

BENEFITS GUIDE for ACTIVE MEMBERS

Iron Workers District Council of Southern Ohio & Vicinity





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WELCOME!

The Iron Workers District Council of Southern Ohio Vicinity Benefit Trust, Pension Trust, and Annuity Trust are proud to offer a comprehensive benefits package, including health and wellness benefits and two retirement plans: a defined contribution annuity plan and a defined benefit pension plan.

In this *Benefits Guide*, you'll find a snapshot of each plan's provisions, details about how the plans work, and contact information for the plan administrators and providers. For more detailed information, please visit the Iron Workers Trust Funds website at iwtrustfund.com.



INTRODUCTION

About the Iron Workers Trust Funds

The Iron Workers District Council of Southern Ohio and Vicinity Benefit Trust, Pension Trust, and Annuity Trust are multiemployer trust funds established by the affiliated local unions and signatory employers to provide health and wellness and retirement benefits for eligible iron workers.

The Iron Workers Trust Funds are separate from the union.

The Iron Workers Trust Funds care about the health and well-being of all our members and their families. This *Benefits Guide* provides an overview of the health and wellness benefits and current or future retirement benefits provided by the Iron Workers Trust Funds to active members.

We encourage you to read through this Guide carefully to understand what benefits are available to you and your family.

For More Information

This *Benefits Guide* offers only a brief snapshot of your benefits. For more detailed information, including summary plan descriptions, and to log in to the Member Dashboard, please visit the Iron Workers Trust Funds website at iwtrustfund.com.

If you have benefit questions, including eligibility questions, you can contact the Fund Office, as follows:

Contact Information

Phone: **937-454-1744**
(Monday–Friday, 7:30 a.m.–4:30 p.m.)

Mailing address: 1470 Worldwide Place
Vandalia, OH 45377

USING YOUR BENEFITS

How to Enroll the First Time

When you are initially eligible for benefits, you need to complete an enrollment form that lists all your eligible dependents and a beneficiary form. You can submit these original documents to the Fund Office. You'll also need to provide the Fund Office with:

- A copy of your marriage certificate, if you are married.
- A copy of your children's birth certificates, if you have children.

How to Make Future Changes

If after your initial enrollment, you get married, have a baby, or get divorced, you should reach out to the Fund Office.

Adding a Spouse

If you get married, you can enroll your spouse for health care benefits by completing a new enrollment form that lists all your eligible dependents. You'll also need to provide the Fund Office with:

- A copy of your marriage certificate.
- Your spouse's date of birth and social security number.
- A copy of your spouse's insurance information, if he or she is covered under another plan.

Adding a Child

You can add a child by completing a new enrollment form that lists all your eligible dependents. You'll also need to provide the Fund Office with:

- A copy of the child's birth certificate, social security number, adoption papers, or court order.
- A copy of your child's other insurance information, if he or she is covered under another plan.
- A copy of your spouse's divorce decree if you are adding a stepchild (to establish if there is other coverage for that child).

If You Divorce

If you divorce, you'll need to provide the Fund Office with a new enrollment form that lists all your eligible dependents. You'll also need to provide the Fund Office with a copy of your divorce decree and property settlement agreement, if applicable.

If your spouse wants to continue coverage, he or she will have the opportunity to elect COBRA continuation coverage for up to 36 months.

Naming a Beneficiary

You may designate anyone you wish as your beneficiary for Life Insurance. In general, if you're married, your spouse is your beneficiary for your pension and annuity benefits.

You can change your beneficiary at any time. To designate or change a beneficiary, request and complete a beneficiary form from the Fund Office. As soon as we receive a signed form, your beneficiary designation will take effect. You may name any person as your beneficiary. You may have multiple primary beneficiaries and you may also name contingent beneficiaries in the event your primary beneficiary(ies) pre-decease you. You may name an **Estate** or a **Trust** as a beneficiary. When naming a **Minor Child(ren)** as a beneficiary, keep in mind that some complications can arise that are important to understand and prevent. Minor children are not able to receive death benefits directly. If a minor becomes the beneficiary, then the decision regarding what to do with the proceeds is in the hands of the probate court. There, they will name a guardian for the minor's estate, and the guardian retains oversight over the estate and its money until the child reaches the age of majority. The minor child(ren) must have a custodian appointed by the court to serve as the guardian of the money and assets intended for the minor child.

