

BAY AREA AUTOMOTIVE GROUP WELFARE FUND

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PLAN CHANGE NOTICE

Summary of Material Modifications

Plan Changes Related to the End of the COVID-19 Public Health Emergency and National Emergency, Nutritional Counseling, and Coverage of "Wilderness Therapy"

RETAIN WITH YOUR BENEFIT PACKAGE FOR FUTURE REFERENCE

June 2, 2023

To: **Plan Participants, Covered Dependents, and COBRA participants**

(If you are enrolled in Kaiser, Kaiser will provide information on how it is implementing some of the changes described in this Notice.)

END OF THE COVID-19 PUBLIC HEALTH EMERGENCY AND NATIONAL EMERGENCY ("COVID-19 EMERGENCY")

COVID-19 emergency declarations have been in place since early 2020. The declarations required health plans to cover COVID-19 tests and vaccines without cost sharing and extended many Plan deadlines. Some of these changes were intended to be temporary and only in effect during the COVID-19 Emergency. **The COVID-19 Emergency has ended.** Changes to your Plan as a result of the end of COVID-19 Emergency are described below:

COVID-19 Vaccines: One thing that will *not* change: If you go to an in-network provider, COVID-19 **vaccines and boosters provided by an in-network provider will be covered at no out-of-pocket cost as a preventive care service – that includes both the vaccination/booster itself and the cost of administration of the vaccination or booster.** In other words, both the cost of vaccinations or boosters and the fee for putting the shot in your arm are covered at no cost if you use an *in-network* provider. For this purpose, an "in-network provider" will include major pharmacy chains like CVS, Rite Aid, and Walgreens.

The following changes are effective immediately:

- **COVID-19 diagnostic tests (excluding OTC COVID-19 tests):** Your Plan's usual cost-sharing and medical management will apply to in-network COVID-19 diagnostic tests in the same way they apply to other lab services. This means the Plan will pay 60% of the out-of-network allowed amount after the deductible is met.
- **Over-The-Counter ("OTC") COVID-19 home testing kits:** Reimbursement for over-the-counter COVID-19 home test kits will end.

Plan Deadlines

With the end of the National Emergency, the suspension of the Plan's deadlines for COBRA election and payment, special enrollment, filing claims and appeals and requests for external review will come to an end. During the COVID-19 Emergency, plans were required to disregard the "Outbreak Period" for up to one year when calculating certain plan deadlines. The Outbreak Period will end on July 10, 2023, and after that date ordinary deadlines for COBRA election (election within 60 days after receiving a COBRA notice and within 45 days after election to make your initial COBRA payment), special enrollment (30, and in some cases, 60 days), claims (within one year) and appeals (within 180 days) or requests for external review (within 4 months) will apply as follows:

- For COBRA election and payment, special enrollment, claims and appeals or requests for external review arising during the National Emergency, the timelines listed above start to run as of July 10, 2023.
- For COBRA election and payment, special enrollment, claims and appeals or requests for external review arising after July 10, 2023, the normal Plan deadlines apply.

Examples:

Example 1 Benefit Claim – You are covered in the Anthem Blue Cross PPO Medical Plan and your BAAGWF claim for benefits was denied on September 30, 2022. Your deadline to file an appeal of that denial is 180 days after July 10, 2023 (the end of the Outbreak Period), which is January 6, 2024.

Example 2 Special Enrollment – You are covered in the Anthem Blue Cross PPO Medical Plan and your spouse gave birth to a newborn on August 2, 2022, but you never enrolled the baby for coverage as a BAAGWF dependent. You must complete your special enrollment of the newborn within 30 days after July 10, 2023, which is August 9, 2023.

Please note that there is a special 60 day enrollment period when someone loses Medicaid or CHIP coverage.

If you have questions about which deadlines apply to you, call the Plan Administrative Office.

COVERAGE OF NUTRITIONAL THERAPY

The Plan covers nutritional counseling for physical health conditions. For claims incurred on or after May 1, 2023, the Plan will now cover nutritional counseling for treatment of a medical, mental health, or substance abuse condition if medically necessary and provided by a physician, dietitian, or other licensed health care provider who is licensed or registered to provide such counseling or therapy and is acting within the scope of such registration or license.

COVERAGE OF “WILDERNESS THERAPY”

The Plan covers behavioral health residential where it is medically necessary to be treated in a highly structured 24-hour a day therapeutic environment when care cannot be safely or effectively treated in a less intensive setting. Effective immediately the Plan will cover the behavioral health treatment called “wilderness therapy” (also known as “outdoor behavioral healthcare”) which is a treatment option for behavioral disorders, substance abuse, and mental health issues in adolescents which involves spending time living outdoors and in therapy with peers.

To be covered, wilderness therapy, like any residential treatment facility, must be properly licensed by the state in which it is located AND accredited by either the Commission on Accreditation of Rehabilitation Facilities (CARF) or Joint Commission on Accreditation of Healthcare Organizations (JCAHO) in addition to maintaining a state license. Certain complimentary alternative treatment – for example, equine (horse) assisted therapy, will not be covered.

Si usted gustaría una copia en español, por favor de contactar la oficina de administración de Bay Area Automotive Group Welfare Fund.

Chinese (中文): 如果需要中文的帮助, 请拨打这个号码 1-800-267-3232.

IMPORTANCE OF THIS DOCUMENT

This Notice is intended to amend all BAAGWF documents, notices, and correspondence, including (but not limited to) the Summary Plan Description (SPD). This document is a Summary of Material Modifications (“SMM”) intended to notify you of important changes made to your plan of benefits. You should take the time to read this SMM carefully (and share it with your family) and keep it with your copy of the SPD. While every effort has been made to make this description as complete and as accurate as possible, this SMM, of course, cannot contain a full restatement of the terms and provisions of your BAAGWF Plan. The Board of Trustees reserves the right, in its sole and absolute discretion, to amend, modify, terminate, or interpret and decide all matters under the Fund’s Plans, or any benefits provided under the Fund’s Plans, in whole or in part, at any time and for any reason.