



ROOFERS LOCAL 149 FRINGE BENEFIT FUNDS

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April, 2007

IMPORTANT NOTICE REGARDING CHANGES IN PLAN COVERAGE AND ELIGIBILITY RULES

The following changes have been made to the rules governing the Roofers Local 149 Security Benefit Trust Fund effective June 1, 2007, unless otherwise noted:

- 1. Prescription Drug Coverage:** The following Injectable Immunomodulators are covered under the Envision Rx Options specialty pharmacy program, with a \$100.00 co-payment for each 34-day supply, effective November 13, 2006:

Interferon/Intron-A	Enbrel
Pegasys/Peg-Intron	Remicade
Orencia	Revlimid
Humira	Mitoxantron/Novantrone
Kineret	Thalomid

All other Injectable Immunomodulators continue to be excluded from coverage.

- 2. Annual Deductible:** Expenses incurred in October, November, and December will be applied toward the Annual Deductible in the following calendar year.
- 3. Hour Bank:** An Active Employee forfeits his/her hour bank if he/she:
 - (a) Works for noncontributing employer:** An active employee will forfeit his/her hour bank if he/she:
 - (1)** is not on the out of work list, or is on the out of work list but refuses suitable employment when offered, and
 - (2)** works with the tools of the trade for a noncontributing employer, or commences self-employment, in the roofing industry without making contributions to the Fund.

- (b) Fails to obey strike notice: An active employee will forfeit his/her hour bank if he fails to obey a strike notice issued as a result of failure of an Employer to pay contributions.

4. COBRA coverage:

- (a) COBRA coverage will not be offered to a Working Principal or the spouse, child, parent, or sibling of a Working Principal, if the reason for loss of coverage is failure of the Employer to remit contributions; and
- (b) No Participant, or spouse or child of such Participant, will be allowed to continue coverage by way of COBRA if the Participant fails to obey a strike notice issued as a result of failure of an Employer to pay contributions.

5. Limitations of Actions: No action may be brought to recover benefits allegedly due under the terms of the Plan more than 180 days following the Notice of Decision on Appeal.

6. Pensioner Coverage: As a reminder, subject to meeting all other eligibility requirements, Class P-1 or P-2 coverage under the Detroit plan is only available to Pensioners receiving a pension benefit earned as a Detroit Participant. Similarly, to the extent eligibility for Retiree coverage under the Mid-Michigan plan references a pension benefit under the Roofers Local 149 Pension Fund, this means a pension earned as a Mid-Michigan participant.

**The Women's Health and Cancer Rights Act of 1998
Annual Notice**

Did you know that your Plan, as required by the Women's Health and Cancer Rights Act of 1998, provides benefits for mastectomy-related services including reconstruction and surgery to achieve symmetry between the breasts, prostheses, and complications resulting from a mastectomy (including lymphedema)?

This notice is being sent to comply with the 1998 Omnibus Appropriations Bill. If you have any questions about coverage for mastectomy-related services, please feel free to call the Fund Office at (248) 641-4949.