

BENEFITS TOOLBOX



A Publication of the New York City
District Council of Carpenters
Benefit Funds

BOARD OF TRUSTEES APPROVES FURTHER IMPROVEMENTS TO DENTAL PLAN

Effective July 1, 2024, the Board of Trustees of the NYCDCC Welfare Fund made the following improvements to the dental plan through Anthem BlueCross BlueShield (“Anthem”):

- The Annual Benefit Maximum for Active Participants/Dependents increased to \$4,000 (previously \$2,500).
- The Annual Benefit Maximum for Retired Participants/Dependents increased to \$3,000 (previously \$1,500).
- Coverage provided by Anthem BCBS under the “Dental Complete” network increased to 100% (previously 80% or 50% in certain instances). This brought the “Dental Complete” network in line with the “XPO” network.

These changes were made to provide eligible NYCDCC members and dependents better access and coverage across Anthem’s In-Network providers.

If you have any questions regarding these changes, please contact Anthem at 1 (844) 852-1553.



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CHARLES JOHNSON JR. MEMORIAL
SCHOLARSHIP APPLICATION INFO

Meeting Your Chronic Illness Needs with Case Management Provided by Independence Administrators

As an active or non-Medicare eligible participant of the NYCDCC Welfare Fund, you and your dependents who are diagnosed with a chronic illness are eligible for Medically Necessary Durable Medical Equipment (DME). This process may seem daunting, which is why Independence Administrators' (IA) staff features Registered Nurse Health Coaches, who provide free and confidential case management.

Examples of Durable Medical Equipment:

- Diabetic Supplies (Continuous Glucose Monitoring Meters/Finger Stick Meters & Lancets)
- Sling/Brace/Boot to support a broken limb
- C-Pap Machine & Equipment (Sleep Apnea Machine)
- Orthotics
- Breast Pumps

Durable Medical Equipment and Supplies Process:

1. Work with your healthcare provider to determine your medical situation and needed DME/supplies.
2. Call 1-888-234-2393; option 6 to speak with a Registered Nurse Health Coach.
3. Your Registered Nurse Health Coach will coordinate with you and your providers for needed services, including DME and supplies.
4. DME suppliers work with IA to ensure processes/medical policies are followed to obtain medically necessary equipment.

Note: The Preferred DME Supplier for IA is Edgepark.

More About Registered Nurse Health Coaches:

Registered Nurse Health Coaches at IA are available 24/7 to help you with the following:

- Provide you with education and resources to understand and manage your issue or concern.
- Coordinate with you and your providers for needed services such as:
 - Durable Medical Equipment (DME)
 - Supplies
 - Home Health Care
 - Nutrition
 - Transitions of care
- Work with you to help you achieve your health/healthcare goals
- Provide education on benefit, policy, and authorization process



MSK Direct: Breast Cancer Screening

According to our partners at Memorial Sloan Kettering Cancer Center (MSKCC), people of any gender can get breast cancer. 3 out of 4 women who are diagnosed with breast cancer have no family history of the disease and are not considered a high risk for developing it.

Get Screened

The type of screening you (or your dependents) may receive, and the screening schedule are based on the average risk of the person being screened. If you're at average risk:

- Starting at age 20, become familiar with how your breasts look and feel. Knowing your breasts will help you notice changes.
- Get a breast exam from your healthcare provider every year starting at age 25.
- Starting at age 40, have a mammogram or tomosynthesis (3D mammogram) every year.

For additional information regarding types of breast cancer, risk factors, treatment, and more, visit www.mskcc.org/cancer-care/types/breast.



The NYCDCC Welfare Fund partners with Memorial Sloan Kettering to offer MSK Direct, a program that gives you guided access to expert cancer care. They provide resources and support throughout your care experience. To learn more about breast cancer, screenings, and other cancer care related topics, visit the MSK Direct website for the NYCDCC Welfare Fund at www.mskcc.org/direct/nycdcc-welfare-fund. If you or a loved one are impacted by cancer and would like to discuss treatment options available at MSK, please call the dedicated MSK Direct phone line for the NYCDCC Welfare Fund at (833) 786-3368.



**Cancer care can't wait.
And you're already covered.**

If you have symptoms or have been diagnosed with cancer, please don't wait to connect with our experts. Memorial Sloan Kettering's world-class cancer care is in-network for NYCDCC Welfare Fund participants and their families.

