IMPORTANT NOTICE REGARDING BENEFIT REVISIONS

To all Participants Enrolled in the following Teamsters Local 731 Health and Welfare Funds:

- Health and Welfare Fund of the Excavating, Grading and Asphalt Craft Local No. 731;
- Local 731, I.B. of T., Garage Attendants, Linen and Laundry Health and Welfare Fund;
- Local 731, I.B. of T., Private Scavengers Health and Welfare Fund

The Board of Trustees have revised the Summary Plan Descriptions to include the following revisions to the Local Union sponsored Health and Welfare Funds.

Prescription Drug Program

Effective January 1, 2014 the mandatory mail order requirement regarding maintenance medication has been removed. Maintenance medications will no longer be required to be filled through Catamaran Home Delivery. A medication is considered maintenance if taken on a regular basis for chronic conditions such as arthritis, diabetes, high blood pressure and a variety of other conditions. Participants will now be allowed to fill maintenance medications for up to a 34 day supply at a retail pharmacy for as many prescriptions as one chooses. Please note that your co-pays will not change and 90 day supplies of a medication are available through the mail order program. A review of the co-pays (your share of the cost) concerning prescription drugs are as follows:

	Retail (Up to 34 day supplies)	Mail Order (Up to 100-day supplies)
Generic Drugs	Greater of \$7.00 or 20%	\$15.00
Preferred Brand Drugs	20%	\$45.00
Non-Preferred Brand Drugs	40%	\$95.00

More information regarding prescription drug coverage is available at www.ibt731funds.org.

- Effective January 1, 2014, all medications that require a review, or prior authorization will be completed by Catamaran. Previously, depending on the drug, a review was required either by Catamaran, Med-Care Management, or the Fund Office. To make the plan easier to use, only one number is required for prescriptions Catamaran at (800) 880-1188.
- Effective January 1, 2014, smoking deterrents will be a covered benefit by the Funds for all adult participants. Covered smoking deterrents include over the counter nicotine products, Bupropion (generic only), and Chantix. A prescription from your Doctor is required, even for over-the-counter medications. There is a limit of two (2) cycles per year. Kindly contact Catamaran Home Delivery if you have any questions.

Sleep Apnea Studies

• Effective January 1, 2014, pre-approval is required before undertaking a sleep apnea test. You can pre-certify by calling Med-Care Management at (800) 367-1934.

The purpose is to inform all participants of their options involving sleep apnea services, including waiving the deductible and coinsurance if you utilize Delta Sleep.

Other

 Healthcare coverage is very confusing, even more so with the introduction of the new Affordable Care Act. For further assistance, please visit the Fund website at www.ibt731funds.org or call the Fund Office directly at (630) 887-4150.

NOTICE REGARDING GRANDFATHERED STATUS

The Trustees of the Health and Welfare Fund of the Excavating, Grading and Asphalt Craft, Local No. 731 believe it 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 means 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 preventive 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 Fund Office at 1000 Burr Ridge Parkway, Suite 301, Burr Ridge, IL 60527, telephone (630) 887-4150. You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at (866) 444-3272 or www.dol.gov/ebsa/healthreform. This website has a table summarizing which protections do and do not apply to grandfathered health plans.

Please retain this notice with your Summary Plan Description booklet for future reference.

Summary of Material Modifications EIN 36-6073848/PN 501 EIN 36-2392752/PN 501 EIN 36-6073849/PN 501 December 2013

