

Summary of Material Modification To The
Summary Plan Description, Restated January 1, 2020

SMM 2020SPD-8

July 31, 2024

This summary of material modification (“SMM”) describes changes made to the IBEW Local 163 Health & Welfare Fund’s plan of benefits (the “Plan”) and supplements the Summary Plan Description, Restated January 1, 2020 (“SPD”). These changes are effective as of July 1, 2024, unless otherwise indicated. You should read this SMM very carefully and retain this document with your copy of the SPD for future reference.

Summary of Changes:

1. 26 Week Extension

Currently, the Plan provides Disability Benefits up to a maximum of \$400 per week for up to a maximum of 26 weeks. Effective July 1, 2024, you may be eligible for an additional 26 weeks of Disability Benefits (Extension Period) if specific eligibility requirements are met.

Section E of Part IV of the SPD is amended in its entirety as follows:

E. Disability Benefits

1. How the Plan Works

The Fund will make weekly payments to you, as described below, in the event you sustain a disability resulting from a non-occupational injury or illness. These benefits are often referred to as short term disability benefits. Disability Benefits are paid directly by the Fund and are paid in addition to any other benefits that are payable under an individual policy of insurance (such as automobile or an individual disability insurance policy).

If you are unable to work because of a disability resulting from a non-occupational (not related to work) illness or injury, you may be eligible for Disability Benefits. Disability Benefits are weekly payments intended to offset your loss of employment income due to a temporary period of disability. Disability Benefits are available for up to two 26-week periods. For the initial 26-week period, if your disability is an illness, benefits will begin on the eighth day following your initial date of disability, unless you are hospitalized, in which case benefits will commence as of the first date of hospitalization. If your disability is an injury caused by an accident, benefits will begin for the initial 26-week period on the first day of your disability.

2. Eligibility for Benefits

To be eligible for benefits, you must be unable, because of an injury or illness, to perform any work as an Electrical Worker in the construction industry. You do not have to be confined to your home to collect benefits, but you must be under the care of a physician. No benefits are payable for any day prior to the date of the first medical treatment for any alleged disability.

Your claim for Disability Benefits may be denied if your doctor's certification is incomplete, inconsistent with other information provided to the Plan Administrator, or if your doctor's license credentials cannot be verified by the Pennsylvania Department of State.

Your claim for Disability Benefits may be denied at any time if the Plan Administrator determines that you are not disabled from work due to a non-occupational illness or injury. You must return any Disability Benefits that you improperly received immediately upon demand by the Plan Administrator.

The Fund reserves the right to have you examined by a health care professional designated and paid for by the Fund. Such examination may be repeated as often as may be reasonably required during continuance of the claim.

3. How the Benefit is Paid

Disability Benefits are paid on a weekly basis for a maximum of 52 weeks. Currently, the maximum benefit is \$400 per week. All payments are subject to federal income tax, FICA tax, and PA Unemployment Compensation Tax.

During the first 26-week period following the beginning of your disability, you will receive weekly disability payments based on your doctor's written certification that you are disabled during the weekly periods for which the benefit is paid. You are required to obtain this certification from your doctor on a form supplied by the Plan Administrator.

For example, suppose you are disabled due to a non-occupational injury and properly apply for Disability Benefits. Your doctor states on the application that you will be able to return to work within three weeks after your initial disability date. You will receive weekly Disability Benefits until the date the doctor states you can return to work.

If you are still disabled at the end of the first 26-week period you receive Disability Benefits, you will be eligible for Disability Benefits for up to another 26-week period if the following eligibility requirements are met:

1. If your doctor certifies that your disability will end prior to the expiration of the second 26-week period and then you will be able to return to work, you will continue to receive weekly Disability Benefits until your doctor's return to work

date. Your doctor's certification must be in writing on a form supplied by the Plan Administrator or acceptable to the Plan Administrator.

2. You will be eligible to receive Disability Benefits for the entire second 26-week period if: (a) your doctor certifies that your disability will continue beyond the second 26-week period; (b) it is reasonably assumed that your disability will continue beyond the second 26-week period; or (c) prior to the expiration of the first 26-week period, you have applied for either Social Security Disability Insurance (SSDI) benefits and/or National Electrical Benefit Fund disability pension benefits and furnished the Plan Administrator with satisfactory documentation of such.
3. You must file an application with the Plan Administrator for the second 26-week period, demonstrating your eligibility extended Disability Benefits as set forth above.

If you make an application as required in the notice during the second 26-week period, you will receive retroactive benefits for the second 26-week period when all required documents have been received and are satisfactory to the Plan Administrator.

Additionally, the Board of Trustees may request you to undergo an independent medical examination by a doctor of its choosing to confirm your disability. In this event, the costs related to the examination will be paid by the Fund. If you refuse to comply with such a request, the Board of Trustees will deem you ineligible for Disability Benefits and immediately terminate payment of your Disability Benefits, if you are then receiving any.

You will not be eligible for any Disability Benefits from the Fund beyond the maximum period of 52 weeks per disability.

In the absence of your doctor's certification that you have fully recovered and are available for work, and you return to work without such certification of recovery, you will not be eligible for an additional period of Disability Benefits relating to that condition since you will be considered to have voluntarily resumed work while still disabled.

4. Benefit Limitations

Successive periods of disability, due to the same or related cause, shall be considered one period of disability unless:

- separated by a return to work for a period of at least 1 day of work after complete recovery from the injury or sickness causing the previous disability; or
- the subsequent disability is due to causes entirely unrelated to the causes of the previous disability and you have worked at least one day.

5. How to Apply for Benefits

After the first day (eighth day for illness) of disability, you may apply for Disability Benefits by completing an application and submitting it to the Plan Administrator. Application forms are available from the Plan Administrator. The application must include a statement signed by your doctor stating that you are totally disabled and describing the cause of your disability and its applicable starting date. The deadline for filing claims for Disability Benefits is six (6) months from when the claim arises.

6. How to Appeal a Denied Claim

In the event your Disability Benefit is denied under the Fund, please refer to “Appeal of Denied Disability Benefit Claims” in Part VI, Section B of this SPD.

Additional Information Regarding this SMM:

If you have any questions, you should refer to your SPD or contact:

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IBEW Local 163 Health & Welfare Fund
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General Information:

Plan Name:	IBEW Local 163 Health & Welfare Fund
Plan Number:	501
Plan Year:	April 1 – March 31
Plan Sponsor/Plan Administrator:	Board of Trustees, IBEW Local 163 Health & Welfare Fund
Plan Sponsor/Plan Administrator Federal Tax EIN:	23-6390518
Legal Service:	Daniel D. Haggerty, Fund Co-Counsel Kang Haggerty & Fetbroyt LLC 123 S. Broad Street; Suite 1670 Philadelphia, PA 19109 - OR - Jason Mettley Meyer, Unkovic & Scott, LLP Henry W. Oliver Building 535 Smithfield Street, Suite 1300 Pittsburgh, PA 15222-2315

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