

Date: October 31, 2024

To: All Kaiser Bargaining Unit Active Participants Enrolled in the HDS Dental Plan

From: Board of Trustees
AFL Hotel and Restaurant Workers Health & Welfare Trust Fund

Subject: **HDS Dental Plan 2025 Benefit Improvements**

Effective January 1, 2025, the following benefits will be added to your HDS Dental Plan:

- **Total Health Plus (THP).** Offers additional cleanings and/or fluoride treatments to those diagnosed with certain medical conditions and diseases (i.e. Diabetes, Cancer, pregnancy, heart conditions, etc.). The Plan covers 100% of the HDS Approved Amount.
- **Salivary Flow Assessment.** Used to diagnose certain medical conditions like Sjogren's syndrome. The Plan covers 80% of the HDS Approved Amount.
- **Athletic Mouth Guards.** The Plan covers 80% of the HDS Approved Amount and limited to one (1) every 24 months through age 18.
- **Multi-State Coverage.** Allows members to use the Delta Dental Premier network based off the out-of-state Delta Dental Fee. This lessens the out-of-pocket costs to members receiving services on the mainland.

If you have questions about these benefits or need assistance locating an HDS participating dentist in Hawaii or a Delta Dental Premier network dentist outside of Hawaii, please call HDS's Customer Service Department at (808) 529-9248 on Oahu or toll-free at 1 (844) 379-4325. You may also visit the HDS website at HawaiiDentalService.com.

If you have any additional questions or need assistance with your coverage, please contact the Trust Fund office at 808 523-0199, neighbor islands call toll free at 1 (866) 772-8989. If you are unable to contact the Trust Fund Office during normal business hours, inquiries may be emailed to hiaflinfo@brmsonline.com

In accordance with ERISA reporting requirements, this document serves as your Summary of Material Modifications to the Plan. Please keep this important notice with your Plan Document/Summary Plan Description (SPD) for easy reference to all Plan provisions.

Disclosure of Grandfathered Status

The Trust Fund believes its group health plans are "grandfathered health plans" under the Patient Protection and Affordable Care Act (the Affordable Care Act). As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan means that your plan may not include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for the provision of preventive health

services without any cost sharing. However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, for example, the elimination of lifetime limits on benefits.

Questions regarding which protections apply and which protections do not apply to a grandfathered health plan and what might cause a plan to change from grandfathered health plan status can be directed to the plan administrator, Benefit & Risk Management Services, Inc., at 560 North Nimitz Highway, Suite 209, Honolulu, Hawaii 96817-5315 or 1-808-523-0199. You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at 1-866-444-3272 or www.dol.gov/ebsa/healthreform. This website has a table summarizing which protections do and do not apply to grandfathered health plans.