



# OE3 Trust Funds

Health. Security. Service.

Operating Engineers Trust Funds  
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TO: PENSIONED OPERATING ENGINEERS HEALTH & WELFARE TRUST FUND

RE: SUMMARY PLAN DESCRIPTION AND SUMMARY OF BENEFITS

Welcome to the Pensioned Operating Engineers Health & Welfare Trust Fund. This letter and the enclosed material will introduce you to the Plan benefits for Retirees. From time to time, the Trust Fund Office may wish to inform you of changes in the Plan or to obtain information related to your benefits under the Plan or concerning administration of the Plan. **It is YOUR responsibility to notify the Trust Fund Office, in writing, of any change in address.** Always include your social security number on all correspondence with the Trust Fund Office.

The enclosed material contains important information about your Plan coverage and benefits. Please read this material carefully and save it for future reference.

Please consider your Plan selection carefully. The selection you make will remain in effect for you and your eligible family members for twelve months. Once each year you have the opportunity to change your Medical coverage, however you must remain in the plan you select for a minimum of 12 months unless you choose an HMO and later move out of the HMO plan's service area. Any change in plans will be effective on the first day of the second month following the date the enrollment form is received by the Trust Fund Office.

Enclosed you will find the following information:

1. Pensioned Operating Engineers Health & Welfare Trust Fund Summary Plan Description (SPD). This booklet describes the benefits provided for you and your dependents by the Trust Fund effective 2015.
2. Pensioned Operating Engineers Health & Welfare Trust Fund Comparison of Medical Benefits – A chart comparing the medical benefits of the plans for medicare and non-medicare participants.
3. Privacy Rule of the HIPAA. Information on Privacy Rules.
4. Return Pre-Paid Envelope.

## 5. Notice of Creditable Prescription Drug Coverage. Important Information about the Medicare Prescription Drug Program

- Medical Plan Identification Card. You will receive medical identification card(s) directly from Blue Cross if you are enrolled in the Comprehensive Medical Plan, Identification cards should be used when obtaining medical services. If you are enrolled in Kaiser, Health Net or Pacificare, you will receive medical identification card(s) directly from these providers. **Possession and use of these cards does not guarantee eligibility or payment.**
- OPTUMRx materials and Prescription Identification Card. You will receive pharmaceutical identification card(s) and a OPTUMRx booklet mailed directly from OPTUMRx if you are enrolled in the Comprehensive Medical Plan. Identification cards should be used when obtaining pharmaceutical services. Kaiser participants are to utilize Kaiser pharmacies, Health Net participants are to utilize participating Health Net pharmacies and Pacificare participants are to utilize participating Pacificare pharmacies. **Possession and use of these cards does not guarantee eligibility or payment. OPTUMRx- Prescription Drug Benefit Program, Effective: July 1, 2013. Contact OPTUMRx at (855) 672 3644 or (855) OPA ENGI for benefit information. The websites [www.opturnrx.com](http://www.opturnrx.com) and [www.oe3trustfunds.org](http://www.oe3trustfunds.org) resource for information about all Health and Welfare Benefits and communication about the OPTUMRx transition will be posted there as well.**
- Vision Service Plan (VSP) Summary Sheet. Describes Eye Care services available from Vision Service Plan. Contact VSP at (800) 877-7195 for benefit information or a listing of Member Doctors in your area. *Please Note: Excludes POE Schedule II Members.*

- Delta Dental Benefit Highlight and Dental Plan Identification Card. You will receive dental plan identification card(s) mailed directly from Delta Dental if you are enrolled into the Plan. Identification cards should be used when obtaining services at participating dental providers. If you are enrolled in Hawaii Dental Service (HOS) or Safeguard, identification cards will be mailed to you by these providers. *Possession and use of these cards does not guarantee eligibility or payment.*

Sincerely,

Associated Third Party Administrators  
on behalf of the Board of Trustees