



BRICK MASONS TRUST FUNDS

Bricklayers Local No 4 Southern California

SUMMARY OF MATERIAL MODIFICATIONS

TO: Brick Masons' Health and Welfare Fund
 All Participants

FROM: Board of Trustees

RE: Self-Directed and Open Enrollment

DATE: December, 2014

The Board of Trustees is pleased to announce that effective January 1, 2015, you are entitled to make medical and/or dental plan changes in coverage through either the annual open enrollment process (on May 1 of each year), or after 12 months of consecutive enrollment in the same medical or dental plan (usually referred to as "self-directed enrollment"), whichever is earlier.

With "self-directed enrollment," you have the option to change your medical and/or dental plan(s) at any time during the year, but only once in any twelve-month period. You must have been enrolled in your current medical or dental plan(s) for at least twelve (12) months before you can switch to another medical or dental plan(s). Changes are effective the first day of the month following the date the Trust Fund Office receives the appropriate enrollment form that indicates your selected medical and/or dental plan(s), provided the enrollment form is received by the 15th of the month prior to the month of effective coverage. If you do not wish to change your medical or dental plan(s), no action is required. Enrollment form(s) can be obtained by calling the Trust Administrative Office.

Services can be delayed or denied unless you have made your selection in writing, and all the required information has been correctly completed and submitted to the Trust Administrative Office. The Trust Administrative Office can provide you with benefit information regarding the medical and dental plans offered.

Please include this Summary of Material Modification with your current Summary Plan Description booklet (effective May 1, 2013). If you have any questions about your current benefits and eligibility, please contact the Trust Administrative Office at **(626) 646-1080**.

Mailing Address: P.O. Box 430 • West Covina, CA 91793

1050 Lakes Drive, Suite 120 • West Covina, CA 91790

Phone 626-646-1080 • Toll Free 877-516-0586 • Facsimile 626-931-1368

www.bac4cabenefits.org • staff@bac4cabenefits.org