Reach a cancer expert today through your dedicated MSK Direct number: **833-786-3368**.

**Always here.
Always will be.**



Memorial Sloan Kettering
Cancer Center

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ANNUAL REMINDER: “Breaks in Service” Can Impact Your Future Pension Benefits

Your service credit, pension calculation, and pension eligibility can be affected if your Covered Employment is interrupted before you have qualified for a vested benefit. The effect of such an interruption depends on whether the interruption is a “one-year break in service” or a “permanent break in service.” In addition, even if you are vested, a one-year break in service can disqualify you from being eligible for a Disability Pension.

One-Year Break in Service

You have a one-year break in service when you fail to earn at least one-quarter of a Vesting Credit (i.e., when you fail to work at least 300 hours) in a calendar year.

The following absences are not considered a break in service:

- Periods of qualified military service during which you are entitled to service credit under federal law.
- Absence from work for maternity or paternity reasons due to pregnancy, the birth of your child, placement of a child with you in connection with an adoption, or to care for a child immediately following birth or adoption. Under this provision, up to one-quarter of a Vesting Credit is granted (i) in the year such absence begins, if necessary, to prevent a one-year break in service in that year, or (2) in the year following the year the absence began.
- If you receive a Disability Pension, recover, and return to Covered Employment before the end of the third month following the last month for which you received a Disability Pension, a special rule may help prevent a break that would otherwise occur in the calendar year in which you return to Covered Employment. As long as you have at least 300 Hours of Service in the 12-consecutive-month period immediately following the date you returned from disability, you will not incur a one-year break in the calendar year of your return.
- Qualifying periods of absence of up to 12 weeks under the Family and Medical Leave Act (FMLA) will not constitute a break in service if you return to employment in the period required under the FMLA.

Unless one of the rules above applies, periods of disability will **NOT** prevent a break in service.

Remember, if you have a one-year break in service **before** becoming vested, you will no longer be an Active Participant. If you have a one-year break in service **after** becoming vested, you will also cease to be an Active Participant, but you will be a Deferred Vested Participant.

Repairing a One-Year Break in Service

A one-year break in service may be temporary and subject to repair. If you return to Covered Employment and earn at least 870 Hours of Service within any two consecutive calendar years before you have a “permanent break in service,” your previously earned Vesting Credits and Benefit Credits will be restored.

One-Year Break in Service Example:

Tanya started Covered Employment in February 2019 and became a Plan Participant on January 1, 2020, after working 870 hours in 2019. Tanya earned 3 Vesting Credits as of December 31, 2021. Tanya did not work at least 300 hours in 2022 which resulted in a one-year break in service as of December 31, 2022.

If Tanya returns to Covered Employment and earns 870 hours over a consecutive two-year period **before** she has a permanent break in service, she will again become a Plan Participant and recover her 3 Vesting Credits.

(continued on page 5)

Breaks in Service and Disability Pension

One of the requirements for a Disability Pension is that you must be an Active Participant on the date that your disability began. Assume that Carlos has 20 Vesting Credits and is age 50 as of December 31, 2021. Carlos leaves Covered Employment in 2022 for a new career in a different industry. Because Carlos did not work at least 300 hours in 2022, he had a one-year break in service as of December 31, 2022. Due to his one-year break in service, Carlos is no longer an Active Participant, but he is a Deferred Vested Participant. Unfortunately, Carlos becomes disabled in 2023. Carlos is not eligible to receive a Disability Pension from the Fund because he was not an Active Participant in 2023 when he became disabled. Carlos will have to wait until he reaches age 55 to apply for a Regular Pension before receiving benefits from the Fund. If Carlos had fewer than 15 Vesting Credits, he would have to wait until he reached age 65 to receive benefits.

Permanent Break in Service

If you have a permanent break in service, you will forfeit all of your Vesting Credits and Benefit Credits, and you will not be eligible to have that service restored.

If you have at least one Hour of Service on or after January 1, 1999, you have a permanent break in service if you have five or more consecutive one-year breaks in service and had earned fewer than five Vesting Credits before the break began.

When you have a permanent break in service, you permanently lose all Vesting Credits and Benefit Credits (and/or credit earned under the benefit formula) earned before the break and your participation is canceled. Your service credit cannot be restored even if you later become a Plan Participant.