Has Your Address Changed?

Be sure to contact the Fund Office with your new information.



MEMBER DASHBOARD

For immediate access to your personal information, go to the Member Dashboard. You can find the Member Dashboard on the Iron Workers Trust Funds website at iwtrustfund.com. For assistance or technical support, call the Fund Office. **Note:** The first time you access the Member Dashboard, you'll need to create an account by answering questions about your identity.

Once you've created an account, you can access it from any device. Once you log in, you can change your address, self pay for your insurance (using credit card, debit, or HRA balance), request or generate a pension calculation, and find the following:

- Demographic information
- Eligibility for health care benefits
- 12 months of insurance eligibility
- Consolidated health insurance ID cards to download and/or print
- Covered dependents
- Beneficiary designation(s)
- HRA balance
- Entire work history by employer by month
- Number of hours in hour bank reserve
- Annual pension hours credited
- Annuity account balance, updated daily
- Number of vesting and pension credits earned

HEALTH AND WELLNESS BENEFITS

Medical Coverage

Medical coverage is provided to active members by Aetna through a PPO (preferred provider organization) network. The PPO covers in-network and out-of-network services; however, you'll generally save money by seeing in-network providers.

How Your Medical Plan Works

A PPO is a network of health care providers who have agreed to charge negotiated rates. Since in-network providers have agreed to these negotiated rates, you can help control costs for yourself and the plan by using them.

The annual deductible is the amount you pay before the plan begins to pay its share for covered medical expenses. Some services, such as preventive care, routine office visits, and urgent care, do not require you to meet a deductible first. Other services, such as non-routine office visits and outpatient testing like MRIs and CAT scans, do require that you meet your deductible before the plan pays. If you meet your deductible, you'll begin paying your share of coinsurance for covered medical expenses until you reach the out-of-pocket maximum for the year. At that point, the plan pays 100% of your covered medical expenses for the rest of the year.

Important plan features:

- You must show your medical plan ID card.
- You do not need a referral to see a specialist.
- Copayments do not count toward the annual deductible, but do count toward the out-of-pocket maximum.
- Certain covered services may require pre-authorization to determine whether the service is medically necessary. The plan will only cover services that are medically necessary. For a complete list of services that require pre-authorization, contact Aetna.

Contact Information

Online: [aetna.com](https://www.aetna.com)
Member Services: **800-735-8947**

Teladoc Health

Speak with a doctor 24/7 from the comfort of your home using a video-enabled smartphone, tablet, or computer. Teladoc's physicians are board-certified and can diagnose, recommend treatment, and write short-term prescriptions when medically necessary.*

Teladoc offers an affordable and convenient alternative to urgent care or the emergency room. Plus, if you or a loved one are looking for mental health support, you can access a licensed therapist. All calls are confidential.

*Teladoc cannot prescribe controlled substances, non-therapeutic drugs and certain other drugs that may be harmful because of their potential for abuse. Teladoc physicians reserve the right to deny care for potential misuse of service.

Teladoc visits are best for common health conditions, such as pinkeye, a cold, the flu, a fever, allergies, and sinus infections.

Contact Information

Online: [teladoc.com/aetna](https://www.teladoc.com/aetna)
Member Services: **855-TELADOC** (855-835-2362)

Plan Highlights

Here is a snapshot of what you'll pay for covered services.

