

TEAMSTERS LOCAL 863 HEALTH AND WELFARE FUND
209 Summit Road, Mountainside, NJ 07092
Telephone 908-654-6920

SUMMARY OF MATERIAL MODIFICATION

EFFECTIVE May 1, 2023

March 1, 2023

To: All Participants of the Teamsters Local 863 Health and Welfare Fund

The Trustees of the Teamsters Local 863 Health and Welfare Fund (the “Plan”) are committed to ensuring the financial good health of the Fund while providing the best possible benefits for you and your family while avoiding as best we can any increases in the costs to the members. Medical costs have been increasing every year, and our ability to maintain benefits has been challenging and cannot be accomplished without your involvement.

This summary of material modifications (“SMM”) describes certain changes to the Plan. You should read this SMM carefully and retain this document. This SMM, and additional information about the changes, will be posted on the Plan’s website: <http://www.local863welfarefund.com>

As described in more detail below, the Plan changes described in this SMM include the following:

- **Changes to your Prescription Drug Benefits.**
- The **injectable medication benefit** will be modified.
- **Alliance Community Healthcare Center** as Local 863’s **preferred medical provider**. This preferred medical provider is an **accredited Patient Centered Medical Home (PCMH)** which provides the utmost in patient care.
- **Fabian & Byrn** will be available to assist you concerning your medical and prescription benefits. Please contact them at (973) 228-4200 if you have any questions.

Fabian & Byrn, LLC

Fabian & Byrn is a third-party administrator that has been hired to assist the Fund Office with Horizon claims and provider questions and to assist with you with questions regarding prescriptions, including the use of coupons. (Please see the notice about the use of coupons on pages 2 and 3). They can be reached at (973) 228-4200.

PRESCRIPTION DRUG BENEFIT CHANGES

Benefit Change - Effective May 1, 2023:

The copayment structure for prescription drugs will be changed as of May 1, 2023 as follows: For the majority of prescriptions that are filled at your local network pharmacy, your copayments are as follows:

	Generic	Brand* <u>No Generic Available</u>	Brand* <u>Generic Available</u>
1-30 day	\$0.00	\$75.00	\$95.00
31-60 days	\$0.00	Limited to 30 Days	Limited to 30 Days
61-90 days	\$0.00	Limited to 30 Days	Limited to 30 Days

* Brand Name manufacturers coupons are available. In the vast majority of instances, coupons are available and will bring your brand drug copayment down to between \$0 and \$25. If your doctor or pharmacy does not have a drug coupon readily available, please contact Global Pharmaceutical at (800) 341-2234 or Fabian & Byrn at (973) 228-4200 for assistance in locating a coupon.

There are drugs that are so rare that they are not available at your local pharmacy, but are only prepared for you at a specialized pharmacy. For these **Specialty and Limited Distribution drugs**, your physician will coordinate directly with Global Pharmaceutical Benefits ("GPP") and, in most instances, your prescription will be delivered directly to your home. The following copayments will apply:

	Specialty Preferred**	Specialty Non-Preferred**	Limited Distribution Drugs
1-30 day	\$300.00***	\$350.00***	48% Copayment***
31-60 days	Limited to 30 Days	Limited to 30 Days	Limited to 30 Days
61-90 days	Limited to 30 Days	Limited to 30 Days	Limited to 30 Days

*****Important Note.** In the vast majority of instances, the \$300 and \$350 copayment for specialty drugs, and the 48% copayment for Limited Distribution Drugs (drugs that are available only from specific specialty pharmacies), are paid by the drug manufacturers. If your doctor or pharmacy does not have a drug coupon readily available, please contact Global Pharmaceutical at (800) 341-2234 or Fabian & Byrn (973) 228-4200 for assistance in locating a coupon.

