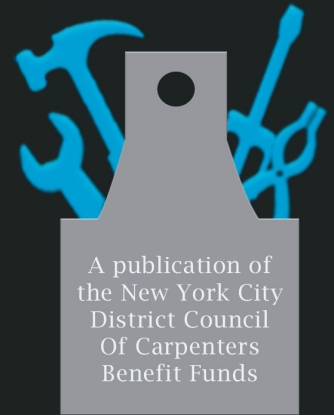


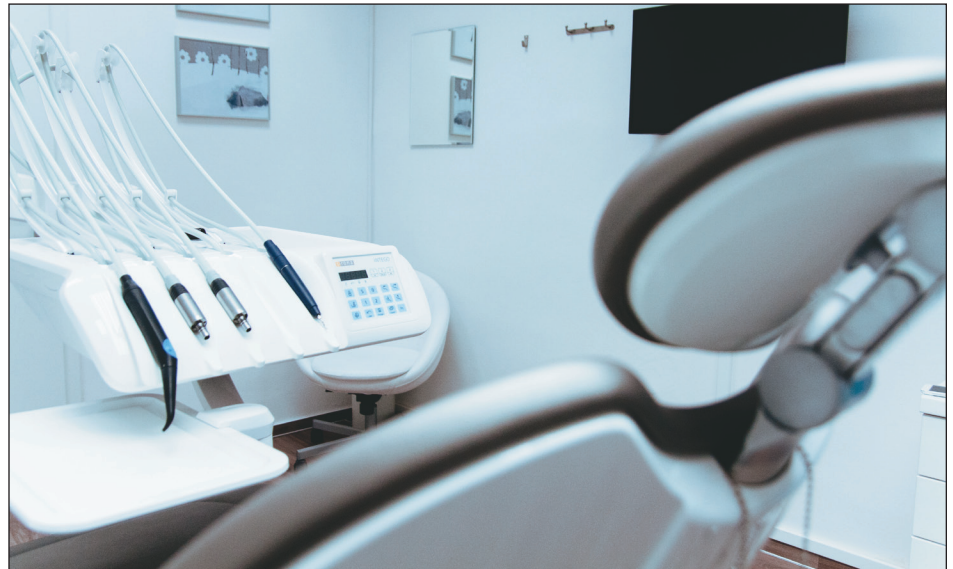
# BENEFITS TOOLBOX



A publication of  
the New York City  
District Council  
Of Carpenters  
Benefit Funds

## BOARD OF TRUSTEES APPROVES IMPROVEMENT TO DENTAL PLAN EFFECTIVE JANUARY 1, 2018

We have great news for participants in the NYCDCC Welfare Fund! The Trustees have listened to and heard your concerns about having broader access to dental care. In response to your concerns, the Board of Trustees is pleased to announce that effective January 1, 2018, the Welfare Fund's dental program will change from the current in-network only Aetna Dental Maintenance Organization ("DMO"), to a Preferred Provider Organization ("PPO") program offering both in- and out-of-network coverage through Self-Insured Dental Services, Inc. ("ASO/SIDS"). This program will be similar to the plan participants had prior to benefit changes made in June 2012 in that benefits will be paid according to a "schedule of allowances" that provides a set fee for a particular procedure. More information on this exciting change will be communicated in the coming weeks and months, so be sure to visit our website at [www.nycdbf.org](http://www.nycdbf.org), our Facebook page at [www.facebook.com/nycdbf](https://www.facebook.com/nycdbf), and our Twitter page at [www.twitter.com/nycdbf](https://www.twitter.com/nycdbf), for more details.



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# A TALE OF TWO ERAS:

## Your Benefits from 2012-Present

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Just as you and your families may experience financial setbacks or gains throughout your lives, the Benefit Funds are subject to fluctuations as well. The Funds experience “good” or “bad” years depending on two main factors, one of them being total hours worked, which determines the amount of employer contributions received by the Funds, and the other being the Funds’ investment returns, which are determined by events in the market. These two sources, hours worked and investment returns, are the lifeblood of the Funds, and can affect your benefits. If the Funds have a few bad years, particularly in both of these areas, the Trustees may have to consider benefit reductions. In contrast, when times are good, the Trustees attempt to prudently enhance benefits, while still maintaining adequate reserves for the future.

This article provides a brief review of your benefits from the years 2012 to present. We hope this review provides you some insight on what has changed over the years, why these changes have occurred, and how the Trustees were able to restore or enhance your benefits in more recent years.

### **Bad Times**

Though the Trustees were able to avoid benefit cuts in the immediate aftermath of the 2008/2009 investment market downturn, which took place simultaneously with a slowdown in construction activity, they were eventually forced to take action to preserve adequate reserves for core health benefits. This was vital to maintaining the viability

of the Welfare Fund because in the fiscal years ending June 30, 2009, June 30, 2010, and June 30, 2011, the Fund had a combined operating deficit of \$57,299,067. Furthermore, an annual actuarial review undertaken in 2011 determined that the Fund would only have 7.7 months of reserves by the end of fiscal year 2012 (June 30th). As a result, the Trustees made the following changes, effective June 1, 2012:

- Implementation of In-Network and Out-of-Network Deductibles
- Elimination of Vision Benefits
- Elimination of Dental Benefits
- Imposition of a Retiree Premium of 10% of the Cost Coverage
- Reduction of Scholarship Awards from 35 to 10 Per Annum

These decisions were not taken lightly, but were necessary to preserve adequate reserves to fund core benefits.

