

**BUILDING TRADES WELFARE BENEFIT FUND  
585 STEWART AVENUE, SUITE 330  
GARDEN CITY NEW YORK 11530**

**Phone: 516-740-5319**

**Email: [BTSupport@Dickinsongrp.com](mailto:BTSupport@Dickinsongrp.com)**

**Fax: 516-740-5410**

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**SUMMARY OF MATERIAL MODIFICATIONS**

The Board of Trustees of the Building Trades Welfare Benefit (“Fund”) has adopted the following changes to Plan A of the Building Trades Welfare Benefit Plan (“Plan”). The changes described below are **effective March 1, 2024**. Please keep this document with your Summary Plan Description (“SPD”).

**Changes to Coverage of COVID-19 Tests and Vaccines**

As you know from previous Fund notices, due to the COVID-19 health crisis and the federal government’s public health emergency, the Fund had been providing coverage for certain COVID-19 related-services at no cost-sharing under the Plan. On May 11, 2023, the public health emergency ended, but the Trustees decided not to change the coverage under the Plan for the remainder of the year. However, effective March 1, 2024, the following changes were made:

**1. COVID-19 Vaccination Coverage**

The Plan will cover COVID-19 immunizations and related items and services subject to the Plan’s rules for other covered preventive care immunizations.

**2. COVID-19 Diagnostic Testing Coverage**

Diagnostic testing by a physician or other covered provider for COVID-19, and related items and services, are no longer covered with no cost sharing (i.e. co-payment or coinsurance). COVID-19 diagnostic testing by a physician or other covered provider, and related items and services, will be covered subject to the Plan’s rules for covered medical expenses and any applicable cost-sharing, prior authorization, and medical management requirements.

**3. Over-the-Counter (OTC) COVID-19 Test Coverage**

OTC COVID-19 testing products and kits are no longer covered under the Plan.

**4. The Section titled “Immunizations for Participants and Dependents Over the Age of 19” on pages 34-35 of the SPD is deleted in its entirety and replaced with the following:**

**Immunizations for Participants and Dependents Over the Age of 19**

The Fund will provide 100% coverage of a BCBS Provider’s rate for immunizations to Participants and Dependents over the age of 19, to the extent such services are included on the government’s Recommended Immunizations of the Advisory Committee on

Immunization Practices that have been adopted by the Centers for Disease Control and Prevention; provided the services have been included on the list for at least one year prior to the Fund's Plan Year (which is the calendar year). Immunizations obtained from an Out-Of-Network provider will not be covered.

**5. The 5<sup>th</sup> paragraph under the Section titled "Prescription Drug Benefit" on pages 54 of the SPD is deleted in its entirety and replaced with the following:**

Participants are eligible to receive the following vaccinations with no Co-payment or other out-of-pocket costs at any participating pharmacy – seasonable influenza, pneumococcal, acute herpes zoster (shingles), hepatitis A&B, HPV, measles, mumps, rubella, varicella, meningococcal, tetanus, diphtheria, pertussis, and COVID-19. Coverage is limited as follows:

- To covered individuals ages 18 and older pursuant to a patient specific order signed by a New York State licensed physician or nurse practitioner ("Order"), except for the seasonable influenza and COVID-19 vaccinations, which apply to covered individuals ages two and older pursuant to an Order; or
- Without an Order for individuals age two and older for the seasonable influenza and COVID-19 vaccinations and 18 and older for all other covered vaccinations, only in accordance with the most current Advisory Committee for Immunization Practices (ACIP), which may include additional age restrictions.

**Grandfathered Status under the Patient Protection and Affordable Care Act**

This group health plan believes this plan 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 your 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.

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 Building Trades Welfare Benefit Fund at 516-833-9300. You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at 1-866-444-3272 or [www.dol.gov/ebsa/healthreform](http://www.dol.gov/ebsa/healthreform).