



VOLUNTARY HOSPITALS HOUSE STAFF BENEFITS PLAN LEGAL SERVICES

COMMITTEE OF INTERNS AND RESIDENTS LEGAL SERVICES PLAN

520 Eighth Avenue, Suite 1200
New York, NY 10018
(212) 356-8195

Go to <http://www.cirseiu.org/> and click on "Benefits"
Fax (212) 504-3057

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Committee of
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VHHSBP LEGAL SERVICES (CIRLS)

IMPORTANT NOTICE

This booklet describes the pre-paid legal services available to CIR members and their families covered by the Voluntary Hospitals House Staff Benefits Plan.

The Trustees reserve the right to change both the types and amounts of benefits available and the rules governing eligibility under this Plan.

If you have any questions regarding these benefits, write to the Plan Manager at 520 Eighth Avenue, Suite 1200, New York, NY 10018. You will receive a written response. Do not rely on statements made orally or by individuals who are not Plan officials.

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Dear Participant:

We are pleased to present this revised and updated booklet which describes the pre-paid legal services benefits available to you through the Voluntary Hospitals House Staff Benefits Plan (VHHSBP) of the Committee of Interns and Residents (CIR).

CIR Legal Services (CIRLS) has been assisting resident physicians and their families since January 1, 1980, providing access to a wide range of legal services free of charge.

CIRLS is financed by contributions from the hospital which employs you, in accordance with the terms of the contract negotiated between CIR and the hospital. The contributions received are administered by the VHHSBP Trustees. Because the Internal Revenue Service (IRS) regards these funds as income to Plan participants, a small sum will be reported each year on your W-2 form. (In 2006, that sum was \$108.00).

We hope that you and your family will find this plan to be useful, not only because it removes the financial burden of obtaining legal assistance, but also because it provides high-quality services. We would appreciate hearing from you regarding Plan coverage and quality of services so that we can better address your legal needs in the future.

Sincerely,
Harry Franklin
General Counsel

WHAT IS CIRLS?

The Committee of Interns and Residents VHHSBP Legal Services (CIRLS) is a pre-paid legal services plan which provides services to resident physicians and qualifying family members on “covered” matters.

All covered matters are handled by CIRLS, through either its in-house legal staff or designated outside counsel, called “cooperating attorneys,” who CIRLS has retained to help meet the legal needs of Plan participants. CIRLS attorneys are licensed to practice in the State of New York and/or in the State of New Jersey.

To minimize your legal costs and simultaneously ensure that the Plan’s resources are available to all Plan participants, CIRLS must adhere to the following guidelines:

- You pay no attorneys’ fees for any covered matter handled by CIRLS. However, CIRLS will not pay, or reimburse you, for the services of an attorney whom you retain privately.
- You are responsible for payment of any court or agency filing fees, mailing costs, and other expenses. CIRLS will pay for service of papers on your opponent in litigation and will also pay a limited sum for a private investigator should that become necessary in the course of representation. (See page 12.)
- If you intend to receive coverage under the Plan, you must contact CIRLS first for referral to an attorney. This is true even if your private counsel is someone with whom CIRLS is in a cooperating relationship. CIRLS retains the right to make the requisite referral.
- If you are referred to a CIRLS cooperating attorney you agree and understand that your cooperating attorney may discuss your case with a CIRLS in-house lawyer to update CIRLS on the status of your case and to determine whether and what type of coverage should be provided under the legal services plan.

HOW TO OBTAIN BENEFITS UNDER THIS PLAN

To access legal services under this Plan, simply:

1. Call (212) 356-8195.
2. Provide your name, hospital, residency program, social security number, address, and telephone number so that your eligibility can be verified.
3. Briefly describe your problem. (It is often helpful in this regard to refer to any relevant documents.)

If you are eligible for CIRLS coverage your case will be referred to an attorney. Once you obtain advice from a CIRLS attorney, you are responsible for following up as advised. If you do not follow up within an appropriate time, you risk losing coverage.

If you are dissatisfied with the services of your attorney and wish to have CIRLS designate a different attorney, you must make your request in writing to the CIRLS General Counsel who will determine whether such a change is warranted. You must state the reasons for your dissatisfaction with your attorney in your written request. You can contact the General Counsel at:

520 Eighth Avenue, Suite 1200
 New York, NY 10018
 (212) 356-8195
 cirls@cirseiu.org
 Go to <http://www.cirseiu.org/> and click on “Benefits”
 Fax (212) 504-3057

Be sure to include your address, telephone, fax, beeper numbers and email address.

WHO IS ELIGIBLE FOR PLAN BENEFITS?

