

CENTRAL ILLINOIS CARPENTERS  
HEALTH and WELFARE TRUST FUND

200 S. Madigan Dr., Lincoln, IL 62656 • phone 866-732-1919 • Office Hours: 8 am - 4:30 pm M-F

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<b>*** IMPORTANT INFORMATION ABOUT YOUR BENEFITS ***</b>
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**July 2018**

Dear Participant:

The Trustees of the Central Illinois Carpenters Health and Welfare Trust Fund (the “Plan”) want to make you aware of certain benefit enhancements to the Plan. This Summary of Material Modifications highlights those enhancements.

**PRESCRIPTION SAFETY GLASSES COVERAGE**

Effective July 1, 2018, the Plan will offer a prescription-only safety glasses benefit for Participants (not spouses or dependent children). The Fund Office will process reimbursement only to the Participant (not to the provider) for up to \$100 for the cost of lenses and frames for prescription safety glasses.

This \$100.00 benefit will cover prescription lenses and frames for safety glasses on a rolling 12 month period measured from the date of service. In addition, the Participant must be eligible for coverage with the Health Plan on the date of service to be eligible for this benefit. A claim for reimbursement must be submitted to the Fund Office within one year of the date of service.

Participants must submit a completed claim form and include receipt(s) showing the provider name, participant name, date of service, amount paid and sufficient identifying information to show that the item purchased is prescription safety glasses. The claim form is available from the Fund Office or on our website at: <https://www.cichealth.org/health-welfare-forms.html>. This prescription safety glasses benefit will not be applied towards a Participant’s health plan benefits, copays or deductible nor will it be applied towards a Participant’s VSP vision benefit maximums.

**CREDITING OF HOURS PROCEDURE**

Effective July 1, 2018, if a Participant’s Employer fails to report and pay contributions to the Fund Office for hours worked in Covered Employment, the Participant may request a crediting of the hours worked for purposes of maintaining eligibility for health plan coverage. Written requests for crediting of hours must be submitted to the Fund Office after the Participant receives the most recent quarterly hours status report from the Fund Office.

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Written requests must include a completed information form (available from the Fund Office) along with supporting documentation to establish the number of hours sought to be credited, and to establish the hours were worked in Covered Employment with an Employer signatory to the Fund.

Participants will be eligible for a crediting of hours one (1) time every twelve (12) months per Employer. However, if the Employer remits payment of all delinquent contributions owed within thirty (30) days from the date the Fund Office mailed the Participant his most recent quarterly hours status report, any crediting provided to the Participant of those contributions will not count against his one (1) time every twelve (12) month crediting opportunity.

Any request for a crediting of hours must be received by the Fund Office at least five (5) business days prior to the start of the Benefit Quarter for which credited hours would maintain eligibility for coverage. For example: a request for crediting of hours to be eligible for the September 1-November 30, 2018 benefit quarter would need to be received by the Fund Office no later than August 27, 2018.

Crediting requests which are accepted may be applied retroactively to the immediately previous Benefit Quarter or to the date the Participant is notified, via his most recent quarterly hours status report, of the Contributing Employer's delinquency, whichever is sooner. Otherwise, crediting requests which are accepted will be applied by the Fund Office to obtain health plan coverage in the next immediate Benefit Quarter.

Participants will not be permitted to receive a crediting of hours in amounts that exceed the minimum number of contribution hours necessary for the Participant to continue health plan eligibility during the next immediate Benefit Quarter. In addition, if you are a sole proprietor, corporate officer, partner or owner of a Signatory Employer that is delinquent in the payment of contributions, you will not be eligible for a crediting of hours.

The Trustees are pleased to offer these enhancements and will continue to work to improve benefits offered under the Plan for you and your family. In the event you have any questions regarding this Summary of Material Modifications, please contact the Fund Office toll-free at 877-732-1919.

Sincerely,

Board of Trustees

*This announcement, which serves as a Summary of Material Modifications, contains only highlights of recent changes to the Central Illinois Carpenters Health & Welfare Trust Fund. Full details are contained in the documents that establish the Plan provisions. If there is a discrepancy between the wording here and the documents that establish the Plan, the document language will govern. The Trustees reserve the right to amend, modify, or terminate the Plan at any time. If you need another copy of the SPD or if you have any questions regarding the changes to the Plan listed herein, please contact the Administrative Manager during normal business hours at: 200 South Madigan Drive, Lincoln, Illinois 62656, phone 866-732-1919.*