Coverage Description	What You'll Pay	
	In-Network	Out-of-Network
Preventive Care Visit Screening/Immunization	No charge (deductible does not apply)	30% coinsurance
Primary Care Visit (non-preventive)	\$30 copay per visit (deductible does not apply)	30% coinsurance
Specialist Visit	\$30 copay per visit (deductible does not apply)	30% coinsurance
Annual Deductible	\$500 single/\$1,000 family	\$1,000 single/\$2,000 family
Teladoc Health Visit	\$10 copay	Not covered
Diagnostics (X-ray, blood work)	10% coinsurance	30% coinsurance
Imaging (CT/PET scan, MRI)	10% coinsurance	30% coinsurance
Out-of-Pocket Limits	\$4,000 single/\$8,000 family	\$8,000 single/\$16,000 family
Hospital Stay		
Facility Fee	10% coinsurance	30% coinsurance
Physician/Surgeon Fees	10% coinsurance	30% coinsurance
Emergency Room	\$135 copay per visit (deductible does not apply; copay waived if admitted)	\$135 copay per visit (deductible does not apply; copay waived if admitted)
Emergency Medical Transport	\$135 copay	\$135 copay
Urgent Care	\$65 copay per visit (deductible does not apply)	\$65 copay per visit (deductible does not apply)
Prenatal and Maternity		
Office Visits	\$30 copay for first prenatal visit; after first visit, no charge (deductible does not apply)	30% coinsurance
Other Services	10% coinsurance	30% coinsurance
Home Health Care (up to 120 visits per calendar year)	10% coinsurance	30% coinsurance
Mental/Behavioral Health, Substance Abuse Services		
Outpatient Services	\$30 copay per office visit (deductible does not apply); 10% coinsurance for other outpatient services	30% coinsurance
Inpatient Services	10% coinsurance	30% coinsurance

For a complete list of services, visit the Iron Workers Trust Funds website at iwtrustfund.com.



Health Reimbursement Account (HRA)

Active bargained members who are eligible for medical coverage and who receive employer contributions to the plan on their behalf are eligible for a Health Reimbursement Account (HRA) benefit. Ten cents an hour for every hour worked is paid into your account each month by your contributing employer.

Use the money in your HRA to get reimbursed for allowable health care expenses. Examples of allowable expenses include medical, prescription drug, dental, vision, and hearing aid out-of-pocket expenses such as deductibles, copays, and coinsurance. Expenses must be incurred during the period of time you and your eligible dependents are eligible for the HRA under the plan, and must be submitted for reimbursement within one year from the date the expense is incurred.

You can also use your HRA to self-pay for active medical and prescription drug coverage for yourself and your dependents and to pay for retiree health insurance.

Need to File a Claim?

To file a claim, complete an HRA Out-of-Pocket Claim Form, and then mail or email it to the Fund Office. You can find this form on the Iron Workers Trust Funds website at iwtrustfund.com on the Forms page.

FREE Enrollment in CVS ExtraCare+

When you sign up, you get \$10 added to your ExtraCare® card each month to thank you for being a member. Spend it on whatever you want. Plus, you get more money back in your pocket with 20% savings on thousands of CVS Health® products. In addition, you can have eligible items delivered to your home, with no-cost, one- to two-day shipping.

How does a member enroll in ExtraCare Plus?

Enrollment will occur in Aetna Health on or after the member's effective date. To enroll, a member would log in through their Aetna HealthSM app or the Aetna member website and select the link to enroll in ExtraCare Plus. After the member "signs" a consent form, they'll create an account on CVS.com to complete enrollment and become an active subscriber in the ExtraCare Plus program.

What will the member need to consent to during enrollment?

The member will need to authorize the disclosure of certain limited information (no underlying health information) to CVS Pharmacy to administer the program, including to receive communications from CVS Pharmacy related to the program or other offers from CVS Pharmacy. They can log into their Aetna HealthSM app or Aetna member website for additional information.

Prescription Drugs

When you become eligible for medical coverage, you automatically receive prescription drug benefits, which are administered by CVS Caremark. When you need a short-term medication (for example, an antibiotic), it is best to use the retail pharmacy program. If you take medication on a long-term basis (maintenance medication), it is generally best to use the mail service pharmacy.

