

April 18, 2013

TO: All Plan A and Plan B Participants of the San Diego Electrical Health & Welfare Trust
FROM: Board of Trustees
RE: Plan A and Plan B Summary of Material Modifications

Please be aware of modifications to two Plan provisions as follows:

Plan A & Plan B Eligibility Rules - The Eligibility Rules for Bargaining Employees under Plan A and Plan B have been modified to clarify that when hours are received from a contributing employer or via the ERTS Reciprocal system at a contribution rate below that under the applicable LU 569 collective bargaining agreement the corresponding hours will be pro-rated to an equivalent number of hours as if the full contribution rate had been remitted.

Examples: Under Plan A - 100 hours remitted at \$4.22/hr would generate \$422.00 in contributions, which, when divided by the current hourly rate under the Inside Agreement for a journeyman of \$6.63/hr, would be reduced to 63.65 hours.

Under Plan B, 100 hours remitted at \$2.00/hr would generate \$200.00 in contributions which, when divided by the current hourly Residential rate of \$2.25/hr, would be reduced to 88.9 hours.

The impact of pro-rated hours is that fewer hours will be credited to the participant's Reserve Account to be used to qualify for coverage and/or satisfy their monthly cost of coverage. If there are insufficient hours in the Reserve Account it will be necessary to make a direct payment in order to maintain coverage.

Under "General Provisions" the Section on "Right of Recovery" has been expanded to provide that in the event an overpayment of claims occurs due to fraud or a misrepresentation of material information the amount of the overpayment may be recovered by withholding future claim payments to have been made on behalf of any Covered Person (Employee, Spouse and/or Dependent) until such time as the total overpayment has been recovered.

It is also important to be aware that whenever a claim is filed for an injury or illness believed to have been caused by a third party the Plan requires completion and execution of a Subrogation Agreement by the Covered Person (or a parent if the impacted party is a minor) and their attorney **before** payment of any related claims may be made by the Plan. The purpose of this Agreement is to ensure that the Plan will be reimbursed from the proceeds of any recovery for related claims paid in good faith on the premise that the responsible third-party should cover part or all of any resulting medical expenses. Recovering such advanced payments help to reduce the overall cost of the PPO Plan and the amount of hourly contributions required to maintain the excellent coverage being afforded to all eligible participants.

OVER

PPO Plan Disease Management Program - On April 1, 2013, an addition to the PPO Plan disease management program being managed by Alere became effective which focuses on musculoskeletal chronic conditions such as back pain (neck, upper and lower back), fibromyalgia, migraine and tension headaches, osteoarthritis, rheumatoid arthritis and various other disorders such as elbow bursitis/tendonitis, rotator cuff shoulder injury and carpal tunnel syndrome. As with all other chronic diseases being managed by Alere the goal of the program is to help the participant understand and manage the condition(s), improve function, maintain quality of care, enhance quality of life, reduce exacerbation or reoccurrence, reduce absenteeism and improve productivity.

If it is determined that a participant has been diagnosed with one or more of the identified diagnoses, a registered nurse from Alere will attempt to contact the participant by telephone for the purpose of introducing the disease management program and offering to provide important information about the chronic disease(s) with an minimum goal of preventing the disease(s) from getting worse and an ultimate goal of possibly reversing them. **There is no cost to the participant to participate in the disease management program.** Therefore, it can only benefit the participant to communicate with the Alere representative and commit to working with them.

As a reminder, the prescription drug co-payment for maintenance medications applicable to one of the chronic diseases managed under the Alere disease management program (previously 20% for generic and/or preferred brand name drugs) has been LOWERED to the **lessor of \$5 or 5%**. However, this reduced co-payment will only be applicable at the time an eligible prescription is filled if the participant is actively enrolled in the disease management program and certified by Alere as being in full compliance with the program such as communicating with the Alere registered nurses each time contact is made. Further, in the event a participant is contacted by Alere about being selected to receive a DayLink monitor, full compliance with the disease management program will require that the participant has consented to receive the monitor and that Alere confirms they are providing all requested information on a daily basis.

Best Doctors Magnet - Enclosed is a refrigerator magnet with contact information to be used by PPO Plan participants to contact Best Doctors at 1-866-904-0910 to discuss a significant diagnosis, plan of treatment, elective surgery, to request a referral to an expert specialist, or with general health care questions. **There is no out of pocket cost to covered PPO Plan participants to utilize this service.**

TRUST OFFICE RELOCATION

The Trust Office servicing the Health & Welfare and Pension Trusts, as well as the NECA/IBEW Drug-Free Workforce Program, has recently relocated to within the IBEW Local 569 building at 4545 Viewridge Avenue, #110, San Diego, CA 92123. The telephone numbers have remained the same at 858-569-6322 and 800-632-2569 from outside of the 619, 760 and 858 area codes. However, all of the telephone extensions have changed as follows:

Audrey Benjamin, Claims Exam. (P-Z)	Ext. 308	Amy Mleczo, Admin. Ass't	Ext. 326
Jenny Embleton, Claims Exam. (A-F)	Ext. 306	Matt Morfoot, Ass't Adm. Mgr	Ext. 335
Bianca Garza, Office Assistant	Ext. 305	Kelly Novak, Front Desk Mgr	Ext. 300
Adrienne Hyde, Claims Super (G-O)	Ext. 307	Ken Stuart, Admin. Mgr	Ext. 325
Robin Wheelock, Operations Mgr		Ext. 355	

Office Hours M-F 8:00AM - Noon and 1:00PM - 4:30PM

If there are any questions relative to the above please contact the Trust Office, extension #310.

Thank you.