



**SOUTHERN CALIFORNIA PIPE TRADES
 HEALTH & WELFARE FUND**
 (Active Plan)

SUPPLEMENT No. 23

To: All Participants
 From: Board of Trustees
 Date: June 2022
 Re: Dependent Child Special Disability Benefits

**KEEP THIS NOTICE WITH THE
 SUMMARY PLAN DESCRIPTION**

The Board of Trustees has amended the Plan to change the requirements for the Dependent Child Special Disability Benefit. The purpose of this change is to match authorization requirements for essential therapies under this benefit to those of similar medical therapies covered elsewhere under the Plan and is effective for applications submitted on or after June 1, 2022

Specifically, you must apply for this benefit in writing and provide a Physician’s letter of Medical Necessity on an annual basis. The Plan may also require you to provide an annual professional evaluation and medical records only if this documentation is required for similar medical benefits available elsewhere under the Plan.

This changes the 2019 Summary Plan Description as follows:

SECTION
9. MEDICAL BENEFITS

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Dependent Child Special Disability Benefits

If an eligible child incurs expenses for disabilities resulting from Illness or Injury and the expense is not covered under any other benefit provided by the Plan, the Plan will pay 90% of the Blue Shield of California PPO Network Rate or 90% of the Allowable Charge, whichever is applicable. A maximum benefit of \$2,500 per Calendar Year applies for non-essential services, such as prosthetic devices, corrective shoes, braces, or casts. For example:

- A) Essential Services
 - i) Corrective Surgery rendered by a provider acting within the scope of his/her license; and
 - ii) Therapy rendered in an institution, office, home, clinic, or academic school.
- B) Non-Essential Services
 - i) Prosthetic devices and their repair; and
 - ii) Corrective shoes, braces, or casts and their repair.

This benefit has the following additional exclusions and limitations:

- A) Treatment by corrective Surgery, therapeutic treatment, or need for prosthetic devices or orthopedic supplies must be certified as Medically Necessary by the Physician and approved by the Plan;
- B) This benefit does not provide coverage for Deductibles or Coinsurance or charges in excess of the Blue Shield of California PPO Network Rate or the Allowable Charge;
- C) This benefit does not provide coverage for developmental delay; and
- D) Benefits available through a government entity will not be duplicated.

You must apply for this benefit in writing and provide a Physician's letter of Medical Necessity on an annual basis. The Plan may also require you to provide an annual professional evaluation and medical records if this documentation is required for similar medical benefits available elsewhere under the Plan.

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This Southern California Pipe Trades Health & Welfare Fund believes this Active 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 means that the Active 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 (800) 595-7473. You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at 1-866-444-3272 or <https://www.healthcare.gov/health-care-law-protections/grandfathered-plans/>. This website has a table summarizing which protections do and do not apply to grandfathered health plans.