
FOR YOUR BENEFIT

NEWSLETTER OF THE LOCAL 295 IBT EMPLOYER GROUP BENEFIT FUNDS
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What's Inside This Edition of "For Your Benefit" Newsletter

Women's Health and Cancer Rights Act - Front Page

Continuation of Care Act - Page 2

The Importance of Updating Your Contact Information - Page 2

Wellness and You – Page 3

Anthem – Mt. Sinai Negotiations Update - Page 4

THE WOMEN'S HEALTH AND CANCER RIGHTS ACT OF 1998 NOTICE

YOUR RIGHTS AFTER A MASTECTOMY - If you have had a mastectomy or expect to have one, you may be entitled to special rights under the Women's Health and Cancer Rights Act of 1998 (WHCRA).

A federal law known as the Women's Health and Cancer Rights Act of 1998 (WHCRA) requires group health plans and insurance companies that provide coverage for mastectomies to provide certain mastectomy related benefits or services to persons covered by the Welfare Fund. This Plan has historically provided the benefits required under the WHCRA and continues to make these benefits available to eligible persons.

Coverage for these benefits or services will be provided in a manner determined in consultation with the eligible person's attending physician. If you are eligible in the Plan and currently receiving, or in the future receive benefits under this Plan in connection with a mastectomy, you are entitled to coverage for the benefits and services described above in the event that you elect reconstruction of the affected breast.

Eligible dependents are also entitled to coverage for these benefits or services on the same terms. Coverage for the mastectomy-related services or benefits required under the WHCRA will be subject to the same deductibles and coinsurance or co-payment provisions, if any, that apply to any other medical or surgical benefits provided by the Welfare Fund.



Questions? Our Fund Office is available Monday through Friday during normal business hours to assist you. Contact P: 1.212.308.4200, F: 1.212.308.4545 or Toll Free at 1.888.728.2782 and ask to speak to a Welfare or Pension Representative

CONTINUATION OF CARE ACT

The Continuation of Care Act allows members who are in the middle of on-going courses of treatment to temporarily continue seeing their current in-network doctor or in-network provider if that provider is in the process of leaving the insurance network or if the member's insurance coverage changes.

Examples of conditions and situations include: if you are receiving ongoing care for cancer, have a serious or chronic and/or complex condition, are pregnant, are scheduled for an urgent surgery, or inactive mental health and substance abuse treatment, or have a terminal illness, you may be eligible to continue care with your current provider for a limited period of time (i.e. potentially up to 90 days) while you transition to a new in-network provider.

Please note that Continuity of Care is not provided automatically and it must be requested. Approval of Continuity of Care depends on your specific situation and the relevant plan rules.

Your provider will need to reach out to Anthem customer service center with additional questions, to help determine your Continuity of Care approval, and to minimize any possible disruption to your care.

THE IMPORTANCE OF UPDATING YOUR CONTACT INFORMATION

Remember to update your contact information with the Fund.



Have you moved recently? Do you have a new cell or home phone number?

Did you change your email address? Please be certain to update your physical address at your earliest convenience. Any changes to your phone numbers and/or email addresses should be updated, too. Notifying the Fund will ensure that if you are receiving pension checks that will you continue to do

so in a seamless manner after your move. It will also keep you aware of any important and relevant benefit information. We want to keep you informed!



Was there a new addition to your family? We realize that it's a very exciting time in your life and we want to be sure that your whole family receives all the services and benefit information that it is entitled to so please be certain that you update your dependent information at your earliest convenience after a child is born. This will help us help you to keep them happy and healthy!



Have you had a recent divorce? Please let us know as soon as you can if you're no longer married (or about to be divorced). This is because in the event that your ex-spouse receives benefits as a result of your failure to notify the Fund when they were no longer eligible, you and your ex-spouse will be liable to repay all amounts paid by the Fund.

WELLNESS AND YOU

10 MOST COMMON AND COSTLY CHRONIC HEALTH CARE CONDITIONS,
PROMOTING HEALTHY LIVING

The International Foundation of Employee Benefit Funds ("IF") is an organization comprised of Fund Administrators, Fund Professionals and Trustees of Taft-Hartley Multiemployer Funds. Both the Local 295 IBT Employer Group Welfare Fund and Pension Fund belong to this association. Recently the IF conducted a survey and determined what the *10 most common and costly chronic health care conditions were that affected Fund participants*. Here is the list of the results of that survey. Some are no surprise at all but a few of the results are unexpected.

-  The # 1 condition was heart disease and stroke. While this is completely expected what many people do not realize is that heart disease affects women just as much as it affects men.
-  2. *Diabetes*- Readers of this newsletter know that unfortunately this disease may lead to blindness, kidney disease, amputations of toes and legs and heart disease.
-  3. *Arthritis* - This disease affects nearly 25% of Americans. There are now effective drug therapies that can ease the pain. Please talk to your doctor about them.
-  4. *Alcoholism* - Alcohol related deaths amount to nearly 100,000 a year in the USA. Alcoholism is a disease just like any other disease. Help is available through the Fund's relationship with Teamster Center Services ("TCS") at 212.235.5003. Reach out to them. They have helped members of the Fund for decades and they will be able to help you.
-  5. *Cancer* - Although it doesn't seem like it, this is better news than what it would have been ten years ago. It would have probably topped the list then.
-  6. *Obesity* - People who are morbidly obese can suffer from all types of health conditions. Getting down to your recommended weight is certainly not easy but if you are obese, it is the single best thing that you can do.
-  7. *Alzheimer's* Anyone who has a loved one who suffers from this disease knows how truly awful it is. While at present there is no effective treatment, research continues to give us all hope. If you have a loved one suffering from this disease, you know what a toll it takes on other family members. Reach out to TCS for help.
-  8. *Smoking* - Smoking costs Health Funds like our hundreds of billions of dollars a year. If you smoke, there is nothing you can do that is better for yourself than to quit. Talk to your doctor about the best way for you to do that.
-  9. *Tooth Decay*- Surprisingly, in addition to the expenses relating to the dental aspects of this, such as losing teeth or gum disease, it can also have a negative impact on your overall physical well-being. Annual visits to your dentist are highly recommended.
-  10. *Epilepsy* made the list at number 10 - Regular medical checkups and maintenance of your medications can ease its burden on you.

While there are some diseases that we have little control over, there are many more that we do. Healthy eating, healthy weight, quitting smoking, exercise and sleep and annual physical exams. Conditions caught early can be the difference between life and death. Remember, there is no copay for your annual physical. *Get started today for a healthier you.*

LOCAL 295 IBT EMPLOYER
GROUP PENSION TRUST FUND AND
EMPLOYER GROUP WELFARE FUND
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MOUNT SINAI HOSPITAL & DOCTORS CONTRACT UPDATE

Anthem – Mt. Sinai negotiations update:

We are pleased to share that Anthem Blue Cross and Blue Shield in New York has reached a new three-year agreement with Mount Sinai Hospital, restoring access to one of the region's leading health systems while supporting lower cost of care trends and long-term stability for the Local 295 IBT Employer Group Welfare Fund and its members.

What you need to know:

- New agreement through 2028 provides stability and reduces disruption risk
- Physicians are in-network effective January 1, 2026
- Facilities are in-network effective March 4, 2026
- All impacted claims since Mount Sinai went out-of-network will be processed as in-network

What this means for Local 295 & its Members:

- Members will continue to have access to high-quality care across the Mount Sinai system
- Less disruption due to retroactive claims processing
- Controls price increases and mitigates claims volatility
- Supports Anthem and the Local 295 IBT Employer Group Welfare Fund's goal of lowering healthcare costs