

HEAVY AND GENERAL LABORERS' FUNDS OF NEW JERSEY

Local 472 . Local 172

Joseph P. Madden Building . 700 Raymond Boulevard
Newark, New Jersey 07105
Phone: 973-589-5050 Fax: 973-589-5161

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IMPORTANT NOTICE

This is an important notice that describes important benefit changes that are being made to the Heavy and General Laborers' Local Union 472 and Local Union 172 of New Jersey Welfare Fund (the "Fund") reaction to COVID-19. These changes will generally take effect as of March 18, 2020 (unless otherwise noted) and remain in effect through the end of the emergency period in which the federal government has announced a National Emergency.

Please take the time to read this Notice carefully, and keep it with your copy of the Fund's Summary Plan Description ("SPD").

By now, everyone has heard of the "Coronavirus" or the illness it causes, known as "COVID-19". At a time like this, it is more important than ever to have health insurance, and as a Participant in the Welfare Benefit Fund, we have you covered. Your health plan provides a wide range of benefits including but not limited to coverage for office visits, hospitalization and diagnostic testing (including testing for COVID-19). As always, we encourage you to use a PPO Provider in order to receive the highest level of benefits.

If you and/or your dependents think you have been exposed to COVID-19 and develop a fever and/or symptoms of respiratory illness, such as a cough or shortness of breath, call your healthcare provider immediately. We encourage you to call your healthcare provider before presenting to an emergency room for treatment, to both ensure you have the quickest access to the specific services you need as well as to prevent the unnecessary exposure of yourself and any other patients or providers in the emergency room to the coronavirus without having taken appropriate protective measures.

WAIVER OF COST SHARING FOR DETECTION OF COVID-19

Effective for services received on or after March 18, 2020 and through the end of the emergency period in which the federal government has announced a National Emergency (referred to as the National Emergency), the Fund will now cover the following services **from either a PPO or Non-PPO provider with no cost-sharing (for example, no copayments, deductibles or coinsurance).**

- Diagnostic tests to detect the virus that causes COVID-19, including the administration of such tests, for the following types of tests:
 - Tests to detect the virus that are approved, cleared or authorized by certain sections of the Federal Food, Drug and Cosmetic Act (the Drug Act);
 - Tests for which the developer has requested, or intends to request, emergency use authorization under the Drug Act (and where such authorization has not been denied);
 - Tests developed in and authorized by a state that has notified the United States Department of Health and Human Services ("HHS") of its intention to review tests to diagnose COVID-19; and

- Tests determined appropriate by HHS.
- Items and services furnished to individuals during provider office visits (whether in-person or via telehealth), urgent care visits, and emergency room visits that result in an order for, or the administration of, one of the tests described above, but only to the extent such items or services relate to the furnishing or administration of the test or the evaluation of whether the person needs the test.

These services will also be provided without any need for prior authorization or medical management. This means that you do not have to get precertification/prior authorization to have the tests or those visits covered.

Payment for the treatment of COVID-19, including but not limited to hospital, transportation and pharmacy services will be covered in accordance with the terms and conditions set forth in the Summary Plan Description (SPD) and will still be subject to applicable cost-sharing.

ADDITION OF TELEHEALTH BENEFITS

The Trustees are pleased to announce that the Plan will now cover telehealth visits. Generally speaking, telehealth means the use of electronic information and communication technologies including a telephone, smartphone, tablet or computer with a web cam, by a physician or other licensed provider to deliver covered services from a location that is different from a provider's office.

Telehealth visits are a convenient way for you and your covered dependents to access care. The service gives you quick and easy access to a doctor wherever you are. You can talk to a physician without leaving your house. In fact, it is recommended that members use telehealth when possible to help prevent the spread of infection and improve access to care. It is a safe and effective way to receive medical guidance for many medical issues, including those related to COVID-19, from your home using your telephone or online (depending on your doctor).

The Plan will now cover telehealth or virtual visits provided by your doctor (provided they have such capabilities). In addition, the Trustees of the Fund have contracted with a telehealth provider who offers telehealth visits through their network of providers. Both of these new benefits are described below.

Telehealth/Virtual Visits with Your Own Provider

If you wish to schedule a virtual visit with your own doctor or healthcare provider, check first to see if they offer telehealth services or virtual visits. If such services are available, the office can walk you through the process for scheduling an appointment and what types of virtual visits they provide (e.g., telephone or video). This benefit is available for both in-network and out-of-network provider who have the capability. To find a provider or to locate a current listing of in-network providers, visit www.Meritain.com.

