

The information here is a summary of the provisions of the official documents that govern the operation of the Pension and Welfare Plans and the benefits provided by the Pension and Welfare Plans. Those official documents include the Trust Agreements, the Summary Plan Descriptions, the Summaries of Material Modifications that are published in the newsletter and other written policies, rules and guidelines. While we have attempted to insure that the information is as accurate as possible, in the event there is any conflict in the official documents, the terms of the official documents will control. As always, if you have any questions regarding the operation of the Plans or about your benefits, please feel free to call the Fund Office at (314) 739-6442.

Notes:

District No. 9, I. A. M. & A. W. Welfare Trust
12365 St Charles Rock Road
Bridgeton, MO 63044
314-739-6442

Core Dental Vision Plan	
Vision Care Benefits	
Eye exam per person, in calendar year	
In-Network	100%
Non-Network	Up to \$36
Eyeglass lenses, per pair, in calendar year	
Single Vision	
In-Network	100%
Non-Network	Up to \$28
Lined Bifocal	
In-Network	100%
Non-Network	Up to \$45
Lined Trifocal	
In-Network	100%
Non-Network	Up to \$56
Eyeglass Frames	
Benefit Limits	1 every 24 months
In-Network	Up to \$120
Non-Network	Up to \$45
Contact Lenses	
Benefit Limits	1 every 12 months
In-Network	Up to \$120
Non-Network	Up to \$105

Core Dental Benefits	
Calendar Year Deductible	
Individual	\$25
Family	Not Limited
Routine Preventive	No Deductible, 100%
Basic Restorative	After Deductible, 80%
Major Dental	After Deductible, 80%
Maximum Annual Benefit	\$1,500