

AUTOMATIC SPRINKLER

LOCAL 281, U.A.

WELFARE FUND



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SUMMARY OF MATERIAL MODIFICATIONS #5

Important **Improvements** to your Plan of Benefits Effective January 1, 2019

November 2018

Dear Participant:

This notice, referred to as a Summary of Material Modifications (SMM), describes important changes to the rules of the Automatic Sprinkler Local 281, U.A. Welfare Fund. We encourage you to read this notice carefully and to keep it with your Summary Plan Description and Plan Document. As always, please feel free to contact the Fund Office if you have any questions.

Benefit Improvements

The Trustees are pleased to announce several important improvements to your benefits effective January 1, 2019:

1. *Better Dental Coverage.* The \$1,500 annual maximum for dental services will increase to \$2,500. This improvement applies to all participants.
2. *Better Orthodontia Coverage.* The \$1,500 annual maximum for orthodontia and periodontal services will increase to \$2,500. This improvement applies to all participants.
3. *Better Chiropractic Coverage.* The \$35 per visit allowance for chiropractic care for active and non-Medicare eligible participants will increase to \$50 per visit with a maximum of 24 visits per year.
4. *Better Vision Coverage.* The \$150 annual in-network frame allowance for active and non-Medicare eligible participants will increase to \$300.

Conclusion

The Trustees will continue to monitor the Fund's resources to ensure that it is able to provide high-quality health coverage to members and their families for many years to come. It is their hope that the Fund's financial position will remain strong so they may authorize further benefit improvements in addition to the improvements summarized in this SMM.

The viability of any such improvements will depend on the investment performance of the Fund's portfolio, the amount of work hours generated in the future, the contribution rate to the Fund, claims experience, healthcare costs, and numerous other factors.

As always, if you have any questions about this SMM, or the Fund in general, please feel free to contact the Fund Office. In the event of an ambiguity or conflict between this SMM and the Summary Plan Description and Plan Document, as amended, the Summary Plan Description and Plan Document will control.

Note Regarding the Importance of Using In-Network Providers

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.

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.

Note Regarding Medicare-Eligible Participants

The Fund provides chiropractic and vision benefits to Medicare-eligible participants through its comprehensive, fully-insured Medicare Advantage Prescription Drug (MAPD) program. This program renews on an annual basis and the renewal period has already expired. Consequently, any modifications to the program's chiropractic and vision benefits similar to the modifications summarized in this notice cannot be considered, approved, and implemented until the following plan year.

In addition, included with this notice is a flyer from Interactive Health, as a reminder of the Welfare Fund's **free**, 2018 Early Detection and Prevention Health Program, available until February 28, 2019. Also, as another reminder to all pre-Medicare Participants, we have provided a flyer from Absolute Solutions, our Welfare Fund's imaging network. If your doctor prescribes an MRI, CT or PET Scan, by calling Absolute Solutions, you will receive discounted services, throughout the year and there will be **no deductibles or out of pockets costs applied**. Both **free** services are offered to save the Plan and Participants money as well as improving the health and well being of the Participants.

Sincerely,



Tim Morrin
On Behalf of the
Board of Trustees