

**The Benefit Fund for Hospital and Health Care Employees—Philadelphia and Vicinity
For members of District 1199C, National Union of Hospital and Health Care Employees,
AFSCME, AFL-CIO**

Health Care Reform Notices

November 29, 2010

Grandfathered Status

The Benefit Fund for Hospital and Health Care Employees – Philadelphia and Vicinity Health Plan believes this 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 plan administrator at 888-502-3862. You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at 866-444-3272 or www.dol.gov/ebsa/healthreform. This website has a table summarizing which protections do and do not apply to grandfathered health plans.

Dependent Coverage to Age 26

Individuals whose coverage ended, or who were denied coverage (or were not eligible for coverage), because the availability of dependent coverage of children ended before attainment of age 26 are eligible to enroll in the Benefit Fund for Hospital and Health Care Employees – Philadelphia and Vicinity health plan. Since the Benefit Fund for Hospital and Health Care Employees - Philadelphia and Vicinity Health Plan is a "grandfathered plan," if the adult child is eligible to enroll in his or her own employer's sponsored health plan, the adult child is not eligible to enroll in the Benefit Fund for Hospital and Health Care Employees - Philadelphia and Vicinity Health Plan until January 1, 2014. Individuals may request enrollment for such children for 30 days from the date of notice. **Please contact the Benefit Fund’s member services representatives for the necessary forms to enroll your dependents.** Enrollment will be effective January 1, 2011. For more information contact the Benefit Fund Office at 215-735-5720 or if out of area, 1-800-531-1199.

Lifetime Limits

The lifetime limit on the dollar value of benefits under the Benefit Fund for Hospital and Health Care Employees – Philadelphia and Vicinity health plan no longer applies. Individuals whose coverage ended by reason of reaching a lifetime limit under the plan are eligible to enroll in the plan. Individuals have 30 days from the date of this notice to request enrollment. For more information contact the Benefit Fund Office at 215-735-5720.

Patient Protection

The Benefit Fund for Hospital and Health Care Employees – Philadelphia and Vicinity health plan administered by Aetna generally requires the designation of a primary care provider. You have the right to designate any primary care provider who participates in our network and who is available to accept you or your family members. For children, you may designate a pediatrician as the primary care provider.

You do not need prior authorization from Aetna or from any other person (including a primary care provider) in order to obtain access to obstetrical or gynecological care from a health care professional in our network who specializes in obstetrics or gynecology. The health care professional, however, may be required to comply with certain procedures, including obtaining prior authorization for certain services, following a pre-approved treatment plan, or procedures for making referrals. For a list of participating health care professionals who specialize in obstetrics or gynecology, contact Aetna Member Services at 800-533-2195.