Effective for services received on or after March 23, 2020 and through the end of the National Emergency, telehealth services (virtual visits) will be covered when provided by an in-network provider at the current in-network primary care physician (PCP) copayment. Services provided by an out-of-network provider will be subject to the current cost-sharing (deductible and coinsurance) applicable for out-of-network office visits. Please note that all cost-sharing will be waived for services related to testing for COVID-19 as described above.

TELADOC Program

The Trustees have also contracted with TELADOC™ Phone & Online Video Consultations. As of May 1, 2019, you will be able to access a TELADOC™ network of physician for phone and online video consultations. The TELADOC™ program provides access to a wide network of physicians that can diagnose your symptoms and prescribe medication when appropriate. In addition, the TELADOC program includes access to virtual appointments for treatment of mental health and substance use disorders. In order to access the TELADOC™ program, you will need to enroll in the program. Please see the attached flyer that provides more detail on this important new benefit.

Effective for services received on or after May 1, 2020 and through the end of the National Emergency, TELADOC™ Phone & Online Video Consultations will be covered at 100% with no member cost sharing regardless of the diagnosis code.

If you have any questions regarding the information in this Notice or the enclosures, please contact the Fund Office.

Notice of Grandfathered Health Plan Status

The Heavy and General Laborers' Local Union 472 and Local Union 172 of New Jersey Welfare Fund believes this 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 means 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 preventive 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 at (973) 589-5050. 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.

This Notice is intended to provide you with an easy-to-understand description of certain important changes, updates and clarifications to the Fund's plan of benefits and rules. While every effort has been made to make this description as complete and accurate as possible, this Notice, of course, cannot contain a full restatement of the terms and provisions of the plan. For a full description of your rights under the Fund, please refer to the plan documents (including the SPD).

The Board of Trustees reserves the right, in its sole and absolute discretion, to amend, modify or terminate the Fund, or any benefits provided under the Fund, in whole or in part, at any time and for any reason, in accordance with the amendment procedures established under the plan and the trust agreement establishing the plan. The formal plan documents and trust agreement are available at the Fund Office and may be inspected by you during normal business hours. No individual other than the Board of Trustees (or its duly authorized designee) has any authority to interpret the plan documents, make any promises to you about benefits under the plan, or to change any provision of the plan. Only the Board of Trustees (or its duly authorized designee) has the exclusive right and power, in its sole and absolute discretion, to interpret the terms of the plan and decide all matters arising under the plan.



Reach a doctor 24/7

The Teladoc[®] solution

Teladoc is the on-demand health care solution that gives you the medical care you need, when you need it. You can talk to a doctor anytime, anywhere about non-emergent medical conditions.

Benefits of Teladoc

- Saves time and money
- Quicker recovery from illness
- Convenient prescriptions
- Choice of consultation method
- Great health means peace of mind

With Teladoc, you can talk to a doctor 24/7/365 by phone, online video or mobile app. Use Teladoc for medical advice and care when:

- Your primary care doctor is not open.
- You are at home, traveling or do not want to take time off work to see a doctor.
- You need a prescription or refills*.

**Please note, there is no guarantee you will be prescribed medication.*

Beginning May 1, 2020, Teladoc will provide services for behavioral health concerns, such as depression, stress, Post-traumatic stress disorder, panic disorder and family issues.

Highly qualified, experienced doctors

When you use Teladoc, your medical questions will be answered by a highly qualified doctor. Teladoc doctors are:

- Experienced—with an average of over 10–15 years in practice.
- Progressive—using the latest technology to provide excellent care.
- U.S. board certified and state licensed.
- Specially trained in telemedicine.

There's more than one way to reach a doctor



By phone. Just call **1.800.362.2667**.



Online. Simply request a video consultation online at www.Teladoc.com.



On the go. You can download the Teladoc mobile app by visiting the App Store[®] or Google Play[™].

Common conditions treated:

- Allergies
- Bronchitis
- Cold/flu
- Headaches/migraines
- Eye/ear infection
- Rash/skin infections
- Sinus infections
- Stomachache/diarrhea
- Urinary tract infections

Our members love Teladoc

"We had a good experience with the doctor. She called and talked to me, and gave great service. I had no problem picking up my prescription. This is a really good service."

Contact a Teladoc physician at **1.800.362.2667**, or by visiting www.Teladoc.com.

