

**LABORERS'
WELFARE
FUND**

11465 CERMAK ROAD
WESTCHESTER, ILLINOIS 60154-5768

Telephone: (708) 562-0200
Toll Free: (866) 906-0200
Welfare Fax: (708) 562-0716
e-mail: Claims@chilpwf.com
e-mail: Eligibility@chilpwf.com
www.chicagolaborersfunds.com

December 2012

The Affordable Care Act prohibits health plans from applying dollar limits below a specific amount on coverage for certain benefits. This year, if a plan applies a dollar limit on the coverage it provides for certain benefits in a year, that limit must be at least \$1.25 million.

Your health coverage, offered by the Chicago Laborers' Welfare Fund, Retiree Basic Medical Coverage Plan, does not meet the minimum standards required by the Affordable Care Act described above. Your coverage has an annual limit of:

- **\$3,200 for covered outpatient medical services (hospital services and supplies for therapeutic treatment, emergency room treatment for an illness, and outpatient x-rays and laboratory tests)**
- **\$3,000 for covered inpatient hospital services and/or emergency room treatment for accidents**
- **\$400 for diabetes education**

This means that your health coverage might not pay for all of the health care expenses you incur. For example, a stay in a hospital costs around \$1,853 per day. At this cost, your insurance would only pay for one and one-half days.

BOARD OF TRUSTEES

Administrator
JAMES S. JORGENSEN

Appointed by Labor
ANTONIO S. CASTRO
JAMES P. CONNOLLY
MARTIN T. FLANAGAN
RICHARD KUCZKOWSKI
CHARLES V. LOVERDE, III
SCOTT PAVLIS

For Employers
JULIE CHAMBERLIN
CHARLES J. GALLAGHER
CLIFTON M. HORN
DAVID H. LORIG
DENNIS P. MARTIN

EMPLOYER PARTICIPANTS –

Builders' Association, Employing Plasterers' Association, Underground Contractors' Association, Mason Contractors' Association, Concrete Contractors' Association, Wrecking Contractors, Concrete Products Employers, Lake County Illinois Employers, Illinois Road Builders Association, Bridge and Highway Structural Builders; i.e. all those who employ Laborers Engaged in the Building and Construction Industry.

Your health plan has requested that the U.S. Department of Health and Human Services waive the requirement to provide coverage for certain key benefits of at least \$1.25 million this year. Your health plan has stated that meeting this minimum dollar limit this year would result in a significant increase in your premiums or a significant decrease in your access to benefits. Based on this representation, the U.S. Department of Health and Human Services has waived the requirement for your plan until May 31, 2014.

If you are concerned about your plan's lower dollar limits on key benefits, you and your family may have other options for health care coverage. For more information, go to: www.HealthCare.gov.

If you have any questions or concerns about this notice, contact Fund Office by telephone at 1-708-562-0200 or 1-866-906-0200 between the hours of 8:00 AM to 5:00 PM on Monday through Friday or email the Fund Office at Claims@chilpwf.com.

In addition, you can contact:

**Illinois Department of Insurance
100 Randolph St, 9th Floor
Chicago, IL 60601
(877) 527-9431
<http://www.insurance.illinois.gov>
DOI.Director@illinois.gov**