



NECA-IBEW WELFARE TRUST FUND

2120 Hubbard Avenue, Decatur, IL 62526-2871

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SUMMARY OF MATERIAL MODIFICATIONS



EyeMed Vision Care Benefit

Effective January 1, 2022, the Fund is adding a new vision care network benefit with EyeMed. EyeMed will administer a network of vision care providers (known as the **“Insight Network”**) on behalf of the Fund. Participants and Dependents who are eligible¹ for Vision Benefits can choose to go to a provider in the EyeMed Insight network and receive discounts on services and materials, such as exams, frames, lenses, and contacts. This will allow your Vision Benefits dollars to go further.

Please note that Vision Benefits and the additional benefits provided through EyeMed (explained later) are only available for Covered Persons under the NECA-IBEW Welfare Trust Fund **Base Plan**.

Going to an EyeMed network provider will not be mandatory to use your Vision Benefits. Should you wish to continue using your preferred vision care provider who is not in the EyeMed Insight network, then you will continue to have \$400 per year maximum for your Covered Vision Expenses. If you use a provider who is not in the EyeMed Insight network, then your provider or you can submit your claim to EyeMed or the Fund Office for reimbursement.

The following is a summary of how the new EyeMed vision care benefit will work for services on and after January 1, 2022:

- To find a current list of EyeMed Insight network providers, visit www.eyemed.com and select “Find an eye doctor,” call 866-804-0982, or use the EyeMed mobile app
 - On the website drop-down menu under “Network,” select **“Insight Network”**
 - You can use your location, or input a specific zip code to generate a list of Insight Network providers
- When you visit your EyeMed Insight Network provider and present your EyeMed identification card, the provider will automatically have your benefits and discounts in their system
- Your EyeMed Insight Network provider will submit your claim to EyeMed
- When using an EyeMed Insight Network provider, you will receive more value for your benefit dollars, around \$600 worth of value for your \$400 benefit, on average

- You will still be responsible for expenses which are not Covered Vision Expenses and amounts over \$400
- You will receive an explanation of benefits (EOB) from EyeMed via their website or mobile app (printed EOBs for Vision Benefits under EyeMed will be available by contacting the Fund Office)

You will be receiving a welcome packet with EyeMed identification cards in mid-December. There will also be additional materials with information about the EyeMed mobile app, texting service, and information about additional discounts you can obtain for Lasik or PRK treatment, as well as hearing aid discounts through the Amplifon Hearing Care Network.

Importantly, Lasik and PRK treatment are not Covered Expenses under the Fund. However, when using the EyeMed affiliated U.S. Laser Network for such services, Covered Persons will receive a discount of around 15% off retail. Also, through the EyeMed program, Covered Persons will also have access to up to 64% off hearing aids under the Amplifon Network. This will be a savings for both the Covered Person and the Fund. Hearing aids are a Covered Expense under the Fund.

For questions about the new EyeMed vision care benefit program or your benefits generally, please contact the Fund Office (217-875-0254 or 800-765-4239).

¹Participants, Retirees, and Dependents who participate in the Fund's Alternative Plan or Single Alternative Plan are not covered for Vision Benefits.

Nondiscrimination Notice Under Section 1557 of the Affordable Care Act

Discrimination is against the law. The NECA-IBEW Welfare Trust Fund complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. The Fund does not exclude people or treat them differently because of race, color, national origin, age, disability or sex. The 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 Mr. Kevin Cope, the Civil Rights Coordinator. If you believe that the 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: Mr. Kevin Cope, Civil Rights Coordinator, NECA-IBEW Welfare Trust Fund, 2120 Hubbard Avenue, Decatur, IL 62526-2871; Phone: 800-765-4239; Fax: 217-875-2084; Email: info@neca-ibew.org. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Mr. Kevin Cope 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, DC 20201; Phone: 800-368-1019; TDD: 800-537-7697 (TDD).

Complaint forms are available at www.hhs.gov/ocr/filing-with-ocr/index.html

Got questions? We've got answers.

How do I use my benefits?

Simply find a doctor, schedule an appointment and receive services. We'll handle all the paperwork, when you visit an in-network provider.

Can I view my EyeMed benefits online?

Yes, you can view your benefits and do a lot more on our secure Member Web – such as print an ID card, check the status of a claim, locate a provider and download an Explanation of Benefits.

Want on-the-go access?

Download our mobile app (App Store or Google Play) to get the same features, plus the ability to save a vision prescription and set an eye exam reminder.

How do I submit a claim?

We take care of all of the paperwork when you visit an in-network provider.

If you see an out-of-network provider AND you have out-of-network benefits as part of your vision benefits package, you'll need to pay at the time of service and complete a claim form to send to us for reimbursement. Be sure to include an itemized paid receipt with your name.

Will I get an ID card? How do I order replacements or extra cards?

Yes, we provide 2 ID cards in the subscriber's name, but you aren't required to have it at the time of service. If you lose your card or need extras for your family, you can print a replacement by creating an account at eyemed.com or downloading the EyeMed Members App (App Store or Google Play) to pull up a digital version anytime, anywhere.

How do I find an eye doctor in your network?

Simply visit our enhanced provider search on eyemed.com or the mobile app to choose from thousands of in-network providers. You can filter your search by your frame preferences, hours of operation and much more – and then even schedule your appointment.*

Does EyeMed offer any additional discounts?

We sure do! At participating in-network providers, members can receive 40% off additional complete pairs of glasses or 20% off a partial pair (lenses only or frames only). You can also receive 20% off non-prescription sunglasses and accessories. If that's not enough, you can create an account at eyemed.com and login anytime to view special offers.

Don't like wearing glasses or contacts? We also offer discounts on LASIK laser vision correction. To find a LASIK provider, visit eyemedlasik.com or call 877-5laser6.

I don't see any or all of my dependents on Member Web. Why?

Due to privacy guidelines, we only show family members who are under the age of 18 under the subscriber. Anyone 18 or older will need to register for his or her own account.

*At select in-network providers



eye
Med



Does EyeMed sell individual insurance plans?

Yes, visit <http://individual.eyemed.com> to see if an individual plan is offered in your state.

Can I use my benefits online?

Absolutely! You can use your in-network benefits to purchase contact lenses and eyewear online at:



lenscrafters.com



targetoptical.com



ray-ban.com/eyemed



glasses.com



contactsdirect.com

If I have an FSA, can I apply funds to out-of-pocket costs after my EyeMed benefit is applied?

Yes. You can use your Flexible Spending Account (FSA) to pay for a variety of health-related out-of-pocket expenses, including those associated with supplementary benefits like vision benefits. Money from the FSA can be applied toward the eye exam copay, out-of-pocket costs for prescription glasses or contact lenses (including upgrades), and supplies such as contact lens solution. Employees can even use FSA funds for LASIK surgery. Vision care out-of-pocket costs are also eligible for Health Savings Account (HSA) reimbursement, although these expenses do not count toward your annual deductible.

I don't wear glasses and can see fine. Why do I need an eye exam?

Getting an eye exam is not just about corrective vision – it's about your health. An eye exam can detect eye health problems like glaucoma or cataracts, as well as help identify signs of diseases that impact your whole body, such as high blood pressure, diabetes and high cholesterol – just to name a few.

To learn more about vision wellness, visit eyesiteonwellness.com.

At what age should my child first visit the eye doctor?

The American Optometric Association recommends that your child should have his or her first eye exam with an optometrist or ophthalmologist between 6 months of age and 1 year.¹ The doctor may check for nearsightedness, farsightedness, astigmatism, amblyopia (or "lazy eye"), proper eye movement and eye alignment, how the eye reacts to light and darkness, and other eye health problems. They also recommend that your child's next eye exam should take place sometime between the ages of 3 and 5, and then every year after that. During these exams, the doctor will conduct a comprehensive eye exam as well as vision screening tests. To learn more about your child's vision, visit eyesiteonwellness.com.

My child gets a vision screening at school. Is there still a need for an eye exam?

A vision screening does not take the place of an eye exam. Generally, they check a child's ability to see far away and check for color blindness, but a comprehensive eye exam evaluates the entire structure of the eye and also allow the doctor to view nerves and blood vessels, providing a glimpse into a child's overall health. Eye doctors may also check for farsightedness, which is more common in younger children.²

How often should I get an eye exam?

As with any type of ongoing health care, annual eye exams are a good rule of thumb unless otherwise directed by your doctor. To learn more about eye exams, visit eyesiteonwellness.com.

Can I get the same care at a retail provider as I can at an independent doctor?

All optometrists, regardless of the setting of their practice, must meet the same state licensing and credentialing requirements. In addition, due to the finite number of optometry schools in the United States, optometrists are trained consistently regardless of the practice model they eventually choose.



¹ American Optometric Association, "Infant Vision: Birth to 24 Months of Age", 2010, <https://www.aoa.org/patients-and-public/good-vision-throughout-life/childrens-vision/infant-vision-birth-to-24-months-of-age>

² All About Vision, "Vision Problems of Preschool Children," Oct. 26, 2017, <http://www.allaboutvision.com/parents/preschool.htm>

Statement of Grandfathered Status

The Trustees believe that this Plan is a “grandfathered health plan” under the Affordable Care Act, which permits us to preserve certain basic health coverage already in effect before the law was passed. As with all grandfathered health plans, our Plan does not have to include certain consumer protections of the Affordable Care Act that apply to other plans (for example, providing preventive health services without any cost sharing). However, grandfathered health plans, like our Plan, must comply with other consumer protections in the Affordable Care Act (for example, the extension of coverage for dependent children to age 26).

Contact the Welfare Trust Fund Administrative Office if you have questions about what it means for a health plan to have grandfathered status and what might cause a plan to lose its grandfathered status. You may also contact the U.S. Department of Labor’s Employee Benefits Security Administration (EBSA) at 866-444-3272 or www.dol.gov/ebsa/healthreform. The website includes a chart summarizing the protections that do and do not apply to grandfathered health plans.

Please read this Summary of Material Modifications (SMM) carefully and save it with your Summary Plan Description and other benefits documents. This Summary of Material Modifications contains only highlights of certain features of the NECA-IBEW Welfare Trust Fund. Full details are contained in the documents that establish the Plan provisions. If there is a discrepancy between the wording here and the documents that establish the Plan, the Plan document language will govern. The Trustees reserve the right to amend, modify, or terminate the Plan at any time.



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Go Paperless! If you would like to get your required correspondence, such as Newsletters and Annual Reports, electronically, you can sign up to go paperless on the Fund's website. We hope this option will make your life easier, save on postage costs and help the environment at the same time. If you wish to continue receiving information by mail, you do not need to do anything. EOBs (explanation of benefits) will continue to be mailed regardless of whether or not you sign up to go paperless.



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We're Online and Accessible 24/7!