



WISCONSIN ELECTRICAL EMPLOYEES BENEFIT FUNDS



2730 DAIRY DRIVE • SUITE 101 • MADISON, WI 53718 • PHONE (608) 276-9111 • (800) 422-2128
RECEIVING FAX (608) 276-9103 • HEALTH CLAIM FAX (608) 288-9095
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LOCAL UNIONS #14, 127, 158, 159, 388, 430, 577, 890
NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION-WISCONSIN CHAPTER

SUMMARY OF MATERIAL MODIFICATIONS TO THE SUMMARY PLAN DESCRIPTION DATED JANUARY 1, 2012 FOR THE WISCONSIN ELECTRICAL EMPLOYEES HEALTH AND WELFARE PLAN

September 2014

*** As a reminder please remember to immediately update your address with the Benefit Office anytime that you move. Notice can be sent to the address or fax numbers shown above on our letterhead. ***

** For Retirees and dependents on Medicare, there is no need to enroll in a separate Part D program from this Plan. If you do enroll in other coverage you do get terminated from the Prescription Drug Plan offered through United Healthcare and Sav-Rx. Drug coverage is included as part of the premium paid by retirees for Medical subsidy coverage. **

Effective January 1, 2013, the prescription drug copayment was improved to allow for a choice to receive a 61 to 90 day supply or eligible retail and mail order medications. (Previously you were only able to receive up to a 60 day supply.) Copayments for Generic Medication is \$10 for 60 days or less and \$15 for 61 to 90 supply. Copayments for Brand Medication is \$50 for up to a 60 day supply and \$75 for a 61-90 supply.

Effective January 1, 2013 coverage for Routine Physical Examination and Immunizations by a NON-PPO provider was increased to \$450 per calendar year and then a 90% participant copayment for the remainder of the calendar year for out-of-network services provided by a non-ppo provider. (Previously coverage was limited to \$450 per calendar year.

Effective January 1, 2014 the Catastrophic Health Plan option will no longer be available for those participants who have lost coverage.

Effective January 1, 2014 the Plan has made a benefit improvement where you will have a maximum out of pocket expense of \$6,350 for each individual and \$12,700 per family **for Prescription Drugs**. The Prescription Program will work as it has in the past where you pay copays for each script, \$10 for Generic or \$50 for Brand name medication. The Plan will cover the first \$10,000 of Prescription Drug Expenses after which the Plan pays 50% of prescription drugs

expenses up to a \$6,350 Individual out-of-pocket maximum or \$12,700 family out-of-pocket maximum. If the out-of-pocket maximum has been reached, the Plan will pay at 100% for the remainder of the calendar year.

Effective January 1, 2014 the Plan was amended to remove any language pertaining to pre-existing condition exclusions.

Effective January 1, 2014 to the extent required under PPACA, the Plan will not deny any Qualified Individual the right to participate in an Approved Clinical Trial, deny limit or impose additional conditions on the coverage of Routine Patient Costs for items and services furnished in connection with participation in the Approved Clinical Trial. Qualified individuals must use a PPO Provider if a PPO Provider is participating in an Approved Clinical Trial and the PPO Provider will accept the Qualified Individual as a participant in the Approved Clinical Trial.

Effective February 4, 2014, the Plan was amended to reduce the time period to file a lawsuit from two years to one year statute of limitations provided the person bringing such action has properly filed an appeal pursuant to the Plan's appeal procedure and has received the Trustees decision on such appeal.

Effective April 29, 2014, the Plan was amended to clarify that the exclusion relating to injury or illness resulting from the commission of a criminal act is not applicable with regard to losses resulting from acts of domestic violence.

Effective August 1, 2014 Northwestern Mutual changed service providers for their Employee Assistance Program from Horizon Behavioral Health to Bensinger, Dupont & Associates (BDA). The Service Model, Toll Free number (888-893-6585) and your log in information remained the same. However, the web address was changed to www.eapbda.com

Effective September 1, 2014 the Plan added a feature where participants and their eligible dependents may receive flu shots at participating pharmacies (Walgreens, CVS, Rite Aid, SuperValu, Albertson's and Target) without cost sharing, simply by presenting your Sav-Rx Prescription Drug Card. Retirees on Medicare will have the claim processed by the pharmacy first through Medicare Part B as primary and then through Sav-Rx as secondary.

Trustee Changes

Effective July 2013, Robert Doyle IBEW Local Union 159 replaced Mark Hoffman as an Employee Trustee, Effective April 2014 John Desens, Westphal & Company, Inc. replaced Employer Trustee position previously vacated by Larry Navarette and Effective July 2014 Sean Frank IBEW Local Union 127 replaced Ed Gray as an Employee Trustee.