## Ohio Conference of Plasterers and Cement Masons Health and Welfare Fund

33 Fitch Boulevard • Austintown, Ohio 44515 Telephone (330) 270-0453 • Toll Free 1-800-435-2388



## NOTICE OF MEDICAL REIMBURSEMENT OPT-OUT

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.

Currently, employers make contributions on behalf of Participants into Medical Reimbursement Accounts. The money in these accounts is available for Participants to use for medical care that is not covered by health insurance.

Effective May 1, 2014, Participants will have the ability to <u>permanently</u> opt-out of the Medical Reimbursement Accounts. This means that, starting May 1, 2014, a Participant can elect to remove himself from the MRA.

## \*IMPORTANT\*

If you opt-out, you are NOT permitted to re-enroll in the MRA. Choosing to opt out is <u>PERMANENT</u>. Any money that is in your MRA at the time you opt out would be forfeited. Future employer contributions would not be given to you. Instead, they would simply go into the general Ohio Conference of Plasterers and Cement Masons Health and Welfare Fund.

In other words, if you opt out of the MRA, you will receive **no** further benefit from the MRA. You will **not** receive the money that was going into the MRA into your pocket. You will **not** have the ability to send that contribution anywhere else.

If you want to remain in the MRA, you do not need to do anything. Your MRA will continue as it always has. However, if you do opt out, it is <u>PERMANENT</u> and you will <u>forfeit</u> any amount you have in your MRA at the time you opt out.

Please contact the Fund Office if you have any questions.

BOARD OF TRUSTEES
Ohio Conference of Plasterers and Cement
Masons Health and Welfare Fund

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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 <a href="https://www.dol.gov/ebsa/healthreform">www.dol.gov/ebsa/healthreform</a>. This website has a table summarizing which protections do and do not apply to grandfathered health plans.