## I.B.E.W. Local 688 Health & Welfare Plan

33 FITCH BOULEVARD AUSTINTOWN, OHIO 44515



PHONE: 800-435-2388 FAX: 330-270-0912

## NOTICE OF ELIMINATION OF PLAN LIFETIME LIMITS

## **NOTICE OF IMPLEMENTATION OF ANNUAL PLAN LIMIT**

## NOTICE OF ELIMINATION OF PRE-EXISTING CONDITION LIMIT FOR CHILDREN

Due to changes required by the Affordable Health Care Act of 2010, the Board of Trustees of the Fund has recently made changes to the Plan/Summary Plan Description. These changes are outlined below. Please keep this Summary of Material Modification with your Summary Plan Description.

You are now notified that, effective June 1, 2011, lifetime limits on the dollar value of essential benefits under I.B.E.W. Local No. 688 Health and Welfare Fund will no longer apply. Individuals whose coverage ended by reason of reaching a lifetime limit under the Plan are eligible to enroll in the Plan. Individuals have 30 days from the date of this Notice to request enrollment.

You are also notified that, effective June 1, 2011, the Plan has implemented an annual maximum benefit limit of \$1,000,000. All essential benefits currently subject to annual limits, including the prescription drug benefit, will be subject to the new overall annual maximum limit.

In addition, effective June 1, 2011, the Section of the Plan entitled "Pre-Existing Conditions Limitation", currently presented on Pages 20 and 21 of the Summary Plan Description (SPD), shall not apply for children under the age of 19.

BOARD OF TRUSTEES I.B.E.W. Local No. 688 Health and Welfare Fund

April 28, 2011