



SOUTHERN CALIFORNIA IBEW - NECA TRUST FUNDS

6023 Garfield Avenue, City of Commerce, CA 90040

Phone: (323) 221-5861 or (800) 824-6935

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Mailing Address:

P.O. Box 910918

Los Angeles, CA 90091



Website: www.scibew-neca.org

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SOUTHERN CALIFORNIA IBEW-NECA HEALTH TRUST FUND

Important Notice to Participants

May 2014

Continued Grandfather Status. The Board of Trustees of this group health Plan 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 Board of Trustees, c/o The Southern California IBEW-NECA Administrative Corporation at either (323) 221-5861 or toll-free at 1-(800)824-6935. 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.

Positive Enrollment. Effective July 1, 2011, employees of the Plan establishing initial eligibility will be required to complete an enrollment form for health benefits in order to access health benefits. Even if an employee has established initial eligibility for health benefits, the only benefit an employee will have until he or she completes an enrollment form for one of the medical options and one of the dental options will be life insurance. The employee’s failure to take appropriate action in enrolling for benefits will cause a reduction in the employee’s Hour Bank Reserve without providing the employee with benefits of coverage, which would exist if the employee enrolled in the benefit options available to him or her on a timely basis.

See other side →



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Women's Health and Cancer Rights Act (WHCRA)

A federal law requires group health plans including HMOs and other insurance companies providing coverage for mastectomies to also cover reconstructive surgery after a mastectomy. The purpose of this notice is to remind you and your covered spouse of the following benefits available to you if you undergo a mastectomy:

- Reconstruction of the breast on which the mastectomy was performed;
- Surgery and reconstruction of the other breast to produce a symmetrical appearance;
- Prostheses; and
- Treatment of physical complications in all stages of the mastectomy, including lymphedemas.

Your medical coverage in connection with any treatment involving a mastectomy will be provided in consultation with the attending physician and the patient.

Your coverage for treatment of a mastectomy will be subject to annual deductibles and coinsurance provisions that are consistent with those established for other benefits under the plan or coverage.

If you have any questions, contact your HMO directly or call the Administrative Office for assistance.