

**CARPENTER FUNDS ADMINISTRATIVE OFFICE
OF NORTHERN CALIFORNIA, INC.**

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July 24, 2015

**TO: All Active Plan B and Flat Rate Participants and their Dependents,
Including COBRA Beneficiaries**

**FROM: BOARD OF TRUSTEES
Carpenters Health and Welfare Trust Fund for California**

RE: Federal Mental Health Parity and Addiction Equity Act (MHPAEA)

This notice is to advise you of Plan modifications adopted by the Board of Trustees to comply with a federal law known as the Mental Health Parity and Addiction Equity Act (MHPAEA). As a result of the Plan changes, benefits for treatment of mental health, substance abuse, and the Member Assistance Program (MAP) are impacted. Please read this notice carefully and retain a copy with your Summary Plan Description.

Effective September 1, 2015, mental health, substance abuse, and the MAP will be administered by Kaiser Permanente, Anthem, and the Fund Office. These services were previously provided by OptumHealth Behavioral Solutions.

Member Assistance Program (MAP): Services such as relationship counseling, legal assistance, financial advice, identity protection, tobacco cessation coaching, as well as other work-life services are part of MAP. All Plan enrollees, regardless of what medical plan option you are enrolled in, have access to MAP benefits through Anthem's toll-free phone number (800) 999-7222 or Anthem's website: www.AnthemEAP.com (Member log in: Carpenters Trust). Some example MAP services are listed in the chart below:

Member Assistance Program (MAP)		
Service available	Examples of Available Services	Benefit
Counseling	<ul style="list-style-type: none"> • Improve your personal and professional relationships • Address an emotional concern • Manage stress • Break a bad habit or start a good one 	Four free face-to-face counseling sessions per different concern
Legal Assistance	<ul style="list-style-type: none"> • Personal business legal services • Civil/consumer issues • Criminal matters • Estate planning law • IRS matters • Person/family legal services 	Thirty minute consultation per different concern then if additional services are needed, 25% discount

Member Assistance Program (MAP)		
Service available	Examples of Available Services	Benefit
Financial Advice	<ul style="list-style-type: none"> • Budgeting techniques • College funding • Credit reports • Debt counseling • Divorce planning • Retirement planning • Social Security benefits 	Unlimited telephone consultations
Daily Living (child and elder care)	<ul style="list-style-type: none"> • Child day care • Adult day care • Alzheimer's support • Sick child care • Skilled nursing facilities • Summer programs • Chore and companion services 	Referral services

Mental Health Benefits		
Medical Plan Election:	Kaiser	Indemnity Plan
Contracting Network	Kaiser Permanente	Anthem PPO
In-patient Care (including residential treatment)	\$250 copayment	Following Pre-Admission Review for medical necessity: PPO = no deductible, 90% up to a maximum out-of-pocket of \$5,000 in a calendar year. Non-PPO = no deductible, 60% of Plan Allowed Charge.
Out-patient Treatment at a hospital facility (including partial hospitalization, intensive outpatient treatment)	\$20 copayment per individual visit \$10 copayment per group visit	PPO = no deductible, 90% up to a maximum out-of-pocket of \$5,000 in a calendar year. Non-PPO = no deductible, 60% of Plan Allowed Charge.
Office Visits	\$20 copayment per individual visit \$10 copayment per group visit	PPO = no deductible, 100%. Non-PPO = no deductible, 60% of Plan Allowed Charge.
Emergency Room Care	\$50 per visit copayment (waived if admitted as an in-patient)	PPO = no deductible, 100%. Non-PPO = no deductible, 100% of Plan Allowed Charge.
Severe Mental Illness/Serious Emotional Disturbance of a Child	Benefits will be paid as noted above, based on the type of treatment setting.	Benefits will be paid as noted above, based on the type of treatment setting.
Expenses not covered		Educational, memory, behavioral training and behavioral change services, supplies, or equipment.

Substance Abuse Benefits		
Medical Plan Election:	Kaiser	Indemnity Plan
Contracting Network	Kaiser Permanente	Anthem PPO
In-patient Care (including residential treatment)	\$250 copayment	Following Pre-Admission Review for medical necessity: PPO = no deductible, 100%. Non-PPO = no deductible, 60% of Plan Allowed Charge.
Out-patient Treatment (including partial hospitalization, intensive outpatient treatment and office visits)	\$20 copayment per individual visit \$5 copayment per group visit	PPO = no deductible, 100%. Non-PPO = no deductible, 60% of Plan Allowed Charge.
Emergency Room	\$100 per visit copayment (waived if admitted as an in-patient)	PPO = no deductible, 100%. Non-PPO = no deductible, 100% of Plan Allowed Charge.

Pre-Admission Review/Utilization Review Program: All hospital in-patient services must be determined Medically Necessary for Plan benefit payment. Be sure the attending physician or hospital obtain verification of Medical Necessity by requesting Pre-Admission, concurrent, or retrospective Utilization Review. If Utilization Review is not obtained, no benefits will be payable.

Grandfathered Health Plan: The Board of Trustees of the Carpenters Health and Welfare Trust Fund for California believes the Fund's medical plans are "grandfathered health plans" 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 preventative 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 plan administrator or the 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.

Please keep this notice with your benefit booklet. If you have any questions, please contact Benefit Services at the Fund Office at (510) 633-0333 or toll free at (888) 547-2054. You may also send an email to benefitservices@carpenterfunds.com. Forms and information can be found on our website at www.carpenterfunds.com.

The Board of Trustees maintains the right to change or discontinue the types and amounts of benefits under this Plan. This notice is intended as a summary only, and actual Plan documents will be used to interpret the Plan. Only the full Board of Trustees is authorized to interpret the Plan. The Board has discretion to decide all questions about the Plan, including questions about your eligibility for benefits and the amount of any benefits payable to you. No individual Trustee, Employer or Union Representative has authority to interpret this Plan on behalf of the Board or to act as an agent of the Board.

In accordance with ERISA reporting requirements this document serves as your Summary of Material Modifications to the Plan.