



NATIONAL HEALTH AND WELFARE FUND

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January 4, 2023

Summary of Material Modifications

To: All Participants in the UFCW National Health and Welfare Fund Plan of Benefits for Huhtamaki /UFCW Local 5401.

From: Glenn Di Biasi, Fund Administrator

Re: Notice of Medical and Prescription Drug Benefit Plan Changes

Date: Effective: January 1, 2023

This document is a Summary of Material Modifications (“Summary”) intended to notify you of important provisions in the UFCW National Health and Welfare Fund Plan of Benefits (“the Plan”) for Connected Santa Ana/UFCW Local 324, Employer Number 5691. You should take the time to read this Summary carefully and keep it with the copy of the Summary Plan Description that was previously provided to you. If you need another copy of the Summary Plan Description or if you have any questions regarding the Plan, please contact the Fund Office during normal business hours at 66 Grand Avenue, Englewood, NJ 07631, 1-888-773-8329 or visit our website at www.ufcwnationalfund.org.

- Increase Out-of-Network deductible to \$500 (Single)/\$1,000 (Family) from \$250 (Single)/\$500 (Family)
- Increase Out-of-Network coinsurance to 40% from 30%
- Increase Emergency Room copay to a \$300 copay + 20% coinsurance from a \$50 copay + 20% coinsurance
- Increase Generic Drug coinsurance to 15% from 10%
- Increase Non-Preferred Brand Drugs coinsurance to 35% from 20%.
- Preferred Brand Drugs remain the same at 20% coinsurance.

This Summary of Material Modifications is intended to provide you with an easy-to-understand description of certain changes to the Summary Plan Description. The Summary Plan Description previously provided to you also serves as the Plan Document. While every effort has been made to make this description as complete and as accurate as possible, this Summary of Material Modifications, of course, cannot contain a full restatement of the terms and provisions of the Plan. The Board of Trustees or its duly authorized designee, reserves the right, in its sole and absolute discretion, to amend, modify or terminate the Plan, or any benefits provided under the Plan, in whole or in part, at any time and for any reason, in accordance with the applicable amendment procedures established under the Plan and the Agreement and Declaration of Trust establishing the Plan (the "Trust Agreement"). No individual other than the Board of Trustees (or its duly authorized designee) has any authority to interpret the plan documents, make any promises to you about benefits under the Plan, or to change any provision of the Plan. Only the Board of Trustees (or its duly authorized designee) has the exclusive right and power, in its sole and absolute discretion, to interpret the terms of the Plan and decide all matters arising under the Plan.