



SEIU MICHIGAN HEALTH AND WELFARE FUND

UNION TRUSTEES:
Max Gerboc, Secretary
Ken Munz

EMPLOYER TRUSTEES:
John Aska, Chairman
John Tamas

May 2024

TO: ALL PARTICIPANTS OF THE SEIU MICHIGAN HEALTH AND WELFARE FUND

RE: ANNUAL NOTICES

Dear Plan Participants:

We have attached the following Important Notices and Annual Reports for your review. These Notices and Reports are required to be mailed to each Plan Participant annually as required by the Employee Retirement Income Security Act of 1974 (ERISA):

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| • 2023 Summary Annual Report | Pages 2 – 3 |
| • Notice of Availability of Privacy Practices | Page 4 |
| • Preventive Services Notice | Page 4 |
| • Creditable Coverage Notice | Page 5 – 6 |
| • Notice on Women's Health and Cancer Rights / Newborns' And Mothers' Health Protection | Page 7 |
| • Social Security Number Privacy Policy | Page 7 – 8 |

If you (and/or your dependents) have Medicare or will become eligible for Medicare in the next 12 months, a Federal law gives you more choices about your prescription drug coverage. Please see pages 5-6 for more details.

If you have any questions, please contact the Fund Office.

Sincerely,

Board of Trustees
SEIU Michigan Health and Welfare Fund

SUMMARY ANNUAL REPORT FOR 2023 PLAN YEAR

This is a summary of the annual report of the SEIU Michigan Health and Welfare Fund, Employer Identification Number 38-6061083, Plan No. 501, for the period July 1, 2022 through June 30, 2023. The annual report has been filed with the Employee Benefits Security Administration, U. S. Department of Labor, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

The Board of Trustees has committed itself to pay certain medical, surgical, prescription, dental and other health care claims incurred under the terms of the Plan.

INSURANCE INFORMATION

The Plan had contracts with United Omaha Life Insurance Company (for short-term disability, life insurance and accidental death and dismemberment benefits), Symetra Life Insurance Company (for stop-loss) and Eye Med (for vision benefits) to pay claims incurred under the terms of the Plan. The total premiums paid for the Plan year ending June 30, 2023 were \$173,836, \$263,914 and \$24,272, respectively.

BASIC FINANCIAL STATEMENT

The value of Plan assets, after subtracting liabilities of the Plan, was \$9,133,620 as of June 30, 2023, compared to \$10,847,146 as of July 1, 2022. During the Plan year, the Plan experienced a decrease in its net assets of \$1,713,526. This decrease includes unrealized appreciation or depreciation in the value of Plan assets; that is, the difference between the value of the Plan assets at the end of the year and the value of the assets at the beginning of the year or the cost of assets acquired during the year. During the current Plan year, the Plan had total income of \$4,567,261, including employer contributions of \$3,489,908, employee contributions of \$6,681, realized gains (losses) from the sale of assets of (\$30,046) and earnings from investments of \$1,100,718.

Plan expenses were \$6,280,787. These expenses included \$733,382 in administrative expenses and \$5,547,405 in benefits paid to or on behalf of participants and beneficiaries.

YOUR RIGHTS TO ADDITIONAL INFORMATION

You have the right to receive a copy of the full annual report or any part thereof, on request. The items listed below are included in that report:

1. An accountant's report;
2. Financial information and information on payments to service providers;
3. Assets held for investment;
4. Insurance information, including sales commissions paid by insurance carriers.

To obtain a copy of the full annual report, or any part thereof, write or call the Board of Trustees, SEIU Michigan Health and Welfare Fund, 30700 Telegraph Road, Suite 2400, Bingham Farms, MI 48025 or (248) 645-6550. The charge to cover copying costs will be \$9.75 for the full annual report or twenty-five cents per page for any part thereof.

You also have the right to receive from the Plan Administrator, on request and at no charge, a statement of the assets and liabilities of the Plan and accompanying notes, or a statement of income and expenses of the Plan

and accompanying notes, or both. If you request a copy of the full annual report from the Plan Administrator, these two statements and accompanying notes will be included as part of that report. The charge to cover copying costs given above does not include a charge for the copying of these portions of the report, because these portions are furnished without charge.

You also have the legally protected right to examine the annual report at the main office of the Plan (Board of Trustees, SEIU Michigan Health and Welfare Fund, 30700 Telegraph Road, Suite 2400, Bingham Farms, Michigan, 48025), at any other location where the report is available for examination and at the U.S. Department of Labor in Washington, D.C., or to obtain a copy from the U.S. Department of Labor upon payment of copying costs. Requests to the Department should be addressed to: Public Disclosure Room, Room N-1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.

