SPECIAL NOTICES

OCTOBER 2026

NONDISCRIMINATION NOTICE

Under Section 1557 of the Affordable Care Act

Discrimination is Against the Law

The Electrical Insurance Trustees Health & Welfare Plans (the "Plans") complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. The Plans do not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

The Plans:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign language interpreters; and
  - Written information in other formats (large print, audio, accessible electronic formats, and other formats); and
- Provides language services to people whose primary language is not English, such as:
  - Qualified interpreters; and
  - Information written in other languages.

If you need these services, contact Ms. Erin Keane, the Civil Rights Coordinator.

If you believe that the Plans have failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Ms. Erin Keane, Civil Rights Coordinator
Electrical Insurance Trustees Insurance Trust Fund
6195 W. 115th Street, Alsip, IL 60803
312-782-5442 (main phone)
312-782-9765 (fax)
ekeane@fundoffice.org

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Ms. Erin Keane, Civil Rights Coordinator, is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at:
http://www.hhs.gov/ocr/office/file/index.html.

The Plans include:

Electrical Insurance Trustees Health & Welfare Plan for Construction Workers
Employer Identification Number: 36-1033970;
Plan Number: 501

Electrical Insurance Trustees Health & Welfare Plan for Communication Members
Employer Identification Number: 36-1033970;
Plan Number: 510

Electrical Insurance Trustees Health & Welfare Plan for Building, Hotel, Sign and Maintenance Employees
Employer Identification Number: 36-1033970;
Plan Number: 502

Electrical Insurance Trustees Health & Welfare Plan for Office and Miscellaneous Employees
Employer Identification Number: 36-1033970;
Plan Number: 501

Electrical Insurance Trustees Health & Welfare Plan for the Employees of the Contractors' Association, Fund Office, Apprentice Schools and Union Office
Employer Identification Number: 36-1033970;
Plan Number: 501

Electrical Insurance Trustees Health & Welfare Participatory Plan Employer Identification Number: 36-1033970;
Plan Number: 501

For a list of the languages available for translation, please see the reverse side of this document.

EIT
BENEFIT
FUNDS

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Illinois Top 15 Languages

Spanish:
ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-312-782-5442, ext. 212.

Polish:
UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-312-782-5442, ext. 212.

Chinese:
注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電1-312-782-5442, ext. 212.

Korean:
주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-312-782-5442, ext. 212 번으로 전화해 주십시오.

Tagalog:
PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-312-782-5442, ext. 212.

Arabic:
ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم
1-312-782-5442, ext. 212

Russian:
ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-312-782-5442, ext. 212.

Gujarati:
સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-312-782-5442, ext. 212.

Urdu:
5442-782-312-1-1کریں ۔ کال پر دستیاب ہیں خدمات مفت میں کی مدد کی زبان کی آپ کو تو ہیں، بولتے اردو آپ اگر :خبردار, ext. 212

Vietnamese:
CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-312-782-5442, ext. 212.

Italian:
ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-312-782-5442, ext. 212.

Hindi:
ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-312-782-5442, ext. 212 पर कॉल करें।

French:
ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-312-782-5442, ext. 212.

Greek:
ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε 1-312-782-5442, ext. 212.

German:
ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-312-782-5442, ext. 212.