September 2010

IMPORTANT NOTICE REGARDING YOUR ADULT CHILD’S ELIGIBILITY FOR HEALTH BENEFITS

PLEASE READ THIS NOTICE CAREFULLY!!

Dear Participant:

The Pension, Hospitalization and Benefit Plan of the Electrical Industry (“the Plan”) is pleased to be able to extend coverage to adult children up to age 26 as required by the Patient Protection and Affordable Care Act.

Upon further review of the Act and in accordance with regulations, the Trustees of the Plan have decided to exclude from coverage any adult child who is eligible for group health coverage through their own or their spouse’s employer. This exclusion will be in effect through September 30, 2014, as allowed under the law. Eligible for coverage means that coverage may be currently provided to such adult child or may be elected at an out-of-pocket cost or through COBRA, even if such coverage is not in fact elected. If no other employer-provided coverage is available, your adult child may be enrolled in the Plan.

Here are some examples of who can and cannot be enrolled at this time:

1. John, an adult child, is 21 years old and works full time. His employer does not offer health coverage at all and John is not eligible for any employer-sponsored coverage through his spouse. John is eligible for coverage under the Plan.

2. John's employer, at a later date, offers coverage to his employees at a cost. Because John is now eligible for coverage on his own, he will no longer be eligible for coverage under this Plan, whether or not he elects to purchase coverage under his employer’s plan.

3. Mary, an adult child, is 23, married and is a full time student. She has coverage under her husband's health plan. Mary is not eligible for coverage under this Plan.

4. Mary's husband loses his coverage in February 2011. Mary is not eligible for coverage under this Plan as of the time she becomes eligible for COBRA coverage, regardless of whether she actually elects COBRA coverage. Mary may seek to enroll in this Plan at the expiration date of the COBRA coverage period (e.g. 18 or 36 months, whether or not she actually elects such coverage) if she is still not eligible for coverage through her own or her husband’s employer.

5. Mary’s husband lost his coverage prior to October 1, 2010. Mary did not elect COBRA coverage at that time and the COBRA election period has already lapsed. If she is still not eligible for coverage through her own or her husband’s employer, Mary is eligible for coverage under this plan.
The Plan, in order to comply with this provision, must ask all Participants who are enrolling an adult child who is eligible for coverage under the Plan to verify that the adult child is not covered by or eligible for their own or a spouse’s employer-sponsored health coverage, and complete, sign and return the enclosed affidavit that states that the adult child is neither covered by nor eligible for coverage under a group health plan through the child’s or spouse’s employer. Please return the completed affidavit to the Members’ Records Department at the Joint Industry Board, located at 158-11 Harry Van Arsdale Jr. Avenue, Flushing, NY 11365.

Once the affidavit is received and it is determined that your adult child is eligible for coverage under the Plan, his or her coverage will become effective as follows: If the original enrollment form was mailed on or prior to October 31, 2010, coverage will be effective as of October 1, 2010. If the enrollment form was mailed after October 31, 2010, coverage will be effective as of the date the enrollment form was received. Your receipt of new medical and prescription drug identification cards within a few weeks will acknowledge the enrollment of the child. **If such affidavit is not returned, your child will not be enrolled into the Plan.**

The Pension, Hospitalization and Benefit Plan of the Electrical Industry believes this 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 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 plan administrator at the Joint Industry Board of the Electrical Industry at 718-591-2000. You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at 1-866-444-3272 or [www.dol.gov/ebsa/healthreform](http://www.dol.gov/ebsa/healthreform). This website has a table summarizing which protections do and do not apply to grandfathered health plans.

If you have any further questions concerning your adult child’s enrollment or status in the Plan, please contact the Members’ Records Department at (718) 591-2000, ex. 2491.

Thank you for your cooperation in this matter.

Sincerely,

The Joint Industry Board of the Electrical Industry
The Pension, Hospitalization and Benefit Plan of the Electrical Industry

I, ______________________________________________________________________________, Print Participant’s Name

Social Security No.: _______________________________, hereby request that my adult child(ren):

Name:________________________________________, Date of Birth: ______________________

Name:________________________________________, Date of Birth: ______________________

(List names and birth dates of additional adult children on the back of this form)

be enrolled for coverage as my eligible adult child(ren) under the Pension, Hospitalization and Benefit Plan
of the Electrical Industry (“the Plan”).

I attest that the adult child(ren) listed above are not now either eligible for or enrolled in another health plan
through their employment or their spouse’s employment. I have verified that the child(ren) listed in this
document are not now eligible for or enrolled in another health plan through their employment or their
spouse’s employment. I understand that if my adult child(ren) are in fact eligible for coverage now or
become eligible for coverage or become covered under such a health plan in the future before turning age
26, they will no longer be eligible for coverage under the Plan, and any coverage provided by the Plan to
such child(ren) in reliance on this affidavit will be rescinded. I further attest that I will inform the Plan if
my adult child’s status changes and understand that, by failing to do so, I will be responsible for any claims
incurred by the Plan on behalf of my adult child while they were not eligible.

