



ANNOUNCING AN IMPORTANT CLARIFICATION TO RETIREE DENTAL COVERAGE

Date: August 2022

To: Non-Medicare-Eligible Retired Employees, Medicare-Eligible Retired Employees, and Their Eligible Dependents Participating in the Wisconsin Laborers' Health Fund

From: The Board of Trustees

As the Board of Trustees of the Wisconsin Laborers' Health Fund (the Fund or Plan), we are providing this announcement to clarify the Plan's retiree dental coverage for preventive and diagnostic services. Please file this announcement with your Plan-related documents for easy reference.

Cost Sharing for Delta Dental Premier and Out-of-Network Preventive and Diagnostic Dental Services

If you are enrolled in Delta Dental Premier coverage, your cost sharing for preventive and diagnostic dental services is 20% coinsurance whether you use a Delta Dental Premier network dentist or a non-network dentist.

The chart below clarifies the Schedule of Benefits dental benefit section of your Summary Plan Description:

Retiree Plan (Non-Medicare-Eligible Retirees and Dependents)

Dental Benefit	What You/Plan Pays (Covered Expenses are paid based on the Allowable Charge)
Coinsurance • Preventive and Diagnostic - Delta PPO - Delta Premier (or any other dentist)	You pay 0%, no deductible 20%, no deductible

Medicare-Eligible Retiree Plan (Medicare-Eligible Retirees and Dependents)

Dental Benefit	What You/Plan Pays (Covered Expenses are paid based on the Allowable Charge)
Coinsurance • Preventive and Diagnostic - Delta PPO - Delta Premier (or any other dentist)	You pay 0%, no deductible 20%, no deductible

Statement of Grandfathered Status

The Board of Trustees believes that the Plan is a “grandfathered health plan” under the Affordable Care Act, which means that our Plan existed when the health care reform law was signed on March 23, 2010, and that we can preserve certain basic health coverage that was already in effect when the law was passed. However, as with all grandfathered health plans, we must still comply with certain consumer protections in the Affordable Care Act (for example, the elimination of the Plan’s lifetime maximums). Consequently, because this Plan is “grandfathered” and not required to adopt other changes required by the Affordable Care Act, this Plan may not include certain consumer protections of the Affordable Care Act that apply to other plans.

Contact the Fund 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.

Questions?

If you would like more information about Plan eligibility or the Fund’s health benefits in general, contact the Fund Office at the address and telephone number shown at the top of this announcement. For Delta Dental benefits, please call 800-236-3712 or visit www.deltadentalwi.com