

**DIVISION 1181 A.T.U. – NEW YORK WELFARE FUND
101-49 Woodhaven Boulevard, Ozone Park, N.Y. 11416
(718) 845-5800**

March 2010

Re: Participant Education Letter for Empire Claim Administration Issues

Dear Participant:

As you know, the Division 1181 A.T.U. – New York Welfare Fund has used Empire BlueCross for over a year. Over that year, Fund participants have raised issues or questions with the Fund Office about how some claims are processed. The Fund Office and the Board of Trustees work diligently with Empire BlueCross to resolve the issues you raise. We are pleased to inform you that Empire has agreed to the Fund's requests to handle the claims processing issues in a manner that we believe provides better service to our participants. We have summarized the resolution of these issues below.

- If you go to an emergency room at a participating hospital, and you are treated by a out-of-network provider, Empire has agreed to negotiate with these out-of-network providers to accept the Fund's allowance that would have been paid to a participating provider, in the hopes that you will not be responsible for any out-of-pocket costs in this circumstance. This same process will apply if you go to a participating hospital and, without your request, you are treated by an out-of-network pathologist or anesthesiologist. If you have an outstanding bill from a provider that appears to fall in this category, please send these claims onto the Fund Office immediately.
- If you have any covered procedure (i.e. colonoscopy, endoscopy etc.), done at a participating provider's office and a non-participating anesthesiologist provides you a bill for services, Empire BlueCross has agreed to negotiate with the anesthesiologist to accept the Fund's allowance that would have been paid to a participating anesthesiologist, in the hopes that you will not be responsible for any out-of-pocket costs in this circumstance. If you have an outstanding bill from such a provider that appears to fall in this category, please send these claims onto the Fund Office immediately.
- Participating providers are not permitted to send lab tests to non-participating laboratories; the only lab network in the Empire BlueCross network is Quest Diagnostic. Therefore, your doctor should not use a lab other than Quest Diagnostic for your laboratory work. If your doctor sends a laboratory test onto a non-participating laboratory, and you receive a bill from the laboratory, Empire has agreed to pay these claims because its participating providers are prohibited from sending labs to non-participating laboratories. Consequently, to the extent that you have such a claim, you should send it onto the Fund Office immediately.

- Empire has agreed that if you go to an out-of-network provider in Empire's service area, Empire will pay that provider directly instead of paying the participant as long as the participant requests the assignment to the provider on his or her claim form. Therefore, if you go to out-of-network provider in Empire's service area, please make sure to indicate in the assignment if you want payment to go to the provider directly. Empire's service area covers 28 counties in New York State, but does not include New Jersey or Connecticut. For complete listing of the covered counties in Empire's PPO network, go to www.empireblue.com.
- The Plan covers administration charges associated with immunizations/vaccinations that are covered under the terms of the Plan. If you have a bill for administration of a covered immunization or vaccine that was denied or is still outstanding, please provide a copy of the bill to the Fund Office.

We would also like to take this opportunity to remind you of a couple things about our Plan.

- The Plan only covers "routine" physicals for dependents until the end of the calendar year in which the dependent turns 14 years old. The Plan does not cover routine physicals for anyone else. For participants, the Plan only covers annual physicals that are required by the Department of Education.
- If you go to a non-participating provider, please inform the provider that all lab work should be sent to Quest Diagnostic, which is the only participating laboratory in the Empire network. Otherwise, you may be responsible for a balance bill that could have been avoided had Quest Diagnostic been used instead.
- To eliminate a potential cost to you, prior to seeing any provider, please verify that he or she is in the Empire BlueCross PPO network. Do not assume that if the provider was previously in the MagnaCare network, the provider also is part of the Empire BlueCross PPO network. It is your responsibility to verify this fact before any services are provided to you. Otherwise, this might result in you being responsible for a balance bill that you could have avoided if you had gone to a participating PPO provider.
- For faster processing of your claim, please make sure that your provider has updated Fund information for you. A number of claims are still erroneously being sent to MagnaCare based on incorrect information on file with providers. This unnecessarily delays processing and payment of your claims.
- Please notify the Fund Office if you have changed your address so that the Fund Office can update its database and forward this information onto Empire BlueCross. This will also avoid any delays in payment and processing.
- Finally, please keep the Fund Office updated with any college letters for each of the semesters that your Dependent is attending in order to eliminate any delays in processing their claims. We will forward this information over to Empire BlueCross. This will avoid any delays in payments and processing.

Of course, to the extent that you encounter any issues related to the items described above, please contact the Fund Office. Thank you in advance for your cooperation.

Very truly yours,

A handwritten signature in cursive script that reads "Robert D'Ulisse".

ROBERT D'ULISSE
Director

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