



North Central States Regional Council of Carpenters' Benefit Funds

Pension • Health • Vacation • Training • LMC Trust

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◆◆ IMPORTANT NOTICE TO PARTICIPANTS ◆◆

November 15, 2010

To All Employees and Dependents:

This Notice is to inform you of the following:

- ◆ Women's Health and Cancer Rights Act Annual Notification.
- ◆ HIPAA Privacy Update.
- ◆ Coverage for routine immunizations.
- ◆ **Enclosure:** Important Notice of Prescription Drug Creditable Coverage. Please take time to read this Notice carefully as it contains valuable information on your options regarding Medicare Part D.

Women's Health and Cancer Rights Act Annual Notification

The Women's Health and Cancer Rights Act of 1998 requires that we notify you annually of the coverage required under this Act. This Notice fulfills that requirement.

The Act amended ERISA by requiring group health plans which provide medical and surgical benefits for a mastectomy to provide the following coverage if you elect breast reconstruction in connection with a mastectomy, in a manner determined in consultation with the attending physician and the patient:

- »» all stages of reconstruction of the breast and nipple of the breast on which the mastectomy has been performed;
- »» surgery and reconstruction of the other breast to produce symmetrical appearance;
- »» prostheses and surgical bras; and
- »» treatment of physical complications of the mastectomy, including lymphedemas.

Subject to any applicable deductible and copayment requirements, your Plan provides coverage for the preceding items on the same basis as any other medical or surgical procedure covered by the Plan.

HIPAA Privacy Update

On April 14, 2003, the HIPAA Privacy Regulations went into effect for the North Central States Regional Council of Carpenters' Health Fund. These Regulations were further revised effective February 17, 2010. In April of 2010 (or when you enrolled, if later), the Plan provided you an updated Privacy Practices Notice as required by the Privacy Regulations. This Notice provided information regarding the Plan's uses and disclosures of your Protected Health Information (PHI), your rights regarding your PHI, and the Plan's duties to protect the privacy of your PHI.

This is a reminder that the Plan's Privacy Practices Notice is available upon request. To request a copy, please contact the Fund's Privacy Officer, LaVonne Stratton, at: (715) 835-3174 or 1-800-424-3405.

Coverage for Routine Immunizations

We want to take this opportunity to remind you of the Plan's coverage for routine immunizations. Although a physician may **recommend** an immunization, it may not be covered by the Plan.

For adults, only immunizations for tetanus, Hepatitis B, flu, and pneumonia are covered. For dependent children, immunizations **REQUIRED** to attend public schools are covered as well as an annual flu immunization.

Many immunizations are available at little or no cost from your local Health Department.

The Plan does not cover immunizations recommended or required for foreign travel. If you have a question about whether a specific immunization is covered, please call the Fund Office.

Please keep this Notice with your Summary Plan Description (SPD) booklet for future reference. If you have any questions, feel free to call the Fund Office.

Yours very truly,

THE BOARD OF TRUSTEES

Enclosure

HF Annual Notice 11-2010