

Plasterers & Cabinet Makers Health Fund

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Fund Administrators

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IMPORTANT NOTICE TO PLAN PARTICIPANTS

SUMMARY OF MATERIAL MODIFICATIONS TO THE SUMMARY PLAN DESCRIPTION FOR THE PLASTERERS AND CABINET MAKERS HEALTH FUND (APRIL 2016)

The Trustees of the Plasterers and Cabinet Makers Health Fund announce the following changes to the Plan on the effective dates listed below.

Effective March 1, 2020

Telehealth Visits - The Plan has extended coverage for telehealth benefits and will cover such services on an in-network and out-of-network basis the same as a regular office visit. This extension of coverage does not include medical providers who only offer their services online and do not otherwise operate through an established medical office or clinic.

As an important reminder, the Plan continued to cover telehealth medical visits through Doctor on Demand and those visits remain covered at 100%.

Effective September 1, 2020

Sex Transformation Services – The Plan's exclusion for charges incurred for any operation or treatment in connection with sex transformation is removed.

Effective January 1, 2021

Preventive Services – The Plan is amended to extend in-network coverage at 100% with no cost sharing for all services defined as preventive services under the Patient Protection and Affordable Care Act (ACA). Out-of-network coverage for preventive services remains subject to the deductible and coinsurance provisions of the Plan's Schedule of Benefits.

GRANDFATHERED STATUS

The Plasterers and Cabinet Makers Health Fund believes this Plan is a "grandfathered health plan" under the Patient Protection and Affordable Care Act (the Affordable Care Act). As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan means that your Plan may not include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for the provision of preventive health services without any cost sharing. However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, for example, the elimination of lifetime limits on benefits.

Questions regarding which protections apply and which protections do not apply to a grandfathered health plan and what might cause a plan to change from grandfathered health plan status can be directed to the plan administrator at Wilson-McShane Corporation, 3001 Metro Drive, Suite 500, Bloomington, MN 55425, 952-854-0795. You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at 1-866-444-3272 or www.dol.gov/ebsa/healthreform. This website has a table summarizing which protections do and do not apply to grandfathered health plans.

If you have any questions about these changes to the Plan, please contact the Plan Administrator at (952) 854-0795 or (800) 535-6373.

The Board of Trustees

September 2020