

IBEW LOCAL NO. 9 FRINGE BENEFIT FUNDS

IBEW Local No. 9 and Line Clearance Contractors Health & Welfare Fund
IBEW Local No. 9 and Line Clearance Contractors 401(k) Retirement Fund

Managed for the Trustees by:
TIC INTERNATIONAL CORPORATION

June 2023

IMPORTANT UPDATE ABOUT YOUR BENEFITS

Dear Participant:

The Trustees of the IBEW Local No. 9 and Line Clearance Contractors Health & Welfare Fund (the Fund) are providing you with this notice to explain some important improvements to your benefits.

Extension of COVID-19 Coverage After the End of the COVID-19 Public Health Emergency

The federal government has announced that both the National Emergency and Public Health Emergency related to COVID-19 terminated on May 11, 2023. During the COVID-19 crisis, the Trustees enacted some Plan changes to help you through COVID. The Trustees have elected to continue these benefits after the end of the Public Health Emergency, as explained below.

- **COVID-19 Vaccination Coverage.** The Plan will continue covering COVID-19 (coronavirus) vaccinations with no member cost sharing for all covered participants under both the medical and prescription drug benefits, on both an in-network and out-of-network basis. The coverage is subject to all other Plan provisions and is the same as coverage for other vaccines. Please note that administrative costs in connection with the vaccine will be subject to member cost sharing if you receive the vaccine through your medical (rather than prescription drug) coverage.
- **COVID-19 Diagnostic Testing and Associated Provider Visits.** The Plan will continue to cover COVID-19 diagnostic testing and associated provider visits 100%. The coverage is subject to all other Plan provisions.
- **Over-the-Counter COVID-19 Test Kits.** The Plan will continue covering the purchase of over-the-counter COVID-19 test kits as follows:
 - You may purchase COVID-19 tests through Prime Therapeutics (the Fund's pharmacy benefit administrator). If you do, they will be fully covered by the Fund, at no cost to you.
 - You also have the option to purchase the tests at a non-participating pharmacy. If you do, your reimbursement is limited to \$12 per test. You must submit a claim and appropriate receipts to the Fund to receive reimbursement.
 - You may purchase up to eight COVID-19 rapid tests per covered family member per month.
 - Tests performed at a doctor's office or hospital **do not count** toward the eight-test maximum for reimbursement.
 - Tests purchased for employment purposes are **NOT** covered.

Telehealth Visits. During the COVID-19 national health emergency, the Board of Trustees authorized coverage for telehealth services. These services have proven to be popular, convenient and effective for our participants. For that reason, we are continuing coverage for telehealth services after the public health emergency ends. The coverage will be the same as for other office visits as noted below.

| | In-Network | Out-of-Network |
|------------------------|--|--|
| Office Visit** | \$10 co-payment, deductible does not apply | 20% after \$10 co-payment, deductible does not apply |
| Primary Care Physician | | 50% after \$10 co-payment, deductible does not apply (Non-Administrative Provider) |
| Specialist | | |

** Please note that if your provider adds charges to an invoice in addition to the Office Visit charge, those charges are paid at the normal Medical coinsurance rates and they are subject to the annual deductible and annual out-of-pocket maximums.

New Vision Program to Protect Your Eyes from Ultraviolet and Blue Light Rays

Effective June 1, 2023, the Trustees are proud to provide you with access to VSP’s LightCare program.

Ultraviolet (UV) exposure can be hazardous to your eyes, both outside from the sun and indoors from artificial sources such as tanning beds, lasers, and even fluorescent lights. Exposure to blue light rays from digital devices like phones, computers, and fluorescent lights is also harmful to our eyes.

Through our partnership with Vision Service Plans, Inc. (VSP), you have access to eye care and eyewear solutions to protect your eyes from UV and blue light. With the LightCare program you can use your frame allowance (up to \$200 at a VSP provider or up to \$110 at a Costco provider, plus 20% off any amount over the allowance) for ready-made non-prescription sunglasses or ready-made non-prescription blue light filtering glasses instead of prescription glasses or contacts.

Your VSP network doctor can help you find the right glasses for you. If you prefer to shop online, you can go to eyeconic.com.

A Final Note

This document update is intended to notify you of important changes being made to the Fund’s plan of benefits. You should read this carefully and keep it with your copy of the Plan’s Summary Plan Description (“SPD”) that was previously provided to you. If you have any questions regarding these changes, or about your benefits in general, please contact the Fund Office at (877) 423-9155.

Sincerely,

The Board of Trustees

Notice of Grandfathered Health Plan Status. The IBEW Local No. 9 and Line Clearance Contractors Health & Welfare Fund believes its entire plan of benefits, including the retiree option provided therein, is a “grandfathered health plan” under the Patient Protection and Affordable Care Act (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 the 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 preventive health services without any cost sharing. However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, for example, the elimination of lifetime limits on benefits, once those consumer protections become effective for the plan. Questions regarding which protections apply and which protections 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 plan administrator at (877) 423-9155. You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at (866) 444-3272 or www.dol.gov/ebsa/healthreform. This website has a table summarizing which protections do and do not apply to grandfathered health plans.

This announcement contains highlights of certain features of the IBEW Local No 9 and Line Clearance Contractors Health & Welfare Fund. Full details are contained in the documents that establish the Plan provisions. If there is a discrepancy between the wording here and the documents that establish the Plan, the document language will govern. The Trustees reserve the right to amend, modify, or terminate the Plan at any time.