



# Heat & Frost Insulators of Northern California Local 16 Trust Funds

**Date: March 21, 2023**

**To: Participants and Dependents enrolled in the Heat and Frost Insulators of Northern California Local Union 16 Health and Welfare Indemnity Plan or the Kaiser HMO Plan**  
**From: Board of Trustees**

**This information is VERY IMPORTANT to you and your dependents. Please read it carefully.**

## **Coverage for Autism for Indemnity Plan Participants**

**Effective January 1, 2023**

The Board of Trustees has made the following changes and/or clarifications to your benefits effective for services received on or after January 1, 2023. These changes apply to all benefit plan options unless otherwise stated.

- **Coverage for applied behavioral analysis, applied behavioral therapy or training (also known as ABA therapy):** Effective for services received on or after January 1, 2023, the Plan will cover medically necessary services related to the treatment of autism including ABA therapy. These will be covered at the Plan's regular cost-sharing depending on type/location of services, and subject to the Plan's requirements, terms and limitations.
- **Speech Therapy:** The Board has revised the benefits for speech therapy (which are covered at this time only for a participant who had normal speech at one time and lost it due to illness or injury) to clarify that benefits will be available for speech therapy in conjunction with autism treatment.
- **Physical, Occupational or Speech Therapy:** The Plan has a 20 visit combined annual visit limit for physical, occupational and/or speech therapy. The Board has added language to this provision clarifying that the visit limits will not apply to treatment of a diagnosed mental health condition or substance use disorder consistent with generally recognized independent standards of current medical practice.
- **Habitation Services Exclusion:** The Plan excludes treatment for habilitation services. This exclusion will not be applied to services that are prescribed by a qualified licensed provider for the medically necessary treatment of a mental health disorder, such as autism spectrum disorders as defined in the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders.

**Hearing Aid Allowance for Indemnity Plan and Kaiser Plan Participants**  
**Effective June 1, 2023**

At this time, the Fund does not provide coverage for hearing aids either under the Indemnity Medical Plan or the Kaiser HMO. We are pleased to advise you that for services received on or after June 1, 2023, the Fund will pay 100% of the Allowed Charge for hearing aids up to a maximum of \$1,500 per ear every three years if a prescription from a healthcare practitioner is received. The exam by the healthcare practitioner needed to obtain the hearing aid will be covered under your normal medical plan benefits, subject to any deductible and/or coinsurance.

**Not Covered**

- More than one hearing aid for each ear;
- The replacement of a hearing aid for any reason more often than once during any 3-year period;
- Batteries or any other ancillary equipment other than that obtained upon purchase of the hearing aid that can be covered within the \$1,500 maximum benefit; and
- Servicing or alterations of the hearing aid.

You have the option of purchasing hearing aids from any retailer.

For **Indemnity Plan participants**, Contract Providers will submit hearing aid claims directly to Anthem Blue Cross, electronically, or by mail. Should you obtain your hearing aid from a Non-Contract provider, please submit your claim (with a claim form) to the address below.

For **HMO participants**, hearing aid claims should be sent to:

Heat & Frost Insulators of Northern California  
Local Union No. 16 Health & Welfare Fund  
7180 Koll Center Parkway, Suite 200  
Pleasanton CA 94566

or

P.O. Box 2684  
San Ramon, CA 94586.

You or your dependent will need to contact the Trust Fund Office in order to obtain a claim form for the hearing aid benefit. The form should be completed and returned with applicable documentation to the above address.

**Delta Dental Annual Maximum**  
**Effective February 1, 2023**

We are pleased to advise you that effective for dental services you receive on or after February 1, 2023, the Board of Trustees has increased the dental annual dollar maximum from \$2,000 per person per calendar year to \$2,500.

**Receipt of this notice does not constitute a determination of your eligibility. If you wish to verify eligibility, or if you have any questions regarding the Plan changes, please contact the Fund Office.**

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

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Because the Indemnity Plan is a “grandfathered health plan,” we are required by law to provide this notice to you:

This group health plan believes the indemnity medical plan sponsored by **Heat and Frost Insulators of Northern California Local Union 16 Health and Welfare Plan** is a “grandfathered health plan” 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 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 the Administrative Office.