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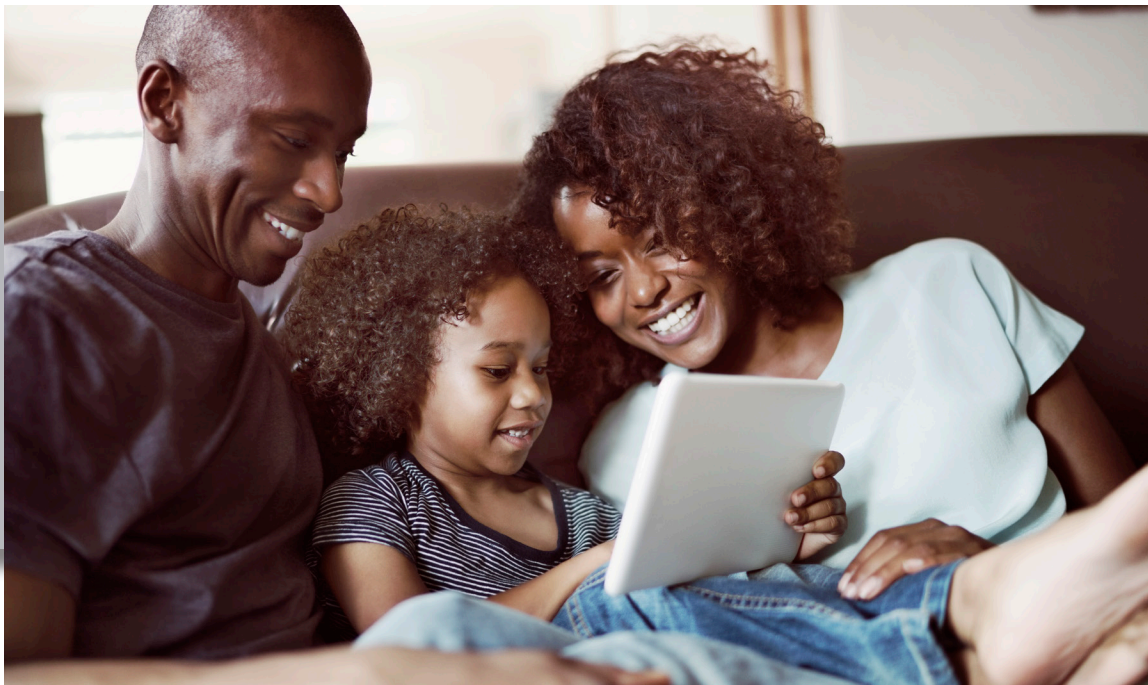
How to register for Teladoc

You can use Teladoc anywhere you have Internet access. Just:

1. Visit www.Teladoc.com and click *Set Up Account*.
2. Enter your name, date of birth, ZIP code, email address, preferred language and gender and click *Continue*. The system will identify you based on this information. If you're unable to be identified, you'll be directed to Teladoc Customer Service.
3. On the next screen, enter the required information and click *Set up my account*. Your registration is now complete!

Then, you can complete your profile by clicking on *My Medical History*. You can enter your history right after registering or you can come back to finish it later. By finishing it when you register, you'll be ready to request a consultation any time and you won't have to fill out your medical history when you're feeling sick.

If you have any questions, or run into any problems when setting up your account, call Teladoc at **1.800.DOC.CONSU**L (1.800.362.2667).



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Assistant General Manager
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Heavy and General Laborers' Local Unions 472 and 172 of New Jersey Welfare Fund complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Heavy and General Laborers' Local Unions 472 and 172 of New Jersey Welfare Fund does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Heavy and General Laborers' Local Unions 472 and 172 of New Jersey Welfare Fund:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact Claudia Caetano.

If you believe that Heavy and General Laborers' Local Unions 472 and 172 of New Jersey Welfare Fund has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with: Claudia Caetano, 700 Raymond Blvd, Newark, NJ 07105, 973-589-5050, 973-589-5161 (fax), ccaetano@hglfunds.com. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Claudia Caetano is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-973-589-5050.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-973-589-5050.

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-973-589-5050.

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-973-589-5050.

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-973-589-5050。

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-973-589-5050.

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-973-589-5050.

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-973-589-5050.

સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-973-589-5050.

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-973-589-5050.

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-973-589-5050.

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-973-589-5050-1

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-973-589-5050.

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-973-589-5050.

ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-973-589-5050.

خبردار: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت میں دستیاب ہیں۔ کال کریں 1-973-589-5050