Plan Highlights

Here is a snapshot of what you'll pay for prescription drugs.

Coverage Description	What You'll Pay	
	In-Network	Out-of-Network
Deductible	\$65 per person (combined in-network and out-of-network)	\$65 per person (combined in-network and out-of-network)
Out-of-Pocket Maximum	\$4,150 single/\$8,300 family	Unlimited
Retail Pharmacy (30-day maximum supply)		
Generic Copay	\$10 per prescription	For any type of prescription, you pay 50%; minimum \$55
Brand-Name Copay	\$40 per prescription	
Non-Formulary	\$60 per prescription	
Direct Mail Service or CVS Retail Pharmacy (90-day maximum supply)		
Generic Copay	\$20 per prescription	Not covered
Brand-Name Copay	\$60 per prescription	
Non-Formulary	\$90 per prescription	
Specialty Pharmacy		
PrudentRx	\$0 or \$60*	30% coinsurance

**If you or a covered dependent take a specialty medication and enroll in the PrudentRx Copay Program, you will pay \$0 for covered specialty medications when you fill the prescription at CVS Specialty® Pharmacy. As part of the Trust's prescription plan with CVS/Caremark, the program works with you and drug manufacturers to get copay card assistance for any specialty medications that are included on our Plan's Exclusive Specialty Drug List. (If the specialty drug you take is not included on the Exclusive Specialty Drug List, you will pay a \$60 copay.) Once the program confirms that the manufacturer of your medication offers copay card assistance, the program manages enrollment and renewal for the copay cards on your behalf. Even if there is no copay card program for your medication, you, as a program participant, still pay nothing out of pocket to fill your prescription.*

Contact Information

Online: [caremark.com](https://www.caremark.com)
 Customer care: **888-202-1654**
 Submit paper claims: CVS Caremark Claims Department
 P.O. Box 52136
 Phoenix, AZ 85072-2136

The plan covers generic and brand-name medications; however, you'll pay a higher copay for brand-name medications. By law, both generic and brand-name medications must meet the same standards for safety, purity, and effectiveness.

Prior authorization may be required for certain medications. For a complete list of these medications, as well as detailed prescription drug plan exclusions and limitations, contact CVS Caremark or visit [caremark.com](https://www.caremark.com).

The Broad Vaccination Network (BVN) is now available for seasonal vaccinations.

As a reminder, members can now receive flu shots and COVID vaccines at in-network pharmacies.

Dental Coverage

If you meet eligibility requirements, your dental benefits are provided through Delta Dental. You are not eligible for the dental plan if you have to supplement or self-pay for your benefits. Your dental benefits cover diagnostic, preventive, restorative, endodontic, periodontic, prosthodontic, oral surgery, and other general services. The plan covers in-network and out-of-network providers; however, you'll generally save money if you visit a provider who participates in the Delta Dental PPO or Premier networks.

Plan Highlights

Here is a snapshot of your dental benefits.

Coverage Description	In-Network Coverage	Out-of-Network Coverage
Annual Deductible	None	
Calendar-Year Maximum	\$2,000 per person	
Preventive Services	Plan pays 100% Preventive services include exams, cleanings, fluoride treatments and X-rays	Covered dental procedures completed by an out-of-network provider will be paid based on Delta Dental's Schedule of Benefits up to the \$2,000 maximum per person per year. Members are responsible for any difference between what is paid and what the provider charges
Basic and Major Services	Plan pays 100% Basic and Major services include sealants, endodontics, periodontics, root canals, extractions and bridges, for example	
Orthodontia	Not covered for children or adults	

Contact Information



Online: deltadentaloh.com

Click **Log In/Register** to access the secure **Consumer Toolkit®**.

Here you can:

- Learn about your benefits plan.
- Review claims.
- Find a dentist near you.

