



January 16, 2012

To: Participants in the Low Cost Plan of Benefits

The U.S. Department of Health and Human Services (HHS) requires that the following notice be sent to you in the event a health plan receives approval of a waiver request from HHS with regards to requirements under Health Care Reform. As premiums for the Low Cost Plan of Benefits are subsidized by Plan assets, the Board of Trustees sought a waiver of the annual maximum benefit in order to maintain this continued coverage plan option. No action is required on your part.

The Affordable Care Act prohibits health plans from applying arbitrary dollar limits for coverage for key benefits. This year, if a plan applies a dollar limit on the coverage it provides for key benefits in a year, that limit must be at least \$750,000.

The Chicago Regional Council of Carpenters Low Cost Plan of Benefits does not meet the minimum standards required by the Affordable Care Act described above. Instead, it puts an annual limit of \$250,000 for all benefits.

In order to apply the lower limit described above, your health care plan requested a waiver of the requirement that coverage for key benefits be at least \$750,000 this year. That waiver was granted by HHS based on your plan's representation that providing \$750,000 in coverage for key benefits this year would result in a significant increase in your premiums or a significant decrease in your access to benefits. This waiver is valid for one year.

If the lower limits are a concern, there may be other options for healthcare coverage available to you and your family members. For more information, go to www.healthcare.gov.

If you have questions or concerns about this notice, contact the Chicago Regional Council of Carpenters Welfare Fund Office at 312-787-9455, telephone option #3.

