FLINT PLUMBING AND PIPEFITTING
FRINGE BENEFIT FUNDS

Flint Plumbing & Pipefitting Industry Health Care Fund
Flint Plumbing & Pipefitting Industry Pension Fund
Flint Plumbing & Pipefitting Industry Defined Contribution Plan
Scholarship Fund of Flint Plumbing & Pipefitting Industry
Supplemental Unemployment & Disability Plan of Local Union 370

Managed for the Trustees by:
TIC MIDWEST

TO: Flint Plumbing & Pipefitting Industry Health Care Fund Participants

FROM: The Board of Trustees of the Flint Plumbing & Pipefitting Industry Health Care Fund Board of Trustees

RE: Eligible Expenses for Supplemental Benefit Medical Reimbursement / Benny Card

DATE: March 2025

Please read this Notice carefully—it contains important information about the Flint Plumbing & Pipefitting Industry Health Card Fund Plan (Plan). This document should be read carefully and attached to your Summary Plan Description. Please contact the Fund Office if you have any questions.

SUPPLEMENTAL BENEFIT MEDICAL REIMBURSEMENT – ELIGBLE EXPENSES

As you know, the Flint Plumbing & Pipefitting Industry Health Care Fund implemented a Benny Card program to provide a more convenient way for you to access funds in your Supplemental Benefit Account (SB Account) to pay for eligible medical expenses.

The use of the Benny card is subject to Internal Revenue Service (IRS) requirements to ensure that the card is only being used for eligible medical expenses. In some cases, this requires that your plan administrator contact you for documentation to backup certain expenses that come through on your card. This process is known as "substantiation." **These requirements are not arbitrarily imposed by the Fund or TIC - substantiation is required by federal law.**

Below is a description of the types of medical expenses for which you can use your Benny Card.

ELIGIBLE MEDICAL EXPENSES

As noted above, your Supplemental Benefit, and therefore the Benny card, can be used only for eligible medical expenses. Examples of eligible medical expenses are:

- Deductibles and co-payments applied to covered medical expenses under the Flint Pipefitting & Plumbing Industry Health Care Fund;
- Reimbursement of Self-payments to maintain coverage under the Fund;
- Hearing Aids;

- Unreimbursed prescription medicines, including co-pays;
- Dental expenses, including orthodontics;
- Unreimbursed special items (artificial limbs, eyeglasses, contact lenses, hearing aids, crutches, wheelchair, etc.);
- Vision care expenses, including laser eye surgery;
- Any other medical expenses identified in Internal Revenue Code §213 including over-the-counter drugs as defined by the FDA, and amounts paid for menstrual care products.

Please see the attached list which provides examples of eligible and ineligible expenses.

A more thorough list of eligible medical expenses is contained in IRS Publication 502, which can be found at https://www.irs.gov/forms-pubs/about-publication-502.

SUBSTANTIATION REQUIREMENTS

Here are common examples of charges that will result in a request for substantiation:

- Charges related to vision care – eye doctor visit, eyeglasses, contacts, etc.
- Charges related to dental care.
- Charges related to over-the-counter drugs.
- Charges at a health care provider that do not match a set copayment set forth in the Plan. For example, you pay your doctor an office copayment plus a balance from a prior visit at the same time, or you pay two copayments in one transaction to a pediatrician where you took two children at the same time.

If you receive a request for substantiation, you will be asked for the following documentation:

- To substantiate medical claims: A copy of your Explanation of Benefits (EOB) (you can find these on the attached pamphlet).
- To substantiate dental claims: Dental EOB (you can find these in the attached pamphlet).
- To substantiate – medically necessary - vision claims: Copy of your itemized bill.
- To substantiate prescription drug claims: Copy of the label on your prescription or printout from your pharmacy.
- To substantiate other eligible expenses: Documentation clearly showing the item/service purchased, date of purchase, and amount paid.

Your substantiation can be submitted via email to: hrahelp@ticmidwest.com or via fax: 517-321-7508. If you prefer, you can mail your documents to TIC Midwest, 6525 Centurion Drive, Lansing, MI 48917.

If you have any questions about the information contained in this Notice, please contact the Fund Office. Please keep this Notice with your Summary Plan Description.

