



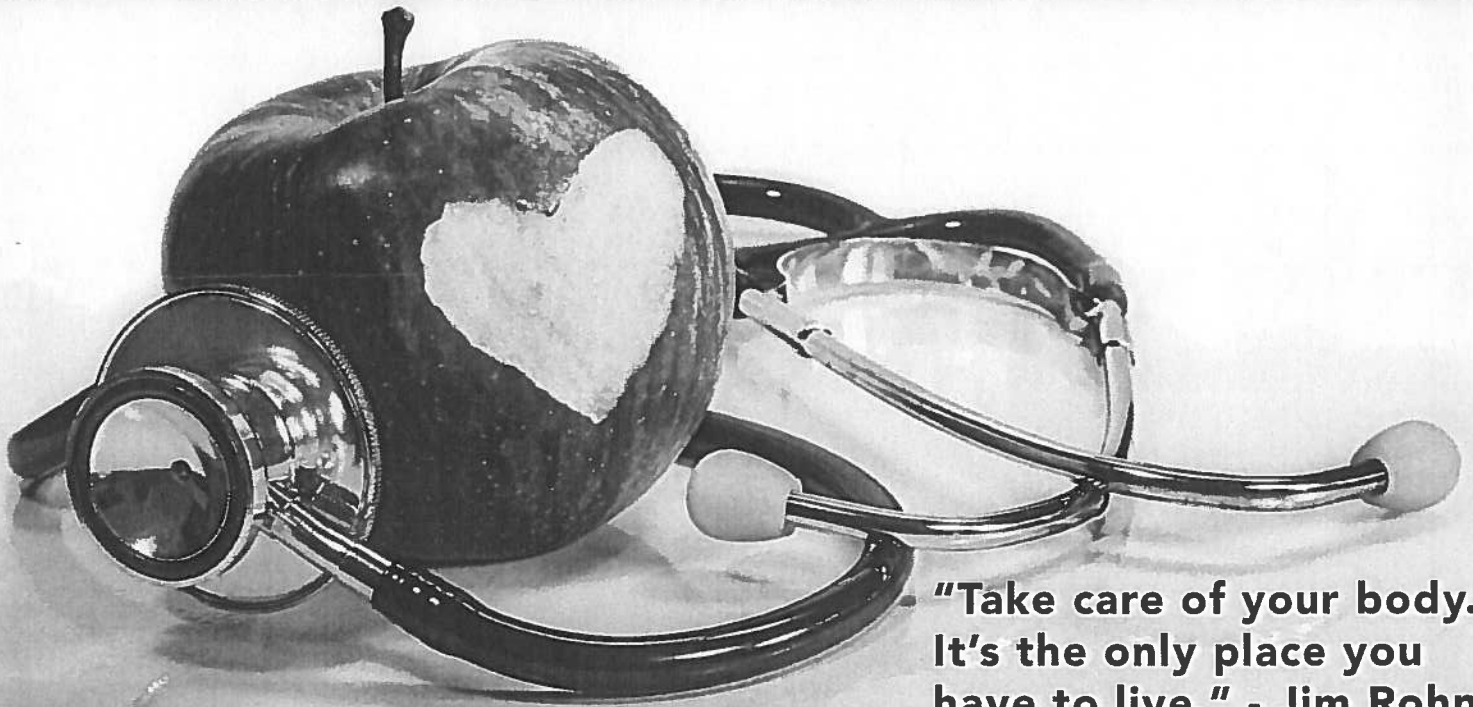
YOUR HEALTH IS YOUR WEALTH

GET A FREE SCREENING & YOUR 2018 DEDUCTIBLES WILL BE WAIVED



Go to your doctor and bring the Physician/Get Healthy Screening Form to your appointment.

PLEASE NOTE SCREENING RESULTS ARE CONFIDENTIAL



**"Take care of your body.
It's the only place you
have to live." - Jim Rohn**

DON'T FORGET TO TAKE CARE OF YOURSELF!

Submit your Physician/Get Healthy Screening Form on or before November 30, 2017.

If you and your spouse complete a physical exam, between **December 1, 2016 and November 30, 2017** your 2018 medical deductible will be waived! Deductibles are **\$300** for individual and **\$600** for family.

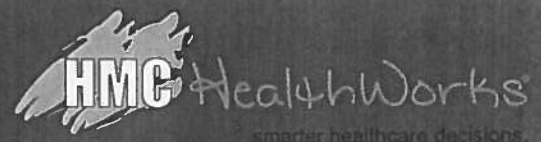
WANT TO EARN AN ADDITIONAL \$100 TOWARD YOUR HRA?

If you and/or your spouse are identified with out of range results, you will receive a call from an HMC nurse. If you engage with the HMC nurse and participate in at least two coaching calls, you will be entitled to a \$100 contribution in your Health Reimbursement Account. That's up to \$200 per family if you and your spouse both qualify and participate.

