

AUTOMOTIVE INDUSTRIES WELFARE FUND



4160 DUBLIN BOULEVARD SUITE 400 | DUBLIN, CA 94568-7756
TELEPHONE (800) 635-3105 | FAX (925) 588-7121
www.aitrustfunds.org

Date: November 21, 2018

To: Participants in the Automotive Industries Welfare Fund Plan (including COBRA Participants) who are enrolled in one of the Indemnity Plans (A, B or C)

From: Board of Trustees, Automotive Industries Welfare Fund Plan

This Participant Notice provides information that is **VERY IMPORTANT** to you and your dependents. Please take the time to read it carefully.

HEALTH DYNAMICS PROGRAM AND DEDUCTIBLE CHANGES EFFECTIVE JANUARY 1, 2019

Depending on your Plan, for services received on or after January 1, 2019, your deductible will change as outlined in the chart below. However, if **you (and your eligible spouse or domestic partner if applicable)** get a **FREE** comprehensive health exam through the Health Dynamics Program, you may be eligible to reduce your deductible. This health evaluation is **absolutely free** and will provide you with a health profile that identifies any potential health concerns, assesses your nutritional status and fitness and helps keep you on track to maintain optimal health.

Plan Option	2019 Calendar Year Deductible	2019 Decreased Deductible for participation in Health Dynamics Program
Plan A	\$400/individual or \$800/family	\$200/individual, \$400/family
Plan B	\$1,000/individual or \$3,000/family	\$500/individual, \$1,500/family
Plan C	\$1,000/individual, \$2,000/family	<u>No change</u> - \$1,000/individual, \$2,000/family

This 2019 deductible will become effective for services on or after January 1, 2019. However, Plan A and B Participants and spouses/domestic partners who have previously completed a Mobile Unit or Health Dynamics Program exam in 2017 or 2018, or who complete their comprehensive health exam through the Health Dynamics Program by January 31, 2019 may reduce their 2019 deductible. **Those Plan A and B Participants who have not completed their Health Dynamics exam by the January 31, 2019 deadline will not have the opportunity to reduce their deductible for 2019.**

As a reminder, the following rules apply (Plans A and B only):

- Once you have completed the Health Dynamics exam and all documentation demonstrating the satisfaction of this requirement has been received by the Trust Fund Office, your deductible will be decreased as noted above.
- This change will become effective for claims submitted on or after the first of the second month following the Fund Office's receipt of this documentation. For example, if you complete your Health Dynamics exam and the documentation is received by the Trust Fund Office in January 2019, your deductible will be reduced effective for claims submitted on or after March 1, 2019.
- Any cost-sharing credited to your deductible for claims submitted prior to this effective date of the change will not be reimbursed if you will be found to have already surpassed the deductible as of the effective date of the change.

The Health Dynamics health evaluation is **absolutely free** and will provide you with a health profile that identifies any potential health concerns, and assesses your nutritional status and fitness and helps keep you on track to maintain optimal health. While the increased deductible does not apply to Participants in Plan C, **Plan C participants may still obtain this free health evaluation** to receive this valuable and personalized health information.

The exam typically takes about two hours to complete. It begins with a questionnaire and includes a physician-directed physical, a lab panel that is likely more extensive than you would routinely obtain from your primary-care physician and tests that evaluate your heart, lungs and potential cancer risks. Nutritional intake, cardiovascular fitness, strength, flexibility, body composition and stress inventory are also tested. After completing your exam, you may participate in a personal-consultation session with a health educator to review the results. Your educator will make recommendations and suggestions specific to your unique health, fitness and nutritional status. Knowing what you need to do is essential to improving or maintaining your health.

Find a participating provider in your area by calling Health Dynamics at 866-443-0164, option 1.

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Please keep this important notice with your Plan Document/Summary Plan Description (SPD) for easy reference to all Plan provisions. If you have any questions, you may call the AI Trust Fund Office at (800) 635-3105.

Receipt of this notice does not constitute a determination of your eligibility. If you wish to verify eligibility, or if you have any questions regarding this Plan change, please contact the Trust Fund Office.

In accordance with ERISA reporting requirements, this document serves as your Summary of Material Modifications to the Plan.

NOTICE REGARDING WELLNESS PROGRAM

The Health Dynamics Program is a voluntary wellness program available to all participants and eligible spouses in the Automotive Industries Welfare Fund. The program is administered according to federal rules permitting employer-sponsored wellness programs that seek to improve employee health or prevent disease, including the Americans with Disabilities Act of 1990, the Genetic Information Nondiscrimination Act of 2008, and the Health Insurance Portability and Accountability Act, as applicable, among others. If you choose to participate in the wellness program you will be asked to complete a voluntary questionnaire that asks a series of questions about your health-related activities and behaviors and whether you have or had certain medical conditions (e.g., cancer, diabetes, or heart disease). You will also be asked to complete a biometric screening, which will include a blood test that is likely more extensive than you would routinely obtain in order to determine certain health risks. You are not required to complete the questionnaire or to participate in the blood test or other medical examinations.

However, employees who choose to participate in the wellness program will receive an incentive of a lower annual deductible. Although you are not required to complete the questionnaire or participate in the biometric screening, only employees who do so will receive lower deductible.

The information from your questionnaire and the results from your biometric screening will be used to provide you with information to help you understand your current health and potential risks. You also are encouraged to share your results or concerns with your own doctor.

Protections from Disclosure of Medical Information

We are required by law to maintain the privacy and security of your personally identifiable health information. Although the wellness program and Automotive Industries Welfare Fund may use aggregate information it collects to design a program based on identified health risks in the workplace, the Health Dynamics Program will never disclose any of your personal information either publicly, to the Fund or to the employer, except as necessary to respond to a request from you for a reasonable accommodation needed to participate in the wellness program, or as expressly permitted by law. Medical information that personally identifies you that is provided in connection with the wellness program will not be provided to the Fund, your supervisors or managers and may never be used to make decisions regarding your employment.

Your health information will not be sold, exchanged, transferred, or otherwise disclosed except to the extent permitted by law to carry out specific activities related to the wellness program, and you will not be asked or required to waive the confidentiality of your health information as a condition of participating in the wellness program or receiving an incentive. Anyone who receives your information for purposes of providing you services as part of the wellness program will abide by the same confidentiality requirements. The only individual(s) who will receive your personally identifiable health information is the Health Dynamics health educator in order to provide you with services under the wellness program.

In addition, all medical information obtained through the wellness program will be maintained separate from your Fund records and personnel records, information stored electronically will be encrypted, and no information you provide as part of the wellness program will be used in making any Fund benefit decision or employment decision. Appropriate precautions will be taken to avoid any data breach, and in the event a data breach occurs involving information you provide in connection with the wellness program, we will notify you immediately.

You may not be discriminated against in employment because of the medical information you provide as part of participating in the wellness program, nor may you be subjected to retaliation if you choose not to participate.

If you have questions or concerns regarding this notice, or about protections against discrimination and retaliation, please contact the Fund Office at (800) 635-3105.