

Cleveland Asbestos Workers #3 Health and Welfare Fund

33 FITCH BOULEVARD

AUSTINTOWN, OHIO 44515

1-800-435-2388

SUMMARY OF MATERIAL MODIFICATION FOR THE SUMMARY PLAN DESCRIPTION OF THE ASBESTOS WORKERS LOCAL NO. 3 HEALTH & WELFARE FUND

The Trustees have made the following **CHANGES** to the Plan that will affect various provisions of your Summary Plan Description (SPD). This "Summary of Material Modification" explains this change and should be kept with your SPD. These changes are effective with the May 1, 2013 work month.

* * *

1. Article IV, Subsections A(1) and A(2) are amended by the deletion of those provisions, in their entirety and by the insertion of the following:

1. Initial Eligibility

To be eligible, you must be a member of IAHFILAW Local #3, and an active employee of a Contributing Employer or Retiree, who has made written application to the Fund to be covered as an Eligible Retiree. An Employee working under the terms of the Collective Bargaining Agreement between the Union and Employer or for a Participating Employer who is otherwise authorized to participate in the Plan by the agreement of the Board of Trustees, who has accrued contribution of not less than 288 hours paid in his name by Participating Employers to the Fund Office for work performed by him within the preceding **nine (9)** month period, is eligible for coverage the first day of the second month following the month in which contributions are received. For example, if you work 288 hours in January and February and the Fund Office receives and credits the contribution for those hours in March, you will be eligible for coverage May 1.

2. Continuation of Eligibility

An individual account of hours worked is maintained for you once you have one hour of contributions made on your behalf. Once you become an Eligible Employee because you fulfill the initial eligibility requirements, you will remain an Eligible Employee provided you are credited with a minimum of 144 hours of contributions received per calendar month with one or more contributing Employers or through reciprocal contributions.

Continuous coverage will commence on the first day of the second month following the work month reported to the Fund Office or the month in which Reserve Hours are applied to maintain your eligibility.

For Example: Once you reach your initial 288 hours, you will be eligible for coverage based upon 144 hours worked for which contributions are received as follows:

Contributions Received For The Work Month Of:

Provides Coverage For:

January	April
February	May
March	June
April	July
May	August
June	September
July	October
August	November
September	December
October	January
November	February
December	March

2. Article IV, Subsection 2(a) is amended by the deletion of that provision in its entirety and by insertion of the following:

a) Reserve Bank

All contribution hours in excess of 144 hours per month are credited to your Bank up to a maximum accumulation of hours converted to dollars equaling \$14,000.00 in reserve. This Reserve in your Bank can be used to maintain eligibility until exhausted, provided you are actively seeking work through the Union. To be actively seeking work, you must maintain membership through the Union and register with the Union that you are available for work according to the Union rules.

In the event that your Bank contains more than zero (0) dollars, but less than the number of dollars necessary to maintain one (1) month of eligibility, the dollars remaining in the account shall be exhausted and you may preserve eligibility for only that month through a self-payment of a rate established by the Trustees.

If a Participant did not elect to use the reserve dollars to make a self-payment, the reserve dollars will be used towards reinstatement eligibility under Section 3. If you do not complete the appropriate application for coverage, contributions will still be deducted from your bank of hours.

3. Article IV, Subsection A(3) is amended by the deletion of that provision in its entirety and by insertion of the following:

3. Reinstatement of Eligibility

If you were an Eligible Employee who fails to maintain your eligible through work hours, use of your Reserve Hours Bank, use of your Medical Expense Reimbursement Account or by making self-payments, other than through COBRA, you can become an Eligible Employee again on the first day of the second month following the month in which 288 hours of contributions are received from one or more contributing Employers within a period of **nine (9)** consecutive months after termination of such eligibility. If you seek to become an Eligible Employee again after the lapse of this **nine (9)** month period, you will be required to re-qualify as set forth under the Initial Eligibility requirements, above.

4. Article XII, at the second paragraph is amended by the deletion of that provision in its entirety and by the insertion of the following:

Under the Bank Plan, contributions made by your Employer for hours work credited to your account are used to pay premiums for life insurance, accidental death and dismemberment coverage and dental and vision coverage, which are required under the plan. Participant's Bank Plan balances are charged 30 hours per month to pay premiums for these coverages. A balance of 90 hours is maintained in your account to cover these benefits. Any portion of your account which is in excess of 90 hours can then be used to reimburse you for eligible expenses incurred by you or your dependents that are not covered by any other group insurance plan you may have. The maximum that can be accumulated is hours equivalent to **\$14,000.00**.

* * *

Please keep this information with your Summary Plan Description. If you should have any questions regarding these changes, please contact the Fund Office.

BOARD OF TRUSTEES
ASBESTOS WORKERS LOCAL NO. 3
HEALTH and WELFARE FUND

July 17, 2013