



INTERNATIONAL UNION OF OPERATING ENGINEERS  
**LOCAL 4**  
Health and Welfare Fund

January 2017

**Important Notice from IUOE Local 4 Health and Welfare Fund about the  
Affordable Care Act - Summary of Benefits and Coverage**

**Summary of Benefits and Coverage (SBC) and Uniform Glossary of Terms**

The IUOE Local 4 Health and Welfare Fund is required to provide its members with an easy-to-understand summary about their health plan's benefits and coverage. The SBC is designed to help members better understand and evaluate their health plan benefits.

All insurance companies and group health plans use the same standard SBC form. The SBC form also includes details, called "coverage examples," which are comparison tools that allow members to see what the plan would generally cover in two common medical situations. Members have the right to receive the SBC from the Health Fund upon request. Members may also request a copy of the uniform glossary of terms from the Health Fund.

**What This Means for Our Members**

The rules are a joint effort among the Department of Health and Human Services, the Department of Labor, and the Department of the Treasury. The SBC is designed after the Nutrition Facts label required for packaged foods which helps people make healthy and informed decisions about their diet. The SBC's standardized and easy to understand information about our health plan benefits and coverage allows members to more easily understand the benefits available to them.

**Some Important Details**

- This provision applies to **all** health plans, whether members get coverage through their employer or purchase it themselves, beginning September 23, 2012 (*beginning January 1, 2013 for the IUOE Local 4 Health and Welfare Fund*).
- All health plans must provide an SBC to members upon request.
- The coverage examples give a general sense of how our plan would cover the normal delivery of a baby, and services to help a person control type 2 diabetes.
- You may be receiving an SBC for the Basic Plan *and* for various COBRA plans. If you do, it's because we are required by law to send the SBC now even though we may not have yet received all information necessary to substantiate whether you have worked sufficient hours in 2016 to establish eligibility under the Basic Plan. You will receive a Report of Contributions in February 2017 informing you whether you are eligible for coverage under the Basic Plan beginning March 1, 2017.

**Notice continued on reverse side of this page**

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Medway, MA 02053-0660

TEL (508) 533-1400  
FAX (508) 533-1404  
1-888-486-3524

**The SBC is enclosed with this letter**

We encourage you and your family to read this SBC carefully to make the best use of the benefits available to you and your family under the IUOE Local 4 Health and Welfare Fund. The SBC and the Uniform Glossary of Terms are both available on our website: [www.local4funds.org](http://www.local4funds.org).

If you have any questions concerning the medical or dental benefits, you may call Blue Cross Blue Shield at 1-800-401-7690. If you have any questions about prescription or vision benefits or about any other material in the SBC, please contact the Benefit Funds Office at 508-533-1400 or 888-486-3524, option 5.

**Important Note:**

The SBC enclosed with this letter specifies a “Coverage Period: Beginning on 01/01/2017” (in the top right hand corner of Page 1). This means that the benefits outlined in the SBC are the benefits available under your health plan as of 01/01/2017. Going forward, each time there is a change in the benefits outlined within the SBC, the SBC will be updated and the updated version will include a new “Coverage Period” date. The “Coverage Period” date in the top right hand corner of Page 1 of the SBC does not coincide with your health plan eligibility coverage dates.

Sincerely,

**Your Board of Trustees**

Louis G. Rasetta, Chairman  
Paul C. DiMinico  
David F. Fantini  
James Reger  
John J. Shaughnessy, Jr.  
Nino Catalano

**IUOE Local 4**

Louis G. Rasetta, Business Manager

**Administrator**

Gina M. Alongi