Submit paper claims:

Delta Dental of Ohio
Claims Processing
P.O. Box 9085
Farmington Hills, MI 48333-9085



Customer Service:
800-524-0149

(TTY users call 711)

Use the automated system 24/7 or speak with a representative M–F, 8:30 a.m.–8 p.m. E.T. to:

- Ask about your eligibility and benefit information.
- Check claim status.
- Find a dentist near you.

To see a *Schedule of Dental Services and Supplies* and a complete list of plan exclusions, visit the Iron Workers Trust Funds website at iwtrustfund.com and review the Summary Plan Description.

Vision Coverage

If you meet eligibility requirements, vision benefits cover routine vision-related expenses through the VSP Choice Plan®. You are not eligible for the vision plan if you have to supplement or self-pay for your benefits. If you are eligible, you can obtain vision services from any VSP Network Provider.

You are eligible for the vision plan if you do not have to supplement or self-pay for your benefits.

Some vision plan highlights include:

- Comprehensive WellVision Exam® covered in full
- Routine retinal screening covered after no more than a \$39 copay
- Prescription lenses (glass or plastic single vision, lined bifocal, lined trifocal, or lenticular lenses covered in full)
- Most popular lens enhancements covered after a copay
- Frames covered in full up to \$200 and 20% off any amount over that amount. **Note:** Some featured frame brands are covered in full up to \$250 and then 20% off any amount over that amount

Plan Highlights

Here is a snapshot of your vision benefits.

Coverage Description	
Annual Deductible	None
Comprehensive WellVision Exam®	Plan pays 100%
Lenses: Includes glass or plastic single vision, lined bifocal, lined trifocal or lenticular lenses	Plan pays 100%
Retail Allowance: Includes Frames and Contacts	Plan pays 100% up to \$200 Note: Some featured frame brands are covered in full up to \$250

Learn more in the Summary Plan Description on the Iron Workers Trust Funds website at iwtrustfund.com.

Contact Information

Online: vsp.com

Customer Service: **800-877-7195**

Hearing Benefits

The plan covers hearing aid devices once per person in any three consecutive calendar-year periods and hearing exams once per person in a consecutive 24-month period.

When you need hearing care, first schedule an appointment with a licensed provider, then file a completed claim form with the Fund Office.

Aetna Resources for Living, a Member Assistance Program

Resources for Living makes it easy for you to access resources to help you live your best life. This **free** benefit is available **to you and all members of your household***. Services are **confidential** and available **24 hours a day, 7 days a week**.

Below are some of the areas where the program can assist.

Emotional well-being support

Access up to three counseling sessions per issue each year. You can also call 24 hours a day for in-the-moment emotional well-being support. Counseling sessions are available face to face, on televideo, or chat/text through Talkspace. Start here if you or a family member is coping with mental health issues, addiction issues, anxiety, behavioral health, relationship issues, depression, stress, work/life balance, and more. To continue care after your free visits have been exhausted, you may continue care with your counselor by providing your Aetna ID card and utilizing your Aetna health insurance plan benefits. 99% of our Member Assistance Program providers are also in the Aetna Medical network.

Daily life assistance

Competing day-to-day needs can make it tough to know where to start. Call when you need help finding resources for childcare, parenting, adoption, elder care, school and financial aid research, pet care, home repair and improvement, and more.

Legal services

Get a free 30-minute consultation with a participating attorney for up to three new legal topics, such as civil/criminal law, divorce, mediation, wills and other document preparation, and real estate transactions. If you opt for services beyond the initial consultation**, you can get a 25 percent discount. You also have free access to legal documents and forms on your member website.

Financial services

Call for a free 30-minute consultation for up to three new financial topics*** related to budgeting, retirement or other financial planning, mortgages and refinancing, credit and debt issues, college funding, and tax and IRS questions. You can get a 25 percent discount on tax preparation services. You also have access to financial articles, calculators, and a financial assessment on your member website.

Online resources

The website offers a full range of tools and resources to help with the topics listed above and more. You'll find articles and self-assessment, care provider search tool, videos, live and recorded webinars, and a mobile app. You also have access to the Discount Center, where you'll find deals on brand name products and services.