Eligible and Non-Eligible Health Care Expenses

The following list identifies some common medical, dental and health related expenses that the Internal Revenue Service considers to be eligible medical expenses. These expenses are eligible for reimbursement through your Supplemental Benefit Account provided that you have not been reimbursed for them through any other benefit plan. **You must be eligible for the Supplemental Benefit Account on the date of purchase / incurred cost.**

Eligible Health Care Expenses

Abortion, Legal	Laboratory Fees
Acupuncture	Lead based paint removal
Alcoholism & Drug Addiction Treatments	Legal Fees – to allow treatment for mental illness
Ambulance Services	Lodging for medical care
Annual Physical Examination	Long Term Care
Artificial Limbs & Teeth	Medicare B & D Premiums
Bandages	Menstrual care products
Body Scan	Nursing Home – if for medical care
Birth Control Pills	Operations & related treatments
Braces	Orthopedic Shoes
Braille books & magazines	Over the Counter Drugs
Breast Pump & Supplies	Oxygen Equipment
Capital Expenses – Special equipment installed in home or improvements made, if main purpose is medical care	Prescription Drugs
Car – special medical equipment installed in a car for the use of a person with a disability	Smoking Cessation Programs
Contact Lenses	Special Education for learning disabilities caused by mental or physical impairments
Crutches	Sterilization
Dental Treatment	Telephone – for the deaf
Diagnostic Devices	Television Equipment – for the deaf
Disabled Dependent Care Expenses	Therapy – for medical treatment
Eye Examination	Travel Costs essential for medical care (must be submitted via paper claim)
Eyeglasses	Vasectomy
Eye Surgery	Weight Loss Program – as treatment for a specific disease
Fees for physicians, surgeons, dentists and other medical practitioners	Wheelchair
Fertility Enhancement	Wigs – for hair loss from disease
Guide Dog & its upkeep	X-Rays
Health Institute – prescribed by a physician	
Hearing Aids & batteries	
Hospital Services	
HMO Health Maintenance Organization – co-payments	
Insulin	
Insurance Premiums (Paid with after-tax dollars)	

Over-the-Counter Drugs

OTC drugs include many drugs that used to be prescription drugs, such as Claritin and Advil, as well as items like cold or cough medicine, pain relievers, allergy medications, and antacids. OTC items that are merely beneficial to the general health of an individual, such as vitamins, toiletries (such as toothpaste, mouthwash, etc.), dietary and nutritional supplements, and cosmetics (such as face cream) are not allowable.

As with all other expenses, you will need to save your receipts for these items. The Fund requires proper substantiation for each item purchased.

Eligible Over the Counter Reimbursable Medical Expenses

Allergy Relief, such as oral medications, nasal sprays, and patches
Analgesics, such as fever and pain reducers like Aspirin, Tylenol & Ibuprofen
Antacids and Heartburn Relief, such as Alka-Seltzer, Mylanta, & Milk of Magnesia
Antibiotic Ointments
Anti-itch & Hydrocortisone creams
Arthritis pain relieving creams
Athletes Foot Treatment, such as nail & foot anti-fungal creams
Blood Pressure monitor & related equipment
Cholesterol test equipment
Cold medicines, such as tablets, syrups, drops & lozenges
Diabetes, such as glucose monitor & related equipment
Eye Care, such as contacts, saline solution, & lubricating eye drops
Eye Patches
Feminine Care relating to treatment of vaginal infections
First Aid, such as heat wraps, compresses, bandages, tape gauze dressing, & pain-relieving creams
Incontinence Products, such as Depends & Serenity pads
Joint Support Bandages & Hosiery, such as knee supports, elbow supports
Laxatives
Motion Sickness, such as Dramamine, patches, & bracelets
Shampoo Treatment relating to treatment of psoriasis, lice
Smoking Cessation Relief, such as patches, gum
Stomach & Digestive Relief, such as Pepto-Bismol, Imodium, Colace, & Lactaid
Tooth & Mouth Pain Relief, such as Orajel, Anbesol
Urinary Pain Relief
Vaporizers & Humidifiers
Wart Removal Medication

Non-Eligible Over-the-Counter Medical Expenses

Vitamins (for the general health of an individual)
Toiletries, such as toothpaste, mouthwash, etc.
Dietary and Nutritional Supplements
Cosmetics, such as face cream, etc.

