CANTON ELECTRICAL WELFARE FUND

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SUMMARY OF MATERIAL MODIFICATION FOR THE SUMMARY PLAN DESCRIPTION OF THE CANTON ELECTRICAL WELFARE FUND

This is a notice of modifications made to the Canton Electrical Welfare Fund and is being furnished to you by law. This Notice should be kept with your Summary Plan Description booklet. In accordance with applicable provisions of the Affordable Health Care Act the Plan is being changed as follows:

Effective November 1, 2014, the Plan shall be amended to eliminate the requirement that a person must complete the program provided for drug and alcohol abuse in order to be eligible for inpatient treatment benefits. Accordingly, the Plan will provide as follows:

VI. EXPLANATION OF MEDICAL BENEFITS

Drug Abuse and Alcoholism Services:

Detoxification and rehabilitation services are provided for the treatment of Drug Abuse or Alcoholism in addition to the appropriate services listed in the Mental Health Care Services section.

Treatment that is prescribed by a physician or licensed psychologist and performed by a physician or a licensed psychologist or a licensed therapist under the supervision of the prescribing physician or licensed psychologist is a covered benefit. However for those participants covered under Medical Mutual, the claims for treatment by licensed therapist must be filed under the supervising physician's/licensed psychologist's name.

Services not covered under this benefit include:

- Treatment not prescribed by a physician or licensed psychologist and not performed by a physician or licensed psychologist or a licensed therapist under the supervision of the prescribing physician or licensed psychologist.
- Legal services, recreational, vocational, financial, or educational counseling, except as part of a chemical dependency treatment program.
- Detoxification or drug withdrawal programs not rendered by a hospital or as part of a maintenance program.
- Personal comfort items.
- Marriage or family counseling except as part of a psychiatric treatment program.
- Charges for services provided by a Social Worker.

If you have any questions regarding these changes, please contact the Fund Office.

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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 mean 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 preventative 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, 33 Fitch Blvd., Austintown, Ohio 44515. 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.