Contact Information

Online: resourcesforliving.com
Username: Iron Workers
Password: EAP

Customer Service: **888-238-6232**
(TTY users call 711)

*Children living away from home are covered up to age 26.

**Services must be related to the plan participant and eligible household members. Work-related issues are not covered. Discount does not include flat legal fees, contingency fees, and plan mediator services.

***Services must be for financial matters related to the employee and eligible household members.

If You Become Disabled or Die

If you meet eligibility requirements and become disabled or die, the Fund provides financial protection to you and/or your family.

Weekly Income Benefits

If you cannot work because of a non-work related injury or sickness:

- Call your employer, local union, and the Fund Office.
- See a physician as soon as possible.
- Complete the **Weekly Disability Income Claim Form** and submit it to the Fund Office.

The Weekly Income Benefits are \$375 per week. Weekly Income Benefits are reported on your W-2 form as wages. The maximum duration is 26 weeks. **Note:** After your disability ends, you must notify the Fund Office.

IMPACT Off-the-Job Accident Plan

If you are disabled as a result of an Off-the-Job Accident, you may be eligible for a benefit through IMPACT's Off-the-Job Accident Plan. For more information regarding eligibility for benefits, and to download a claim form, visit impact-net.org or call Welfare & Pension Administration Service, Inc. (WPAS) at **800-331-6158**.

Workers' Compensation

If you are receiving Workers' Compensation, please contact the Fund Office and provide copies of your paystubs.

Disability Credit Hours

While you are receiving Weekly Income Benefits or Workers' Compensation, you may be credited hours toward the Benefit Trust and the Pension Trust. These credit hours may continue your health insurance coverage while you are disabled. They may also provide you with Pension Credit hours during this time.

Life Insurance Benefits

Life insurance is paid if you die while eligible for benefits, even if the cause of death is work-related. Benefits are provided through MetLife. In the event of your death, your spouse or beneficiary should:

- Contact the Fund Office.
- Provide the Fund Office with a certified copy of your death certificate.

The life insurance benefit amount is \$7,000.

Accidental Death and Dismemberment (AD&D) Insurance Benefits

AD&D benefit is payable for the loss of life, loss of limb(s), or entire and irrecoverable loss of sight of one or both eyes. Benefits are payable only if the loss results from an accident while you are eligible. The AD&D benefit is provided through MetLife, and is in addition to life insurance. Benefits are paid directly to you for an injury or to your beneficiary in the event of your death. Contact the Fund Office or visit the Iron Workers Trust Funds website at iwtrustfund.com for more information.

The AD&D benefit amount is \$7,000.

RETIREMENT BENEFITS

Defined Contribution Annuity Plan

The Iron Workers District Council Annuity Trust is a money purchase plan designed to supplement your other retirement benefits. When you become a participant in the Annuity Plan, an individual account is established in your name. Employer contributions are made on your behalf to your individual account.

Participation

You immediately become a participant on the first day of the plan year in which you work at least one hour of service for an employer that contributes to the plan on your behalf. You are always 100% vested in the money contributed into your individual account.

Your Individual Account

Highlights of your individual account include:

- You determine how your Annuity Plan funds are invested in increments of at least 1%. If you don't designate how you want these funds invested, your balance will be invested in a default fund, or funds, designated by the Board of Trustees.
- To change how your funds are invested, contact Empower at **833-569-2433** or visit the website at **empowermyretirement.com**.
- Your account balance reflects contributions made on your behalf, investment earnings and losses, any distributions made from your account, and administrative expenses.
- Each quarter you will receive a statement showing your account balance.
- The Annuity Plan also offers a loan program (see the next page).
- Your balance is updated daily on the Member Dashboard.

Eligibility for Benefits

In general, you become eligible for a withdrawal when you:

- Retire
- Become disabled
- Leave covered employment

If you leave covered employment, you become eligible to take a distribution 14 months from the month you last worked as an ironworker. Example: You last worked in March 2020. You will be eligible to take a distribution of your annuity account in full or in part on or after May 1, 2021.

