NORTHERN CALIFORNIA PIPE TRADES TRUST FUNDS FOR UA LOCAL 342

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FEBRUARY 2021

TO: ACTIVE AND RETIRED PARTICIPANTS

RE: SUMMARY OF MATERIAL MODIFICATIONS TO THE NORTHERN CALIFORNIA PIPE TRADES HEALTH AND WELFARE PLAN ("PLAN") FOR COVID-19 BENEFIT CHANGES – DURING PUBLIC HEALTH EMERGENCY

The Board of Trustees of the Northern California Pipe Trades Health and Welfare Plan ("Plan") is pleased to provide you with the following summary of change to the Plan, called a Summary of Material Modification ("SMM"). Please review the important change to the Plan's benefits described below.

GENERAL PROVISIONS – Plan Amendment ACTIVE and RETIRED Participants TEMPORARY COVID-19 TESTING, SERVICES, TREATMENT AND VACCINE COVERAGE EXTENSION OF COVID-19 TREATMENT COVERAGE Article XXI, Section R.2. and R.3.

- R. COVID-19 Testing, Services, Treatment, and Vaccine Coverage During Public Health Emergency
 - 2. COVID-19 Qualifying Preventive Service and Vaccination Coverage. Effective the earlier of January 1, 2021, or 15 business days after the date on which the United States Preventive Services Task Force ("USPSTF") or the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention ("CDC") makes an applicable recommendation relating to qualifying COVID-19 immunizations, the Plan will cover approved COVID-19 vaccinations, including any qualifying coronavirus preventive service defined as an item, service or immunization that is intended to prevent or mitigate coronavirus disease 2019 that has received either an "A" or "B" in the recommendation of the USPSTF or the CDC through both the Kaiser Permanente HMO Plan and Blue Shield of California HMO and PPO Plans during the duration of the COVID-19 Public Health Emergency Period.

Once it becomes available to the public and subject to future government guidance, COVID-19 vaccinations will be available to all eligible Participants and Dependents (through Kaiser and Blue Shield) at **no cost (meaning no copayment, coinsurance or deductible) whether received in-network or out-of-network** and **without prior authorization** at doctors' offices and medical facilities, including applicable participating pharmacies with Kaiser and Blue Shield.

Providers are prohibited from seeking reimbursement from Participants and Dependents for the vaccine itself including the vaccine administration costs whether as a cost-sharing or balance billing.

Please further note under a priority four tiered-system developed by the State of California based on federal guidance, the State of California has already started administering the first doses available to Phase 1A individuals (health care workers, residents and staff in long-term facilities), and recently began vaccinating those Phase 1B individuals (those age 75 and older). In addition, based on the availability of supply and the county, individuals in the Phase 1B tier (those age 65 or older, individuals whose work puts them at higher risk of exposure and residence in vulnerable communities) may be vaccinated. In anticipation of these vaccinations, whenever it becomes available to you and your family based on State guidance, the Plan has amended its rules to prepare for the imminent administration of these vaccinations. More information on when you and your family can get vaccinated should be available through Kaiser Permanente and Blue Shield of California, depending on the health plan you are enrolled in. You can also visit the California website www.covid19.ca.gov/vaccines/ or the Contra Costa Health Services website www.coronavirus.cchealth.org/distribution-phases for more information.

3. COVID-19 Treatment Coverage.

Blue Shield of California HMO and PPO Plans. Effective March 1, 2020, and further extended through February 28, 2021, (or longer, if Blue Shield's policy is extended), if a Blue Shield Plan Participant or Dependent is diagnosed with COVID-19, charges for treatment of the COVID-19 (including hospital admission, transportation and pharmacy services) will be covered in accordance with the terms and conditions set forth in the Evidence of Coverage pursuant to the terms and conditions of the Plan. Cost sharing (e.g. copayments, coinsurance deductibles) related to a positive COVID-19 diagnosis and treatment will be waived.

<u>Kaiser Permanente HMO Plan.</u> Effective April 1, 2020, and further extended through March 31, 2021, unless superseded by government action or extended by Kaiser, if a Kaiser Plan Participant or Dependent is diagnosed with COVID-19 charges, such as out-of-pocket costs for treatment of COVID-19, will be covered for inpatient medical, inpatient pharmacy, outpatient medical, office visits, telemedicine, hospitalization, emergency room, urgent care, and transportation costs. This means any out-of-pocket costs, copayments or other cost share related to a positive COVID-19 diagnosis and treatment will be waived by Kaiser.

IN ACCORDANCE WITH THE REQUIREMENTS OF THE EMPLOYEE RETIREMENT INCOME SECURITY ACT OF 1974, AS AMENDED ("ERISA"), THIS DOCUMENT SERVES AS A SUMMARY OF MATERIAL MODIFICATIONS ("SMM") TO THE PLAN AND SUPPLEMENTS THE RESTATED SUMMARY PLAN DESCRIPTION THAT HAS BEEN SEPARATELY PROVIDED TO YOU. YOU SHOULD RETAIN THIS DOCUMENT WITH YOUR COPY OF THE RESTATED SUMMARY PLAN DESCRIPTION.

If you have any questions, please contact the Trust Fund Office at 925/356-8921 ext. 246.

Respectfully submitted, Fund Manager On Behalf of the Board of Trustees