Permanent Break in Service Example:

Phil started Covered Employment in March 2015 and became a Plan Participant on January 1, 2016 after working 870 hours in 2015. Phil has 2 Vesting Credits as of December 31, 2016. Phil did not work at least 300 hours in 2017 which resulted in a one-year break in service, and he did not return to Covered Employment in any year thereafter. Because Phil incurred five consecutive one-year breaks in service as of December 31, 2021, he permanently lost his 2 Vesting Credits. Phil's credit cannot be restored even if he becomes a Plan Participant again in the future.

If you have questions concerning breaks in service and how they may impact your pension, you can view the Summary Plan Description on the Benefit Funds' website at www.nyccbf.org/wp-content/uploads/2024/04/NYDCC-Pension-Fund-SPD_May-2024_Final-for-Website.pdf or you can call Member Services at (800) 529-FUND (3863).



INTERESTED IN WORKING FOR THE NYDCCBF?

To see our current job openings, scan the QR code or visit www.nyccbf.org/jobs



 **BENEFIT FUNDS** New York City District Council of Carpenters 395 Hudson Street, 9th Floor, New York, NY 10014

“I highly recommend the MEND Program for assistance in choosing the right treatment for your child, yourself, or a loved one.

MEND offers a unique blend of guidance and support to members and families who are struggling. We are so grateful for their help with finding behavioral health resources and navigating treatment options.”

-Anonymous NYCDCC Parent



**Members
Education &
Network for
Dependency**

The Members Education and Network for Dependency (“MEND”) Program gives NYCDCCBF participants and their dependents access to confidential treatment for substance abuse and mental health issues.

Why You Might Reach Out To MEND

- You or your dependents are experiencing grief after losing a loved one.
- You or your dependents are experiencing family or relationship issues.
- Your child or adolescent is experiencing behavioral issues, depression, or anxiety.
- You or your dependents are experiencing difficulties related to substance use.
- You or your dependents are having trouble with daily functioning such as poor sleep or concentration.

Please remember that there is no shame in asking for help, that MEND operates under strict confidentiality restrictions, and that we are here to help you and your family.

Contact Us:

The MEND program can be reached by phone at (212) 366-7590 or by email at MEND@nycCBF.org.

The program is located at 395 Hudson Street, New York, NY 10014, on the 5th floor.



New York City District Council of Carpenters

BENEFIT FUNDS



Scan to visit the MEND Program page on nycCBF.org

REMINDER: Failing to Promptly Notify the NYCDCC Welfare Fund of Your Divorce May Result in Out-of-Pocket Liability to the Fund and Loss of Coverage

Failing to report a divorce and to remove your spouse (and stepchildren, if applicable) from your health coverage through the NYCDCC Welfare Fund (the “Fund”) may cost you money and result in the loss of your health coverage if your former spouse incurs health claims after your divorce without electing and paying for COBRA.

How does a Divorce Affect your Former Spouse’s Coverage under the Fund? What should I do if I get divorced?

- Your former spouse is covered under the Fund until the last day of the month in which the judge signs your divorce judgment (the “Coverage Termination Date”).
- Immediately provide a copy of your divorce judgment to the Fund so that the Fund Office can terminate your former spouse’s eligibility for coverage.
- For your former spouse to qualify for COBRA coverage, you or your former spouse must notify the Fund of your divorce within 60 days of the date of divorce.
- If the Fund does not receive notice of the divorce within 60 days of the divorce:
 - Your former spouse will lose their COBRA rights,
 - You (along with your former spouse) will be personally liable for health claims paid by the Fund on behalf of your former spouse after their Coverage Termination Date; and
 - You and your covered family members will lose their health coverage until the Fund receives reimbursement of the claims paid for your ex-spouse after the Coverage Termination Date.
- If you are a Retiree, your monthly premium will be reduced to reflect the removal of your former spouse from your Retiree Coverage.