### **Good Times**

Since those dark days, both hours and contribution rates have significantly increased, which has resulted in increased employer contributions. At the same time, the investment markets have also rebounded, resulting in strong returns. There have still been challenges though. In fact, welfare benefit expenses have increased by 5.4% during the period of July 1, 2012-June 30, 2016 to \$376 million, while the number of Plan participants has also increased by 2.6%, resulting in more spending per participant. However, the

Trustees’ focus on efficiencies in Fund operations have reduced administrative costs, counteracting these rising numbers and resulting in more reserves for benefits. Consequently, a recent valuation of the Welfare Fund projected an estimated reserve of 20.2 months as of June 30, 2017.

Because of these positive trends, the Trustees have been able to enhance benefits, while still also remaining mindful of potentially reduced construction activity, ever-increasing healthcare costs, and/or an investment market downturn in the future. Due to increased funding levels and reserves, the Trustees have reinstated and/or enhanced the following Welfare Fund benefits:

- Reduction of Retiree Premiums by 50% (9/1/14)
- Restoration of Dental Benefits (10/1/14)
- Restoration of Vision Benefits (1/1/15)
- Introduction of the MEND Program, *which provides assistance to participants and dependents in addressing substance abuse issues* (8/1/16)
- In-Network Deductibles Reduced by 50% (1/1/17)
- Scholarship Awards Increased to 25 Per Annum (1/1/14)

### **Coming Soon:**

- New and Improved Dental Preferred Provider Organization (“PPO”) Plan through Self-Insured Dental Services, Inc. (“ASO/SIDS”), Effective 1/1/18

(Continued on page 6)

# Message from the NYCDCC Benefit Funds



As we head toward the end of 2017 and look forward to the beginning of 2018, there is one theme we hope you have noticed over the last year ... **WE HEAR YOU!** And not only do we hear you, but we take your feedback very seriously and do our best to address your concerns and needs.

At the Fund Office, we absorb your feedback in a variety of ways:

1. We hear your concerns through our Member Services Department.
2. We read and respond to inquiries you submit through our website's Member Feedback Form.
3. We get reports from Business Agents and Trustees about what you're saying out on the job sites.
4. Our Executive Director attends local union meetings to participate in Q&A sessions with members.

Through these efforts to consistently be in communication with you, we are often able to hear and respond to your feedback positively. For example, when we announced plans to convert all members to paperless vacation payments via a rapid! Pay Debit Card beginning in June, we heard overwhelming feedback from you requesting an option for direct deposit as well. Responding to these requests, we postponed the implementation of the paperless initiative until September so that we could construct a direct deposit process. We were ultimately successfully in this endeavor, and as of last month, over five thousand of you are already receiving your vacation payments through direct deposit.

Additionally, when a member at a local union meeting mentioned that it would be useful for him and his fellow members to receive notifications any time hour contributions toward benefits from employers were entered into our system, we immediately went to work on developing a method in which to do this. Currently, we are in the process of implementing a system in which any member who provides us a viable cellphone number will automatically receive a text message alert any time an employer contribution is made on his/her behalf. As we get closer to completing this implementation process and begin to collect cellphone numbers, we will be sure to notify you.

Similarly, when the topic was broached about having text alerts sent out to you each time contributions are made to your Annuity Fund, we reached out to Prudential to see if this was a future possibility. Prudential is now researching the topic and will be reporting back to us soon. Furthermore, as a result of your inquiries, we are happy to report that transfers to your Prudential account are now taking place on a weekly basis. You can see the positive results of this change by logging into your Prudential account at **[www.prudential.com/nycdccbf](http://www.prudential.com/nycdccbf)** and checking your contributions.

Overall, we just want you to know that we hear your feedback, we note your requests, and we truly do the best we can to satisfy all of your needs. As we have previously stated, servicing the membership (you) is our number one priority, and we will continue to look for ways to enhance our service of you as we move toward the future.

Sincerely,

NYCDCC Benefit Funds

## Check out the NYCDCC Benefit Funds Website!



- Breaking News
- Benefits Video Library
- Benefits Information & FAQs
- *Benefits Toolbox* Newsletter
- Electronic SPDs & SMMs
- Member Portal & User Guide
- Preventive Care & Wellness Section
- Printable Benefits Flyers
- Important Contact Information
- And Much More!

