



SHEET METAL WORKERS' LOCAL 292
FRINGE BENEFIT FUNDS
P.O. Box 189
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February 24, 2017

TO: ALL ELIGIBLE PARTICIPANTS
SHEET METAL WORKERS LOCAL UNION NO. 292 HEALTH FUND

RE: LIFE INSURANCE BENEFITS

Dear Participant:

The Board of Trustees, upon the advice of the Fund consultants, has decided to change the carrier that provides your Life Insurance and Accidental Death and Dismemberment benefit. Effective March 1, 2017, these benefits will be provided by Union Labor Life Insurance Company (Ullico). ***Please be advised that your benefit has not changed.***

The below information summarizes the Life Insurance Benefit:

The Life Insurance benefit is provided through a policy issued by ULLICO (a commercial insurance company) and is subject to all exclusions of that policy. *Where any term in the Fund's Plan or SPD conflict with the policy issued by ULLICO, the terms of the policy shall control!*

Eligibility: Eligibility for Life Insurance Benefits begins 30 days after eligibility under the Plan for Participants.

Benefit Amount: The amount varies based on your work classification, whether you are active or retired, and whether you are eligible based on work and Employer contributions (with or without use of your Hour Bank), or by self-payment (***excluding COBRA – no life insurance benefit is provided for you or any dependent who is covered based on COBRA***).

The various amounts of the Life Insurance Benefit payable are set forth below (*except as may be reduced by the amount of any accelerated benefit paid*). The Life Insurance Benefit is only payable on behalf of these persons - no other categories of persons are eligible.

DECEDENT	BENEFIT AMOUNT
Journeyman (while covered by working/Hour Bank)	\$40,000
Apprentice (while covered by working/Hour Bank)	\$40,000
Classified Worker (while covered by working/Hour Bank)	\$30,000
Participant active by self-payment (covered by self-payments <i>excluding</i> COBRA)	\$15,000
Normal or Early Retiree or Disabled Participant under the Sheet Metal Workers Local No. 292 Pension Fund (covered by self-payments <i>excluding</i> COBRA)	\$ 5,000
Dependent Child of a Participant (while covered by working/Hour Bank)	
6 months and older	\$ 2,000
14 days to 6 months	\$ 100
(No benefits are available on behalf of a dependent child under 14 days old, or any dependent child of a Participant covered by any form of self-payment)	
Dependent Spouse of a Journeyman, Apprentice or Classified Worker (<i>while the Participant is covered by working/Hour Bank only - no coverage if the Participant is covered by any form of self-payment</i>)	\$ 2,000

Up to \$500 of the above benefit amounts (as applicable) may be paid to any person or entity that incurred expenses related to the death and burial of the deceased. That amount will be deducted from any Life Insurance Benefit payable.

The below information summarizes the Accidental Death and Dismemberment Benefits:

Accidental Death and Dismemberment Benefits are provided through a policy issued by ULLICO (a commercial insurance company) and is subject to all exclusions of that policy. *Where any term in the Fund's Plan or SPD conflict with the policy issued by ULLICO, the terms of the policy shall control!*

Eligibility: Eligibility for Accidental Death and Dismemberment Benefits begins 30 days after eligibility under the Plan for Participants. Accidental Death and Dismemberment benefits are payable on behalf of Journeymen, Apprentices and Classified Workers who are covered by Working/Hour Bank **only**. Dependents are not covered by this benefit, nor any retirees or participants eligible by self-payment.

Benefit Amount: The amount of basic benefits is set out in the table below. The “Principal Sum” is the Life Insurance Benefit (currently, \$40,000 for Journeymen and Apprentices and \$30,000 for Classified Workers).

Loss	Benefit
Loss of Life	Principal Sum
Loss of Both Hands	Principal Sum
Loss of Both Feet	Principal Sum
Loss of Entire Sight of Both Eyes	Principal Sum
Loss of One Hand and One Foot	Principal Sum
Loss of One Hand and Entire Sight of One Eye	Principal Sum
Loss of One Foot and Entire Sight of One Eye	Principal Sum
Loss of One Hand or One Foot	One-half Principal Sum
Loss of Entire Sight of One Eye	One-half Principal Sum
Loss of Four or More Finger of same Hand	One-fourth Principal Sum
Loss of Thumb and Index Finger of same Hand	One-fourth Principal Sum
Quadriplegia (Paralysis of both upper and lower limbs)	Principal Sum
Paraplegia (Paralysis of both lower limbs)	One-half Principal Sum
Hemiplegia (Paralysis of an upper and a lower limb)	One-half Principal Sum
Loss of Speech and Hearing (both ears)	Principal Sum
Loss of Speech or Hearing (both ears)	One-half Principal Sum

In addition to the above loss schedule, the policy also provides the following benefits, commonly referred as “Value Added” benefits. These benefits will be paid in addition to the above benefits.

Loss	Benefit
Workplace Accidental Death	Principal Sum
Seat Belt Benefit	10% of the Principal Sum
Air Bag Benefit	10% of the Principal Sum
Education Benefit	5% of the Principal Sum
Common Carrier Benefit	Principal Sum
Labor Dispute Waiver of Premium Benefit	Premiums are waived in the event of a strike.

If you have any questions or concerns or if you need additional information, please contact the Fund Office at (248) 641-4992.

*For the Board of Trustees,
Sheet Metal Workers Local No. 292 Health Fund*

