



**FABIAN & BYRN, LLC**

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**MEMORANDUM**

**DATE:** 12/1/13  
**TO:** Participants of the Joint Welfare Fund of Local 164  
**FROM:** Fabian & Byrn, LLC Third Party Administrator for IBEW Local Union No. 164 Welfare Fund

**SUMMARY OF MATERIAL MODIFICATION TO THE  
JOINT WELFARE FUND OF LOCAL 164, IBEW  
EIN: 22-153776**

The following is a modification to the provisions of the Summary Plan Description. Keep it with your copy of the Summary Plan Description for easy reference.

**Effective January 1, 2014, the Joint Welfare Fund will make the following changes:**

**Dental**

The annual maximum for Plan B members will be increased to \$2500 per family per calendar year. The Plan A maximum will remain the same at \$1000 per family per calendar year.

Orthodontia will be added as a covered service to the dental benefit for Plans A and B. It will be applied towards the annual family maximum. Pre-authorization is required.

**Vision**

The vision benefit will be reinstated for Plan B members. There is an annual reimbursement of up to \$85 for the exam and \$250 for prescription glasses, contact lens fitting and/or contacts. Claims for exams from participating providers may be submitted by the provider directly to their local Blue Cross Blue Shield Plan. All other vision services need to be paid by the patient at the time of service and then the member must submit a claim reimbursement form to:

Fabian & Byrn, LLC  
Local 164 Vision Reimbursement  
425 Eagle Rock Avenue, Suite 105  
Roseland, NJ 07068

Claim forms can be accessed at: [http://www.ibew164.org/pdf/JW\\_medical.pdf](http://www.ibew164.org/pdf/JW_medical.pdf)

**Co-pays**

The \$200 Outpatient co-pay is being reduced to \$25 for all outpatient services, except Emergency Room and Inpatient Hospital claims. The co-pay for all Emergency Room and Inpatient Hospital claims will remain the same at \$200.

If you have any questions regarding your dental coverage, call Horizon Dental Customer Service at 800 433-6825. If you have any questions regarding your vision or medical coverage, call the claims office at 877 228-4202.