Examples of Non-Eligible Health Care Expenses

Babysitting, Childcare for a normal, healthy baby	Household Help (even if prescribed by a doctor)
Controlled Substances – i.e. marijuana	Illegal Operations & Treatments
Cosmetic Services/Procedures (unless necessary to restore normal functioning)	Insurance Premiums (Paid with Pre-tax dollars; Active Individual policies)
Dancing or Swimming Lessons (even if they are recommended by a doctor)	Maternity Clothes
Diaper Service	Medicines & Drugs from other countries
Electrolysis, Hair Removal, Hair Transplant	Non-prescription Drugs & Medicines
Exercise Equipment	Nutritional Supplements
Health Savings Accounts	Personal Use Items
Household Help	Surrogacy Expenses
Funeral Expenses	Teeth Whitening
Future Medical Care	Veterinary Fees
Health Club Dues	Weight Loss Program

CONSUMER PORTAL QUICKSTART GUIDE

Welcome to your Flint Plumbing and Pipefitting Industry Health Care Fund Benefit Accounts Consumer Portal. This one-stop portal gives you 24/7 access to view information and manage your Supplemental Benefit Account Reimbursements. It enables you to:

- File a claim online
- Upload receipts and track expenses
- View up-to-the-minute account balances
- View your account activity, claims history and payment (reimbursement) history
- Report a lost/stolen Card and request a new one
- Change your login password
- Download plan information, forms and notifications

The portal is designed to be easy to use and convenient. You have your choice of two ways to navigate this site:

1. Work from sections within the Home Page,
2. Hover over or click on the six tabs at the top.

HOW DO I LOG ON TO HOME PAGE?

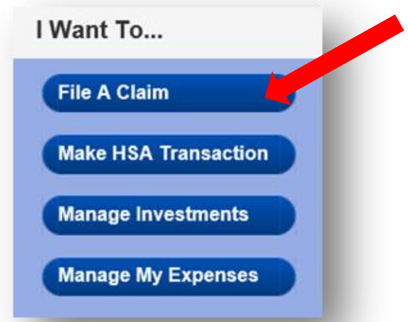
1. Go to [https://tici.lh1ondemand.com/Login.aspx]
2. Enter your login ID and password (login will be your first initial, last name, and the last four of your social security number. Example: John Smith 123-45-6789 John will enter jsmith6789 as his login. Your password is: password
3. Click **Login**.

The **Home Page** is easy to navigate:

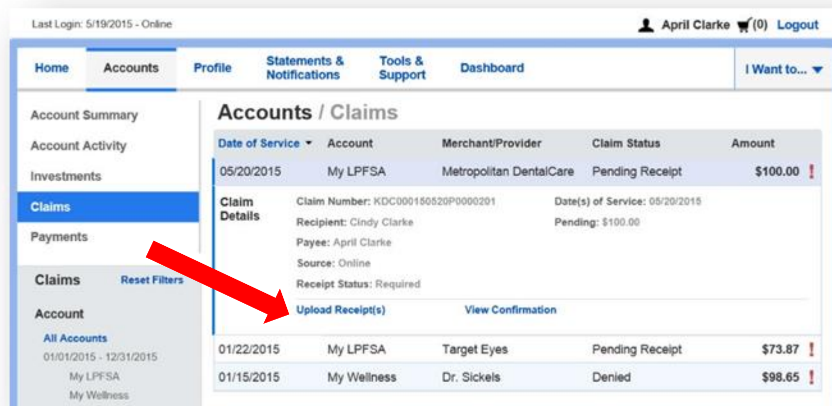
- Easily access the **Available Balance** and **“I Want To”** sections from the left-hand navigation area.
- The **I Want To** section contains the most frequently used features for the Consumer Portal.
- In the left-hand column Available **Balance** links to the Account Summary page, where you can see and manage your accounts.
- The **Message Center** section displays alerts and relevant links that enable you to keep current on your accounts.
- The **Quick View** section graphically displays some of your key account information.

You can also hover over the tabs at the top of the page.

HOW DO I FILE A CLAIM AND UPLOAD A RECEIPT?



1. On the **Home Page**, you may simply select the "**File a Claim**" under the "I want to…" section which can be located on the left-hand side of the home page.
   OR from any page on the portal, expand the "I want to…" section on the right hand side of the screen.
2. The claim filing wizard will walk you through the request including entry of information, payee details and uploading a receipt.
3. For submitting more than one claim, click **Add Another**, from the **Transaction Summary** page.
4. When all claims are entered in the **Transaction Summary**, agree to the terms and conditions click **Submit** to send the claims for processing.
5. The **Claim Confirmation** page displays. You may print the **Claim Confirmation Form** as a record of your submission. If you did not upload a receipt, you can upload the receipt from this screen or print a **Claim Confirmation Form** to submit to the administrator with the required receipts.



