Welfare, Pension, Annuity, Job Training, Vacation & Sick Leave Trust Funds

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VERY IMPORTANT NOTICE TO PARTICIPANTS AND DEPENDENTS COVERED BY THE Local 282 Trust Funds Important Information Regarding Your Benefits

This document is a Summary of Material Modifications ("SMM") intended to notify you of important changes affecting the Local 282 Welfare Trust Fund (the "Health Plan"), the Local 282 Annuity Trust Fund (the "Annuity Plan"), and the Local 282 Pension Trust Fund (the "Pension Plan"). You should take the time to read this SMM carefully and keep it with the copy of the summary plan descriptions ("SPDs") that were previously provided to you. If you have any questions regarding these changes to the Plan, please contact the Fund Office at (516) 488-2822 or (718)-343-3322.

May 26, 2020

Re: DOL/IRS Deadline Extensions Related to COVID-19

Dear Plan Participant,

The Trustees of the Local 282 Trust Funds (the "Plans") are pleased to advise you about recent relief provided by the Department of Labor ("DOL") and Treasury Department in light of the challenges facing many of us due to COVID-19, following the President's declaration of a National Emergency for COVID-19. The relief provides a number of extensions of deadlines for you to take various actions related to the Plans.

Extensions for Health Plan Special Enrollment, COBRA and Claims and Appeal

The Health Plan will disregard the period from March 1, 2020 until sixty (60) days after the announced end of the COVID-19 National Emergency in determining the following periods and deadlines:

- The special enrollment period to request mid-year enrollment in the Health Plan after acquiring a new dependent due to birth, marriage, adoption, or placement of adoption or losing your coverage under a different plan. Keep in mind, however, that the sooner you notify the Health Plan of a new dependent, the sooner you will secure coverage for the dependent. Also, keep in mind that you must notify the Health Plan when your child turns age 26 and within 60 days of your divorce. These deadlines are not extended, and your failure to notify the Health Plan of these events could lead to overpayments by the Health Plan for which you and your dependents may be liable.
- The 60-day period for electing COBRA continuation coverage, as well as the date for making COBRA premium payments, although you still have to make full payment of the COBRA premiums retroactive to the first day for which you are eligible for COBRA coverage if you elect it. You cannot simply pay the COBRA premium for a single month when you have expenses. In order to be covered for any month in the extended COBRA election and payment period, you have to pay the premium for that month and all preceding months.
- The date to notify the Health Plan of a COBRA qualifying event or determination of disability.
- The deadline for individuals to file a claim for benefits under the Health Plan's claims procedure.
- The deadline for claimants to file an appeal of an adverse benefit determination under the Health Plan's claims procedure.

- The deadline for claimants to file a request for an external review after receipt of an adverse benefit determination or final internal adverse benefit determination
- The deadline for a claimant to file information to perfect a request for external review upon a finding that the request was not complete.

Note that the National Emergency may end on different dates for different states or geographic reasons, as the federal government may decide.

Please see the Health Plan SPD for additional information regarding special enrollment, notice requirements, COBRA, and the Health Plan's claims and appeals procedures.

Extensions for Pension Plan and Annuity Plan Claims and Appeals

The Pension Plan and the Annuity Plan will disregard the period from March 1, 2020 until sixty (60) days after the announced end of the COVID-19 National Emergency in determining the deadlines for filing a claim for benefits or an appeal from a denial of a claim for benefits.

Extension of Rollover Window for Annuity Plan and Pension Plan Eligible Distributions

There are two ways you may be able to receive a lump sum distribution from the Annuity Plan. Either the Fund office can make a direct payment to an IRA that you establish or to another eligible employer plan that will accept your distribution and hold it for your benefit, or the distribution can be paid directly to you, in which case, the law requires the Plan to withhold 20% of the amount of the distribution for income taxes. Generally, you have a 60-day window after the receipt of an eligible lump-sum distribution to roll the payment over to an IRA or another plan.

Due to COVID-19, this 60-day window for any individual to roll over an eligible rollover distribution received from the Annuity Plan into an IRA or another eligible retirement plan that accepts such rollovers is extended to the later of: (i) 60 days after receipt of the distribution; or (ii) July 15, 2020. This extension applies to participants who received a required minimum distribution on or after February 1, 2020 and to those who will receive any distribution from that date through May 15, 2020. These participants now have until July 15, 2020 to transfer their distributions to an eligible retirement plan that accepts rollover contributions or an IRA.

The 60-day rollover window is also extended for any eligible rollover distributions received from Pension Plan. Generally, this relates only to lump sum distributions you may elect if your pension benefit is worth between \$1001 to \$5,000.

Fraternally yours, Local 282 Trust Funds **The Board of Trustees**

This summary of material modifications ("SMM") is intended to provide you with an easy-to-understand description of certain changes to Plans.

The Boards of Trustees (or their duly authorized designees), reserves the right, in their sole and absolute discretion, to amend, modify or terminate the Plans, or any benefits provided under the Plans, in whole or in part, at any time and for any reason, in accordance with the applicable amendment procedures established under the Plans and the Agreements and Declaration of Trust establishing the Plans (the "Trust Agreements"). No individual other than the Boards of Trustees (or their duly authorized designees) have any authority to interpret the Plans, to make any promises to you about benefits under the Plans, or to change any provision of the Plans. Only the Boards of Trustees (or their duly authorized designees) have the exclusive right and power, in their sole and absolute discretion, to interpret the terms of the Plans and decide all matters, legal and/or factual, arising under the Plans.