

**TEAMSTERS LOCAL 639 – EMPLOYERS PENSION FUND
401(H) RETIREE MEDICAL PLAN**

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SUMMARY OF MATERIAL MODIFICATIONS

Date: June 6, 2023

To: All Participants
Teamsters Local 639 – Employers Pension Trust Fund – 401(h) Retiree Medical Plan

From: The Board of Trustees of the Teamsters Local 639 -- Employers Pension Trust Fund – 401(h) Retiree Medical Plan

Subject: Notice of Clarifications Regarding the End of the National Emergency Due to the COVID-19 Pandemic

This Notice announces changes to the Plan's coverage. Please read this document carefully and keep it in a safe place.

End of the National Emergency

As you may have heard, President Biden recently ended the National Emergency caused by the COVID-19 pandemic effective April 10, 2023. The Public Health Emergency declared by the Department of Health and Human Services, however, remains in effect until May 11, 2023. For purposes of this Summary of Material Modifications, the Fund uses the term "National Emergency" to refer to both the National Emergency and the Public Health Emergency and uses May 11, 2023 as the end date for both declared emergencies. As a result, the Plan has taken the following action:

a. Telehealth visits

Effective May 12, 2023, telehealth benefits (video and audio) for all conditions will become a permanent part of the Plan's benefits for medically necessary telehealth visits for **in-networks providers only**. These charges will be processed in the same way as an in-person visit would be.

For Non-Medicare Retirees, the normal participant cost sharing (deductibles and co-insurance rates) for in-network providers will apply. The Plan previously covered telehealth visits for all conditions at in-network providers and covered only COVID-19 testing related conditions at out-of-network providers through the end of the National Emergency. Out-of-network telehealth claims for COVID-19 testing related conditions incurred after May 11, 2023 will **not** be accepted or processed by the Fund.

For Medicare Retirees, the Plan will provide coverage secondary to Medicare, as applicable.

b. COVID-19 Related Diagnostic Testing and Visits

Effective May 12, 2023, the Plan will cover medically necessary COVID-19 related diagnostic testing and visits **for Non-Medicare Retirees** at regular participant cost-sharing (deductibles and co-insurance rates). These had previously been covered at 100% through the end of the National Emergency.

For Medicare Retirees, the Plan will provide coverage secondary to Medicare as applicable.

c. COVID-19 Vaccine

Effective May 12, 2023, the Plan will cover 100% of the cost of the COVID-19 vaccine through the medical and pharmacy portions of the plan of benefits **for Non-Medicare Retirees**. This means that you can get your COVID-19 vaccine and boosters at a participating pharmacy or your provider's office at no charge to you. Previously, coverage of the COVID-19 vaccine was authorized only through the end of the National Emergency.

Medicare Retirees were able to obtain the COVID-19 vaccine at no cost. You should check <https://www.medicare.gov/medicare-coronavirus> for updates to this program. The Plan will provide coverage secondary to Medicare as applicable.

d. Over-the-counter COVID-19 Tests

For Non-Medicare Retirees, **effective May 12, 2023**, the Plan will no longer pay for at-home COVID-19 diagnostic tests. Previously, the Plan covered the costs of up to eight (8) at-home over-the-counter COVID-19 tests per month through the pharmacy benefit for you and eight for your spouse if they were enrolled in the Plan.

Please note that the Plan will continue to cover the cost of a medically necessary COVID-19 test prescribed by a health care provider under the medical benefit at regular cost sharing (deductibles and co-insurance).

Medicare Retirees were able to obtain up to eight over-the-counter tests each month at no cost through Medicare Part B through the end of the National Emergency. You should check <https://www.medicare.gov/medicare-coronavirus> for updates to this program.

e. Elimination of Extended Deadlines due to National Emergency

The declaration of the National Emergency provided that certain deadlines were suspended until the earlier of one year from the date of the event or until 60 days after the end of the National Emergency. These deadlines include, but are not limited to, dates for filing claims for benefits and appeals for benefits.

As stated above, although the National Emergency ended on April 10, 2023, the Plan is using May 11, 2023 as the end date. Thus, any deadlines will be extended for 60 days thereafter so that the time frame for counting down will begin on July 10, 2023. Thus, for example, if your claim for benefits was denied on March 1, 2023, the 180-day deadline for **filing an appeal to the** Board of Trustees begins to countdown on July 10, 2023 and will thus have to be made on or before January 6, 2024.

If you have any questions about this notice, your health benefits or eligibility, you can contact the Fund Office at (202) 636-8181 or toll-free at (800) 983-2699, Monday through Friday from 9:00 a.m. until 5:00 p.m. Additionally, walk-in, or in-person service has resumed so you may visit the Fund Office in-person.

The Trustees continue to reserve the right to amend, modify, or terminate the Plan and any or all benefits provided thereunder.