Once eligible for a distribution, you can take a distribution of your entire account balance (and pay a minimum of 20% federal income tax on the distribution), roll over some or all of your annuity account to another qualified retirement plan, take incremental distributions, or choose a combination of all the above. You may be subject to a 10% penalty for early withdrawal if you receive a distribution of your annuity account prior to retirement or attain age 59½.

To apply for a distribution, **download the annuity distribution packet** from our website.

You become a participant on the first day of the plan year in which you work at least one hour of service for an employer that contributes to the plan on your behalf.

Eligibility for Annuity Plan Loans

There may be instances when you need to access the money in your Annuity Plan account and wish to take a loan. **To be eligible for an Annuity Plan loan, you must meet all of the following criteria:**

- You must have worked as an iron worker in this district council and had hours contributed to your annuity plan for at least 36 months.
- You cannot have any loans in default.
- Any open loans must be current on repayments.

You may borrow from \$5,000 up to the lesser of \$50,000 or 50% of the amount of your balance as of the last valuation day. **You may take a loan for:**

- General purpose
- Home purchase
- Payment of delinquent contributions, liquidated damages, loans for surety bonds and/or interest owed to the Annuity Plan, Pension Plan, or Benefit Plan if you are a fiduciary with respect to such delinquent contributions

You are eligible to have up to three separate loans outstanding at one time; however, you may not have more than one home purchase loan at a time.

Each loan will have an interest rate, which is determined by the Trustees and is currently the prime interest rate plus 1%. The loan repayments will include both the principal amount of the loan and interest. The repaid amounts will be credited to your individual account.

Stipulations apply, so consult the Annuity Plan Summary Plan Description or contact the Trust Fund Office for more information.

In the Event of Your Death

If you die and you were married at the time of your death, your surviving spouse will be the beneficiary of your Annuity Plan account.

If you were single at the time of your death, your account balance will become payable to your designated beneficiary.

This is only a snapshot of your Annuity Plan benefits. Requirements apply to payment options. For more detailed information, visit the Iron Workers Trust Funds website at iwtrustfund.com, where you'll find the Annuity Plan Summary Plan Description.

Contact Information

You choose how to invest the employer contributions made to the Annuity Plan by contacting Empower at **833-569-2433**. If you want to request a distribution or a loan application, change your address or beneficiary, contact the Annuity Trust Office at **937-454-1744**.

For Annuity Plan details, visit the Iron Workers Trust Funds website at iwtrustfund.com, where you'll find the Annuity Plan Summary Plan Description. If you are married, share the information with your spouse.

Defined Benefit Pension Plan

The Iron Workers District Council Pension Plan is designed to provide income in your retirement years. Your pension benefit can be a significant part of your retirement income. The amount of your pension benefit is generally based on the number of years you work for an employer that contributes to the plan on your behalf. Generally, the longer you work for a contributing employer, the greater your pension.

The Pension Plan offers:

- Pensions at various retirement ages
- Different ways in which your pension can be paid
- Disability benefits
- Death benefits

Normal retirement age means age 65 or, if later, your age on the fifth anniversary of your participation in the plan.

Participation

You become a participant on January 1 or July 1 after you complete at least 1,000 hours of service in your first 12-consecutive-month period of covered employment.

Vesting Service

- Vesting service determines your right to a pension.
- Generally, you earn one year of vesting service for each calendar year in which you work at least 1,000 hours of covered employment, which may include certain periods of non-covered employment.
- You become vested once you complete five years of vesting service, earn five pension credits, or reach normal retirement age while still a participant. Normal retirement age means age 65 or, if later, your age on the fifth anniversary of your participation in the plan.

Pension Credits

- Pension credits are used to calculate your benefit.
- Pension credits include pension credits earned before and during the contribution period, if applicable.
- Generally, you earn pension credits based on the number of hours you work.
- Pension credits are not the same as vesting service.

