doctors are available 24/7 — including holidays.

How does LiveHealth Online work?

To use LiveHealth Online:

- Visit livehealthonline.com from a computer with a camera, or download the LiveHealth Online app to your smartphone or tablet.
- Select Sign up and follow the instructions to create an account.
- When you need to see a doctor, log in and select the state you are in, choose a doctor, and answer a few questions.² Within minutes, you will be connected with a doctor and can talk as if you were in a private exam room.

Using your account, you can:

- Quickly connect with doctors the next time you need care.
- Record your visit and store it as a secure and confidential file, along with your personal and health information.
- Allow a doctor on LiveHealth Online to view your stored health information prior to a visit.
- Access your medical records for your own reference, or to share with your primary care doctor.

How much does it cost to use LiveHealth Online?

Your plan includes benefits for medical visits using LiveHealth Online. It's covered at 100%. The cost of a prescription, if you need one, is not included and additional charges may apply. Check your plan for prescription benefits.

Will I be charged more if I use LiveHealth Online overnight or on a weekend or holiday?

No, LiveHealth Online is available to you at no extra cost, no matter when you call.

How do I pay for a LiveHealth Online visit?

The cost of your visit is covered by your plan. You may be asked to enter payment information when setting up your account or when you have a visit. You may use American Express, Visa, Mastercard, or Discover cards, as well as PayPal. If you receive a charge for your medical visit, please reach out to the fund office for resolution.

Can I download an app for LiveHealth Online?

Yes, search for LiveHealth Online in the App Store[®] or on Google Play[™]. To learn more, go to livehealthonline.com and select **FAQ** in the top right corner.

What type of computer do I need to use LiveHealth Online?

You'll need a computer with a camera, or a smartphone or tablet, as well as a high-speed internet connection. To learn what computer hardware and software you need, go to livehealthonline.com and select **FAQ** in the top right corner.

Can doctors with LiveHealth Online access my health information?

You can allow doctors to access your health information by logging into your account at livehealthonline.com or through the app. Choose **My Records** and make your desired selections. You can also view your health records and summaries of past visits through the *My Records* page.

How long is a LiveHealth Online visit?

A typical LiveHealth Online visit with a doctor lasts about 10 minutes.

Can I visit with a doctor at LiveHealth Online if I'm traveling or in another state?

Yes. When you are logged in to livehealthonline.com or using the app, select the state you're in under *My Location*. You will only see doctors licensed to treat you in that state. Don't forget to change your state back when you are home.

What if I still have questions about LiveHealth Online?

We're here to support you. Email customersupport@livehealthonline.com or call toll free at 888-548-3432.



¹ Prescription availability is defined by physician judgment.

² Select a doctor licensed to practice in the state where you're physically located. If that doctor is seeing another patient, you can choose to go to an online waiting room or you can select another doctor who is available at that moment.

LiveHealth Online is the trade name of Health Management Corporation, a separate company, providing telehealth services on behalf of Anthem Blue Cross and Blue Shield.

Anthem Blue Cross and Blue Shield is the trade name of: In Colorado: Rocky Mountain Hospital and Medical Service, Inc. HMO products underwritten by HMO Colorado, Inc. In Connecticut: Anthem Health Plans, Inc. In Georgia: Blue Cross Blue Shield Healthcare Plan of Georgia, Inc. In Indiana: Anthem Insurance Companies, Inc. In Kentucky: Anthem Health Plans of Kentucky, Inc. In Maine: Anthem Health Plans of Maine, Inc. In Missouri (excluding 30 counties in the Kansas City area): RightCHOICE[®] Managed Care, Inc. (RIT), Healthy Alliance[®] Life Insurance Company (HALIC), and HMO Missouri, Inc. RIT and certain affiliates administer non-HMO benefits underwritten by HALIC and HMO benefits underwritten by HMO Missouri, Inc. RIT and certain affiliates only provide administrative services for self-funded plans and do not underwrite benefits. In Nevada: Rocky Mountain Hospital and Medical Service, Inc. HMO products underwritten by HMO Colorado, Inc., dba HMO Nevada. In New Hampshire: Anthem Health Plans of New Hampshire, Inc. HMO plans are administered by Anthem Health Plans of New Hampshire, Inc. and underwritten by Matthew Thornton Health Plan, Inc. In Ohio: Community Insurance Company. In Virginia: Anthem Health Plans of Virginia, Inc. trades as Anthem Blue Cross and Blue Shield in Virginia, and its service area is all of Virginia except for the City of Fairfax, the Town of Vienna, and the area east of State Route 123. In Wisconsin: Blue Cross Blue Shield of Wisconsin (BCBSWI), underwrites or administers PPO and indemnity policies and underwrites the out of network benefits in POS policies offered by CompCare Health Services Insurance Corporation (CompCare) or Wisconsin Collaborative Insurance Corporation (WCIC). CompCare underwrites or administers HMO or POS policies; WCIC underwrites or administers Well Priority HMO or POS policies. Independent licensees of the Blue Cross Blue Shield Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc.