

**SUMMARY OF MATERIAL MODIFICATIONS TO
THE HEALTH AND BENEFIT TRUST FUND OF THE INTERNATIONAL UNION OF OPERATING ENGINEERS
LOCAL 94-94A-94B, AFL-CIO**

Commercial Division

To: All Commercial Division Participants in the Health and Benefit Trust Fund of the International Union of Operating Engineers Local 94-94A-94B, AFL-CIO

From: The Plan Administrator of the Health and Benefit Trust Fund of the International Union Operating Engineers Local 94-94A-94B, AFL-CIO – Commercial Division

Re: New Prescription Benefit Manager for Commercial Division Medicare Retiree Participants - UnitedHealthcare MedicareRxSM effective January 1, 2020

Date: February 10, 2020

*This document is a Summary of Material Modifications (“SMM”) intended to notify you of important changes effective January 1, 2020 to the prescription benefit program available for the **Commercial Division Medicare Retiree Participants** under the Health and Benefit Trust Fund of the International Union of Operating Engineers Local 94-94A-94B, AFL-CIO (“the Plan” or the “Fund”). This summary is intended to satisfy the requirements for issuance of a SMM under the Employee Retirement Income Security Act of 1974, as amended. You should take the time to read this SMM carefully and keep it with the Summary Plan Description (“SPD”) that was previously provided to you. (Commercial Division Medicare Retiree Participants: This SMM follows the announcement letter and other materials that were previously mailed to you in November and December 2019 announcing that the new prescription benefit manager will be UnitedHealthcare MedicareRxSM effective January 1, 2020.) If you need another copy of the SPD or if you have any questions regarding this change to the Plan, please contact the Plan Administrator during normal business hours at: 331-337 West 44th Street, New York, New York, 10036, telephone number: (212) 331-1800.*

The Board of Trustees of the Plan has approved the prescription benefit manager UnitedHealthcare MedicareRxSM to administer the **Commercial Division Medicare Retiree Participants’** prescription drug benefit effective January 1, 2020. This change applies ONLY to the Commercial Division Medicare Retiree Participants. OptumRx[®] and United Healthcare are both subsidiaries of the UnitedHealth Group. The UnitedHealthcare MedicareRxSM prescription coverage is designed to deliver quality pharmacy care, safety, convenience, and cost savings. Note, the Medicare Retiree UnitedHealthcare MedicareRxSM prescription drug benefit may vary from the prescription drug benefit received by an eligible Active Member. (Commercial Division Medicare Retiree Participants: Kindly refer to the copies of our prior mailings for additional information about UnitedHealthcare MedicareRxSM. Please contact the Fund Office at the information listed above if you have any questions.)

Sincerely,

Board of Trustees, Health and Benefit Trust Fund of the International Union of Operating Engineers Local 94-94A-94B, AFL-CIO

This SMM is intended to provide you with an easy-to-understand description of material issues concerning the Plan. While every effort has been made to make this description as complete and as accurate as possible, this SMM, of course, cannot contain a full restatement of the terms and provisions of the Plan. The Board of Trustees or its duly authorized designee, reserves the right, in its sole and absolute discretion, to amend, modify or terminate the Plan, or any benefits provided under the Plan, in whole or in part, at any time and for any reason, in accordance with the applicable amendment procedures established under the Plan and the Agreement and Declaration of Trust establishing the Plan (the "Trust Agreement"). The Trust Agreement is available at the Fund Office and may be inspected by you free of charge 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.

IMPORTANT NOTICE REGARDING THE PLAN'S GRANDFATHERED PLAN STATUS

Trustees believe that the Plan is a "grandfathered plan" as such term is defined under PPACA (more commonly known as Health Care Reform). As permitted by Health Care Reform, a grandfathered health plan can preserve certain basic health coverage that was already in effect when Health Care Reform was enacted. Being a grandfathered health plan means that the medical coverage that you have elected under the plan may not include certain consumer protections of Health Care Reform that apply to other group health plans, for example, the requirement for the provision of preventive health services without any cost sharing (i.e., copayments, coinsurance, deductibles). However, grandfathered health plans must comply with certain other consumer protections in Health Care Reform, for example, the elimination of lifetime limits on benefits and extension of coverage to dependents until age 26. 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 during normal business hours at: 331-337 West 44th Street, New York, New York, 10036, telephone number: (212) 331-1800. You may also contact the Department of Labor at (866) 444-3272 or www.dol.gov/ebsa/healthreform. This website has a table summarizing which protections do and do not apply to grandfathered plans.