

# Cement Masons & Plasterers Trust Funds

2815 2<sup>nd</sup> Avenue, Suite 300 • P.O. Box 34203 • Seattle, Washington 98124  
Phone (206) 441-7574 or (800) 732-1121 • Fax (206) 505-9727 • Website  
[www.cementmasonstrust.com](http://www.cementmasonstrust.com)

Administered by  
Welfare & Pension Administration Service, Inc.

March 2, 2016

**TO: All Active and Non-Medicare Retiree Plan Participants  
Cement Masons and Plasterers Health and Welfare Plan**

**RE: New Preferred Provider Organization (PPO) Effective April 1, 2016**

*This is a Summary of Material Modification describing changes adopted by the Board of Trustees. Please be sure that you and your family read this information carefully and keep it with your Plan Booklet.*

## ***Preferred Provider Organization***

The Trustees of the Cement Masons and Plasterers Health and Welfare Plan (“the Trust”) selected Aetna to replace First Choice Health Network as the preferred provider organization (PPO). Aetna will also replace First Choice Health Network for Medical Review, Utilization Review and Individual Case Management. These changes will be effective **April 1, 2016**. WPAS will continue to process your health claims. *These changes do not apply to Medicare eligible retirees.*

Aetna PPO providers have agreed to provide you and your dependents with services and supplies at negotiated discounted rates. These rates reduce the cost to you and the Trust. While you may select any provider or hospital for services and care, non-PPO services will result in a lesser payment by the Trust; as a result, you will be responsible for a greater share of the cost of the claim.

## ***Aetna Navigator Website***

You can access PPO provider directories and all of the online tools available on the Aetna Navigator website, by registering online after April 1, 2016. Until then, if you wish to review Aetna’s provider network, you may search for providers at **[www.Aetna.com/docfind](http://www.Aetna.com/docfind)**. Select the “Aetna Choice POS II (Open Access)” network.

## ***Precertification***

Most hospital stays, inpatient confinements, and surgeries require precertification of medical necessity. Effective April 1, 2016. Aetna will be the Plan’s Utilization Review (UR) Coordinator providing precertification services.

- **If you use an Aetna PPO provider**, the provider is responsible for obtaining the necessary precertification. Because precertification is the provider's responsibility, the provider's reimbursement will be limited if the provider fails to pre-certify required services. The provider cannot pass the costs on to you when the provider fails to obtain necessary preauthorization (provided you do not sign an agreement with the provider to be financially responsible for services denied by the UR Coordinator).
  
- **If you use a non-PPO provider**, your provider may pre-certify services on your behalf. If your provider fails to obtain precertification for any service on the enclosed list, Aetna will review the medical necessity for those services when the claim is filed. If the service is not medically necessary and is not approved, no benefits will be paid. If services are medically necessary, there is a \$250 reduction in benefits, (but not to exceed 50% of the expense incurred in excess of the deductible) for each service that is not pre-certified. Precertification may be requested by contacting the UR Coordinator at (888) 632-3862. Please be advised that Aetna's precertification list is updated monthly and provider's should be directed to the National Precertification List located on [www.aetna.com](http://www.aetna.com). It is important to note benefits will only be provided for services covered by the Plan, regardless of whether the service is included on the list.

Please remember that even if you obtain precertification of medical necessity, you must be eligible at the time of service.

#### ***New Identification (ID) Cards***

New ID cards identifying you as an Aetna network member will be mailed to you by March 31, 2016. Your new Medical ID cards will include the phone numbers for Aetna precertification and provider locator services. You will also receive new Prescription Drug/Dental ID cards. **Please watch your mail for the new cards and begin presenting them for medical services and prescription drugs received on or after April 1, 2016.** If you find errors on your newly issued ID cards or do not receive your cards prior to April 1, 2016, please contact the Administration Office immediately.

If you have any question regarding the information outlined in this notice, please contact the Administration Office at (206) 441-7574 or (800) 331-6158, option 0.

Sincerely,

**Board of Trustees  
Cement Masons and Plasterers Health and Welfare Trust**

## Cement Masons and Plasterers Health and Welfare Plan Precertification Requirements

Certain health care services such as hospitalization, outpatient surgery and certain other outpatient services, require precertification.

- **If you use an Aetna network provider**, your provider is responsible for obtaining necessary precertification for you. Because precertification is the provider's responsibility, if your provider fails to pre-certify required services, the provider's reimbursement will be limited and the provider cannot pass those costs on to you.
- **If you use a non-preferred provider**, your provider may pre-certify for certain services on your behalf. If the provider fails to pre-certify those services, Aetna will review the medical necessity of those services when the claim is filed. If the service is not medically necessary and is not approved, no benefits will be paid. If the service is medically necessary, benefits will be paid according to the plan. Failure to pre-certify will result in a \$250 reduction (but not to exceed 50% of the expense incurred in excess of the deductible) in benefits for each medical service listed below.

### Precertification is required for the following types of medical expenses:

- Inpatient confinements (all) For Example:
  - Surgical and nonsurgical
  - Skilled nursing facility
  - Rehabilitation facility
  - Inpatient hospice
  - Maternity and newborn confinements that exceed the standard length of stay
- Observation stay more than 24 hours
- Ambulance transportation by fixed-wing aircraft (plane)
- Autologous chondrocyte implantation, Carticel
- Dialysis visits
- Dorsal column (lumbar) neurostimulators: trial or implantation
- Electric or motorized wheelchairs and scooters
- Gastrointestinal tract imaging through capsule endoscopy
- Hip surgery to repair impingement syndrome
- The following Home Health Care related services
  - Private duty nursing
- Hyperbaric oxygen therapy
- Lower Limb prosthetics
- Drugs and medical injectables to the extent these services are provided in a doctor's office or medical facility. Please ask your provider to refer to Aetna's National Precertification List for a full listing of medications that should be precertified

- Osteochondral allograft/knee
- Power morcellation with uterine myomectomy, with hysterectomy or for removal of uterine fibroids
- Proton beam radiotherapy
- Reconstructive or other procedures that may be considered cosmetic, including:
  - Blepharoplasty / canthoplasty
  - Breast reconstruction / breast enlargement
  - Breast reduction / mammoplasty
  - Cervicoplasty
  - Chemical peels
  - Sclerotherapy or surgery for varicose veins
- Spinal procedures, including:
  - Artificial intervertebral disc surgery
  - Cervical, lumbar and thoracic laminectomy / laminotomy procedures
  - Spinal fusion surgery
- Uvulopalatopharyngoplasty, including laser-assisted procedures
- Ventricular assist devices
- BRCA genetic testing
- Organ transplants
- Pediatric congenital heart surgery
- Polysomnography (attended sleep studies)
- Transthoracic echocardiogram

If you have any questions regarding plan benefits, please contact Administration Office at (800) 331-6158, option 0.

\*Please be advised that Aetna's precertification list is updated monthly and providers should be directed to the National Precertification List located on [www.aetna.com](http://www.aetna.com). Note: benefits will only be provided for services covered by the Plan, regardless of whether the service is included on the list.