

ILWU-PMA BENEFIT PLANS /

International Longshore & Warehouse Union –
Pacific Maritime Association www.benefitplans.org

1188 FRANKLIN STREET • SUITE 101 • SAN FRANCISCO, CALIFORNIA 94109

PHONE (415) 673-8500

FAX (415) 749-1400

ILWU-PMA Pension Plan
ILWU-PMA Welfare Plan

ILWU-PMA Watchmen Pension Plan

Date: January 31, 2019

To: ILWU Longshore, Ship Clerk, Walking Boss/Foreman, and Watchmen Locals

From: Mario Perez, Director of Benefit Plans

**Subject: ILWU-PMA Coastwise Indemnity Plan
Intraocular Lens (IOL) Implants**

The attached notice is being mailed to Participants to advise them of the addition of Intraocular Lens Implant benefits.

Attachment

cc: Area Welfare Directors

A copy of this memo can be downloaded at www.benefitplans.org

ILWU-PMA Pension Plan
ILWU-PMA Welfare Plan

ILWU-PMA Watchmen Pension Plan

SUMMARY OF MATERIAL MODIFICATIONS**Important Notice
Regarding Your ILWU-PMA Welfare Plan Coverage**

Date: January 31, 2019

To: All Eligible ILWU-PMA Coastwise Indemnity Plan Enrollees

Subject: Coastwise Indemnity Plan – Intraocular Lens (IOL) Implants

Effective November 8, 2018, Intraocular Lens (IOL) Implants such as premium multifocal lenses, accommodating lenses, and astigmatism-correcting lenses (e.g., aspheric, toric) will be a covered benefit following cataract surgery only. Claims will be processed and paid per the plan's normal rules regarding coverage and eligibility.

The benefit will be administered by the ILWU-PMA Coastwise Claims Office as are your other medical benefits. For services incurred on or after November 8, 2018, please submit or have your provider submit your itemized receipts and claims accordingly for processing to the address below. The itemized receipt must be accompanied by a completed [ILWU-PMA Welfare Plan Hospital, Medical and Surgical Benefits Claim Form](#). This form can be downloaded from www.benefitplans.org. If additional documentation is needed, the ILWU-PMA Coastwise Claims Office will reach out to you or your provider to obtain this information prior to issuing payment.

The mailing address for the ILWU-PMA Coastwise Claims Office is:

ILWU-PMA Coastwise Claims Office
P.O. Box 429101
San Francisco, CA 94142

If you have any questions about the intraocular lens implant benefit, please call the ILWU-PMA Benefit Plans Office at 415-673-8500.