



CEMENT MASONS TRUST FUNDS OF NORTHERN CALIFORNIA  
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[www.norcalcementmasons.org](http://www.norcalcementmasons.org)

# BENEFIT BULLETIN

An Informational Bulletin for our Valued Participants

Assisting you in understanding your benefits.



## Plan Term Definitions

### Emergency Services

The term "Emergency Services" means medically necessary treatment required as the result of a life threatening condition which, without immediate intervention, would result in placing the Eligible Individual's health in serious jeopardy, or serious impairment to bodily functions, or serious dysfunction of any bodily part. Some examples of life threatening conditions requiring Emergency Service include, but are not limited to, heart attack, strokes, poisonings and appendicitis.



## Notice of Denial

A Notice of Denial of Claim (Form #2047) is notification from the Fund that your claim has been denied.

The reason for Denial is explained on the form. A denial may be issued for the following reasons:

lack of proper documentation, medical necessity of the services, ineligibility of the participant or the dependent or for other reasons.



## Appeal Process



If you receive a *Notice of Denial of Claim* with which you do not agree, write to the Fund Office and request an Appeal Hearing. Requesting an Appeal Hearing is challenging the action that the Fund has taken on a claim. When you choose to petition for an Appeal Hearing of your denial, you should state the reason or reasons, in clear and concise terms. Your statement should be accompanied by any pertinent documentation as to the medical necessity of the services, proof of eligibility or other materials.

Be sure to submit your request *within 180 days* from the date you receive the *Notice of Denial of Claim*.

The Appeal Committee will conduct the hearing, review your appeal and issue a decision within 5 business days.

The purpose of this Bulletin is to provide you and your family with information to assist you in understanding the various benefits and how to effectively use those benefits. It is not intended as a substitute for official Plan documents. Your rights as a Plan Participant or Beneficiary can only be determined by consulting the actual text of the Plan Booklet.

# Benefit Notices

Benefit Notice Inserts advise you of Plan improvements, additions and other changes. Benefit Notice Inserts update the Summary Plan Description Booklets. The following list represents all Health and Welfare Plan updates to date:

## Active and Retired Inserts and Notice Date

Insert 1 (02/01)

Health Insurance Portability and Accountability Act of 1996 (HIPAA)

Insert 2 (08/01)

New Enrollment Procedures

Insert 3 (08/01)

Sexual Reassignment, Medications, Implants, Hormone Therapy, Surgery and Medical Care

Insert 4 (10/01)

Physical Examination Benefit for Spouses of Retired Participants

Insert 5 (12/01)

Expanded Coverage of Injectable Drugs

Insert 6 (01/03)

Outpatient Intravenous Therapy, Mental Health, Hearing Aid Benefit

Insert 7 (09/02)

Prescriptions Solutions

Insert 8 (01/03)

Claim Procedure - How to File a Claim

Insert 9 (07/03)

Hospital Benefits, Comprehensive Medical Benefit, Out of Pocket Maximum, Prescription Drug Benefit, Dental Benefits, Vision Benefits, and Kaiser Plan

Insert 10 (07/03)

Retired Monthly Self-Payment Rates

Insert 11 (11/03)

Initial and Continuing Eligibility, Termination and Reinstatement of Eligibility

Insert 12 (09/03)

Prescription Drug Benefit Change

Insert 13 (10/04)

Changes in Hospital Benefits, Comprehensive Medical Benefits, Plan Year Out-of-Pocket Maximum, Prescription Drug Benefit, Dental Benefits, Vision Benefits, Kaiser Permanente

Insert 14 (11/04)

Vision - "Value" Plan

*Please direct your questions or concerns regarding Plan Inserts to:*



*[customerservice@norcalcementmasons.org](mailto:customerservice@norcalcementmasons.org)*



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