

Summary of Material Modifications to the DC 37 Health & Benefit Fund

This Summary of Material Modification ("SMM") modifies some of the information contained in the Summary Plan Description ("SPD") for the District Council 37 Health & Benefit Fund (the "Plan") that describes the Plan as of January 1, 2024.

Note: If there is any discrepancy between this SMM and the SPD, the provisions of this SMM will govern.

Modification(s)

Essential changes to certain benefits under the Plan will go into effect on January 1. Coverage for medical benefits shall be amended as follows:

Increase the Office visit co-payment to \$30 (non-hospital and surgical).

Increase in the Specialist visit co-payment to \$35.

Increase the Emergency room co-payment to \$150 per visit, waived if admitted.

Increase the Urgent care co-payment to \$50 per visit.

Change from the BlueCross Jointly Administered with Amalgamated Benefit

If you have questions about these benefits changes, please contact your Plan Administrator at 212-334-0096.

The Trustees reserve the right to amend, modify, or discontinue all or part of the Plan whenever, in their judgment, conditions so warrant. The Trustees of this Plan believe that it is a "grandfathered health plan" under the Patient Protection and Affordable Care Act of 2010, as amended (the "Affordable Care Act"). As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan means that this Plan may not include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for the provision of preventative health services without any cost-sharing. However, a grandfathered health plan must comply with certain other consumer protections in the Affordable Care Act, for example, the elimination of lifetime limits on benefits.

Questions regarding which protections apply and do not apply to a grandfathered health plan and what might cause a plan to change from grandfathered health plan status can be directed to the Fund Office at (212) 334-0096. You may also contact the Employee

Benefits Security Administration, U.S. Department of Labor at (866) 444-3272 or www.dol.gov/ebsa/healthreform. In addition, this website has a table summarizing which protections do and do not apply to grandfather health plans.
