

# AUTOMATIC SPRINKLER LOCAL 281, U.A. WELFARE FUND



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## SUMMARY OF MATERIAL MODIFICATIONS #17

**Benefit Improvement | Preventive Dental Coverage | Effective January 1, 2022**

**October 20, 2021**

Dear Participant:

This notice, referred to as a Summary of Material Modifications (SMM), describes an important change to the preventive dental benefits offered by the Automatic Sprinkler Local 281, U.A. Welfare Fund. Specifically, the Fund's Trustees adopted an improvement to these benefits, which will become effective January 1, 2022. Accordingly, we encourage you to read this notice carefully and to keep it with your Summary Plan Description (SPD) and Plan Document.

### **Improvement to the Plan's Preventive Dental Care**

The Trustees are committed to taking proactive measures to improve your program of health benefits wherever possible. As part of this commitment, they periodically review the Fund's financial strength and evaluate adjustments designed to minimize Participants' out-of-pockets costs.

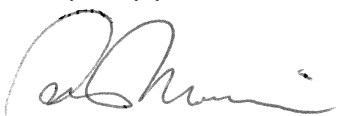
Currently, as set forth in Chapter 8 of the SPD and Plan Document, the Welfare Fund will pay 80% of Usual and Customary Charges for preventive dental services up to \$2,500.00 per person per calendar year. In other words, this means that right now, you would be responsible for paying 20% out-of-pocket for these dental charges.

The Trustees are pleased to announce, that effective January 1, 2022, the Fund will cover 100% of specified preventive dental services. This means that each Participant and Eligible Dependent (including children) is eligible for the following **preventive dental services at no charge per calendar year: two cleanings, two examinations, and two bitewing X-rays**. The Plan's cost associated with preventive dental services will still accumulate towards the \$2,500 per person per calendar year maximum.

### **Conclusion**

We trust this change will be favorable for you and your family. The Trustees will continue to monitor the Fund's resources to ensure it is able to provide exceptional health coverage to members and their families for years to come. As always, if you have any questions about this SMM, or the Fund in general, please feel free to contact the Fund Office.

Very truly yours,



*Tim Morrin*, Administrator

On behalf of the Board of Trustees of the  
Automatic Sprinkler Local 281, U.A. Welfare Fund

### No-Cost Programs Available to You and Your Family

You should be aware that, in addition to the program of dental benefits available to you and your family, the Fund offers the following programs at no charge to participants.

1. **Absolute Solutions.** This is a National Imaging Network you may utilize to schedule free MRIs, CT or PET Scans. You may contact Absolute Solutions at [www.absolutedx.com](http://www.absolutedx.com) or 800-321-5040. This program is available to the active participant population. It is not available to anyone covered under the Humana Medicare Advantage and Prescription Drug (MAPD) program.
2. **Employee Resource Systems.** This is a Member Assistance Program (MAP) you may utilize for a limited number of free and confidential counseling sessions for mental health and substance abuse issues. You may contact the MAP at [www.ers-eap.com](http://www.ers-eap.com) or 800-292-2780. This program is available to the active participant population. It is not available to anyone covered under the MAPD program provided through Humana.
3. **Empower Health Services.** This is a provider you may utilize to schedule free health assessments and evaluations. You may contact the provider at [www.empowerhealthservices.info](http://www.empowerhealthservices.info) or (866) 367-6974. This program is available to all participants.
4. **MDLIVE.** This is a Telemedicine / Virtual Visit Tool you may utilize for free access to care for non-emergent medical issues. You may contact MDLive at [www.MDLIVE.com/bcbsil](http://www.MDLIVE.com/bcbsil) or 888-676-4204. This program is available to the active participant population. It is not available to anyone covered under the MAPD program provided through Humana.
5. **ATI Physical Therapy.** This is an expansive network of clinics that offer physical therapy services for shoulder, neck, back, knee and other pain and injuries. You may contact ATI at [www.ptfirst.com/local-281](http://www.ptfirst.com/local-281) or 833-284-0001. This program is available to the active participant population. It is not available to anyone covered under the MAPD program provided through Humana.

### The Importance of Using In-Network Providers for Health Claims

The Fund has contracted with Blue Cross Blue Shield of Illinois (PPO) to help manage certain health care expenses for you and the Fund. PPO Providers, such as hospitals and physicians within the PPO Network, have agreed to charge discounted rates for services. When you choose to use a PPO Provider, both you and the Fund will save money.

After satisfying applicable Deductibles, the Plan typically covers 85% of the Usual and Customary Charges associated with treatment rendered by a PPO Provider. However, the Plan will cover only 60% of the Usual and Customary Charges associated with treatment rendered by a non-PPO Provider, and the Usual and Customary Charge will typically be no greater than what a PPO Provider would have charged for the same treatment. Additionally, unlike PPO Providers, providers outside the PPO Network have not agreed to charge discounted rates for their services. Therefore, if you use a non-PPO Provider you may be responsible for significant medical fees pursuant to a practice known as *balance billing*. Under this practice, the non-PPO Provider charges the patient the difference between the amount billed and the amount paid by the Fund. Consequently, the Fund strongly encourages all participants to remain *in-network* when seeking medical care.

**Important Note.** In general, the rules summarized in this box apply to health claims. For dental claims, the Plan typically covers 20% of the Usual and Customary Charge associated with treatment rendered by providers, after satisfaction of applicable Deductibles, subject to the Plan's maximums.