Paperwork Reduction Act Statement

According to the Paperwork Reduction Act of 1995 (Pub. L. 104-13) (PRA), no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The Department notes that a Federal agency cannot conduct or sponsor a collection of information unless it is approved by OMB under the PRA, and displays a currently valid OMB control number, and the public is not required to respond to a collection of information unless it displays a currently valid OMB control number. See 44 U.S.C. 3507. Also, notwithstanding any other provisions of law, no person shall be subject to penalty for failing to comply with a collection of information if the collection of information does not display a currently valid OMB control number. See 44 U.S.C. 3512.

The public reporting burden for this collection of information is estimated to average less than one minute per notice (approximately 3 hours and 11 minutes per plan). Interested parties are encouraged to send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Office of the Chief Information Officer, Attention: Departmental Clearance Officer, 200 Constitution Avenue, N.W., Room N-1301, Washington, DC 20210 or email DOL_PRA_PUBLIC@dol.gov and reference the OMB Control Number 1210-0040.

OMB Control Number 1210-0040 (expires 03/31/2026)

NOTICE OF AVAILABILITY OF HIPAA PRIVACY POLICY

This Notice is intended to confirm that the Fund complies with the Privacy Regulations issued under the Health Insurance Portability and Accountability Act (HIPAA). The law restricts the use and disclosure of the non-public “protected health information” of the Participant and the Participant’s covered dependents, if any, with regard to benefits provided under the Fund’s group health plan. That protected health information can generally be disclosed only by the Fund, its vendors and the Participant’s/dependent’s health care provider(s) only if necessary for the payment of claims, treatment of illness or other health care operations, including the administration of health care benefits, as permitted by law and the HIPAA Privacy Regulations.

For a complete copy of the Fund’s Notice of Privacy Policy, write or call the Fund Office at the address and telephone number listed below:

SEIU Michigan Health and Welfare Fund
30700 Telegraph Road, Suite 2400
Bingham Farms, Michigan 48025

Telephone (248) 645-6550
FAX (248) 645-6557

FREE PREVENTIVE SERVICES AVAILABLE TO PLAN PARTICIPANTS

Please do not forget to take advantage of the **free “preventive” services** you are entitled to through the Plan. For example, each calendar year from January 1 to December 31, you can have the following medical services at no charge:

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|---------------------------------------|--|
| • Eye Med | Free Eye Exam |
| • A.D.N. Administrators | Free Dental Exam, Cleaning, and X-Rays |
| • Aetna, Signature Administrators PPO | Free Annual Physical Exam |
| • Aetna, Signature Administrators PPO | Free Mammogram and Pap smear |
| • Aetna, Signature Administrators PPO | Free Immunizations |
| • Aetna, Signature Administrators PPO | Free Routine Hearing Exam |

We cannot make your appointment for you, but we encourage you to pick up the phone and call your doctor. Again, these benefits are covered under **“preventive”** care. **Your deductible does not apply.** Please check your [Insurance Benefit Guide](#) for more details.

If you need assistance finding a doctor near you, please call the Fund office at 248-645-6550.

Important Notice from SEIU Michigan Health and Welfare Fund about Your Prescription Drug Coverage and Medicare

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with SEIU Michigan Health and Welfare Fund (the “Plan”) and about your options under Medicare’s prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

There are two important things you need to know about your current coverage and Medicare’s prescription drug coverage:

- 1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.**
- 2. SEIU Michigan Health and Welfare Fund has determined that the prescription drug coverage provided by the Fund’s plan is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage. Because your existing coverage is Creditable Coverage, you can keep this coverage and you will not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.**

When Can You Join A Medicare Drug Plan?

You can join a Medicare drug plan when you first become eligible for Medicare and each year from October 15th to December 7th.

However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two (2) month Special Enrollment Period (SEP) to join a Medicare drug plan.

What Happens To Your Current Coverage If You Decide to Join A Medicare Drug Plan?

If you decide to join a Medicare drug plan, your current SEIU Michigan Health and Welfare Fund coverage will **not** be affected. If you decide to join a Medicare Part D drug plan, you can keep your current coverage with the Fund and the Fund will coordinate with the Medicare Part D drug plan.

If you do decide to join a Medicare drug plan and drop your current SEIU Michigan Health and Welfare Fund coverage, be aware that you and your dependents will be able to get this coverage back, but not until the next open enrollment in November, for coverage commencing in January.

When Will You Pay A Higher Premium (Penalty) To Join A Medicare Drug Plan?

You should also know that if you drop or lose your current coverage with SEIU Michigan Health and Welfare Fund and don't join a Medicare drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later.

If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up by at least 1% of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go nineteen months without creditable coverage, your premium may consistently be at least 19% higher than the Medicare base beneficiary premium. You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

For More Information about this Notice or Your Current Prescription Drug Coverage...