**For information on Preferred and Non-Preferred drugs contact Global Pharmaceutical Benefits at (800) 341-2234.

***In some instances, the quantity may be exceeded based on pharmacy professional judgement.

Important Information on Prescription Drug “Coupons”

You may be aware that the cost of many brand prescription drugs that are advertised on TV, and other media outlets, are very expensive. The rising cost of prescription drugs is a concern for the Welfare Fund. We recognize that many of these prescription drugs, while expensive, provide advanced care for many chronic and serious health conditions. The Fund wants to continue to cover these prescription drugs for you for as long as it can. In order to do so, please **request a manufacturer coupon/discount or savings card from your doctor or pharmacist** for brand prescription drugs with or without a generic equivalent. If the pharmacy does not indicate that a coupon or discount is available for your prescription, you can also find drug manufacturer coupons online. Once you find a coupon, it is up to you to enroll and access the coupon as defined by the manufacturer’s terms and conditions.

GPP is available to assist you with any questions you might have or if you need assistance finding coupons. Call GPP at 1-800-341-2234 for assistance. Fabian & Byrn are also available to assist you. You can reach them at (973) 228-4200.

INJECTABLE MEDICATIONS

All office administered injectable medications will continue to be processed and administered by your medical provider. Injectables (*other than intravenous/infusion drugs received in a physician’s office*) will generally be covered through the prescription plan, administered by Global Pharmaceutical Benefits, LLC (Global), and no longer available through Horizon BlueCross Blue Shield. If there are any questions, contact Global Pharmaceutical Benefits at (800) 341-2234, or Fabian & Byrn at (973) 228-4200.

EXCLUSION OF GENE THERAPY

The Plan does not cover any charges related to gene therapy, regardless of whether the therapy has received approval from the U.S. Food and Drug Administration (FDA) or is considered experimental or investigational.

Alliance Community Healthcare Center

To better serve the members, the Fund has selected Alliance Community Healthcare Center (“Alliance”) as Local 863’s preferred medical provider. Alliance is an accredited Patient Centered Medical Home (PCMH), providing the utmost in patient care for primary care and many specialized fields. **There is no copayment at Alliance Community Healthcare Center** for medical services such as doctors, telemedicine visits or prescriptions at any tier. There will not be any copay for lab work performed through Alliance. Also, you will be able to get a 90 day supply of generic maintenance medications prescribed at Alliance Community Healthcare Center. Alliance offers full service virtual healthcare office visits after the initial in person visit. This means that you can access many services through your smartphone or computer after your initial visit and would not have to travel to the health center. Because Alliance is “in-network” for the Fund, there will not only be no co-pays, but no balance owed to the provider. Call 201-451-6300 if you wish to make an appointment at Alliance.

Alliance is located at 115 Christopher Columbus Drive, Jersey City, NJ and has an outreach program at 50 Parsippany Road, Parsippany, NJ (in the IBEW Local 102 building).

Drug Copayments are **ZERO** if you or your dependents are a patient of an authorized Patient Centered Medical Home (PCMH), such as Alliance Community Healthcare Center). The following copayments apply for your prescriptions if you are a patient of an authorized PCMH:

	Generic	Brand	Specialty	<i>Limited Distribution Drugs</i>
3 Month Supply	\$0.00	\$0.00	\$0.00	\$0.00

You should keep this SMM. If you have any questions, contact the Fund Office at (908) 654-6920

This Notice, which serves as a SMM, contains only highlights of recent changes to the Plan. Full details are contained in the documents that establish the Plan provisions. If there is a discrepancy between the wording here and the documents that establish the Plan, the document language will govern. The Trustees reserve the right to amend, modify, or terminate the Plan at any time.

March 1, 2023

Please note the following additional modifications to the SMM:

Brand where no Generic is available is \$75 for up to a 30 day supply

Brand where Generic is available is \$95 up to a 30 day supply.

Limited Distribution Drugs - Up to a 48% copay

Subcutaneous injectables shall generally be paid through Global Pharmaceutical Benefits and IV/Infusions shall generally be paid through BlueCross Blue Shield

Alliance Community Health Center- Specialty and Brand Name drugs are available up to a 3 month supply-This quantity may actually be greater or less dependent on the Manufacturer's original package size which in most cases shall be dispensed.

Alliance Community Health Center - correct telephone number for member to call: (973) 508-0685

Alliance Community Health Center, at present, Limited Distribution Drugs are not available.