QUESTIONS? Call 855-888-2146



Call 855.888.2146





Wisconsin Laborers' Health Fund
Get Healthy Program Screening Form

2017

Section I: Patient Information

First name Date of Birth / /

Last name Male Female

Phone Number - - Last Four SSN

E-mail

Section II: To Be Completed by Physician - Exam and Labs must be completed between 12/1/2016 to 11/30/2017

Date of Exam / / Fasting?: Yes No

Blood Pressure

Systolic	Diastolic	Glucose	Total Cholesterol	HDL
<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>

Weight in Pounds	Height in Inches	Triglycerides	LDL
<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>

Physician's Phone Number - -

Physician's Name First Last

Physician's Signature _____ Date _____

ALL INFORMATION IS REQUIRED . Please review and submit completed form to:

Mail: HMC HealthWorks, Attn. Medical Form Department, 140 Intracoastal Pointe Dr. Suite 301, Jupiter, FL 33477
Fax: 561-743-0211 **Email:** biometrics@hmcebs.faxlogic.com



NOTICE REGARDING WELLNESS PROGRAM

The Wisconsin Laborers Health Fund (the "Plan") offers a voluntary wellness program available to all participants. The program is administered according to federal rules permitting employer-sponsored wellness programs that seek to improve employee health or prevent disease, including the Americans with Disabilities Act of 1990, the Genetic Information Nondiscrimination Act of 2008, and the Health Insurance Portability and Accountability Act, as applicable, among others. If you choose to participate in the wellness program you will be asked to participate in a biometric screening, which will include a blood test for total cholesterol, LDL cholesterol, cholesterol ratio, HGBA1C, triglycerides and blood glucose. You are not required to participate in the blood test or other medical examinations.

However, participants who choose to participate in the wellness program will have their major medical deductible waived for the following calendar year. Although you are not required to participate in the biometric screening, only participants who do so will receive a waived deductible.

The results from your biometric screening will be used to provide you with information to help you understand your current health and potential risks. You also are encouraged to share your results or concerns with your own doctor. In addition, when you are identified with out-of-range biometric screening results for one or more of the following conditions: diabetes, back pain, coronary heart failure, high blood pressure, high cholesterol, these results will be used to provide you with the opportunity to complete a health management evaluation (HME). The HME involves answering an initial phone call from a nurse engaged by the Plan and two (2) educational phone calls from a nurse engaged by the Plan regarding treatment and education for your condition. You are not required to participate in the HME. However, if you choose to participate in and complete the HME, you will receive a \$100 HRA contribution. Although you are not required to participate in the HME, only those who do so will receive the \$100 HRA contribution.

Protections from Disclosure of Medical Information

The Plan is required by law to maintain the privacy and security of your personally identifiable health information. Although the Plan may use aggregate information it collects to design a program based on identified health risks, the Plan will never disclose any of your personal information either publicly or to your employer, except as expressly permitted by law. Medical information that personally identifies you that is provided in connection with the wellness program will not be provided to your supervisors or managers and may never be used to make decisions regarding your employment.



WISCONSIN LABORERS' HEALTH FUND
WISCONSIN LABORERS' PENSION FUND

4633 LIUNA WAY, SUITE 201
DE FOREST, WI 53532-2510
TELEPHONE: 608-846-1742
TOLL FREE: 800-397-3373

Your health information will not be sold, exchanged, transferred, or otherwise disclosed except to the extent permitted by law to carry out specific activities related to the wellness program, and you will not be asked or required to waive the confidentiality of your health information as a condition of participating in the wellness program or receiving an incentive. Anyone who receives your information for purposes of providing you services as part of the wellness program will abide by the same confidentiality requirements. The only individual(s) who will receive your personally identifiable health information are those health professionals conducting the biometric screening, or HME, and employees of the Plan Office, as necessary to provide you with services under the wellness program and process your qualification for the incentive.

In addition, all medical information obtained through the wellness program will be maintained separate from your personnel records, information stored electronically will be encrypted, and no information you provide as part of the wellness program will be used in making any employment decision. Appropriate precautions will be taken to avoid any data breach, and in the event a data breach occurs involving information you provide in connection with the wellness program, we will notify you immediately.

You may not be discriminated against in employment because of the medical information you provide as part of participating in the wellness program, nor may you be subjected to retaliation if you choose not to participate.

If you have questions or concerns regarding this notice, or about protections against discrimination and retaliation, please contact the Plan Office at 800-397-3373 or 608-846-1742.



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4633 LIUNA WAY, SUITE 201
DE FOREST, WI 53532-2510
TELEPHONE: 608-846-1742
TOLL FREE: 800-397-3373

February 2017

Dear Participant:

As Trustees of the Wisconsin Laborers' Health Fund, we regularly review the Plan and make changes when necessary.