Stay informed about your benefits...  
Visit us at **[www.nyccbf.org](http://www.nyccbf.org)**

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# SUMMARY OF MATERIAL MODIFICATIONS

## NEW YORK CITY DISTRICT COUNCIL OF CARPENTERS WELFARE FUND

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To: Active and Retired Participants of the New York City District Council of Carpenters Welfare Fund and their Eligible Dependents  
From: Board of Trustees  
Date: October 2017  
Re: **NYCDCC Welfare Fund Plan Changes**

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This Summary of Material Modifications (“SMM”) is intended to notify you of important changes to the New York City District Council of Carpenters Welfare Fund (the “Welfare Fund”). Please read this SMM carefully and share it with your family. You should keep it with your Welfare Fund Summary Plan Description (“SPD”) and other SMMs. The effective dates of the changes are noted in each section of this SMM.

### **Change in Dental Benefits Effective January 1, 2018**

The Trustees have listened to and heard your concerns about having broader access to dental care. In response to your concerns, the Board of Trustees is pleased to announce that effective January 1, 2018, the Fund’s dental program will change from the current in-network only Aetna DMO, to a PPO program offering both in- and out-of-network coverage through Self-Insured Dental Services, Inc. (“ASO/SIDS”). More information on this exciting change will be communicated in the coming weeks and months.

### **Correction of SPD Language Governing Chiropractic Coverage**

Page 57 of the SPD incorrectly states that Empire’s Medical Management Program must be contacted to determine medical necessity of all chiropractic care after the fifth visit. The Plan covers up to 45 chiropractic visits per year without the need for ongoing medical management review.

### **Change of Employer Trustee**

Effective July 1, 2017, John O’Hare of the Building Contractors Association accepted appointment to the Board of Trustees, replacing Paul J. O’Brien.

### **Reminder about Preventive Care with no Cost Sharing**

The Plan will pay 100% of the costs incurred for certain preventive services provided by an in-network provider. This means that these services will not be subject to any deductible, and you will not have to pay any cost sharing, such as a copayment. You may, however, be required to pay a copayment if the primary purpose of an office visit to a provider is not to receive the preventive service, or for a visit that is billed separately from the preventive service.

To view a list of preventive services covered with no cost sharing, please visit the following website: <https://www.healthcare.gov/coverage/preventive-care-benefits/>. Note that the list of preventive services that are covered without cost sharing might change periodically as the standards change.

To find out if a particular preventive service will be paid at 100% when provided by an in-network provider, contact Empire BlueCross BlueShield at (844) 416-6387, Express Scripts at (800) 939-2091, or the Fund Office at (800) 529-FUND (3863).

### **Reminder of Out-of-Network Emergent Claims Process for Empire BlueCross BlueShield**

The Board of Trustees cannot stress enough the importance of selecting in-network providers for all of your healthcare needs. Selecting an in-network provider both limits your out-of-pocket expense and guarantees the most efficient use of the Plan’s limited assets, which in turn means lower increases in health costs that ultimately are paid out of the hourly wage package. Importantly, using an in-network provider also protects you and your family from potentially high bills that can happen when an out-of-network provider “balance bills” you for the portion of charges not covered by the Plan. You can find an Empire participating provider online at [www.empireblue.com](http://www.empireblue.com).

However, we realize that there are certain emergency instances where you have no choice but to receive medical care from an out-of-network provider. If you receive a bill that arises from your use of an out-of-network provider in an emergency situation, please contact Empire and request that Empire seek to negotiate a settlement with the provider. You can call Empire at (800) 553-9603 or contact Empire in writing at:

Empire BlueCross BlueShield Appeals and Grievance Department  
P.O. Box 1407 • Church Street Station • New York, NY 10008-1407

Once a grievance has been filed, Empire will review your claim to validate that it meets Empire’s definition of an emergency out-of-network claim. If it does, Empire will attempt to reach the provider or facility to negotiate settlement. If a settlement is reached, Empire will send you a revised Explanation of Benefits indicating that you have no further payment obligation.

It is important to note that this negotiation service does not guarantee resolution of your claim. In some cases, Empire may determine that the claim in question does not meet its definition of an emergency claim. In no event will additional payments be made to out-of-network providers for non-emergent out-of-network claims. In other cases, the provider or facility may not be willing to negotiate. If this bill negotiation service does not settle your claim, you as a participant retain your right to appeal to the Appeals Committee as outlined in your SPD.

### **Questions?**

If you have questions for the Fund Office, you can call the Member Services Department at (800) 529-FUND (3863), Monday through Thursday from 8:00 a.m. to 5:30 p.m. and Friday from 8:00 a.m. to 5:00 p.m.

# SUMMARY OF MATERIAL MODIFICATIONS

## NEW YORK CITY DISTRICT COUNCIL OF CARPENTERS PENSION FUND

To: All Pension Plan Participants  
From: Board of Trustees  
Date: October 2017  
Re: **NYCDCC Pension Fund Plan Changes**

This Summary of Material Modifications ("SMM") is intended to notify you of important changes to the New York City District Council of Carpenters Pension Plan (Amended and Restated Effective January 1, 2014) (the "Plan"). Please read this SMM carefully and share it with your family. You should keep it with your Pension Fund Summary Plan Description ("SPD") and other SMMs. The effective dates of the changes are noted in each section of this SMM.

### **New Optional Forms of Payment for Pre-Retirement Death Benefits**

The Board of Trustees is pleased to announce the addition of new optional forms of pre-retirement death benefits.

