



Phone: 952.854.0795 Toll Free: 800.535.6373

heartlandhealthcarefund.com

Summary of Material Modification

November 2019

Dear Participant:

As Trustees of the Heartland Healthcare Fund, it is our goal to provide quality benefits, ensure the Fund's financial stability, and comply with all legislative guidelines. This Summary of Material Modification (SMM) outlines improvements to the Weekly Disability Benefit and Hearing Benefit under the Plan.

Weekly Disability Benefit

Effective January 1, 2020, the Plan has increased the Weekly Disability Benefit for Active Employees from \$250 to \$350 per week, limited to 26 weeks. Benefits are payable from the 1st day of an injury or the 8th day of an illness.

Hearing Benefit

Effective January 1, 2020, the Plan's Hearing Benefit for Active Employees, Pre-Medicare Retirees, and Dependents increases from \$800 to \$1,500 every 3 years. The increased limit will apply only to claims incurred on or after January 1, 2020, and no more than \$1,500 will be paid during your current 3-year hearing benefit period.

A Final Note

We know you are concerned about you and your family's heath. The described benefit improvements are examples of how the Board of Trustees continues to look for ways to increase Plan benefits and help improve the well-being of the Plan's members and families. We would also like to remind you that preventive care and Doctor on Demand visits are covered by the Plan at 100%.

Please keep this Summary of Material Modification (SMM) with your other Plan documents for easy reference. Be sure to share this SMM and the enclosed flyer with your spouse and dependents, if applicable.

If you have any questions, please contact the Fund Office at the address or phone number shown above.

Sincerely,

Board of Trustees Heartland Healthcare Fund



Summary of Material Modification

Dear Participant April 2020

Plan changes regarding coverage of testing for COVID-19

Current events are rapidly developing and evolving and even as this communication is being prepared for distribution, there will be multiple changes made in the law, in the treatment of the COVID-19 disease and in what the Heartland Healthcare Fund (Fund) can do for you. The Plan will comply with H.R. 6201 as amended to cover all testing, lab fees, office visits, and telehealth visits relating to COVID-19 at 100% effective March 1, 2020. The changes to the Plan described in this SMM will automatically cease to be effective on the date the Federal Government declares an end to the current national emergency.

It is very important that you stay informed. Please visit the Fund's website at:

www.heartlandhealthcarefund.com for up-to-date information:

The following benefit changes are effective March 1, 2020

- 1. If you (or your dependent) visit a provider and the provider evaluates you only for COVID-19 and orders or administers a COVID-19 test, the entire cost of the visit and the test will be paid by the Fund at 100%.
- 2. If you (or your dependent) think you are exhibiting COVID-19 symptoms and order a test kit from an on-line company. The cost of the test kit is *not covered* by the Fund regardless of the results.
- 3. If you (or your dependent) visit a provider for a reason unrelated to COVID-19, and during the visit, the provider determines that you should be tested for COVID-19, only the evaluation for the test, the test itself, and the test's administration are exempt from cost-sharing under these plan changes. Charges for the visit and for other items and services provided during the visit could be subject to regular cost-sharing.
- 4. Online or telehealth visits associated with COVID-19 testing are covered at 100%, including visits provided through "*Doctor on Demand*".

Understand, we may make additional changes to your SPD in order to stay compliant with developments in this area. While it is frustrating and perhaps confusing to receive multiple notifications from us, please understand that we are required to keep your SPD compliant with the law and that will require us to continue to update your SPD as the law changes.

A Final Note

We know you are concerned about you and your family's heath. The described benefit improvements are examples of how the Board of Trustees continues to look for ways to increase Plan benefits and help improve the well-being of the Plan's members and families. We would also like to, once again, remind you that preventive care and **Doctor on Demand** visits are always covered by the Plan at 100%.

Please keep this Summary of Material Modification (SMM) with your other Plan documents for easy reference. Be sure to share this SMM with your spouse and dependents, if applicable.

If you have any questions, please contact the Fund Office at the address or phone number shown above.

Sincerely, Board of Trustees Heartland Healthcare Fund



Summary of Material Modification

May 2020

Dear Participant:

As Trustees of the Heartland Healthcare Fund, it is our goal to provide quality benefits, ensure the Fund's financial stability, and comply with all legislative guidelines. This Summary of Material Modification (SMM) outlines improvements to the Dental Benefits provided under the Plan.

Dental Benefit

Effective March 1, 2020, diagnostic and preventive services will not count towards your \$1,500 Maximum Payment Per Calendar Year and will continue to be paid 100% and not subject to your dental Deductible or Copayments. For example, you will pay \$0 for a check-up or teeth cleaning and the price of the visit will not be counted against your Maximum Payment Per Calendar Year of \$1,500. As reference, your dental schedule of benefits is shown in the chart below.