Contact the department listed below for further information. **NOTE:** You'll get this notice each year. You will also get it before the next period you can join a Medicare drug plan, and if this coverage through SEIU Michigan Health and Welfare Fund changes. You also may request a copy of this notice at any time.

For More Information about Your Options under Medicare Prescription Drug Coverage...

More detailed information about Medicare plans that offer prescription drug coverage is in the *Medicare & You* handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare drug plans.

For more information about Medicare prescription drug coverage:

- Visit www.medicare.gov
- Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the *Medicare & You* handbook for their telephone number) for personalized help.
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at www.socialsecurity.gov or call them at 1-800-772-1213 (TTY 1-800-325-0778).

Remember: Keep this Creditable Coverage notice. If you decide to join one of the Medicare drug plans, you may be required to provide a copy of this notice when you join to show whether or not you have maintained creditable coverage and, therefore, whether or not you are required to pay a higher premium (a penalty).

Date: May 2024

Name of Company/Sender: SEIU Michigan Health and Welfare Fund

Contact--Position/Office: c/o TIC International Corporation, Benefits Office

Address: 30700 Telegraph Road, Suite 2400

Bingham Farms, MI 48025

Phone Number: 248-645-6550

**WOMEN'S HEALTH AND CANCER RIGHTS/NEWBORNS' AND MOTHERS' HEALTH PROTECTION
NOTICE**

Pursuant to the **Women's Health and Cancer Rights Act of 1998**, the Fund provides participants and beneficiaries receiving mastectomy benefits who elect mastectomy related breast reconstruction with benefit coverage for the following:

- **Reconstruction of the breast on which the mastectomy has been performed.**
- **Surgery and reconstruction of the other breast to produce a symmetrical appearance; and**
- **Prostheses and physical complications of all stages of mastectomy, including lymph edemas, in a manner determined in consultation with the attending physician and the patient.**

Such coverage may be subject to annual deductibles and coinsurance provisions, consistent with those established for other benefits under the plan or coverage.

Also, the **Newborns' and Mothers' Health Protection Act of 1996 (NMHPA)** generally prohibits group health plans from limiting hospital stays for childbirth to less than 48 hours for normal deliveries and 96 hours for cesarean section deliveries for a mother and her newborn child, except with consent of the mother and approval of her physician, or from requiring that a provider obtain authorization from the Plan for prescribing a length of stay not in excess of the above.

If you have any questions regarding this notice, please do not hesitate to contact the Fund Office.

**SEIU MICHIGAN HEALTH AND WELFARE FUND
SOCIAL SECURITY NUMBER PRIVACY POLICY**

The SEIU Michigan Health and Welfare Fund is required by Michigan law to make sure that your Social Security number and the Social Security numbers of your family members are kept private as set forth in that law.

The law permits the Fund to use Social Security numbers to verify your identity and the identities of your family members and to perform other functions related to providing health and welfare benefits under the Fund's Plan. Therefore, the Fund will continue to require Social Security numbers on application and enrollment forms. When your employer pays contributions on your behalf, the law permits your employer to provide the Fund with your Social Security number so that the Fund may determine your eligibility status. The law also permits the Fund to use Social Security numbers when authorized or required to do so by state or federal statute, by court order, or pursuant to legal discovery or process. The Fund will ensure to the extent practicable the confidentiality of those Social Security numbers.

In order to protect your privacy and in compliance with the law, the Fund's third-party administrator, TIC International Corporation ("TIC") and other service providers will use alternate identification numbers wherever feasible, including on benefits cards and explanations of benefits. TIC and other service providers do not print Social Security numbers on the exterior of any envelope or package sent through the mail or in a manner that can be seen from the exterior of such envelope or package. The Fund's website is secure and permits participants to access information through use of a password other than their Social Security number.

Only TIC's employees and agents and employees and agents of the Fund's other service providers may access the Social Security numbers of Fund participants and family members and only as necessary to provide services to the Fund. TIC uses practical means to limit access to written and electronic records in its possession that contain Social Security numbers to those employees and agents whose job duties require such access, such as securing areas where Social Security number information is located when not in use and requiring the use of passwords for access to electronic files containing Social Security numbers. TIC disposes of documents that contain Social Security numbers that the Fund is not actively using or is not otherwise obligated to retain by shredding and other processes that protect the confidentiality of the Social Security numbers. TIC's employees and agents must not disclose Social Security numbers by publicly displaying more than four sequential digits of a Social Security number or in any other manner prohibited by law.

The Fund notifies all service providers that they must ensure, to the extent practicable, the confidentiality of all Social Security numbers related to Fund participants and their families as required by law. The Fund may take action regarding service providers who fail to protect adequately the confidentiality of those Social Security numbers, including the termination of contracts.