#### **For Married Participants:**

If a married, vested participant dies before retirement, the Plan pays a "Pre-Retirement Surviving Spouse Pension." Under the prior Plan rules, if a participant dies before attaining the age required to begin collecting a pension (either age 55 or age 65 depending on the participant's number of vesting credits), the surviving spouse was not eligible to commence his/her pension until the earliest age that the pension would have been payable had the participant lived to the earliest retirement age allowable under the Plan.

Effective immediately, surviving spouses will have the option of (a) electing an actuarially reduced pre-retirement death benefit that is payable immediately, or (b) waiting until the deceased participant's earliest retirement date. Because the immediate benefit will be paid over a longer period of time than the deferred benefit, the immediate payment is actuarially reduced, meaning that the spouse will receive a lesser monthly benefit but for a longer period of time.

This new option is available to all eligible surviving spouses who have not yet commenced collecting their benefit regardless of the date of their spouse's death. If a surviving spouse elects to commence his/her benefits under this new option, the benefit will be payable on the first of the month following submission of an application for this benefit, subject to application processing time. If a surviving spouse filed an application before this new option was available and the benefit was denied based on the terms of the Plan then in effect, a new application will be required and the payment of benefits will be based on the submission of a new application.

#### **For Unmarried Participants:**

For participants for whom the Pre-Retirement Surviving Spouse Pension is not payable, the Plan provides a lump-sum death benefit ranging from \$3,000 to \$10,000 based on the participant's number of Vesting Credits. The Plan will now offer two additional options for the beneficiaries of unmarried participants who die before retirement.

Effective for deaths of unmarried participants occurring on or after July 1, 2017, the Plan will pay one of the following three forms of benefits:

- (1) a Pre-Retirement Non-Spouse Pension for the lifetime of their beneficiary,
- (2) a 60-month annuity, or
- (3) the lump sum death benefit ranging from \$3,000 to \$10,000 based on the participant's number of Vesting Credits.

The Pre-Retirement Non-Spouse Pension in the form of a lifetime annuity (option (1) above) will be calculated in the same manner as the immediately payable Pre-Retirement Surviving Spouse Pension.

If a participant dies *after* attaining the minimum age required to collect a pension, the benefit will be equal to 50% of the amount that would have been paid under the normal form of payment had the participant separated from service on the earlier of the date he/she last worked in Covered Employment or his/her date of death, elected payments starting on the earliest date available under the Plan, and died on the next day. If a participant dies *before* attaining the minimum age required to collect a pension, the benefit will still be payable immediately, but it will be actuarially reduced further to reflect the longer payment period as described above.

The Pre-Retirement Non-Spouse Pension in the form of a 60-month annuity (option (2) above) will also be based on the lifetime value of the Pre-Retirement Non-Spouse Pension, but it will be actuarially increased to reflect payment over a fixed 60-month period instead of payment over the lifetime of the beneficiary. If your beneficiary dies before collecting all 60 payments, no further payments will be payable.

A participant's beneficiaries will have to agree on the form of benefit. If the participant's beneficiaries do not agree on the form of payment, the Plan will only pay the lump sum death benefit which ranges from \$3,000 to \$10,000 based on amount of Vesting Credit that the participant had at the time of his/her death.

### **Additional Bases for Eligibility for Phase II Disability Pension Benefits**

The Plan provides that a participant is eligible for Phase II Disability Pension payments if, in the sole and absolute discretion of the Trustees, he/she is prevented by injury or disease from engaging in *any* gainful employment. (Please note that the standard for Phase II Disability Pension benefits is stricter than the standard for Phase I Disability Pension benefits. Eligibility for Phase I benefits requires, among other things, that a participant be totally unable to perform the duties of any occupation in Covered Employment or any occupation requiring duties similar to a job in Covered Employment.) In determining whether a participant is eligible for Phase II Disability Pension benefits, the Trustees may rely on the opinion of the Trustees' medical advisor as to the physical or mental condition of the applicant or may rely solely on the award or lack of an award of Social Security Disability benefits as evidence of inability to engage in gainful employment. Additionally, effective July 1, 2016, any participant whose Phase I Disability Pension benefits terminated on or after July 1, 2015 may be eligible for six-month extensions of Phase II benefits if, in addition to satisfying all the other requirements for Phase II benefits (as specified in the Plan document and the SPD), the participant: (1) has a pending Social Security Disability application or appeal and the Trustees' medical advisor has determined that the applicant is unable to engage in any gainful employment; or (2) has a pending Social Security Disability application or appeal, and the combination of his/her age plus the number of his/her Current Vesting Credits equals or exceeds 80.

If the participant's Social Security Disability application is denied after exhausting or waiving all administrative appeals, he/she shall cease being eligible for Phase II benefits on the last day of the month in which the final administrative appeal of the denial of his/her Social Security Disability application is denied or otherwise waived.

The participant must immediately notify the Fund Office of the outcome of his/her Social Security Disability application or appeal and must respond to the Fund Office's inquiries regarding the status of his/her Social Security Disability application or appeal. Failure to provide requested information shall be sufficient reason for the denial, suspension or discontinuance of benefits. In the case of any overpayment, the Plan's provisions for recovery of overpayments shall apply.