I attest to the fact that the above statement is true. The Trustees of the Pension, Hospitalization and Benefit
Plan of the Electrical Industry may act upon this affidavit. I agree to indemnify and hold the Pension,
Hospitalization and Benefit Plan of the Electrical Industry, the Joint Industry Board of the Electrical
Industry, the Plans, their trustees, employees and their fiduciaries harmless against any claims that may arise
as a result of these statements.

______________________________________________________________________________  ______________
Signature                                      Date
August 27, 2010

IMPORTANT INFORMATION FOR ALL PARTICIPANTS IN THE PENSION, HOSPITALIZATION AND BENEFIT PLAN OF THE ELECTRICAL INDUSTRY AND OTHER PLANS!

Changes Mandated by Health Care Legislation

While the new Patient Protection and Affordable Care Act has many components, only a few will apply to the Pension, Hospitalization and Benefit Plan of the Electrical Industry (“PHBP”) immediately, while others will not be implemented until some time in the future.

The important changes that will become effective October 1, 2010 are:

● Dependent Children Now Covered Up to Age 26

Under the new health care reform law, a child (including a step-child, who will now be covered at no cost) of a participant in the Pension, Hospitalization and Benefit Plan of the Electrical Industry (“the Plan”) must now be offered the opportunity to enroll in the Plan until his or her 26th birthday, regardless of marital or student status. A child who previously lost coverage, was denied coverage, or was not eligible for coverage under the Plan’s old rules and who will not have attained age 26 by October 1, 2010 is now eligible to enroll in the Plan. (Under the old rules, coverage of dependent children ended upon their marriage or at age 19 (25 for full-time students). Please note that this provision also applies to the Additional Security Benefits Plan of the Electrical Industry and the Health Reimbursement Account Plan of the Electrical industry.

Individuals may request enrollment for their children under the age of 26 for 30 days from the date of this notice. Enrollment will be effective as of October 1, 2010. Please note that if a child is not enrolled during this 30-day enrollment period, the child may enroll at a later date, assuming he or she is still not 26 years old, but coverage will be provided only with respect to claims incurred on or after October 1, 2010 and within one year of enrollment.

In order to enroll your dependent, please complete the enclosed Enrollment Form and return it to the Members Records Department at the Joint Industry Board of the Electrical Industry at 158-11 Harry Van Arsdale Jr. Ave., Flushing, N.Y. 11365.

If this dependent child was never enrolled in the Plan, you must enclose a copy of the birth certificate with the completed enrollment form. If this dependent was previously covered under the Plan but subsequently lost coverage, and you have already provided the Joint Industry Board with a copy of a birth certificate, there is no need to send another copy.

All claim payments will be sent to the participant.
Elimination of Lifetime Maximums
Effective October 1, 2010, the $2,000,000 individual lifetime maximum will no longer apply.

Participants who have reached their lifetime maximum as of October 1, 2010 and would otherwise have been eligible for coverage will be reinstated. If you believe this applies to you, please contact the Members’ Records Department at (718) 591-2000, ext. 2491.

Dental Benefits
Please note that the change affecting dependent children does not apply to the Dental Benefit Plan of the Electrical Industry and the Dental Benefit Plan of the Elevator Division. The eligibility rules remain unchanged and are as follows:

Dependent children: Covered up to age 19. Full-time dependent children attending approved institutions of higher learning continue to be eligible up to age 25.

An original letter from the registrar’s office of the applicable institution is required as proof of current college of school attendance at the beginning of each spring and fall semester.

Step children: continue to be eligible for all coverage as described above on a self-paying basis.

“Grandfathered” Plan Status
The Pension, Hospitalization and Benefit Plan of the Electrical Industry, Additional Security Benefits Plan of the Electrical Industry and the Health Reimbursement Account plan of the Electrical Industry believe these plans are “grandfathered health plans” 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.

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SECTION 1: PARTICIPANT INFORMATION:

Last Name       First Name

Social Security Number     Date of Birth

Address

Phone Number                    Cell Phone Number   Email Address

SECTION 2: DEPENDENT INFORMATION:

Dependent Child Last Name   First Name  Social Security Number

Address

Dependent Child Date of Birth: ________________________________________________

SECTION 3: COORDINATION OF BENEFIT INFORMATION

If your dependent is a participant in another group health plan, please provide information about this coverage below:

Name of other health plan: ________________________________________________

Type of Plan (check one):   ☐ Individual   ☐ Family

Name of Person(s) Covered: ________________________________________________

Policy Holder is (check one):   ☐ Actively Working   ☐ Retired   ☐ Other (i.e. disabled)

Effective date of coverage: ________________________________________________

SECTION 4: PARTICIPANT’S SIGNATURE

Please print, sign your name, and date this form.

_____________________________________   ____________________
Print Name         Date

_____________________________________
Sign Name

The Pension, Hospitalization and Benefit Plan of the Electrical Industry
158-11 Harry Van Arsdale Jr. Avenue
Flushing, NY 11365
Phone: (718) 591-2000     Fax: (718) 380-7741