NOTE: If you see a **Receipts Needed** link in the Message Center section of your Home Page, click on it. You will be taken to the **Claims** page where you can see the claims that require documentation. You can easily upload the receipts from this page. Simply click to expand the line item to view claim details and the **upload receipts link.**

HOW DO I VIEW CURRENT ACCOUNT BALANCES AND ACTIVITY?

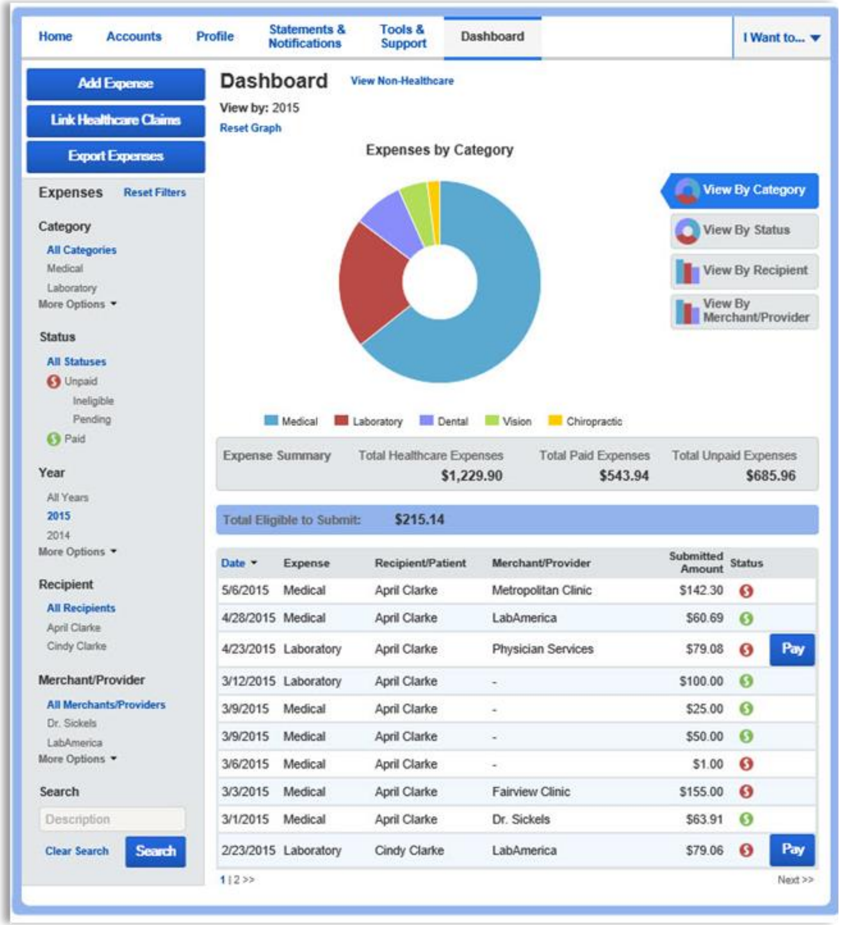
1. For current Account Balance only, on the **Home Page**, see the **Available Balance** section.
2. For all Account Activity, click on the **Available Balance** link from the Home Page to bring you to the Account Summary page. Then you may select the underlined dollar amounts for more detail. For example, click on the amount under “Eligible Amount” to view enrollment detail.

NOTE: You can see election details by clicking to expand the line item for each account.

