

## SUMMARY OF BENEFITS —MEDICARE-ELIGIBLE RETIREES AND THEIR MEDICARE-ELIGIBLE DEPENDENTS

The following chart highlights key features of the Sheet Metal Workers Local Union No. 20 Welfare and Benefit Plan for Medicare-eligible Retirees and their Medicare-eligible Dependents as of January 1, 2026.

Dental Benefits	Coverage
<b>Annual Deductible</b>	\$50 per person; \$100 family maximum
<b>Coinsurance</b>	Plan covers:
Preventive, Diagnostic	100%
Basic Care	80%
All Other Care (including Restorative and Orthodontic)	50%
<b>Annual Maximum</b> (only applies to adults aged 19 and over)	\$1,500 per person
<b>Orthodontia Lifetime Maximum</b>	\$2,500 per person

Vision Benefits	Coverage	
	In-Network*	Out-of-Network*
<b>Coinsurance</b>	Not applicable	Not applicable
<b>Calendar Year Maximum</b>	Not applicable	\$300 per person (only applies to adults aged 19 and over)
<b>Exams<sup>6</sup></b>	100%	Total exam and materials up to \$300 maximum in a 12-month period
<b>Lenses<sup>7</sup></b>	100%	
<b>Frames<sup>7</sup></b>	Up to \$150 allowance (\$70 allowance at Costco), or for VSP-featured frames, \$170 allowance	
<sup>6</sup> No more than one eye exam is covered during any 12-month consecutive calendar month period.		
<sup>7</sup> Lenses are only covered when eyeglasses are first acquired or when required by a change in prescription. Only one pair of frames or one pair of lenses will be covered per person during any 12-month consecutive calendar month period.		
*In-network and out-of-network benefits cannot be mixed. For example, you cannot get a vision exam in-network and get frames or contacts out-of-network.		

Hearing	Coverage
Exam	Plan covers up to \$50 in covered expenses, once in a 24-month period; no deductible
Hearing Aids (Acquisition and Fitting)	<b>Plan covers 100% up to \$3,000 per person in a 36-month period</b> - Includes repair of hearing aids
<b>AudioNet Provider (Includes hearing aid evaluation test and conformity evaluation)</b>	<b>Copayment if using an AudioNet Provider</b>
○ Essential Level standard digital hearing devices	No copayment, once per person in a 36-month period
○ Mid-Level standard digital hearing devices	No copayment, once per person in a 36-month period
○ Advanced Level standard digital hearing devices	\$110 monaural/\$170 biaural copayment, once per person in a 36-month period
○ Flagship Level standard digital hearing devices	\$380 monaural/\$710 biaural copayment, once per person in a 36-month period.
○ Premium Level standard digital hearing devices	\$730 monaural/\$1,410 biaural copayment, once per person in a 36-month period.
○ Batteries	No copayment for first 48 batteries for the first year only
○ Maintenance/Fittings/Follow-Up Benefits	No copayment for visits within first 6 months; \$20 copayment each following visit for remaining 30 months

*This summary is only highlights of certain features of the Sheet Metal Workers Local No. 20 Welfare and Benefit Plan. Full details are contained in the documents (Summary Plan Description, Plan Document, etc.) that establish the Plan provisions. If there is a discrepancy between the wording here and the documents that establish the Plan, the Plan Document language will govern. The Trustees reserve the right to amend, modify, or terminate the Plan, and to modify contribution rates at any time..*

## IMPORTANT CONTACT INFORMATION

The following chart provides the telephone numbers and/or websites for the various organizations that provide services under the Plan.

<b>If you have a question or need information about:</b>	<b>Contact:</b>	<b>At:</b>
Eligibility	Fund Office	(800) 762-1215 or (317) 549-6005
Claims and Benefits	NEBA	(877) 836-7620
PPO Vision Providers	Vision Service Plan (VSP)	(800) 877-7195 or <a href="http://www.vsp.com">www.vsp.com</a>
PPO Dental Providers	Delta Dental Plan of Indiana	(800) 524-0149 or <a href="http://www.deltadentalin.com">www.deltadentalin.com</a>
AudioNet Hearing Aid Providers	AudioNet	586) 840-1360 <a href="http://www.audionetamerica.com">www.audionetamerica.com</a>
Medicare Advantage and Prescription Drug (MAPD)	RetireeFirst	(855) 255-9929 (TTY 711) or (317) 863-5623 (TTY 711)