

SOUTHERN CALIFORNIA PIPE TRADES HEALTH & WELFARE FUND

(Active Plan)

SUPPLEMENT No. 8

To: All Participants

From: Board of Trustees

Date: December 2013

Re: Additional Benefit Improvements

KEEP THIS NOTICE WITH THE SUMMARY PLAN DESCRIPTION

Here is a summary of Health & Welfare Fund (Active Plan) additional benefit improvements starting January 1, 2014:

- Outpatient Speech Therapy will be paid at 100% of the Blue Shield Contract Rate if a Blue Shield of California-Contracting provider is used.
- Outpatient Cardiac Rehabilitation benefits will be paid at 100% of the Blue Shield Contract Rate if a Blue Shield of California-Contracting provider is used.
- Transplants will be covered at 100% of the first \$100,000 plus 60% of the remaining applicable percentage of covered charges if a Blue Shield of California-Contracting provider is used.
- Bariatric surgery will be covered as a medical benefit, subject to strict criteria and only if a Blue Shield of California-Contracting provider is used.
- Renal dialysis facility charges will be paid at 95% of the Blue Shield Contract Rate if a Blue Shield of California-Contracting provider is used.
- Hearing aids will be covered up to \$1,000 per device per ear per 36 month period, subject to a separate \$50 deductible.

Revised Summary Plan Description Sections

The following revisions to the Summary Plan Description reflect the improvements discussed above.

Hearing Aid Benefit

In Section 11, subsection I of the Summary Plan Description (Hearing Aid Benefit), the reference to \$500 is eliminated and \$1,000 will take its place.

Speech Therapy

In Section 11, subsection M of the Summary Plan Description (Outpatient Speech Therapy Benefits), the first sentence will read as follows:

“If a Participant or Eligible Dependent, as a result of an Illness or Injury, suffers speech impairment or loss and is referred by a Physician to a qualified speech pathologist, the Plan will pay 100% of the Blue Shield Contract Rate if a Blue Shield of California-contracting provider is used, or the lesser of \$22.50 per visit or billed charges if a non-Blue Shield provider is used.”

Cardiac Rehabilitation

In Section 11, subsection N of the Summary Plan Description (Outpatient Cardiac Rehabilitation), the following description takes the place of the current description:

“The Plan will pay 100% of the Blue Shield Contract Rate if a Blue Shield of California-contracting provider is used, or the lesser of \$25 per visit or billed charges if a non-Blue Shield provider is used.”

Transplants

In Section 11, subsection T of the Summary Plan Description (Transplants), the third paragraph will read as follows:

“The maximum benefit payable in connection with any one-organ transplant is \$100,000. If a Blue Shield of California-Contracting provider is used, the Plan will pay 60% of the excess of the applicable percentage of the Blue Shield Contract Rate over \$100,000, depending on the services provided. The applicable percentage is 95% for facility charges and 100% for professional charges from Blue Shield-Contracting Providers. This benefit includes all pre and post-transplant care, including but not limited to, chemotherapy, radiation therapy, laboratory services, x-rays or scans and prescription medication.”

Bariatric Surgery

In Section 17 (Plan Exclusions and Limitations), line 58 will read as follows:

“Any surgical procedure, to reduce weight, regardless of any underlying medical conditions that are exacerbated by the weight (Example: Hypertension, diabetes, arthritis, etc.), except Medically Necessary pre-authorized bariatric surgery.”

Section 3 (Summary of Active Plan Benefits): Pages 41 through 45 have been revised as shown on the enclosure.