



Michigan Electrical Employees' Health Plan
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NOTICE

January 2012

To All Eligible Plan Participants and Their Dependents:

This notice describes several changes to your Health Plan. Please read this notice carefully and keep it with your Summary Plan Description (SPD) booklet for future reference.

Dependent Enrollment - The dependent enrollment rules have been revised as follows:

Newly eligible employees have 30 days to enroll their dependents in the Michigan Electrical Employees' Health Plan (MEEHP) to have coverage effective as of the employee's initial eligibility date. Dependents acquired due to marriage, birth, adoption or placement for adoption must also be enrolled within 30 days of the date of marriage, birth or adoption/placement in order to have coverage effective as of the date the dependent is acquired.

If a dependent is not enrolled within the 30-day period, the dependent's effective date of coverage will be the first day of the month in which the dependent is enrolled. "Enrollment" means providing the Plan Office with any required enrollment forms and documentation (marriage certificate, birth certificate, etc.). Remember: the Trustees may require that an employee provide acceptable proof that an individual is a dependent before the individual will be considered a dependent eligible for coverage.

Dual Coverage Permitted for Children - The Trustees have removed the rule prohibiting dual MEEHP coverage for a person who is a dependent child of a MEEHP participant. The child's claims will be paid first under his or her own MEEHP coverage as an employee, and, secondarily, under the parent's MEEHP coverage. The secondary MEEHP coverage will coordinate (reduce) its benefits so that the total benefits paid do not exceed the allowable expenses.

Eligibility During Disability - Short Term Disability - A totally disabled employee may apply for the Plan's Eligibility During Disability - Short Term Disability credited hours program within six months of the date of a Social Security disability award provided the employee has remained continuously eligible under the Plan as an active employee through rollback hours and/or regular self-payments.

Limited Self-Pay Period Extension for Short Term Disability Eligibility and Weekly Disability Benefits - The maximum self-pay period for active employees is nine months. An additional one-month regular self-payment will now be allowed on a limited basis when an employee has made regular self-payments for nine consecutive months and one additional month is necessary to provide uninterrupted eligibility in the active plan to qualify a totally disabled participant for the Plan's Eligibility During Disability - Short Term Disability credited hours program and for Weekly Disability Benefits effective on the first day of the 11th month.

The above changes are effective as of September 1, 2011, except that the 30-day enrollment period for dependents is effective as of November 1, 2011.

REMINDERS

- The Plan office must be notified within 30 days of the date of event, i.e. birth or adoption of a dependent child, marriage, divorce, etc.
- The Plan office requires copies of marriage certificates, birth certificates, divorce decrees, court documents, Qualified Medical Child Support Order, National Medical Support Notice, etc. to add dependents to the Plan. If you are newly eligible, the Plan office will need this information before adding any dependents. If you have not been eligible and become re-eligible, you will be required to provide this information to the Plan office, if it is not currently on file, even if your dependents were previously eligible.
- When submitting claims for reimbursement from your Special Fund account, the Plan office requires the complete Explanation of Benefits (EOB) and the provider's itemized bill. (Note: If you or your dependents have multiple group health plans, MEEHP requires EOB's from all plans before a claim for reimbursement can be processed.)

Notice Regarding Grandfathered Status

The Trustees of the Michigan Electrical Employees' Health Plan believe that the 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 to cover 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 Michigan Electrical Employees' Health Plan at 6011 W. St. Joseph, Suite 401, Lansing, MI 48917, telephone 1-517-323-9250. 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. This website has a table summarizing which protections do and do not apply to grandfathered health plans.

This announcement notice, which serves as a Summary of Material Modifications (SMM), contains only highlights of certain features of the Michigan Electrical Employees' Health Plan. 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 discontinue all or part of the Plan at any time.

- Summary of Material Modifications • EIN: 38-2106878 • PN: 501 • December 2011 • SMM 2011-5