

IBEW LOCAL 1392

FRINGE BENEFIT FUNDS

International Brotherhood of Electrical Workers Local No. 1392 Health and Welfare Fund
International Brotherhood of Electrical Workers Local No. 1392 Pension Fund

Managed for the Trustees by:
TIC INTERNATIONAL CORPORATION

November 2019

To: IBEW Local No. 1392 Health and Welfare Fund Participants

Re: Summary of Material Modification

Dear Participant:

At a recent IBEW Local 1392 Health and Welfare Fund Trustees' meeting, the Trustees made changes to the Health and Welfare medical benefits that will apply to all active and pre-65 eligible participants.

Effective January 1, 2020, the medical benefits will be as follows:

Coverage	PPO PLAN DESIGN PRIOR TO JANUARY 1, 2020	
	IN-NETWORK	OUT-OF NETWORK
Annual Deductible (Individual/Family)	\$400/\$800	\$1,000/\$2,000
Out-of-Pocket (Includes Deductible) (Individual/Family)	\$1,000/\$2,000	\$3,000/\$6,000
Office Visit-PCP (Copay/Coinsurance)	\$20	65%
Office Visit-Specialist (Copay/Coinsurance)	\$20	65%
Coinsurance	85%	65%
Emergency Room (Copay)	\$100	\$100
Inpatient Hospital (Coinsurance per Admission/% of Employers that require Coinsurance)	85%	65%

Coverage	PPO PLAN DESIGN AS OF JANUARY 1, 2020	
	IN-NETWORK	OUT-OF NETWORK
Annual Deductible (Individual/Family)	\$600/\$1,200	\$1,000/\$2,000
Out-of-Pocket (Includes Deductible) (Individual/Family)	\$1,500/\$3,000	\$3,000/\$6,000
Office Visit-PCP (Copay/Coinsurance)	\$25	60%
Office Visit-Specialist (Copay/Coinsurance)	\$40	60%
Coinsurance	80%	60%
Emergency Room (Copay)	\$100	\$100
Inpatient Hospital (Coinsurance per Admission/% of Employers that require Coinsurance)	80%	60%

****Please note that no changes have been made to the Prescription coverage.****

Effective January 1, 2020, all pre-Medicare eligible participants' monthly self-payments will increase by one hundred dollars (\$100). The following chart reflects what such participants pay today and what the new monthly self-payment will be starting in January 2020.

Coverage	PPO PLAN DESIGN AS OF JANUARY 1, 2020	
	IN-NETWORK	OUT-OF NETWORK
Non-Medicare Member/Widow Only	\$300	\$400
Non-Medicare Member/Widow Only with Life Insurance	\$306	\$406
Non-Medicare Member and Spouse	\$600	\$800
Non-Medicare Member and Spouse with Life Insurance	\$606	\$806

Effective January 1, 2020, all Medicare eligible participant's monthly self-payments will increase from the current ninety-five dollars (\$95) to one hundred and twenty-five dollars (\$125) per person.

Description	SELF-PAY RATES	
	PRIOR TO	AS OF JANUARY 1, 2020

	JANUARY 1, 2020	
Medicare Eligible Member/Widow Only	\$95	\$125
Medicare Eligible Member and Spouse With Life Insurance	\$101	\$131
Medicare Eligible Member and Spouse	\$190	\$250
Medicare Eligible Member and Spouse with Life Insurance	\$196	\$262

Coverage	SELF-PAY RATES	
	PRIOR TO JANUARY 1, 2020	AS OF JANUARY 1, 2020
One Person with Medicare and One without Medicare	\$395	\$525
One Person with Medicare and One without Medicare with Life Insurance	\$407	\$537

All self-payment rates will be updated automatically if you have chosen Pension Deduction. If you remit your payments via check or money order, please pay the new rate beginning with your January 1, 2020 self-payment.

If you have any questions regarding the above, please do not hesitate to contact the Fund Office.

Sincerely,

IBEW Local No. 1392 Welfare Fund
Board of Trustees