

SUMMARY OF MATERIAL MODIFICATION TO
SOUTHERN OHIO PAINTERS
HEALTH AND WELFARE FUND

This Notice is being provided to you to explain certain important changes being made to the Southern Ohio Painters Health and Welfare Fund ("Fund"). Please keep this Notice with your Summary Plan Description to be certain you understand the benefits available under your Plan.

Changes to Definition of "Legal Spouse" Under the Plan

Effective September 16, 2013, the Plan's definition of "legal spouse" for dependent eligibility purposes will include individuals in a same-sex couple who were legally married in a state that recognizes same-sex marriages. These marriages will be recognized as legal regardless of whether the state in which the couple resides recognizes same-sex marriages. The Plan will not recognize domestic partnerships or civil unions as marriages for same-sex or opposite-sex couples.

Example: Doug, a participant in the Plan, marries his partner, John, in New York. Doug and John live in Cincinnati, Ohio. New York recognizes same-sex marriages; Ohio does not. John is eligible for dependent coverage as a lawful spouse under the Plan because Doug and John were legally married in a state that recognizes same-sex marriages.

Example: Linda, a participant in the Plan, enters into a civil union with her partner, Mary. Mary is not eligible for dependent coverage because she has not lawfully entered into a marriage in any state.

Special Enrollment Period for Same-Sex Spouses

In order to allow same-sex couples who were previously legally married in a state that recognizes same-sex marriage the opportunity to enroll in the Plan as a dependent, a special enrollment period of 45 days will be offered. *The special enrollment period will begin on November 1, 2013 and end on December 15, 2013.* Please contact the Fund Office to obtain the necessary forms.

Any questions about this Notice can be directed to the Plan Administrator or the Board of Trustees.

Sincerely,
Board of Trustees

This group health plan believes this plan is a “grandfathered health plan” under the Patient Protection and Affordable Care Act (the Affordable Care Act). The Affordable Care Act will become effective for this Plan on January 1, 2011. 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 Compensation Programs of Ohio, 33 Fitch Blvd., Austintown, Ohio 44515. 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.