Individuals

If you are employed by a hospital that, as part of collective bargaining, has agreed to contribute to CIRLS, you become eligible for the Plan benefits on the day that you are placed on the hospital’s payroll and continue to be eligible for as long as you remain on that hospital’s payroll.

If litigation is pending when your employment is terminated, CIRLS will continue representing you for a maximum of 60 days. You are responsible for transitioning your case to private outside counsel or entering into a private retainer agreement with your CIRLS cooperating attorney if representation is still required beyond this 60-day period. Any other ongoing legal services will cease to be covered upon termination of your employment. CIRLS is not responsible for retaining another attorney for you after your coverage ends.

Family members

If you are eligible for CIRLS, your spouse or your domestic partner may be eligible as well.¹ Your spouse is not eligible if you are legally separated. An eligible domestic partner is entitled to services only after registering as your domestic partner with CIRLS.² Generally, your unmarried dependent children under 19 are eligible. Your child 19 years of age or older continues to be eligible if totally disabled.

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1. CIRLS benefits are extended to same sex domestic partners of Voluntary Hospitals House Staff Benefits Plan participants. At the time of publication, St. Luke’s Roosevelt Hospital had extended coverage to both same sex and opposite sex domestic partnerships. Please consult with CIR’s Benefits Plan office to determine whether your employer has extended coverage to opposite sex domestic partnerships.
 2. To register your domestic partner, contact CIR’s Benefit Plan office at (212) 356-8180 for the necessary form and list of required documentation.

WHAT LEGAL SERVICES ARE COVERED?

Medical Licensure

- Consultation and, where appropriate, representation before the New York or New Jersey medical licensing board in connection with a Plan participant's application for a medical license.
- Consultation and, where appropriate, representation if a Plan participant is reported to, or investigated by, New York State or New Jersey in connection with a medical-incident report or because of alleged professional medical misconduct.

Immigration

- Consultation regarding immigrant, non-immigrant, and visa-related issues, including J-1 waivers, political asylum and permanent residency applications.
- Consultation regarding citizenship applications.
- Representation on J-1 applications for Plan participants and J-2 applications for eligible family members.
- Representation on H-1B petitions by Plan participants for residency and fellowship employment at CIR hospitals and related H-4 applications for eligible family members. Representation is excluded on H-1B petitions for Plan participants and related H-4 applications by eligible family members for both post-residency (attending) employment and for residents who transfer their residencies to non-CIR hospitals or who move to fellowships at non-CIR hospitals. Representation is also excluded for H-1B petitions for moonlighting, per diem and sessional employment. (Please note: this does not exclude residents who need to have H-1B petitions because they are transferring payrolls as part of a regular rotation).
- Representation on family-based permanent residency petitions where the participant or eligible family member is the beneficiary.
- Representation on diversity lottery cases where the participant or eligible family member is the beneficiary.

- Representation on applications for employment authorization where the participant or eligible family member is the beneficiary.

Landlord-Tenant Problems

- Consultation and, where appropriate, negotiation regarding tenancy issues.
- Review of leases and related documents.
- Defense, where there is a reasonable legal basis, against eviction proceedings.
- Consultation and, where appropriate, representation in actions to compel landlords to make repairs and provide adequate services.

A cooperative or condominium owner shall be provided the same range of legal services as tenants as long as the owner actually resides in that cooperative or condominium.

Family Matters

- Representation in uncontested divorce proceedings.
- Representation in adoption proceedings.
- Consultation and, where appropriate, representation in child support, child custody and visitation proceedings. However, representation will not be provided in child support, child custody and visitation proceedings that are ancillary to contested divorces.
- Fees for a mediator who mediates a dispute involving a contested divorce, or the custody, visitation or support of a child, and in which a Plan participant is a party to the dispute. Coverage of mediator fees shall not exceed \$2,000. Attorneys fees for representation of a Plan participant or eligible family member in the mediation shall not be covered."
- Consultation and, where appropriate, representation in family offense proceedings.
- Preparation of separation agreements.
- Consultation, and where appropriate, representation for legal guardianship petitions for developmentally disabled children of Plan participants and eligible family members.

In the event that two Plan participants are involved as adversaries in the same controversy or proceeding, CIRLS will reimburse each Plan participant up to \$1,500 for consultation and /or representation with an attorney of his or her choosing.

In the event that a Plan participant and his or her eligible family member are involved as adversaries in a controversy or proceeding, representation will be restricted to the Plan participant, unless he or she signs a written consent declining representation and authorizing CIRLS to represent the family member instead.