Example- Johnny Carpenter’s divorce judgment is signed by a judge on April 11, 2024, which means that his ex-spouse Linda’s coverage under the Fund ends on April 30, 2024. (If notice of the divorce is provided within 60 days, Linda can elect COBRA coverage for up to 36 months.) However, neither Johnny nor Linda notifies the Fund of their divorce. In August of 2024, Linda used her coverage for medical treatment. Because the Fund was not notified of the divorce, the Fund paid \$85,000 in medical claims on Linda’s behalf. In January of 2025, Johnny wishes to add his new spouse to his coverage, and he notifies the Fund of his divorce. The consequences of the late notice are as follows: (1) Johnny and Linda must pay the Fund \$85,000; (2) Linda no longer has the option to elect COBRA coverage; and (3) unless full reimbursement is made, Johnny and his other dependents will immediately lose their Welfare coverage.

Remember:

- Do not put yourself in a situation where you could owe the Fund money and lose your coverage and your family’s coverage because you delayed in notifying us of your divorce. Even if you think your former spouse has provided notice, you should notify the Fund of your divorce to avoid these risks.
- While monthly COBRA premiums are expensive, they are far less expensive than incurring personal liability for claims and losing your coverage.
- If a divorce judgment or settlement agreement requires you to pay the cost of your former spouse’s health coverage after the divorce, this does not mean that your spouse remains eligible for spousal coverage under the Fund (unless COBRA if timely elected) nor does it excuse you from your notice obligations. Instead, it means that you have to pay for your former spouse’s health care premiums (such as COBRA premiums).
- If you have questions about removing an ex-spouse from your coverage after a divorce, please contact our Member Services Department at (800) 529-FUND (3863).

Remember to Complete your Charles Johnson Jr. Memorial Scholarship Application for your College-Bound Child by December 15th

The NYCDCC Welfare Fund offers a Scholarship Program (known as the “Charles Johnson Jr. Memorial Scholarship”) for unmarried, dependent, biological, or adopted children of eligible members. The Scholarship Program pays up to \$3,500 for each year of a four-year academic program at an accredited college or university, or until your child receives a bachelor’s degree, whichever occurs first. The maximum amount of the award is \$14,000 per student. We currently award 25 scholarships each year.

If your child is a high school senior and considering college, and you would like to apply for a Charles Johnson Jr. Memorial Scholarship for your child, you must submit the application by December 15th. You can fill out an application by visiting the Scholarship section of our website at <https://nyccbf.com/member/scholarship-benefit/> and clicking the link to the International Scholarship and Tuition Services’ (“ISTS”) website. You may also visit the ISTS website directly at <https://aim.applyists.net/NYCDCC>.

Congratulations to all the 2024-2025 Charles Johnson Jr. Memorial Scholarship Winners!



**Follow the Benefit Funds
on Social Media!**



@NYCDCCBF





BENEFITS *FUN*

Can you find the 7 carpenters hidden in this picture?



WORD SCRAMBLE

Unscramble the words below to spell out NYCDCC Benefits.



D M L E C A I

— — — — —



G A R I N E H

— — — — —



E D L T A N

— — — — —



I S V N I O

— — — — —



A N V C O T A I

— — — — —



P O S N I E N

— — — — —

For answers to these puzzles, visit nycbf.org/lateseason24answers

IMPORTANT NOTICE: Medicare Enrollment Responsibilities, Retiree Welfare Coverage, and YOU

If (1) you and/or your covered dependent(s) have Retiree coverage under the NYCDCC Welfare Fund (the "Welfare Fund") or (2) you are transitioning from Active coverage to Retiree coverage under the Welfare Fund, you **MUST** enroll in both **Medicare Part A** and **Medicare Part B** on the **earliest date that such coverage is available to you**. To reiterate, you **MUST** enroll in both **Medicare Part A** and **Medicare Part B** to have Retiree coverage through the Fund. (Note that the requirement to enroll in Medicare Part A and Medicare Part B also applies to members who retired before age 65 on a Regular Pension and later become eligible for Social Security prior to age 65.)

When you and/or your covered dependent(s) become eligible for Medicare, your Welfare Fund coverage changes. To avoid a loss of coverage or denial of benefits, you must send us copies of your Medicare cards. This can be done in the following ways:

- **In Person-** At the Fund Office, 9th Floor
- **Mail-** NYCDCC Benefit Funds, Attn: Member Services, 395 Hudson Street, 9th Floor, New York, NY 10014
- **Fax-** (212) 366-7845
- **Email-** MemberServices@nyccbf.org (*PDF attachments of copy only. Images/pictures of the card will not be accepted.)

