

# CHICAGO & VICINITY LABORERS' DISTRICT COUNCIL HEALTH & WELFARE PLAN

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February 2021

# Important Notice of Changes to Benefits under Active Plan 3

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## Dear Participant:

The Board of Trustees of the Chicago & Vicinity Laborers' District Council Health & Welfare Plan (the "Plan") is pleased to announce the following enhancement to the benefits under Active Plan 3.

## **Bariatric Surgery Benefits for Active Plan 3**

Effective for eligible claims incurred on or after February 1, 2021, Active Plan 3 will cover Medically Necessary bariatric (weight loss) surgery at an approved in-network Blue Distinction Center (also referred to as a Center for Excellence), if the Participant:

If you are considering this procedure, please contact the Fund Office to discuss coverage.

- (A) is diagnosed with "Morbidly Obesity"; and
- (B) is either: (1) an adult who is at least 18 years of age or has reached full expected bone growth; or (2) an adolescent who has satisfied Tanner 4 or 5 pubertal development or has a bone age of at least 13 years in girls, or at least 15 years in boys; and
- (C) Has participated in a Physician-supervised nutrition and exercise program (including dietician consultation, low calorie diet, increased physical activity, and behavioral modification) documented in the medical record; and
- (D) Has an evaluation completed by a state licensed behavioral healthcare provider, within the 12 months preceding the request for bariatric surgery; and
- (E) Utilizes a Center for Excellence for bariatric surgery.

"Morbid Obesity" means having a Body Mass Index (BMI) either: (1) equal to or greater than 40 kg/meter<sup>2</sup>; or (2) equal to or greater than 35 kg/meter<sup>2</sup> with at least one of the following clinically significant obesity-related diseases or complications that are not controlled by best practice medical management: hypertension, dyslipidemia, diabetes mellitus, coronary heart disease, sleep apnea, or osteoarthritis in weight bearing joints.

#### **EMPLOYER PARTICIPANTS -**

Bariatric surgery means gastric stapling, gastroplasty, gastric banding, and any other Medically Necessary weight reduction or obesity-related surgery or procedure. The following treatment is also covered provided that it is related to a bariatric surgery that met the requirements of coverage under Active Plan 3: post-surgical counseling, follow-up surgery to correct a previous bariatric surgery and/or any complication due to bariatric surgery, and excess skin removal, but only if Medically Necessary. Keep in mind that, to be covered under Active Plan 3, bariatric surgery must meet requirements A-E set forth above.

To avoid surprises, we encourage Participants contemplating bariatric surgery to contact the Fund Office with a pre-service inquiry before receiving any bariatric surgery services.

### Questions?

If you have questions about your benefits, please contact the Fund Office at (708) 562-0200 or (866) 906-0200, from 8:00 am to 5:00 pm, Monday through Friday.

### **Final Note**

Please share this Notice with your family members who are eligible for coverage and keep it with your SPD and other benefits information for easy reference. Capitalized terms used but not defined in this Notice have the meaning as set forth in the SPD.

Sincerely,

Board of Trustees

Statement of the Plan's Grandfathered Status. The Board of Trustees of the Chicago & Vicinity Laborers' District Council Health & Welfare Plan believes the Plan is a "grandfathered health plan" under the Patient Protection and Affordable Care Act (the Affordable Care Act), which means that the Plan existed when the health care reform law was signed on March 23, 2010. 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 the 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 do not apply to a grandfathered health plan and what might cause the Plan to change from grandfathered health plan status can be directed to the Fund Office at (708) 562-0200 or 866-906-0200. You may also contact the Employee Benefits Security Administration. U.S. Department of Labor at (866)444-3272 http://www.dol.gov/ebsa/healthreform/. This website has a table summarizing which protections do and do not apply to grandfathered health plans.

The information contained in this Notice only highlights certain features of the Chicago & Vicinity Laborers' District Council Health & Welfare Plan and is intended to be a Summary of Material Modifications to the SPD. The Board of Trustees of the Plan ("Board of Trustees") reserves the right and has the authority to amend, modify, or eliminate benefits at any time, or terminate the Plan when financial conditions dictate. Receipt of this Notice does not confer or guarantee eligibility for benefits. In addition, the Board of Trustees, or such other persons as delegated by the Board of Trustees, has the discretion to interpret and construe the Plan's provisions, as set forth in the SPD.

SUMMARY OF MATERIAL MODIFICATIONS EIN: 36-2151212 Plan No.: 501 February 2021