1199SEIU GREATER NEW YORK BENEFIT FUND SUMMARY OF MATERIAL MODIFICATIONS

This Summary of Material Modification describe changes that affect your welfare benefit plan and updates the Summary Plan Description ("SPD") that was previously distributed to you. You should keep this summary with your current SPD and SBC until the changes discussed herein expire.

Effective July 1, 2024, CVS Caremark has replaced Express Scripts as the Pharmacy Benefit Manager ("PBM") for the 1199SEIU Greater New York Benefit Fund ("Benefit Fund"). The Benefit Fund SPD shall be amended to reflect that CVS is the new PBM.

Effective January 1, 2025, the Benefit Fund SPD shall be further amended by removing the plan exclusion for infertility treatment; adding the following new Section II.M; and including the following new definitions to Section IX:

SECTION II. M - FERTILITY SERVICES

The Plan's fertility program is administered by Progyny, and limited to Progyny providers.

Coverage for you and your adult dependent begins after you have been enrolled as Wage Class I for at least 18 months. In order to be eligible for these benefits, the covered individual must have an infertility diagnosis (as defined in Section IX: Definitions). Wage Classes II and III are not eligible for this benefit.

Benefits are payable for the diagnosis and treatment of infertility, subject to a two "Smart Cycles" lifetime maximum per family. Smart Cycles are Progyny's benefit "currency" and are used to customize your lifetime benefit. (See "Smart Cycle" definition in Section IX). Each Smart Cycle is designed to cover treatment bundles, which include individual services, tests and medications. A detailed list of Smart Cycle unit equivalence is as follows:

- IVF fresh cycle ³/₄ Smart Cycle
- IVF freeze, all cycle ³/₄ Smart Cycle
- Frozen embryo transfer (FET) ¹/₄ Smart Cycle
- Frozen oocyte (egg) transfer (FOT) ½ Smart Cycle
- Pre-transfer embryology services ½ Smart Cycle
- Intrauterine insemination (IUI) ¹/₄ Smart Cycle
- Timed intercourse (TIC) ¹/₄ Smart Cycle
- Donor sperm- ¹/₄ Smart Cycle
- Donor oocyte (egg) cohort- 1 Smart Cycle
- Donor embryo- 1 ¹/₄ Smart Cycle

If you are undergoing or seeking to begin fertility treatment, you must contact Progyny (toll free) at (833) 233-0431. Representatives are available Monday through Friday from 9:00 am to 9:00 pm. Fertility benefits must be provided by a Progyny provider. No benefits will be provided outside of the Progyny network.

WHAT IS NOT COVERED

- Home ovulation prediction kits
- Services and supplies furnished by an out-of-network provider
- Services and supplies not listed as covered in the Progyny Member Guide
- Charges associated with a gestational carrier program for any non-covered individual acting as the carrier, including but not limited to fees for laboratory tests
- Treatments considered experimental by the American Society of Reproductive Medicine
- Women with natural menopause

SECTION IX – DEFINITIONS

Infertility

A disease, condition, or status characterized by any of the following:

- The inability to achieve a successful pregnancy after 12 months of regular, unprotected sexual intercourse or, for a female age 35 years of age or older, after six months of regular, unprotected sexual intercourse
- The need for medical intervention in order to achieve a successful pregnancy based on either partner's reproductive organs or known etiology suggestive of impaired reproductive ability
- The need for medical intervention to preserve fertility where planned medical treatment results in iatrogenic infertility

Smart Cycle

Progyny's benefit currency. Progyny bundles all services necessary for a treatment cycle into this unit of currency versus a dollar maximum. Everything needed for a comprehensive fertility treatment is contained within the Smart Cycle, including all necessary diagnostic testing and the latest technology (such as PGT-A, ICSI, etc.). Each treatment or service is valued as a portion of a Smart Cycle. Individuals can utilize their Smart Cycles for whichever treatments they and their physician determine to be necessary until they exhaust their Smart Cycle balance.

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This summary highlights the key changes made to the 1199SEIU Greater New York Benefit Fund New York Plan. This summary 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 would like to review the Plan Document or have any questions, please contact the Fund's Member Services Representatives at (646) 473-9200.

The 1199SEIU Greater New York Benefit Fund plan believes it 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 this plan 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 Sponsors reserve the right to amend or terminate the Fund, or any part of it, at any time. If you would like to review the Plan Document or have any questions, please visit <u>www.1199SEIUbenefits.org.</u>