

**BUILDING TRADES WELFARE BENEFIT FUND
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Import Annual Notice Regarding Benefits under the Building Trades Welfare Fund

NEWBORNS' AND MOTHERS' HEALTH PROTECTION ACT

This Plan may not, under Federal law, restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child less than 48 hours following a vaginal delivery, or less than 96 hours following a cesarean section. However, Federal law generally does not prohibit the mothers' and newborns' attending provider, after consulting with the mother, from discharging the mother or her newborn earlier than 48 hours (or 96 hours as applicable). In any case, plans and issuers may not, under Federal law, require that a provider obtain authorization from the plan or issuer for prescribing a length of stay not in excess of 48 hours (or 96 hours).

WOMEN'S HEALTH AND CANCER RIGHTS ACT

This Plan will provide coverage for any necessary surgery and reconstruction of the breast on which a mastectomy was performed, and the Plan will further provide surgical benefits to allow for the reconstruction of the breast on which a mastectomy was not performed in order to achieve a symmetrical appearance. The Plan will provide benefits for the cost of prostheses (including implants, special bras, etc.) following a mastectomy, and will also provide benefits for the physical complications of all stages of a mastectomy including lymphedemas. All of these benefits will be provided to any Member receiving benefits in connection with a mastectomy. These benefits will be subject to the same deductible, coinsurance, or copayments, if any, that apply to mastectomies (surgery) and prostheses under the Plan.

Grandfathered Status under the Patient Protection and Affordable Care Act

This group health plan 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 Building Trades Welfare Benefit Fund at 516-833-9300. 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