

# IRONWORKERS LOCAL 11 BENEFIT FUNDS AND TRAINING FACILITY

12 EDISON PLACE  
SPRINGFIELD, NEW JERSEY 07081-1310

ANNUITY FUND  
PENSION FUND  
VACATION BENEFIT  
WELFARE FUND  
TRAINING FUND

(973) 376-7230  
www.ironnj.com



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WILLIAM A. KOLFENBACH, JR.  
Executive Director

October 1, 2014

**Re: Welfare Plan Benefit Change /  
Mental Health Parity and Addiction Equity Act**

Dear Member:

At the September 17<sup>th</sup>, 2014 Board of Trustees' Meeting, the following change was approved by the Trustees for the Welfare Fund:

*The Mental Health Parity and Addiction Equity Act (MHPAEA) of 2008 is federal legislation that was signed into law October of 2008. MHPAEA expands existing law to require parity for substance use disorder benefits as well as mental health benefits. Furthermore, the financial requirements such as deductibles, copayments, coinsurance and out of pocket expenses in addition to treatment limits, such as number of visits, days of coverage or other limits cannot be different from the cost sharing and coverage provided for medical/surgical benefits.*

***Effective October 1<sup>st</sup>, 2014, in order to maintain compliance with the Mental Health Parity and Addiction Equity Act, copayments for in-network out-patient visits will change from \$30.00 per visit to \$25.00. To further enlighten you, on the reverse side of this notice is a summary of your current mental health and substance abuse benefit costs.***

If you should any questions on this notice, please do not hesitate to contact the Fund Office at 973-376-7230.

Sincerely,  
The Board of Trustees

This summary only highlights the key changes made to the Ironworkers Local 11 Welfare Fund. Summary of Material Modifications (SMM's) together with the Summary Plan Description make up your official plan descriptions; please keep it together with your Summary Plan Description (SPD) Booklet and refer to them as necessary. If you would like to request a copy of the SPD, please contact the Fund Office.

Ironworkers Local 11 Benefit Funds and Training Facility		
Active Plan - Mental Health and Substance Abuse Benefits Due To		
Mental Health Parity and Addiction Equity Act (MHPAEA)		
	In Network	Out of Network
Outpatient Benefit	\$25 Copay per visit	30% coinsurance subject to deductible
Outpatient Maximum	Unlimited, Subject to Medical Necessity	Unlimited, Subject to Medical Necessity
Inpatient Treatment	10% coinsurance that is applied to individual's annual \$500 Out of Pocket, then covered at 100% of in network rate	30% coinsurance subject to deductible
Inpatient Maximums	Unlimited, Subject to Medical Necessity	Unlimited, Subject to Medical Necessity
Deductible	None	\$500 individual/ \$1,000 family, combined w/major medical
Out of Pocket Maximum (OOP):	\$500 per person / per year, combined w/ major medical	None
Lifetime Maximum	Unlimited	Unlimited
Ambulance	Subject to the Supplemental Benefits / Out of Network Deductible, \$500 individual / \$1,000 family, then subject to a 20% coinsurance, combined w/major medical	
Emergency Room Care	\$100 Copay, waived if admitted to hospital	
All In-patient Mental Health and Substance Abuse Benefits must be pre-certified prior to obtaining services by calling Managed Health Network (MHN) at 1-800-327-6517. In-patient services obtained without a pre-certification are not covered.		