

SUMMARY OF MATERIAL MODIFICATIONS

STONE AND MARBLE MASONS OF METROPOLITAN WASHINGTON, D.C. HEALTH & WELFARE FUND

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September 1, 2013

SUMMARY OF MATERIAL MODIFICATION #3

Dear Participant:

This Summary of Material Modifications is being provided to advise you as to certain new developments relating to the Stone and Marble Masons of Metropolitan Washington, D.C. Health and Welfare Fund (the Plan), which are applicable to the Plan and its Schedule of Benefits, effective September 1, 2013, except as otherwise noted. This Summary of Material Modifications describes changes to the terms of the Plan adopted by the Board of Trustees.

I. Benefit Improvement to the Rubble Men and Caulkers Plan

a. Change to the Medical Benefits Annual Deductible:

Effective September 1, 2013, for purposes of the Rubble Men and Caulkers plan's rate distribution, the Trustees have adopted a benefit improvement by changing the annual medical deductible for the individual participant from 300 to 200 and the family annual deductible from 600 to 400.

Medical Benefits (old)	Benefit Employees with more than 2 year of eligibility		Benefit Employees with less than 2 year of eligibility	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Annual Deductible				
<u>Individual</u>	\$300	\$300	\$300	\$300
<u>Family</u>	\$600	\$600	\$600	\$600

Medical Benefits (Change)	Benefit Employees with more than 2 year of eligibility		Benefit Employees with less than 2 year of eligibility	
	In-Network	Out-of- Network	In-Network	Out-of- Network
Annual Deductible				
<u>Individual</u>	\$200	\$200	\$200	\$200
<u>Family</u>	\$400	\$400	\$400	\$400

b. New Benefit: Dental

Effective September 1, 2013, Trustees have adopted a dental benefit for participants of the Rubble Men and Caulkers Plan. The new dental plan pays 100% of the first \$100 then 80% of the next \$400 of the plan's participants and their dependents' dental care. The plan will pay a maximum of \$800 per family.

Dental Benefits	Employee and Dependents	Dependents up to age 18
Annual Maximums		
At 100%	\$100	\$100
At 80%	\$400	\$400
Maximum paid per family	\$800	Not Applicable (Benefits above \$500 will be paid at 50%)

c. New Benefit: Vision

Effective September 1, 2013, the Trustees adopted a new Vision benefit available to the members and dependents of the Rubble Men and Caulkers plan. The Vision benefit covers \$100 every 24 months of the members and dependents' vision care.

Vision Benefits	Members and Dependents
Benefits available once every 24 months.	\$100

II. Prescription Drugs Requiring Precertification

Effective January 1, 2014, certain prescription drugs will cease being covered by the Plan unless prior authorization is obtained from CVS/Caremark for use of these medications. These specific medications are listed below. Each

of these medications has a therapeutic equivalent prescription drug that is covered under the Plan.

You may have received written notification or a telephone call advising you that these prescription drugs will no longer be covered, if you have an existing prescription for these medications. You and your physician should discuss whether to use the alternate medication instead of the prescription drug on this list. If your physician believes that you should use one of the excluded drugs rather than the therapeutic equivalent, your physician will be asked to provide CVS/Caremark with certain information, so that CVS/Caremark may determine whether to provide you with prior authorization for use of this drug.

If CVS/Caremark provides prior authorization, then the drug will be covered under the normal rules of the Plan. If CVS/Caremark does not provide prior authorization, your prescription for the excluded drug will not be covered under the Plan rules at all. If you agree to use the alternate medication, rather than the excluded drug, the alternate medication will be covered under the normal rules of the Plan.

The following drugs are excluded from coverage under the Plan, effective January 1, 2014, without prior authorization:

LIST OF EXCLUDED DRUGS 2014:

ACTOS	DYMISTA	PREVACID
ALVESCO	KAZANO	PROTONIX
ASACOL HD	LASTACAFT	RAYOS
BREEZE 2 STRIPS AND KITS	LESCOL XL	SUBOXONE FILM
BREO ELLIPTA	LIPITOR	TRICOR
CONTOUR STRIPS AND KITS	LIPTRUZET	TUDORZA PRESSAIR
CONTOUR NEXT STRIPS AND KITS	NESINA	VALTRES
DELZICOL	OSENI	VENTOLIN HFA
DIOVAN HCT	PLAVIX	ZETONNA

LIST OF EXCLUDED DRUGS CARRYOVER 2013:

ADVICOR	HUMALOG MIX 50/50	ONGLYZA
ALTOPREV	HUMALOG MIX 75/25	OXYTROL
ANDROGEL	HUMULIN 70/30	QNASL
ARTHROTEC	HUMULIN N	RHINOCORT AQUA
ATACAND	HUMULIN R	RIOMET
ATACAND HCT	INTERMEZZO	ROZEREM
BECONASE AQ	JALYN	RYZOLT
DETROL LA	KOMBIGLYZE XR	SAIZEN

EDARBI	LEVITRA	SANCTURA XR
EDARBYCLOR	LIVALO	TESTIM
FLECTOR	LUMIGAN	TEVETEN
FORTAMET	MAXAIR	TEVETEN HCT
FREESTYLE STRIPS AND KITS	NUTROPIN/NUTROPIN AQ	TEV-TROPIN
GENOTROPIN	OLEPTRO	TOVIAZ
GLUMETZA	OLUX-E	VERAMYST
HECORIA	OMNARIS	XOPENEX HFA
HUMALOG	OMNITROPE	

This is the third Summary of Material Modification issued to the Summary Plan Description (Fund Booklet) effective February 2012 as recorded on the outside front cover. Please place this with your Summary Plan Description (Fund Booklet) for handy reference and safekeeping. If you need a Summary Plan Description (Fund Booklet), please contact the Fund Office at (410) 872-9500.

Board of Trustees
Stone and Marble Masons of Metropolitan
Washington, D.C. Health and Welfare Fund