Consumer Protection

- Consultation and, where appropriate, negotiation regarding problems arising from the purchase of goods and services.
- Consultation and preparation of the Statement of Claim for small claims proceedings.
- Defense, when there is a reasonable legal basis, against claims arising from the purchase of goods and services which exceed \$5,000.

Wills, Living Wills, and Powers of Attorney

- Preparation of simple wills and testamentary trusts in which the sole trust beneficiaries are minors at the time of the execution of the will.
- Preparation of living wills and health care proxies.
- Preparation of powers of attorney.

Estate Matters

- Consultation regarding the administration of the estate of a Plan participant or eligible family member who dies with or without leaving a will.

Bankruptcy and Debt Problems

- Consultation and, where appropriate, representation in personal bankruptcy proceedings.
- Consultation regarding debt problems arising from loans, installment contracts, or collection actions brought by creditors.
- Defense, where there is a reasonable legal basis, against claims exceeding \$5,000.

Credit Rating

- Consultation regarding inaccurate credit reports.

Name Changes

- Preparation and filing of court documents necessary to effect a legal change of name.

Criminal Matters

- For Plan participants facing impending or actual criminal charges related to acts allegedly committed at the health facility in which they work and related to their work as residents, representation by a CIRLS designated attorney is provided. This benefit includes pre-arraignment investigation of the charges, representation at arraignment and concludes at the completion of arraignment.
- For eligible family members, and for Plan participants for matters not covered above, a single consultation (cost not to exceed \$300.00) with a CIRLS-designated attorney regarding criminal charges that are filed or are likely to be filed against Plan participant or eligible family member of a Plan participant is provided.

Unemployment Benefits

- Consultation regarding unemployment benefits and related issues for eligible family members.

Document Review

- Review of written agreements pertaining to such matters as consumer purchases, loans, residential leases, insurance, and cohabitation.

Document review involves discussion and interpretation of documents. It does not, in itself, involve legal representation.

WHAT LEGAL EXPENSES ARE COVERED?

If CIRLS is handling a case for you, and it becomes necessary to hire someone to serve papers on the opposing party, CIRLS will pay the cost of doing so. In addition, CIRLS will pay up to \$300.00 for a private investigator's services if such become necessary in a case that CIRLS is handling for you.

WHAT LEGAL SERVICES ARE EXCLUDED OR LIMITED?

Financial and legal considerations prevent CIRLS from handling all legal problems. Court representation is limited to the Bronx, Kings, Nassau, New York, Queens, Richmond and Westchester counties in New York and Bergen, Essex, Hudson, Middlesex, Morris, Passaic and Union counties in New Jersey. Cases arising outside of New York or New Jersey shall only be covered where appropriate.

Following are examples of the Plan's exclusions:

1. Cases, such as personal injury claims, which commonly would be handled by a private attorney on a contingency fee basis.
2. Appeals from unfavorable court or administrative agency decisions.
3. Business, commercial, or professional matters, including review of professional employment or practice contracts.
4. Matters relating to the purchase or sale of real estate.
5. Personal injury and property damage matters arising out of the ownership, control, or use of a vehicle.
6. Disputes with or claims against CIR, CIRLS, House Staff Benefits Plan, Voluntary Hospitals House Staff Benefits Plan, a CIRLS cooperating attorney, the City of New York, or employers that contribute to CIRLS.
7. All income tax matters.
8. Any legal service not identified as a covered service on pages 8, 9, 10 and 11.

HOW TO APPEAL A DENIAL OF COVERAGE

A. Authority of the Plan

VHHSBP Legal Services (the Plan) is part of a joint labor-management employee benefit trust fund, financed by contributions fixed by collective bargaining or other written agreements, and administered by an equal number of Trustees designated by the contributing employers and by CIR pursuant to an Agreement and Declaration of Trust, which may be amended from time to time. The Trust Agreement gives the Board of Trustees authority and discretion to determine benefits, and the Trustees have accordingly adopted a Plan of benefits set forth and described by Summary Plan Description (SPD). Under the Trust Agreement and SPD, the Trustees may, in their discretion, revise, discontinue, improve, reduce, modify or make changes in the plan, the types and amounts of benefits provided, the coverage and eligibility provisions, conditions and rules, at any time. Any question of interpretation, construction, application or enforcement of the terms of the Plan and SPD, and all determinations on benefit claims and appeals, are subject to the discretion of the Board of Trustees, whose determinations are final and binding.