### **Change of Trustees Appointed by Employer Associations**

Effective July 1, 2017, John O'Hare of the Building Contractors Association accepted appointment to the Board of Trustees, replacing Paul J. O'Brien.

### **Questions?**

If you have questions for the Fund Office, please call the Member Services Department at (800) 529-FUND (3863), Monday through Thursday from 8:00 a.m. to 5:30 p.m. and Friday from 8:00 a.m. to 5:00 p.m.

## A Tale of Two Eras: Your Benefits from 2012-Present

(Continued from page 2)

In addition to restoring and enhancing Welfare Fund benefits, the Trustees have also continued to review and consider enhancements to your Pension Fund benefits. These opportunities have presented themselves because the Pension Fund is performing well. As of the Plan Year ending June 30, 2016, the Pension Fund was in the Green Zone and funded at 93.3%. Pension benefits recently enhanced as a result of this strong performance include the following:

- Improved Access to Phase II Disability Benefit (7/1/16)  
*\*See SMM on page 5 for more details.*
- Addition of Pre-Retirement Joint & Survivor Benefit Option (1/1/17) *\*See SMM on page 5 for more details.*
- Addition of Pre-Retirement Active Death Benefit for Non-Spouse Beneficiaries

(7/1/17) *\*See SMM on page 5 for more details.*

Additionally, the Trustees have made numerous operational and administrative improvements such as:

- Improved Ability to Collect Employer Contributions through an Online Process: *I-Remit* (1/1/14)
- Creation of New Member Website: **www.nyccbf.org** (1/1/14)
- Introduction of LiveHealth Online (9/1/16)
- PayCards for Paperless Pension Benefit Payments (1/1/17)
- United Healthcare (Medicare Advantage) for Medicare-Eligible Retirees (1/1/17)
- Introduction of Email Blast and RoboCall Communication Programs (3/31/17)

- Change in Life Insurance Carrier, *resulting in cost savings* (8/1/17)
- Weekly Funding of Annuity Contributions (8/1/17)
- PayCards/Direct Deposit for Paperless Vacation Benefit Payments (9/1/17)
- Continuous Efforts to Improve Efficiency of Fund Office through Training Programs, and Digital Formatting of Records (Ongoing)

As you can see, a lot has changed since 2012. Fortunately, most of the recent changes have trended in a positive direction. As we move forward, if fiscally prudent opportunities present themselves, the Trustees will continue to seek improvements to your benefits, as well as to the operational efficiencies of the Funds.

## IMPORTANT NOTICE: Medicare Enrollment Responsibilities and YOU

If you and/or your covered dependent(s) are eligible for Medicare, or become eligible for Medicare, you **MUST** enroll in both **Medicare Part A** and **Medicare Part B** as soon as Medicare coverage becomes available in order to maximize your coverage with the NYCDCC Welfare Fund (the "Welfare Fund"). If you do not enroll in both Part A and Part B, the Welfare Fund will not be able to provide you coverage through UnitedHealthcare, **resulting in higher out-of-pocket costs for you**. This includes those who retired early on a regular pension and later became eligible for Social Security prior to age 65.

When you and/or your covered dependent(s) become eligible for Medicare, your coverage with the Welfare Fund changes. To assist the Fund Office in processing your changes correctly, you must send us copies of your Medicare cards as proof of your conversion to Medicare-Eligible Retiree coverage. This can be done in the following ways:

**In Person-** At Fund Office, 9th Floor

**Mail-** NYCDCC Benefit Funds, Attn: Member Services, 395 Hudson Street, 9th Floor, New York, NY 10014

**Fax-** (212) 366-7845

**Email-** **MemberServices@nyccbf.org** (\*PDF attachments of copy only. Images/pictures of the card will not be accepted.)

If you have any questions about the Medicare enrollment process and your responsibilities concerning continued Welfare Fund coverage, please contact our Member Services Department at **(800) 529-FUND (3863) or (212) 366-7373**.

# More Preventive Services Covered at Zero Cost Added to NYCDCC Welfare Fund Plan

We are pleased to advise that more preventive services covered at zero cost have been added to the NYCDCC Welfare Fund's Plan administered through Empire BlueCross BlueShield. The new services, effective dates, and descriptions are listed in the chart below.

Effective for Plan Year Beginning on/after:	Topic	Description
May 1, 2017	Aspirin Preventive Medication	Adults ages 50-59 with a 10-year Cardiovascular disease ("CVD") risk of 10% or greater, under certain conditions, to prevent CVD and colorectal Cancer.
July 1, 2017	Syphilis Screening	Non-pregnant persons at increased risk.
October 1, 2017	TB Screening	Adult populations at risk.
December 1, 2017	Statin Preventive Medication	Adults ages 40-75 with no history of CVD, 1 or more CVD risk factors, and a 10-year CVD risk of 10% greater.
*May 1, 2018 *Note that effective date is in 2018.	Preeclampsia Screening	Screening in pregnant women with blood pressure measurements throughout pregnancy.