Receiving a Pension When You Retire

In general, you qualify for a pension at:

- **Age 55** if you earned at least 15 pension credits
- **Age 62** if you earned less than 15 pension credits
- **Any age** if you are disabled and earned at least 5 pension credits or 5 vesting credits (restrictions apply)

Applying For Your Pension

You may apply for your pension up to 180 days before your retirement date. Applying early helps to ensure that you'll receive your benefit when you stop working. To apply for your pension, complete the Pension Application, which you can find on the Iron Workers Trust Funds website at iwtrustfund.com, or by calling the Pension Trust Office at **937-454-1744**.

Choosing How Your Pension Is Paid

- **If you are not married**, your pension is generally paid as a single life annuity with 60 payments guaranteed.
- **If you are married**, your pension is generally paid as a 50% husband-and-wife pension, with your spouse as beneficiary. However, you can elect an optional form of payment with your spouse's consent.
- **Other options include:** 75% or 100% husband-and-wife options; 50%, 75%, or 100% joint-and-survivor option to a non-spouse; and a level income option, which provides you with a level income before and after Social Security payments begin. Depending on which payment you choose, you may need your spouse's consent.

In the Event of Your Death

- **If you die before your pension payments begin**, one of the following benefits may be available to your spouse or beneficiary:
 - Preretirement surviving spouse benefit; or
 - Preretirement non-spouse lump-sum-only death benefit.
- **If you die after your pension payments begin**, the plan may offer a postretirement death benefit. Also, if you were receiving your pension in the form of a:
 - 50%, 75%, or 100% husband-and-wife or joint-and-survivor pension, your spouse or qualified survivor will receive 50%, 75%, or 100% of the amount you were receiving for the rest of his or her lifetime.
 - Life annuity, and you had not received 60 monthly payments before your death, your beneficiary will receive the remainder of the 60 monthly payments. If at least 60 monthly payments were made before your death, no further benefits are payable.
 - Lump-sum payment, no further benefits are payable.

This is only a snapshot of your Pension Plan benefits. For more detailed information, visit the Iron Workers Trust Funds website at iwtrustfund.com, where you'll find the Pension Plan Summary Plan Description.

Contact Information

If you are considering retirement or have questions about your retiree benefits, please call the Pension Trust Office at **937-454-1744**.

CONTACT INFORMATION

If You Need More Information About...	Contact...	
General questions about your benefits and eligibility	Benefit Trust Office	937-454-1744 members.iwtrustfund.com
Medical Coverage	Aetna	Member Services: 800-735-8947 aetna.com
Telehealth	Teladoc Health	855-TELADOC (855-835-2362) teladoc.com/aetna
Prescription Drugs	CVS Caremark	888-202-1654 caremark.com
Specialty Medications	PrudentRx	800-578-4403
Vision Coverage	VSP® Vision Care	800-877-7195 vsp.com
Hearing Benefits	Benefit Trust Office	937-454-1744 iwtrustfund.com
Weekly Income, AD&D, and Life Insurance Benefits	Benefit Trust Office	937-454-1744 iwtrustfund.com
IMPACT Off-the-Job Accident	Welfare & Pension Administration Service, Inc. (WPAS)	800-331-6158 impact-net.org/member-programs/ironworkers/off-the-job-accident-program
Annuity Plan	Annuity Trust Office or Empower	937-454-1744 iwtrustfund.com 833-569-2433 empowermyretirement.com
Pension Plan	Pension Trust Office	937-454-1744 iwtrustfund.com
Resources for Living	Aetna	888-238-6232 resourcesforliving.com Username: Iron Workers Password: EAP

This *Benefits Guide* provides a broad, general overview of your benefit programs. If there is any discrepancy between the information contained in this *Guide* and the actual plan documents, the official documents will govern in all cases. To review legally required notices, please visit iwtrustfund.com.



**Iron Workers District Council of Southern Ohio & Vicinity
Benefit, Pension and Annuity Trust**

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