

**AMENDMENT NUMBER TWENTY-ONE
TO THE OPERATING ENGINEERS LOCAL 139 HEALTH BENEFIT FUND
SUMMARY PLAN DESCRIPTION/PLAN DOCUMENT, 2020 EDITION**

The Operating Engineers Local 139 Health Benefit Fund has adopted the following change to the Summary Plan Description/Plan Document, 2020 Edition, effective January 1, 2026 unless otherwise noted:

1. In Amendment No. 20, strike ¶ 18 in its entirety, retroactive to January 1, 2025.
2. On page 4 of the SPD, strike the second sentence of the second paragraph in the left column.
3. On page 13 of the SPD, a new paragraph is added after the first paragraph as follows:

If you have medical coverage through an Affordable Care Act (ACA) marketplace plan, the category of the coverage must be at the Silver level or higher.

4. On page 13 of the SPD, add the following sentence to third paragraph on the right column under the "Retiree In-And-Out" section:

You may opt back into the Plan one time. Unless you qualify for Special Enrollment Rights as explained on page 5, coverage begins January 1. If you had ACA marketplace coverage, coverage begins the January 1st following at least 12 months after you opted out. To opt back into the Plan, you will need to:

5. Page 19, the first paragraph of the section entitled "Child Losing Eligibility," and the associated call out box, are deleted in their entirety and restated as follows:

Your child is no longer eligible for coverage on the last day of the month in which he or she reaches age 26.

6. On page 46 of the SPD, replace the section "Certain Dental Care" in its entirety as follows:

Certain Oral Care

Medically Necessary oral/dental treatment is covered under Comprehensive Medical Benefits if your teeth are damaged in an Accident. Treatment must be received within six months and end within 12 months of the Accident. Coverage is also provided for treatment of cleft lip and cleft palate conditions. In addition, the Plan will cover a palatal obturator device that is required as a result of sinus cancer; such coverage will be subject to the deductible and coinsurance for medical benefits as specified on the Summary of Benefits insert (in the back pocket of this booklet).

7. On page 60, the second sentence is deleted and replaced with the following:

This Calendar Year maximum does not apply to Diagnostic and Preventive Services, Dental Oral Surgery, or Orthodontic services.

8. On page 60 of the SPD, in the section "Orthodontic Services (Braces)," add two sentences at the end of the third paragraph as follows:

Eligible dental expenses under this provision are expenses incurred as the result of

the initial and subsequent installation of Orthodontic appliances, including all Orthodontic treatment rendered by an orthodontist preceding and subsequent to the installation. If the Orthodontic appliance used by the orthodontist is Invisalign or a similar type of appliance with a series of clear removable orthodontic trays that are designed to straighten teeth gradually, only one course of treatment will be covered per lifetime. Failure to adhere to treatment protocol, such as wearing the trays the required length of time per day, may result in the denial of coverage for the remainder of the treatment.

9. On page 60 of the SPD, above the section “Orthodontic Services,” insert a section “Dental Oral Surgery” as follows:

Dental Oral Surgery

Medically necessary Dental Oral Surgery (as defined on Page xx). Certain dental care may be covered under the medical benefits, such as services related to the treatment of oral cancer.

10. On page 60 of the SPD, strike the second sentence of the fifth bullet point in the “Restorative Procedures” section.
11. On page 61 of the SPD, under the “Dental Benefit Exclusions and Limitations” section replace the fourth bullet point with the following:
 - Temporomandibular Joint Disorder treatment, which is covered under comprehensive medical benefits
12. On page 76 of the SPD, the third paragraph of the Appeal Decisions section shall remove “24” and replace it with “12”.
13. On Page 91 of the SPD, the definition of Dependent is revised to: remove the fourth bullet point; remove the callout box on the bottom left column; and remove “or your unmarried Disabled child age 26 or older” from the first sentence paragraph in the right column.
14. On page 94 of the SPD, the definition of Oral Surgery is removed in its entirety and replaced with the following:

Dental Oral Surgery includes surgical removal of teeth or multiple extractions, removal of impacted teeth, bone or soft tissue grafts, alveolectomy, gingivectomy, apicoectomy, torus palatines, torus mandibulous, frenectomy, excision of cysts, osteoplasty, and stomatoplasty.
15. All references in the SPD to “dental” associated with “Optional Ancillary Benefits” shall be clarified to read “dental (Preventative Care and Restorative Procedures only),” including but not limited to: page 13 in paragraphs 5-7; page 14 in the Note, page 16 in the last paragraph; page 29 paragraphs 3 of both the right and left columns; p. 31 in paragraph 2 of the left column; page 59 in paragraph 1; page 62 in paragraph 1, and page 66 in paragraphs 2 and 5.

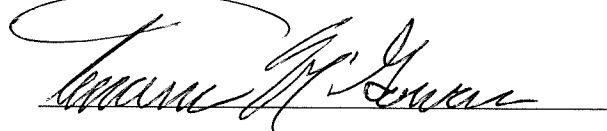
16. On page 94 of the SPD, insert the following definition:

Optional Ancillary Benefits means dental (Preventative Care and Restorative Procedures only), vision, and death and dismemberment benefits described in pages 59-61, 62-63 and 66-67.

17. The Summary of Benefits, second page, shall add a new line in the Dental Benefits section after "Restorative Dental Care" that reads as follows:

Dental Oral Surgery	90%, in-network; 80% of UCR, out-of-network
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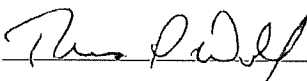
~~Union Trustees~~



9-5-2025

Dated

Employer Trustees



August 29, 2025

Dated