B. Request for Review of Disputed Claims

If you have presented a claim for legal benefits under this SPD, you may file a request for review of its disposition or adverse benefit determination by appealing to the Board of Trustees of the Plan in writing, within 60 days after receiving written notice of the Plan's action. Send your appeal to the Board of Trustees at the VHHSBP Legal Services Plan Office, 520 Eighth Avenue, Suite 1200, New York, New York 10018 or email your appeal to cirls@cirseiu.org. You will be notified, in writing, of the decision of the Board of Trustees within 60 days of the date your request for review is received, unless there are special circumstances, in which case you will be so notified and then notified of the decision within 120 days.

C. Additional Information

If additional information is needed, it will be requested by the Plan, and the failure to timely provide the information may require the denial of the claim or appeal.

D. Finality

In deciding claims, the Board of Trustees has broad discretion to interpret and apply the terms of this Plan and SPD. The determination of the Plan will be final and binding if an objection or request for review is not timely filed. The decision of the Board of Trustees will be final and binding on any appeal timely presented to it. The Claimant has the right to bring a civil action under Section 502(a) of the Employee Retirement Income Security Act following an adverse benefit determination on review.

E. Notification and Right to Comment and to Information

Upon any adverse benefit determination, the Plan will notify the Claimant of this Claims Review and Appeal Procedure and its time limits. A Claimant may review pertinent documents and submit written issues and comments, records or other information relating to the claim. A Claimant shall be provided upon request and free of charge, reasonable access to and copies of all documents, records and other information relevant to the claim. All comments, documents, records, and other information submitted by the Claimant will be taken into account at any stage of the Claims Review and Appeals Procedure and process.

STATEMENT OF RIGHTS UNDER THE EMPLOYEE RETIREMENT INCOME SECURITY ACT (ERISA)

As a participant in the CIR VHHSBP Legal Services, you are entitled to certain rights and protections under the Employee Retirement Income Security Act of 1974 (ERISA). ERISA provides that all plan participants shall be entitled to:

Receive Information About Your Plan and Benefits

Examine, without charge, at the plan administrator's office and at other specified locations, such as worksites, all documents governing the plan, including insurance contracts and collective bargaining agreements, and a copy of the latest annual report (Form 5500 Series) filed by the plan with the U.S. Department of Labor and available at the Public Disclosure Room of the Pension and Welfare Benefit Administration.

Obtain, upon written request to the plan administrator, copies of documents governing the operation of the plan, including insurance contracts and collective bargaining agreements, and copies of the latest annual report (Form 5500 Series) and updated summary plan description. The administrator may make a reasonable charge for the copies.

Receive a summary of the plan's annual financial report. The plan administrator is required by law to furnish each participant with a copy of this summary annual report.

Prudent Actions by Plan Fiduciaries

In addition to creating rights for plan participants, ERISA imposes duties upon the people who are responsible for the operation of the employee benefit plan. The people who operate your plan, called "fiduciaries" of the plan, have a duty to do so prudently and in the interest of you and other plan participants and beneficiaries. No one, including your employer, your union, or any other person, may fire you or otherwise discriminate against you in any way to prevent you from obtaining a welfare benefit or exercising your rights under ERISA.

Enforce Your Rights

If your claim for a welfare benefit is denied or ignored, in whole or in part, you have the right to know why this was done, to obtain copies of documents relating to the decision without charge, and to appeal any denial, all within certain time schedules.

Under ERISA, there are steps you can take to enforce the above rights. For instance, if you request a copy of plan documents or the latest annual report from the plan and do not receive them within 30 days, you may file suit in a Federal court. In such a case, the court may require the plan administrator to provide the materials and pay you up to \$110 a day until you receive the materials, unless the materials were not sent because of reasons beyond the control of the administrator. If you have a claim for benefits which is denied or ignored, in whole or in part, you may file suit in a state or Federal court. In addition, if you disagree with the plan's decision, or lack thereof, concerning the qualified status of a domestic relations order or a medical child support order, you may file suit in Federal court. If it should happen that plan fiduciaries misuse the plan's money, or if you are discriminated against for asserting your rights, you may seek assistance from the U.S. Department of Labor, or you may file suit in a Federal court. The court will decide who should pay court costs and legal fees. If you are successful, the court may order the person you have sued to pay these costs and fees. If you lose, the court may order you to pay these costs and fees, for example, if it finds your claim is frivolous.

Assistance with Your Questions

If you have any questions about your plan, you should contact the plan administrator. If you have any questions about this statement or about your rights under ERISA, or if you need assistance in obtaining documents from the plan administrator, you should contact the nearest office of the Employee Benefits Security Administration, U.S. Department of Labor, listed in your telephone directory, or the Division of Technical Assistance and Inquiries, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue N.W., Washington, D.C. 20210. You may also obtain certain publications about your rights and responsibilities under ERISA by calling the publications hotline of the Employee Benefits Security Administration.