To learn more about these new zero cost preventive services, please contact Empire BlueCross BlueShield directly at (844) 416-6387 or Express Scripts at (800) 939-2091.

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- Breaking News
- Tips For Using Prescription Drug, Medical, Dental, & Vision Coverage
- Retirement Articles & Advice
- Wellness Tips
- A More Personal Connection
- And Much More!

Don't forget to find us in the world of social media at:

[www.facebook.com/NYCDCCBF](http://www.facebook.com/NYCDCCBF)  
[www.twitter.com/NYCDCCBF](http://www.twitter.com/NYCDCCBF)

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# REVIEWING YOUR EXPLANATION OF BENEFITS (“EOB”) TO PREVENT IMPROPER CHARGES AND HEALTH CARE FRAUD

When you (or a covered dependent) receive health care services from a doctor or other health care provider/facility, a claim is generally submitted on your (or your covered dependent's) behalf to your claims processing or insurance company (For the NYCDCC Welfare Fund, these companies include Empire BlueCross BlueShield, Express Scripts, and Aetna.) Once the claim is submitted and your claims processor makes a determination, based on your plan, how much to pay toward your claim, your doctor or other health provider/facility will then send you a bill charging you for the remaining amount that was not covered by the Fund. During this time period, you will also receive an Explanation of Benefits (“EOB”), which explains the charges associated with your claim. Generally, an EOB contains the following information:

- Date of Service(s)
- Type of Service(s) Received
- Name of Doctor/Provider/Facility
- Amount Paid
- What You Owe

When you receive your EOB, it is important for you to review it carefully to ensure that you actually received the services that are stated in the claim, and you are being charged the proper amount for the services listed, if in fact you did receive them. Insurance and claims processing companies, as well as health care providers/facilities, can occasionally make mistakes on claim submissions, so it is always best for you to double check that the charges are correct. If services are incorrect, you should advise your insurance or claims processing company and/or health care provider/facility of any charges you believe are unwarranted.

Additionally, instances of health care fraud are also possible. Health care fraud is a federal crime which is deemed to have occurred when health care providers/facilities submit fraudulent claims for services that they never provided, submit claims using improper coverage information, or duplicate claim submissions, among other examples.

To safeguard against being improperly charged, you can protect yourself from health

care fraud in the following ways:

- Ask your health care provider/facility to explain the reason for the services being provided
- Beware of “free” medical services, as illicit entities use this to obtain information from you
- Keep your member ID card in a safe place
- Report instances where co-payments and/or deductibles are waived
- Do not give your member ID number to marketers or solicitors
- Never sign a blank insurance form

For more information regarding your EOBs and how to use them to protect yourself from improper charges and fraud, you can contact Empire BlueCross Blue Shield at (844) 416-6387, Express Scripts at (800) 939-2091, Aetna at (855) 201-8436, or our Member Services Department at (800) 529-FUND (3863). You can also view a video which explains EOBs by visiting the Video Library section of our website at [www.nyccbf.com/news-media/videos/](http://www.nyccbf.com/news-media/videos/).



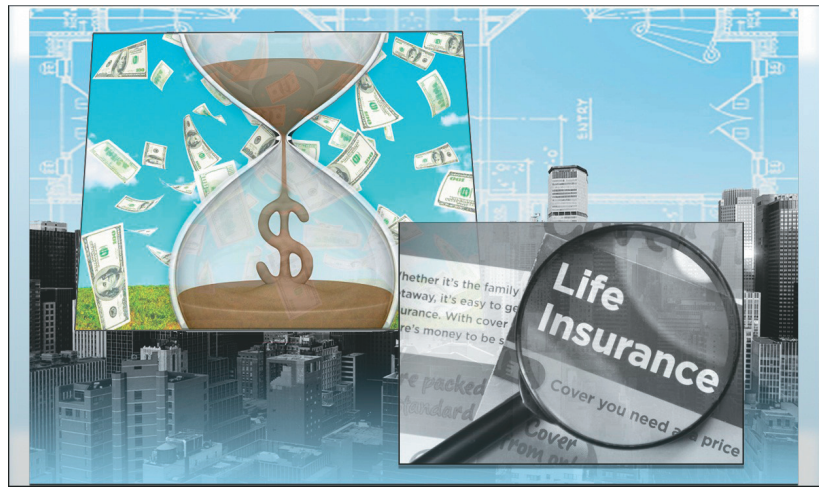
# LIFE INSURANCE BENEFITS FOR ACTIVE AND RETIRED CARPENTERS

— **New Provider Now Amalgamated Life Insurance Company**

After a recent change in providers, the New York City District Council of Carpenters Welfare Fund (the “Welfare Fund”) now offers basic and dependent life insurance benefits through the *Amalgamated Life Insurance Company*. This life insurance benefit, which was unchanged by the provider switch from *Guardian*, helps protect your family financially in the event of your death. It is meant to create a peace of mind knowing that when you die, your beneficiaries will receive some compensation to assist them with future expenses.

