The Love Canal Medical Benefits Plan will pay up to $500 per year, per beneficiary, for prescription medication purchased beginning January 1, 2014 through December 31, 2015 that is related to a medical condition that reasonably could be associated with exposure to toxic chemicals at Love Canal.

For example, if you are a diabetic, or take thyroid or heart medication, you should submit your prescription costs to the Love Canal Medical Benefits Plan.

Getting the information together to submit is easy. Just ask the drug store or other place where you have your prescription(s) filled, to print out a summary of prescription medications you purchased and their cost. They will usually do this for you at no charge. Then attach that summary to your claim form - it’s that easy!

A second reception was held a few weeks later with Lois Gibbs and the Center for Health, Environment & Justice. A short segment of a documentary film, A Fierce Green Fire, on Love Canal was shown at the reception. One hundred and twenty-five people came, many former residents reminisced about the “fight” and caught up on what people are doing today. A news conference and tour was also held at 100th Street in Love Canal.

Affordable Care Act

This new federal health insurance program is a bit of an unknown to the Love Canal Medical Fund as it is likely to you. It is unclear whether it will increase the amount of funds that we provide through the program or decrease that amount. We’ll have to wait and see. That said, it is important that you continue to submit your out-of-pocket expenses for medical treatment and prescriptions related to medical conditions that reasonably could be associated with exposure to toxic chemicals at Love Canal.

Over the years the Love Canal Medical Benefit Plan has evolved and has offered different benefits at times. If you are a named beneficiary of the largest Love Canal lawsuit, you are entitled to these benefits. We will continue to monitor and adjust the benefits program as we move forward and better understand the federal program and hear from you about what you need.

You should take advantage of the medical coverage offered to you by this plan so that you will receive reimbursement for medical expenses not covered by your health insurance. If you have questions about coverage, please call us at (716) 773-6578.

Questions and Answers

There are many questions that beneficiaries have frequently asked over the years. Here are some of those questions and their answers.

Q: I was a resident of Love Canal and am a participant in the Love Canal Medical Fund. I developed a medical problem years after the settlement. Am I covered for this problem?

A: Yes, as long as the medical problem is related to a medical condition that reasonably could be associated with exposure to toxic chemicals at Love Canal.
B: **Q:** How do I know if my problem is related to Love Canal? I’m confused about what can be reasonably associated with exposure to toxic chemicals at Love Canal.

**A:** Whenever you have a question about coverage you should submit a claim for reimbursement and our claims adjuster will let you know if it’s covered.

**Q:** What is covered?

**A:** A brief summary of covered medical expenses follows. But please, refer to your medical benefits plan booklet or read the online version at www.lcmf.org. At the top of the home page you’ll see a link to the plan, claim forms and other information. The plan describes in detail what is and what is not covered - below is only a summary.

- Medical problems that reasonably could be associated with exposure to toxic chemicals at Love Canal includes expenses for treatment and diagnostic procedures related to such medical problems.
- Preventative and diagnostic procedures and tests in order to detect any medical problems that reasonably could be associated with exposure to toxic chemicals at Love Canal.
- Routine Physical Examinations - up to a maximum of $250 for one physical examination per calendar year, per beneficiary. There is no deductible for a routine physical exam.
- Mental Health and Emotional Disorders - diagnosis and treatment related to an illness or other medical condition that reasonably could be associated with exposure to toxic chemicals at Love Canal.
- Allergies - covered expenses include desensitization shots and prescription medications.
- Prescription medications for covered conditions up to a maximum of $500 per beneficiary per year.
- Chemotherapy treatment prescription medication is treated differently than other prescriptions. The Fund will pay up to $2,000 per year for chemotherapy treatment protocol/regimen.
- Hearing Aids or other devices to assist hearing impaired, when such expense are related to a birth defect or other medical condition which reasonably could be associated with exposure to toxic chemical at Love Canal.
- Rental or purchase of appliances such as devices to assist in walking or mobility (walker, crutches, wheelchair) or hospital bed, etc. These must be prescribed by a health care provider for medical conditions that reasonably could be associated with exposure to toxic chemicals at Love Canal. Maximum benefit is up to $2,000 per beneficiary per year.
- Dental care, if such care is related to a birth defect or other medical condition diagnosed by a dentist or physician that reasonably could be associated with exposure to toxic chemicals at Love Canal.
- Expenses associated with miscarriages and stillbirths of a female beneficiary. Also covered are amniocentesis, sonograms and other procedures designed to detect potential problems with the fetus of a female beneficiary.
- Foot care and eye care when such care is related to a birth defect or other condition that reasonably could be associated with toxic chemical exposure at Love Canal.
- Reconstructive surgery for a medical condition that reasonably could be associated with toxic chemical exposure at Love Canal.

**Q:** Is cancer covered by the Fund?

**A:** Yes. We have paid claims for cancer treatments for beneficiaries. The claims adjuster reviews all claims. If you have cancer, submit a claim and a determination will be made.

**Q:** Are heart problems covered?

**A:** Yes, the Medical Fund has paid claims for heart problems. Again, if you have a heart problem, submit your claim.

**Q:** My doctor said the bill he sent to LCMF was returned unpaid. Why?

**A:** The Medical Fund does not accept bills directly from providers—hospital, doctors, labs, etc. You must fill out a claim form following the procedures outlined on the form. The LCMF reimburses the beneficiary according to the plan outline. Thus direct payments are only made to beneficiaries.

**Q:** I don’t understand how to fill out the claim form. Can I get help?

**A:** Yes. Do the best you can in filling out the form and mail it with a copy of your bill(s) to our claims adjuster at: First Niagara Risk Management, Inc. 239 Van Rensselaer Street Buffalo, NY 14210.

If they have any questions, they’ll contact you. You can also call them at (716) 849-8177 or toll free At (800) 899-3078

Please keep a photo copy of your form and attachments.

Blank claim forms can be obtained from our web site at www.lcmf.org, or by contacting the Love Canal Medical Fund in any of the following ways:
- E-Mail to: lcmfund@yahoo.com
- Telephoning: 716-773-6578
- Mail: LCMF, PO Box 1782, Amherst, NY 14226.