DENTAL BENEFITS (Active Employees, Pre-Medicare Retirees, and Dependents)	
Maximum Payment Per Calendar Year	\$1,500
Deductible Per Covered Individual	\$50
Deductible Per Family	\$150
Plan Copayment for Preventive Care	100%*
Plan Copayment for Basic Services	80%
Plan Copayment for Major Services	50%

^{*} Preventive Care services are not subject to the Plan's Deductible, Copayment or Maximum Payment Per Calendar Year.

A Final Note

We know you are concerned about you and your family's heath. The described benefit improvements are examples of how the Board of Trustees continues to look for ways to increase Plan benefits and help improve the well-being of the Plan's members and families. We would also like to remind you that medical preventive care and Doctor on Demand visits are covered by the Plan at 100%.

Please keep this Summary of Material Modification (SMM) with your other Plan documents for easy reference. Be sure to share this SMM and the enclosed flyer with your spouse and dependents, if applicable.

If you have any questions, please contact the Fund Office at the address or phone number shown above.

Sincerely,

Board of Trustees Heartland Healthcare Fund





Summary of Material Modification

Dear Participant: October 2020

The Heartland Healthcare Fund has made two changes to the Plan Document that the Board of Trustees would like to make Participants aware of:

1) Plan change regarding Death Benefit Beneficiary Designations (Active Employees Only)

The Heartland Healthcare Fund has made a modification to the Plan's Death Benefit beneficiary rules to take into account that a Participant may not want an ex-spouse to remain as a designated beneficiary for Death Benefits payable under the Plan.

Accordingly, effective October 12, 2020, if you designate or have previously designated your spouse as your beneficiary, the beneficiary designation is automatically null and void as of the date of divorce. If you would like your ex-spouse to remain your beneficiary, you must file a new beneficiary form with the Plan Administrator listing your ex-spouse as your beneficiary (i.e., after your divorce is finalized, you must file a new form listing your ex-spouse as your beneficiary).

2) Clarification regarding dental expenses which are reimbursable through the Plan's Health Reimbursement Arrangement (HRA) (All Participants)

The Plan document currently lists "dental fees" as valid expenses which can be reimbursed with your HRA account. The Trustees wish to clarify the Plan language that **orthodontia expenses** <u>are</u> dental fees which can be reimbursed through your HRA account.

Please keep this Summary of Material Modification (SMM) with your other Plan documents for easy reference. Be sure to share this SMM with your spouse and dependents, if applicable.

If you have any questions, please contact the Fund Office at the address or phone number shown above.

Sincerely, Board of Trustees Heartland Healthcare Fund





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Summary of Material Modification

Dear Participant January 2021

It is very important that you stay informed. Please visit the Fund's website at:

www.heartlandhealthcarefund.com for up-to-date information:

The Trustees of the Heartland Healthcare Fund have adopted the following Plan enhancements.

DEATH BENEFIT (Active Employees - Regular Plan Only - including Non-Bargaining and Shop Employees)

The \$10,000 death benefit available to active employees is increased to \$20,000 for deaths occurring on and after January 11, 2021.

COVERAGE FOR COVID-19 VACCINE

FDA-approved COVID-19 vaccines will be covered at 100% of the allowable cost with no out-of-pocket cost and no deductible regardless of where the vaccine is administered.

On December 11, 2020, the FDA issued the first emergency use authorization (EUA) for Pfizer's COVID-19 vaccine, developed in conjunction with the German company BioNTech. The Pfizer-BioNTech vaccine was approved for use for individuals 16 years of age and older. The Pfizer-BioNTech vaccine requires two doses provided three weeks apart.

Similarly, on December 18, 2020, the FDA issued EUA for the Moderna vaccine, for individuals 18 years of age and older. The Moderna vaccine requires two doses provided 28 days apart.

Additional vaccines may be approved in the future. When the COVID-19 vaccine becomes available for you to receive, you should discuss whether the COVID-19 vaccine is medically appropriate for you and your family with your health care providers.

Effective December 11, 2020 and during the COVID-19 Public Health Emergency, the Fund will cover COVID-19 immunizations without participant cost sharing (such as a copayment, coinsurance, or a deductible), prior authorization, or other medical management requirements. The Public Health Emergency was initially declared as of January 27, 2020, and has currently been extended through April 21, 2021.

ACTIVE AND PRE-MEDICARE RETIREE RATES

The Board of Trustees is pleased to announce that there will be no increase to the active eligibility dollar bank premium, and COBRA rates and there will be no increase to the current pre-Medicare retiree premium rates originally effective July 1, 2020.

Please keep this Summary of Material Modification (SMM) with your other Plan documents for easy reference. Be sure to share this SMM with your spouse and dependents, if applicable.

If you have any questions, please contact the Fund Office at the address or phone number shown above.

Sincerely, Board of Trustees Heartland Healthcare Fund