It is important to know that you may designate one or more beneficiaries for your life insurance, as well as a contingent beneficiary who will receive benefits if your primary beneficiary predeceases you. With this in mind, it is a good idea to review your beneficiary designation every few years, especially after major life events such as a marriage, divorce, birth of a child, or the loss of a loved one, in case you want to make changes.

If you die while you are an Active Employee, your beneficiary will receive a life insurance payment equal to the sum of the highest 24 months of your earnings, excluding any extra compensation such as overtime pay, bonuses, commissions, or tips. The minimum payment is \$6,000 and the maximum payment is \$25,000. If you are an eligible Retiree, your



coverage will continue in the amount of \$8,000, which is the Retiree life insurance amount. Keep in mind that if you have received an Accelerated Death Benefit, your life insurance will be reduced by that benefit paid.

If you are an eligible Active Employee or Retiree, the Welfare Fund also provides life insurance coverage to your dependents. If your dependent dies while insured under the Welfare Fund, a death benefit of \$1,000 will be paid to you, since you are automatically the beneficiary for any life insurance coverage on your dependent.

Additionally, in the unfortunate circumstance of becoming permanently disabled, you may be able to receive a Continuation of Coverage During Total Disability. This means you can continue your life insurance coverage as long as you remain permanently disabled. The amount of coverage you receive through the continuation of coverage is based on the

30-month period of earnings before the month you became disabled. However, if you reach the retirement age of 65, the amount is reduced to the Retiree Life Insurance benefit amount.

In either case, if your life insurance policy with the Welfare Fund ends, you may convert all or a portion of your coverage to an individual plan by contacting the Amalgamated Life Insurance Company directly at (914) 367-5000. *\*You must apply for an individual policy within 31 days after your Fund coverage ends.*

Be sure to contact the Fund Office within 30 days of an event resulting in a covered loss to obtain a claim form. Claim forms must be submitted as soon as possible, along with proof of death.

**To learn more about your life insurance benefits, including how to name a beneficiary or file a claim, call the Fund Office at (800) 529-FUND (3863) or (212) 366-7373.**

# INSTRUCTIONS FOR ENTERING DIRECT DEPOSIT INFORMATION FOR VACATION BENEFIT PAYMENTS

As of September 2017, the New York City District Council of Carpenters Welfare Fund (the "Welfare Fund") is requiring all vacation benefits to be paid paperless via either a rapid! PayCard Debit Card or through direct deposit payments to your personal checking or savings account. Many of you who wished to receive your vacation payments via direct deposit already provided us your information prior to your September benefit. However, if you still have not provided us your banking information, but you wish to do so now, we would like to once again provide the instructions for you below.

## **Instructions on how to enter your personal savings or checking account information on the Benefit Funds' website (\*if you wish to receive your vacation payments in this manner)**

If you wish to receive your future vacation payments via direct deposit to your personal savings or checking account, you must enter your information through the Benefit Funds' website. **If you do not enter your information, you will receive (or continue to be paid via) a rapid! PayCard Debit Mastercard.** To provide us your

direct deposit information, please do the following:

1. Go to **www.nycgbf.org**.
2. Click the "Member Log-In" button located on the top right corner of the screen.
3. Log into the website using your Username (UBC #) and Password.
4. Check the box agreeing to the terms of the website and click "Continue."
5. After you agree to the website terms, select the "View Add/Edit Banking Information" option and click "Continue."
6. Once you move to the next screen titled "Banking Information," click the "Vacation" box.
7. Upon entering the screen titled "Authorization Agreement for Automated Deposits (Credits)," select either "Checking" or "Savings" under "Choose Account Type" using the pull-down menu.
8. After selecting the account type, enter all of your relevant banking information (Transit/Routing/ABA Number and Account Number)

using the form that appears on the screen.

9. Re-enter your Transit/Routing/ABA Number and Account Number to confirm that the information is correct.
10. Check the box located underneath the banking information you just entered to authorize the Welfare Fund to distribute direct deposit payments to your account.
11. Make sure all of the necessary information requested is filled out and correct, and then click "Submit" at the bottom of the screen.
12. If your banking information is successfully entered, you will then receive a message that notifies you that your form has been submitted and provides you a confirmation number. If you receive an error message instead, please correct the error and resubmit the form.

If you have any questions concerning how to log into the website, or how to enter your direct deposit information, please contact our **Member Services Department at (800) 529-FUND (3863).**

## HOW PENSIONERS AND FUTURE PENSIONERS CAN ACCESS PERSONAL BENEFITS INFORMATION THROUGH THE MEMBER LOG-IN AREA OF THE NYCDCC BENEFIT FUNDS' WEBSITE

Regardless of whether you are already a pensioner or you are vested and eligible to eventually receive a pension upon retirement through the New York City District Council of Carpenters ("NYCDCC") Pension Fund, you have the ability to access important personal benefits information through the Member Log-In area of the NYCDCC Benefit Funds' website.

If you are already receiving a pension and you would like to view your payment history, including your federal withholding and/or

welfare premium deductions, you may do so by following the below instructions:

1. Go to **www.nycgbf.org**.
2. Click the "Member Log-In" button located on the top right corner of the screen.
3. Log into the website using your Username (UBC #) and Password. (If you are having trouble logging into your account, you can contact our Member Services Department for assistance.)

