

June 2016

THE STEAMFITTERS' INDUSTRY SECURITY BENEFIT FUND

SUMMARY OF MATERIAL MODIFICATION

IMPORTANT BENEFIT ANNOUNCEMENT

This summary of material modification ("SMM") describes changes to the Steamfitters' Industry Security Benefit Fund and supplements the Summary Plan Description (SPD). The effective date of each of these changes is July 1, 2016. You should read the SMM very carefully and retain this document with your copy of the SPD for future reference.

❖ FRAUDULENT CLAIMS ❖

If you file a claim or set of claims which are deemed fraudulent you will be suspended from receiving benefits for a period of time according to the chart below. You will need to "reimburse" the Fund by the submission of valid claims equaling the fraud amount with claims for periods after your suspension period. In addition, your account will be charged an administrative fee listed below to reimburse the Fund for some of its extraordinary costs associated with a fraudulent claim or set of fraudulent claims.

<u>Number of Claims</u>	<u>Suspension Period</u>	<u>Administrative Fee</u>
1-5	One Year	\$500.
6-10	Two Years	\$1,000.
More than 10	Three Years	\$1,500.

❖ APPLICATION OF REPLACEMENT WAGES FOR UNEMPLOYMENT ❖

In order to qualify for this benefit you must be eligible and have filed a claim for Unemployment Insurance benefits with the New York State Department of Labor regardless of the length of your unemployment.



Inasmuch as the NYSDOL has a one week “waiting period” and needs initial processing time when you first apply, the Trustees will allow you to receive up to three weeks of benefits based on your completion of the application’s affidavit. However, no benefits will be paid by the Fund after the third week until you have substantiated your full unemployment going back to your initial unemployment period listed on your affidavit by submitting a full copy of the “Official Record of Benefit Payment History” (ORBPH). All NYSDOL unemployment insurance claimants have access to their personal accounts online and can print copies of their ORBPH.

All subsequent benefit payments will require an updated copy of the ORBPH in order to substantiate your continued unemployment. You can mail, fax, or present in-person your ORBPH to obtain an additional week of replacement wages.

Regardless of the length of your unemployment and the number of weeks of unemployment wages you have received from the Fund you must submit your ORBPH to prove your unemployment. If you do not submit your ORBPH or the ORBPH indicates information different than you submitted to the Fund at the time of initial application your claim(s) will be considered fraudulent.

In direct correlation with the New York State Department of Labor Unemployment Insurance benefits, replacement wages for unemployment will run on a Monday to Sunday benefit period.

[Note: If you were unemployed for a few days under the Temporary Job Shut-Down provision of the Fund, you must indicate that on the application. After appropriate verification of the temporary job shut-down the above regulation will not be in effect.]

❖ APPLICATION OF REPLACEMENT WAGES FOR WORKERS’ COMPENSATION AND DISABILITY ❖

Similar to the revised procedures for replacement wages for unemployment, all claims for Workers’ Compensation or Disability must be substantiated with documentation from the insurance company paying you as a claimant. The Trustees will allow you to receive up to three weeks of benefits based on your completion of the application’s affidavit. However, no benefits will be paid by the Fund after the third week until you have substantiated your full unemployment going back to your initial unemployment period listed on your affidavit.

All subsequent benefit payments will require updated insurance company documentation supporting your continued unemployment prior to the issuance of a Fund benefit payment.

Regardless of the length of your Workers' Compensation or Disability claim and the number of weeks of replacement wages you have received from the Fund, you must submit the insurance company documentation to prove your situation. If you do not submit your documentation or the documentation indicates information different than you submitted to the Fund at the time of initial application your claim(s) will be considered fraudulent.

[Note: If there are extenuating or unusual circumstances regarding your Workers' Compensation or Disability insurance benefits please contact the Fund Office for specific and personalized guidance.]

❖ REVISED BENEFIT APPLICATIONS FOR REPLACEMENT WAGES ❖

There will be two different applications for replacement wages. One application will pertain to Unemployment and Temporary Job Shut-Down cases only. The other application for replacement wages will be used in cases where you are involved with Worker's Compensation, Disability, or Jury Duty. You must use the correct application for the type of replacement wages you are applying for and the entire application must be properly completed. Incomplete or improperly completed applications will be returned and will slow down your benefit receipt.

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Should you have any questions regarding this benefit announcement or about any aspect of your employee benefit programs please contact the Fund Office at 212.465.8888.

**THE TRUSTEES OF THE
STEAMFITTERS' INDUSTRY SECURITY BENEFIT FUND**

**Patrick Dolan, Jr. (Co-Chairman)
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