ALL HEALTH CARE EXPENSE ACTIVITY IN ONE PLACE

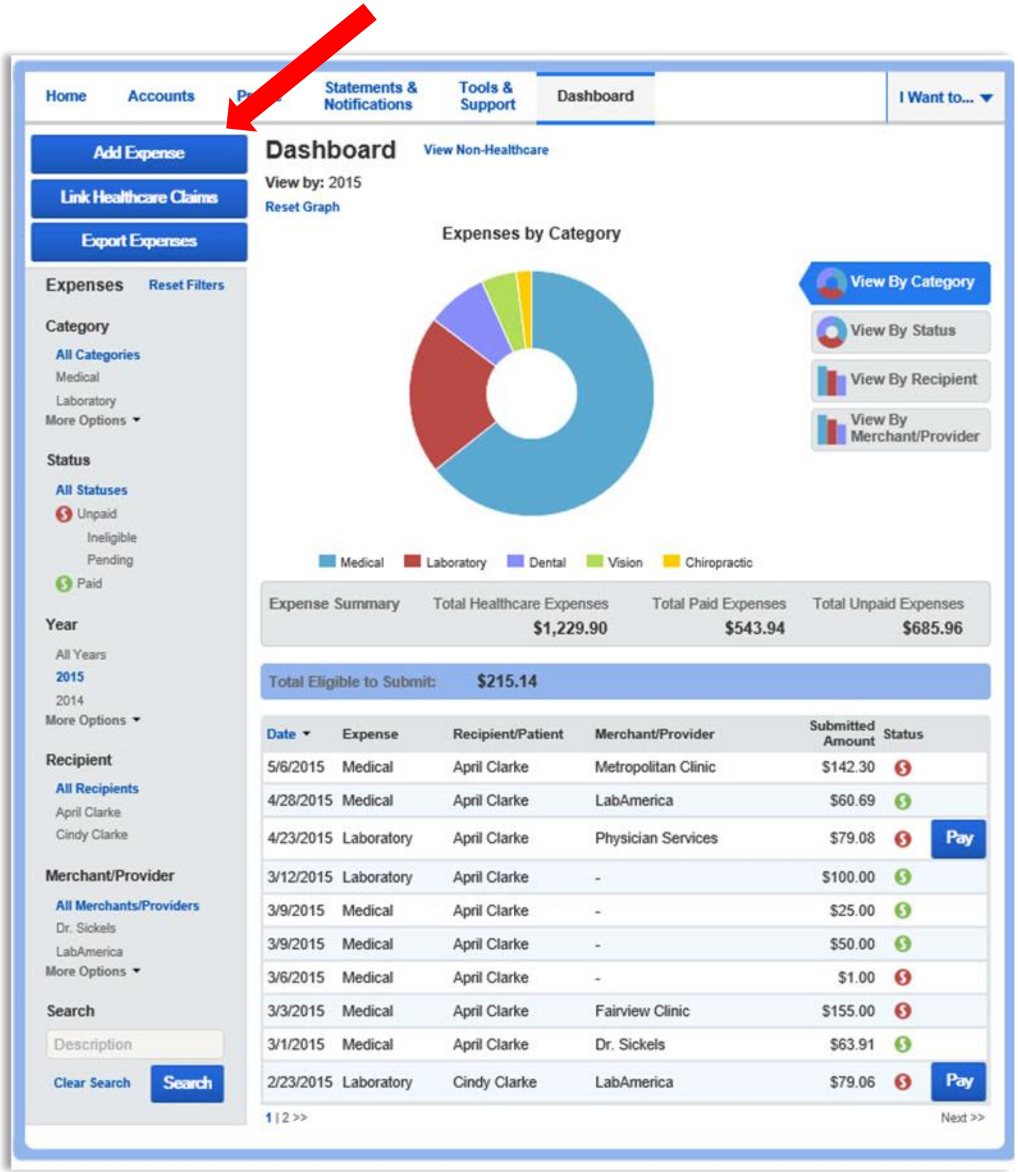
To view and manage ALL healthcare expense activity from EVERY source, use the DASHBOARD

1. On the **Home Page**, under the Dashboard tab. The 1View Dashboard provides you with an easy-to-use consolidated view of healthcare expenses for ongoing management of medical claims, premiums, and card transactions.
2. Easily filter expenses by clicking on the **filter options** on the navigation pane on the left side of the screen or, by clicking on the **field headers** within the Dashboard.
3. You can search for specific expenses using the **search field** on the bottom left side of the screen.
4. Expenses can be exported into an Excel spreadsheet by clicking on the **Export Expenses** button on the upper left side of the page.