4. Check the box agreeing to the terms of the website and click "Continue."
5. After you agree to the website terms, select the "View Payment History for Retirees" option, then click "Continue."
6. Once you get to the "Payment History for Retirees" screen, click "Submit."
7. Once you click "Submit," a summary of your pension payment history will pop-up.

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## How Pensioners and Future Pensioners Can Access...

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8. You will then see your gross payment amounts, withholding deductions, medical deductions (this column is for deductions made to satisfy your welfare premium), and net amounts.
9. You may choose to view this document online, print it, and/or download and save it as a PDF file.

If you are vested and eligible to receive a pension at retirement but have not yet retired, you have the ability to estimate your pension's future worth. You may do so by following the below instructions:

1. Go to **www.nycCBF.org**.
2. Click the "Member Log-In"

button located on the top right corner of the screen.

3. Log into the website using your Username (UBC #) and Password. (If you are having trouble logging into your account, you can contact our Member Services Department for assistance.)
4. Check the box agreeing to the terms of the website and click "Continue."
5. After you agree to the website terms, select the "View Pension Estimates" option, then click "Continue."
6. Once you are on the "View Pension Estimates" screen, enter your desired date of

retirement in the "Effective Date of Retirement" field and click "Submit."

7. Upon completion, the system will generate a letter that provides your estimated pension worth at the date of retirement you selected. You may then choose to view the document online, print it, and/or download and save it as a PDF file.

**If you follow the above directions and are still unable to access your desired pension information, please contact our Member Services Department at (800) 529-FUND (3863) or assistance.**

## Tool Time

## Notes and Reminders

### **Women's Health and Cancer Rights Act ("WHCRA") ANNUAL NOTICE - 2017**

The NYCDCC Welfare Fund, in accordance with the Women's Health and Cancer Rights Act of 1998, provides benefits for mastectomy related services including all stages of reconstruction and surgery to achieve symmetry between the breasts, prostheses, and complications resulting from a mastectomy, including lymphedema. If you would like more information on these benefits, please contact us at (212) 366-7300 or (800) 529-FUND (3863).

### **Compliance and Ethics Program**

#### **Report Misconduct, Fraud, Waste, or Abuse**

The New York City District Council of Carpenters Benefit Funds ("Benefit Funds") strive to maintain the highest standards of ethics and conduct in all aspects of Funds operations.

As a tangible commitment to this ideal, the Board of Trustees has adopted and implemented a Compliance and Ethics Program ("CEP"). The CEP sets forth standards for the guidance of all Benefit Funds staff in the day-to-day business of administering benefits for all members.

#### **Reporting**

You can contact the Chief Compliance Officer of the Benefit Funds if you have a question or concern regarding the appropriateness or legality of a Benefit Funds' policy, procedure or transaction. All of us — Benefit Funds staff, the Trustees and Funds members - are responsible for ensuring that Funds assets are reserved to pay only for covered benefits and the reasonable costs of administering those benefits. We all share a duty to protect against violations of law and Benefit Funds rules. So, if you see or suspect something, say something.

Please report any matter that may constitute a breach of applicable laws, rules, regulations

or Benefit Funds' policies to Allan Bahn, the Benefit Funds Chief Compliance Officer. You can provide your name or remain anonymous. All information will be considered confidential. The Chief Compliance Officer can be contacted via:

#### **Mail:**

Allan Bahn,  
Chief Compliance Officer  
New York City District Council  
of Carpenters Benefit Funds

395 Hudson Street, 9th Floor  
New York, New York 10014

#### **Work Phone:**

(212) 366-7533

#### **Confidential Hotline:**

(646) 484-1665

#### **Email:**

ABahn@nycCBF.org  
complianceandethics@nycCBF.org

#### **Website:**

Visit **www.nycCBF.org** and click on the "Report a Compliance Issue" link located at the bottom of the screen.





## Statement of Nondiscrimination

The New York City District Council of Carpenters Welfare Fund (the “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.

\*The New York City District Council of Carpenters Welfare Fund cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo.

\*The New York City District Council of Carpenters Welfare Fund

遵守適用的聯邦民權法律規定，不因種族、膚色、民族血統、年齡、殘障或性別而歧視任何人。

## New York City District Council of Carpenters Benefit Funds

### CONTACT INFORMATION:

New York City District Council of Carpenters Benefit Funds  
395 Hudson Street, 9th Floor  
New York, NY 10014

Member Services Call Center: (800) 529-FUND (3863) or (212) 366-7373

[www.nyccbf.org](http://www.nyccbf.org)  
[www.facebook.com/NYCDCCBF](https://www.facebook.com/NYCDCCBF)  
[www.twitter.com/NYCDCCBF](https://www.twitter.com/NYCDCCBF)

\*The information in this newsletter is intended to highlight certain information about your benefits and the Benefit Funds. **Benefits Toolbox** is not a substitute for the official Plan documents which set forth the requirements and conditions for benefits. In the event of an inconsistency or a conflict between **Benefits Toolbox** and the Plan documents, the Plan documents shall control.