The following changes are effective January 1, 2017, except as noted below.

Changes to Get Healthy Screening Program Submission Dates

The Wisconsin Laborers' Health Fund is committed to improving the health and quality of life for its membership and is pleased to announce an additional opportunity for active Regular Plan and Bare Bones Plan members who participate in the *Get Healthy Screening Program*. If you (and your spouse if married or Domestic Partner) complete a biometric health screening through the *Get Healthy Screening Program* between December 1 through November 30, your major medical deductible will be waived for the following calendar year. The following example applies to the first year of this change: If you (and your spouse if married or Domestic Partner) complete a biometric health screening through the *Get Healthy Screening Program* between December 1, 2016 through November 30, 2017, you will be eligible to have your major medical deductible waived for the 2018 calendar year (January 1, 2018 through December 31, 2018).

The Regular Plan major medical deductibles for 2018 are:

- \$300 for individuals; and
- \$600 for family.

The Bare Bones Plan major medical deductibles for 2018 are:

- \$350 for individuals; and
- \$700 for family.

The new submission dates do not alter/change any of the other requirements of the Biometric Screening Program outlined in your Summary Plan Description (SPD). Please refer to your SPD for additional information on the *Get Healthy Screening Program*.

Elimination of the Home Test Kit as method of completing Get Healthy Screening

Effective January 1, 2017, the Home Test Kits which utilize the finger prick and mailing of the sample to the address contained in the Home Test Kit, are no longer available as a way of completing the Get Healthy Screening Program. The Get Healthy Screening can only be conducted through your doctor as further explained in your SPD.

Elimination of LabCorp as a Location to Complete the Get Healthy Screening Program

Prior to November 1, 2016, those who lived in the Milwaukee area could have a blood draw conducted at a LabCorp patient service center and also have the HMC HealthWorks Medical Checklist form completed there. Effective November 1, 2016, LabCorp patient service centers are no longer available as a location to have the Get Healthy Screening Program completed.

New Benefit for participating in the Health Management Education Program

Effective January 1, 2017, the Wisconsin Laborers' Health Fund will provide an additional incentive to members (and/or their spouses if married or Domestic Partners) who complete the new *Health Management Education Program (HME)* through the *Get Healthy Screening Program* between December 1, 2016 through November 30, 2017. This program allows you (and your spouse if married or Domestic Partner) to educate yourselves on your health and earn additional incentives. If a member's (and/or spouse's if married or Domestic Partner's) biometric health screening results show that the member (and/or spouse if married or Domestic Partner) is considered out-of-range for certain health-related conditions, the member (and/or spouse if married or Domestic Partner) will also have an opportunity to complete the *HME* by November 30, 2017 and each earn an additional \$100 HRA contribution (a total of up to \$200 per household) upon completing the *HME*. Please note, Spancrete Plant members currently do not have access to an HRA and will receive a similar incentive in the amount of \$100 as decided by the Board of Trustees.

If you (and/or your spouse if married or Domestic Partner) are identified with out-of-range results for one or more conditions (diabetes, back pain, coronary heart failure, high blood pressure, high cholesterol), you (and/or your spouse if married or Domestic Partner) will each have the opportunity to complete the *HME*, which includes the following steps:

- Answer an initial call from an HMC HealthWorks Nurse; and
- Engage via telephone on at least two calls with an HMC HealthWorks Nurse regarding education and treatment for your condition.

If these two steps are completed, you (and your spouse if married or Domestic Partner) will earn the additional \$100 HRA contribution (a total of up to \$200 per household). Please note, however, that coaching is anticipated to continue beyond 2 calls as a normal part of the process.

This new program and benefit is **voluntary** and **confidential**. The program is administered by HMC HealthWorks, an industry leader in wellness and lifestyle programs. This benefit is available at **no cost** to eligible members (and their spouses if married or Domestic Partners). HMC HealthWorks will not share your information with your Employer or the Fund.

For more information on participating in the *Get Healthy Screening Program* and the *Health Management Education Program*, and for questions regarding the different options call: HMC HealthWorks at **1-855-888-2146**. We strongly encourage you to take advantage of this great benefit.

Note: The health screening benefit/health management education program is not available for COBRA beneficiaries or the Retiree Plan.

For More Information

Please keep this announcement with your SPD benefit booklet. If you have any questions about this change, please contact the Fund Office at the address and telephone number shown at the top of this announcement.

Sincerely,

Board of Trustees

This announcement notice, which serves as a Summary of Material Modifications, to the Wisconsin Laborers' Health Fund Plan Document, contains only highlights of certain features of the Plan. Full details are contained in the documents that establish the Plan provisions. If there is a discrepancy between the wording here and the documents that establish the Plan, the document language will govern. The Trustees reserve the right to amend, modify, or terminate the Plan at any time.