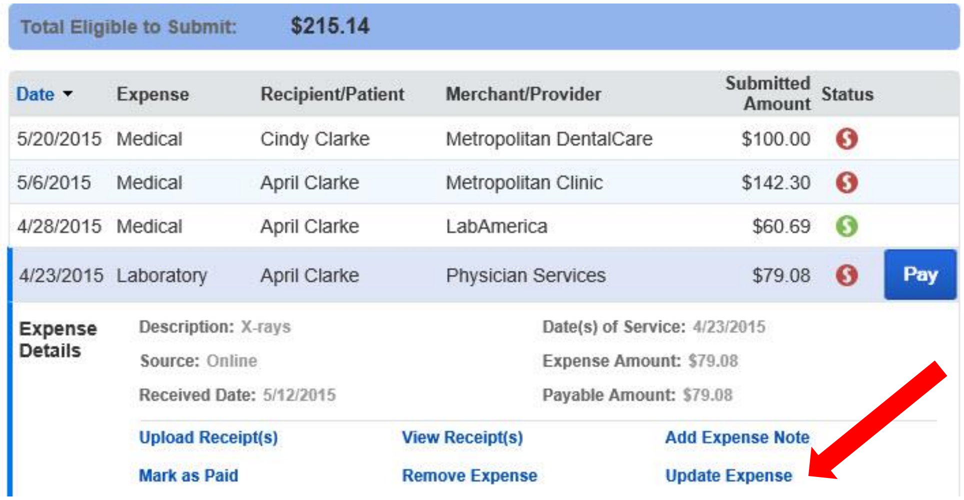
HOW DO I ADD AN EXPENSE TO THE DASHBOARD?

1. From the Dashboard click on the **Add Expense** button in the upper left side of the page.
2. Complete the expense detail fields. You can even upload a copy of the receipt and, add notes for your records.
3. Once the expense has been added to the dashboard you can pay the expense, if desired.



HOW DO I EDIT AN EXISTING EXPENSE IN THE DASHBOARD?

1. You can edit expense details for all claim statuses directly from the Dashboard page.
2. Expand the claim details visible by clicking on the expense line item from the Dashboard.
3. You will be presented with options to add expense notes, update the expense details, mark the expense as paid/unpaid or, remove the expense from the Dashboard.



HOW DO I VIEW MY CLAIMS HISTORY AND STATUS?

1. From the **Home Page**, click on the **Accounts Tab,** and then click on the **Claims** link to see your claims history. You can apply filters from the left-hand side of the screen. You can filter by plan year, account type, claim status or receipt status.
2. By clicking on the line of the claim, you can expand the data to display additional claim details.

Did you Know? For an alternative perspective, you may also view claims history and status for all claim types including dependent care on the **Dashboard** page**.** You can apply filters from the left-hand side of the screen. Filter options on the Dashboard screen include: expense type, status, date, recipient or merchant/provider. You may also search for a specific expense by entering a description into the search field.

HOW DO I VIEW MY PAYMENT (REIMBURSEMENT) HISTORY?

1. From the **Home Page**, under the **Accounts** tab, click **Payments**. You will see reimbursement payments made to date, including debit card transactions.
2. By clicking on the line of a payment, you can expand the data to display additional details about the transaction.

HOW DO I REPORT A DEBIT CARD MISSING AND/OR REQUEST A NEW CARD?

1. From the **Home Page**, under the **Profile**, click the **Banking/Cards** link on the left-hand side of the screen.

Under the Debit Cards column, click **Report Lost/Stolen** or **Order Replacement** and follow instructions.

HOW DO I UPDATE MY PERSONAL PROFILE?

1. From the **Home Page**, under the **Profile,** you will find links to update profile information including profile summary details, dependents, and beneficiaries.
2. Click the appropriate link on the Profile screen for your updates: **Update Profile** or **Add/Update Dependent** or **Add Beneficiary.** Some profile changes will require you to answer an additional security question.
3. Complete your changes in the form.
4. Click **Submit**.

HOW DO I CHANGE MY LOGIN PASSWORD?

1. From the **Home Page**, click on the **Profile** tab, and click **Login Information** on the left-hand navigation bar.
2. Follow instructions on the screen. (For a new account, the first time you log in, you will be prompted to change the password that was assigned by your plan administrator. Follow the instructions.)
3. Click **Save**.
4.

HOW DO I VIEW OR ACCESS…

…DOCUMENTS & FORMS?

1. From the **Home Page**, click the **Tools & Support** tab.
2. Click any form or document of your choice.

…NOTIFICATIONS?

1. From the **Home Page**, click the **Statements & Notifications** tab.
2. Click any link of your choice. **Receipt Reminders**, **Account Statements**, **Advice of Deposits**, **Denial Letters**, or **Denial Letters with Repayments** are a few options.

…PLAN INFORMATION?

1. On the **Home Page**, under the **Accounts** tab, you will be directed to the **Account Summary** page
2. Click onto the applicable account name and the **Plan Rules** will open in a pop-up window.
   OR from the **Home Page**, under the **Tools & Support** tab, you may view **Plan Summaries** for basic information. Then click each applicable plan to see the plan details.