

QUESTIONS REGARDING THE BOILERMAKERS LOCAL 83 SUPPLEMENTAL HEALTH AND WELFARE FUND

What is the Boilermakers Supplemental Health and Welfare Fund (Supplemental Plan)?

The Fund is designed to assist Retirees with the costs associated with maintaining health care coverage.

Do I have to pay for the Supplemental Plan?

No. The Fund is paid for by Employer Contributions *as determined by the applicable collective bargaining agreement.*

Effective with the work month of January 2006, each contributing employer will remit \$0.25 per hour in contributions to the Boilermakers Supplemental Health and Welfare Fund for active employees working within the jurisdiction of the Fund.

Effective January 1, 2007, the employer contribution rate will be \$0.50 per hour.

Effective January 1, 2011, the employer contribution rate will be \$0.71 per hour.

Effective January 1, 2012, the employer contribution rate will be \$0.47 per hour.

Effective January 1, 2016, the employer contribution rate will be \$0.60 per hour.

Is the money in the Supplemental Plan mine to do with as I please?

No, this is not a savings account. These are not vested benefits. The Fund was designed to provide a *supplement* to eligible participants that will assist them with payment of covered expenses.

Who can participate in the Supplemental Plan?

Employees who work within the jurisdiction of Local 83 on or after January 1, 2006, and are covered under the terms of the Collective Bargaining Agreement, are participants in the Plan.

How do I know if I am eligible for benefits with the Fund?

To be eligible for benefits, you must retire on or after January 1, 2007, must be a minimum of 55 years old, must be receiving a monthly benefit from the Boilermaker Blacksmith National Pension Trust Fund, must not be eligible for active plan benefits (unless through COBRA) in the Boilermakers National Health and Welfare Plan and must meet the minimum hour requirements.

What are the minimum hour requirements?

- a) You must have at least 500 hours of employer contributions made to the Fund on your behalf since January 1, 2006.
- b) You must have worked at least 8,000 hours within the jurisdiction of Local 83. (Proof of field construction hours required, as determined by Boilermakers National Pension Fund records, field dues or other appropriate documentation).
- c) You must have at least 4,000 hours within the jurisdiction of Local 83 in the 10 calendar year period immediately prior to your retirement.

When will the Fund begin to reimburse me for my retiree health care coverage?

Participants may be reimbursed for eligible expenses incurred after January 1, 2007.

What benefits are reimbursable?

- Self-payments or premiums paid for coverage under a health care policy
- Self-payments or premiums paid to the spouse's employer for your dependent coverage under your spouse's health plan
- Medicare Part D prescription drug premiums
- COBRA premiums after retirement

Are there expenses that are not reimbursable?

- Expenses incurred prior to January 1, 2007
- Premiums paid *only* for dental or vision coverage
- Self-payments or premiums paid *only* for dependents or surviving spouses
- Amounts paid directly to doctors or other health care providers for services
- Self-payments or premiums paid for health care coverage prior to retirement
- COBRA payments prior to retirement

How are the benefit amounts determined?

The Trustees determine the Benefit Amounts for each period by reviewing the total Fund assets available for Plan Benefits and the total amount of claims submitted for that period of time.

What is a Benefit Period?

There are two (2) Benefit Periods each year. The Benefit Periods are January 1st through June 30th and July 1st through December 31st each year.

How do I submit a claim?

Once you become eligible for benefits, you must submit a claim form for reimbursement which can be obtained from the Fund Office. You can request a claim form by writing to the Fund Office at the following address:

Boilermakers Supplemental Health and Welfare Fund
6405 Metcalf, Suite 200
Overland Park, KS 66202

You can also call the Fund Office to request a form at (913) 236-5490, or you can fax a request to (913) 236-5499 or download the form from the Fund web page at <http://www.bml83shw.org/health/form.asp>.

Do I need to submit anything in addition to the Claim Form?

Yes. If you maintain retiree health care coverage through the Boilermakers National Health and Welfare Fund, you will also need to submit an Authorization for Release of Protected Health Information, so that we can verify your coverage through that Fund.

Claims for all other health care premiums must include copies of the bill *and* either copies of your cancelled checks or a letter or receipt from the health care provider confirming that the premiums were paid.

Claims must include all necessary paperwork and receipts to be considered timely and paid during the current benefit period. Claims submitted without proper documentation will be denied.

How often can I submit claims for reimbursement?

Twice each year

When does my claim need to be submitted?

Claims must be submitted within 60 days following the end of each Benefit Period to be included in the current benefit distribution. Claims submitted more than 60 days, but less than 6 months after the end of the Benefit Period will be considered for payment in the *next* benefit period.

Are there time limits for filing my claim?

Yes. Claims must be submitted within 6 months after the end of the benefit period. Claims submitted more than 6 months after the end of the benefit period will be denied.

When can I expect to receive a check?

Benefits are paid semi-annually within a reasonable period of time after the end of each Benefit Period. Checks will generally be issued in April and October of each year for the preceding Benefit Period.

Do I have to claim benefits from the Supplemental Plan as taxable income?

No. Benefits are not treated as income since they are reimbursements for health care expenses. For additional information you should consult with your tax advisor.

Can I have additional contributions added to the Supplemental Plan?

No. Contributions are based upon the actual number of hours worked and remitted by each employer for active employees.