

**INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS  
LOCAL #38 HEALTH & WELFARE FUND BENEFIT PLAN**

**THIRD SUMMARY DESCRIPTION OF MATERIAL MODIFICATION TO  
THE MAY 1, 2022 SUMMARY PLAN DESCRIPTION**

**END OF EMERGENCY COVID-19 COVERAGE**

The Board of Trustees wishes to announce the following changes to the “I.B.E.W. Local No. 38 Health and Welfare Summary Plan Description/Plan Document For Active Inside, Residential, and Teledata Electricians” (hereinafter, the “SPD”) dated May 1, 2022. This document should be read in conjunction with the SPD, which was provided to you previously. Information contained in this Summary Description of Material Modification (hereinafter “Summary Description”) supersedes what is contained in the SPD. However, this Summary Description materially modifies only those provisions of the SPD to which it specifically refers. The remaining provisions of the SPD remain unaltered. The changes set forth in this Summary Description of Material Modifications are effective on the date indicated below.

**COVID-19 Testing and Treatment**

*Effective May 10, 2023*, the COVID-19 Public Health Emergency officially ends. As a result, the emergency coverage provisions adopted by the I.B.E.W. Local No. 38 Health and Welfare Fund will also end. While the Plan will continue to cover both the diagnosis and treatment of COVID-19, including any vaccines approved by the U.S. Food and Drug Administration, these claims will be treated like all other medical claims and will be subject to the Plan’s deductible, co-insurance, and copayment rules. Therefore, the Benefit Summary Table set forth in Article II, Section is amended by removing the description of “COVID-19 Testing and Qualified Preventive Care” and replacing it with the following:

BENEFITS	FOR COVERED SERVICES FROM A PPO NETWORK PROVIDER		FOR COVERED SERVICES FROM A NON-PPO PROVIDER
	Wellness Tier	Non-Wellness Tier	Both Tiers
COVID-19 Testing and Qualified Preventive Care	80% of Lesser Amount	70% of Lesser Amount	50% of Lesser Amount or Covered Charges

Moreover, the description of the Plan’s coverage for COVID-19 testing and treatment set forth in Article IV, Section F(31), is deleted in its entirety and replaced with the following new description of coverage for COVID-19 Testing and Qualified Preventive Care:

Effective May 11, 2023 (the, “Effective Date”), the Plan will cover charges related to COVID-19 diagnostic testing and “Qualifying Coronavirus Preventive Services” according to the same terms and conditions that apply to all other medical coverage claims. Therefore, as of the Effective Date, such expenses shall be subject to the Plan’s deductible, co-insurance, and copayments.

For the purposes of this Subsection (F)(31), the term “COVID-19 Test” or “COVID-19 Testing” shall mean an in vitro diagnostic test defined in Section 809.3 of title 21 of the Code of Federal Regulations for the detection of SARS-CoV-2 or the diagnosis of the virus that causes COVID-19, and the administration of such as test that (A) is approved, cleared, or authorized under sections 510(k), 513, 515, or 564 of the Federal Food, Drug, and Cosmetic Act; (B) is developed in, and authorized by, a State that has notified the Secretary of Health and Human Services of its intention to review tests intended to diagnose COVID-19; or (C) other test that the Secretary of Health and Human Services deems appropriate and is in accordance with effective Federal and State law.

Further, the term “Qualifying Coronavirus Preventive Services” shall mean an item, service, or immunization that is intended to prevent or mitigate coronavirus disease 2019, and that is (A) an evidence-based item or service that has in effect a rating of “A” or “B” in the current recommendations of the United States Preventive Services Task Force; or (B) an immunization that has in effect a recommendation from the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention with respect to the individual involved. Coverage for such Qualifying Coronavirus Preventive Services shall be effective fifteen (15) business days following the date on which the coronavirus preventive services recommendation is made.

Finally, and *effective May 10, 2023*, the Plan will no longer cover the cost of over-the-counter COVID tests. Beginning on January 15, 2022, the Plan was required under Federal law to cover the cost of up to eight (8) COVID tests per enrollee. The Plan is no longer required to cover the cost of these tests once the Public Health Emergency expires. However, over-the-counter COVID tests are eligible for reimbursement from your VEBA account.

## CONCLUSION

As stated in the Introduction, this Summary Description should be read in conjunction with the SPD. Information contained in this Summary Description supersedes what is contained in the SPD. However, this Summary Description changes only the provisions to which it specifically refers and any other provisions in the SPD have not been materially modified.

**Please keep this notice with your SPD booklet, and if you have any questions regarding this notice, please contact the Fund’s administrative office at 1-216-431-7738.**

**Spanish (Español): Para obtener asistencia en Español, llame al 1-216-431-7738.**

**Chinese: 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-216-431-7738.**

**Board of Trustees  
International Brotherhood of Electrical Workers Local No. 38  
Health and Welfare Fund**