

**1199SEIU NATIONAL BENEFIT FUND FOR HOME CARE EMPLOYEES
SUMMARY OF MATERIAL MODIFICATIONS**

This Summary of Material Modifications describes changes that affect your welfare benefit plan and updates the Summary Plan Description (“SPD”) and Summary of Benefits and Coverage (“SBC”) that was previously distributed to you. You should keep this summary with your current SPD and SBC until the booklet is updated to reflect the changes discussed herein.

The 1199SEIU National Benefit Fund for Home Care Employees (the “Benefit Fund”) SPD and/or Plan shall be amended to have new eligibility criteria and to create a new tier of benefits called Eligibility Class II, as follows:

1. Effective on or about November 1, 2023, the Benefit Fund shall have two packages of benefits called Eligibility Classes. Your Eligibility Class is based on the hours you work, your household income, and your household size.
2. Beginning with hours worked in April 2024, for eligibility determinations effective July 2024, the eligibility requirements of the Plan are amended to increase the hours requirement for the benefits described in Section II of the SPD (now called Eligibility Class I): You must have 130 or more “hours worked” per month for two consecutive calendar months, as well as earning the more than minimum income set forth in the plan, in order to be eligible to enroll in Eligibility Class I benefits.
3. If you earn the minimum income set forth in the plan or less, but you meet the Plan’s 100-hour rule and enroll in premium deduction, you are eligible for the benefits in Eligibility Class II.
4. As of April 1, 2024, the minimum income shall be 250% of the Federal Poverty Level.
5. If you do not meet the plan’s hours requirement, or if you are not enrolled in the Fund’s premium deduction (See Section I.B), you are eligible for social service benefits. This means you are eligible for the Wellness and Member Assistance Program, Benestream, Financial Wellness, and the Citizenship Program and Earned Income Tax Credit Assistance Program described in Section V.A, regardless of whether you meet the minimum hour rule and regardless of whether you pay the required weekly premium.
6. Effective on or about June 15, 2023, maternity benefits in Eligibility Class I include an allowance for a total of eight prenatal and postnatal doula visits and doula support during labor and delivery.
7. Effective on or about June 15, 2023, the following definitions were added or replaced previous definitions in Section IX:

Doula: Birth/Postpartum doulas with certification from an organization approved by the Plan Administrator.

Experimental/Investigational Treatments, Services, or other Procedures:

Experimental means any treatment, procedure, facility, equipment, drug, device or supply that does not meet one of the following criteria for use in treating a specific illness or condition:

- If a drug, biological product or device or other item that requires governmental approval: that item has completed the required clinical trials and has received final approval from the appropriate governmental regulatory bodies for commercial distribution;
- Where governmental approval is not required: the treatment or service is demonstrated to be obtainable outside the investigational or experimental setting and is not performed or provided in connection with a clinical trial or investigational protocol

Note: A treatment, service, facility, equipment, drug, device, or supply will be considered experimental/investigational if it is the subject of an ongoing clinical trial that meets the definition of a Phase I, II, or III clinical trial set forth in the U.S. Food and Drug Administration (“FDA”) regulations, regardless of whether the trial is subject to FDA oversight; and/or if it is the subject of a written research or investigational treatment protocol being used by the treating provider or by another provider who is studying the same service. (However, the Fund covers medically necessary routine patient care costs in approved clinical trials in the same way that it covers routine care for members who are not enrolled in clinical trials.)

Services or supplies that are Experimental/Investigational or Unproven are not Medically Necessary.

Unproven Treatments, Services, or Other Procedures

A treatment, procedure, facility, equipment, drug, device, or supply (“service/treatment”) that does not meet each of the following criteria for use in treating the condition being reviewed, regardless of any governmental approval:

There is reliable scientific evidence, including but not limited to published peer-reviewed evidence-based studies and literature meeting nationally-recognized requirements, demonstrating that the service/treatment:

- Improves net health outcomes by having a measurable, reproducible positive effect on health outcomes attainable under the usual conditions of professional practice; and
- Is safe and effective, or the beneficial effect on health outcomes outweighs any potential risk or harmful effects.
- The service has been endorsed by national medical bodies, societies or panels regarding the efficacy and rationale for use.

This summary only highlights the key changes made to the 1199SEIU National Benefit Fund for Home Care Employees. Summaries of material modifications together with the Summary Plan Description make up your official plan descriptions; please keep them together and refer to them as necessary. If you have any questions, please contact the Fund at (646) 473-9200.

The 1199SEIU National Benefit Fund for Home Care Employees believes Eligibility Class I is a “grandfathered health plan” under the Patient Protection and Affordable Care Act (the “Affordable Care Act”). A grandfathered health plan can preserve certain basic health coverage

that was already in effect when that law was enacted in 2010. Being a grandfathered health plan means that Eligibility Class I may not include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for an external review process for claims appeals. 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 can be directed to the Plan Administrator at (646) 473-9200. 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.

The plan sponsor of the 1199SEIU National Benefit Fund for Home Care Employees reserves the right to amend or terminate the Fund, or any part of it, at any time.