If you have questions about the Medicare enrollment process and your obligations to maintain Welfare Fund coverage, please contact our Member Services Department at **(800) 529-FUND (3863)** or **(212) 366-7373**. In addition, you may want to refer to the Welfare Fund's Frequently Asked Questions ("FAQs") that address a wide variety of topics related to Medicare and the Welfare Fund. The FAQs can be found by visiting our website at nyccbf.com/wp-content/uploads/2020/09/Medicare-Eligible-Retirees-FAQ-Final_9-9-20.pdf.

VISIT US ONLINE!

WWW.NYCCBF.ORG

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- BENEFITS DOCUMENTS
- UBC TRAINING PROGRAMS
- NEWSLETTER ARCHIVE
- AND MUCH MORE!



New York City District Council of Carpenters

BENEFIT FUNDS



TOOL TIME

Notes & Reminders:

COMPLIANCE AND ETHICS PROGRAM

Report Misconduct, Fraud, Waste, or Abuse

The New York City District Council of Carpenters Benefit Funds (“Benefit Funds”) strive to maintain the highest standards of ethics and conduct in all aspects of Funds operations. As a tangible commitment to this ideal, the Board of Trustees has adopted and implemented a Compliance and Ethics Program (“CEP”). The CEP sets forth standards for the guidance of all Benefit Funds staff in the day-to-day business of administering benefits for all members.

Reporting

You can contact the Chief Compliance Officer of the Benefit Funds if you have a question or concern regarding the appropriateness or legality of a Benefit Funds’ policy, procedure or transaction. All of us – Benefit Funds staff, the Trustees and Funds members - are responsible for ensuring that Funds assets are reserved to pay only for covered benefits and the reasonable costs of administering those benefits. We all share a duty to protect against violations of law and Benefit Funds rules. So, if you see or suspect something, say something.

Please report any matter that may constitute a breach of applicable laws, rules, regulations or Benefit Funds’ policies to the Benefit Funds Chief Compliance Officer. You can provide your name or remain anonymous. All information will be considered confidential.

Mail:

Chief Compliance Officer
New York City District Council of Carpenters Benefit Funds
395 Hudson Street, 9th Floor
New York, New York 10014

Work Phone:

(212) 366-7533

Confidential Hotline:

(646) 484-1665

Email:

Complianceandethics@nyccbf.org

Website:

Visit www.nyccbf.org and click on the “Report a Compliance Issue” link located at the bottom of the screen.

WOMEN’S HEALTH AND CANCER RIGHTS ACT (“WHCRA”) ANNUAL NOTICE - 2024

The NYCDCC Welfare Fund, in accordance with the Women’s Health and Cancer Rights Act of 1998, provides benefits for mastectomy-related services including all stages of reconstruction and surgery to achieve symmetry between the breasts, prostheses, and complications resulting from a mastectomy, including lymphedema. If you would like more information on these benefits, please contact us at (212) 366-7300 or (800) 529-FUND (3863).



New York City District Council of Carpenters

BENEFIT FUNDS

**395 Hudson St. 9th fl.
New York, NY 10014**

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Class
US POSTAGE
P A I D
Wilkes-Barre, PA
Permit #188

Statement of Non-Discrimination

The New York City District Council of Carpenters Welfare Fund (the "Fund") complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

The New York City District Council of Carpenters Welfare Fund cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo.

纽约市木匠区议会福利基金（“基金”）遵守适用的联邦民权法，不因种族、肤色、国籍、年龄、残疾或性别而歧视

The New York City District Council of Carpenters Benefit Funds

CONTACT US

Address:

**395 Hudson St., 9th Fl.
New York, NY 10014**

Member Services:

**(800) 529-FUND
(212) 366-7373**

Website:

**www.nyccbf.org
(Bookmark us!)**

Social Media:

@NYCDCCBF



Newsletter designed and edited by the NYCDCCBF Communications Department:
Gerard Minetello, Communications Manager - Johnny DiNapoli, Communications Coordinator

The information in this newsletter is intended to highlight certain information about your benefits and the Benefit Funds. *Benefits Toolbox* is not a substitute for the official Plan documents which set forth the requirements and conditions for the benefits. In the event of an inconsistency or a conflict between *Benefits Toolbox* and the Plan documents, the Plan documents shall control.