



PENSION HOSPITALIZATION AND BENEFIT PLAN JOINT INDUSTRY BOARD OF THE ELECTRICAL INDUSTRY

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Plan Design Changes and Clarifications

Dear Participant:

We write to advise you of benefit changes and clarify some existing benefits for Medicare-eligible retirees in the Pension, Hospitalization and Benefit Plan of the Electrical Industry-Welfare Plan (the "Plan").¹ The benefits provided by the Plan to Medicare-eligible retirees will now be considered non-grandfathered under the Affordable Care Act ("ACA"). As such, effective July 1, 2022, some benefits will be expanded as described below.

CLARIFICATION OF COVERAGE FOR CERTAIN PREVENTIVE CARE:

Non-grandfathered plans cover certain preventive medical items, services or prescription drugs, as defined by the ACA, without any co-payments, co-insurance or other cost-sharing. However, as a reminder, the Plan pays medical/hospital benefits secondary to Medicare for Medicare-eligible retirees. The Plan will cover preventive prescription drugs, as defined by the ACA, without any co-payments, co-insurance or other cost-sharing. These preventive benefits are subject to limitations based on age, frequency and other criteria.

For a complete list of preventive items or services that are currently covered without any co-payment or co-insurance, as well as any limitations that apply, visit the HealthCare.gov website at <https://www.healthcare.gov/coverage/preventive-care-benefits/>. You may also find a copy of this notice with a link to the HealthCare.gov website on the Joint Industry Board website at <https://www.jibei.org/health/phbp-medical-and-rx-plan/>. Participants may also call the Hospitalization Department at 1-718-591-2000, extension 1350, to request a copy of the most recent list of preventive items and services covered by the Plan without cost-sharing. Please be aware that the list of preventive items and services may change each plan year. Any applicable co-payment or co-insurance will continue to apply for items and services that do not appear on the list or where certain limitations apply.

ANNUAL OUT-OF-POCKET LIMITS:

Each covered individual's annual out-of-pocket limit for the current plan year will continue to be \$8,550 and a family's out-of-pocket limit will be \$17,100. The out-of-pocket limit applies to essential health benefits under the ACA, including amounts attributable to applicable co-insurance, co-payments, deductibles and similar costs. The out-of-pocket limit does not apply to premiums or out-of-network benefits. The annual out-of-pocket limit may change each plan year consistent with federal guidelines.

The out-of-pocket limits apply to each individual within a family as well as to the family as a whole. For example, in a family of three, if one family member incurs \$10,000 in eligible out-of-pocket costs in the current plan year, those costs will be capped at \$8,550. The Plan will pay 100% of the in-network charges for any additional essential health benefits that person receives for the rest of the plan year. If the other two family members each

¹ Per the Plan's terms, the Plan only provides benefits to Medicare-eligible retirees if they also enroll in Medicare. Please refer to the Summary Plan Description for more information.

incur \$4,275 in eligible expenses, the family will have reached the \$17,100 family maximum. From that point, the Plan will pay 100% of the in-network charges for any additional essential health benefits that anyone in the family receives for the rest of the Plan year.

APPROVED CLINICAL TRIALS:

The Plan will cover routine services for Medicare-eligible retirees in clinical trials that are approved by the Centers for Medicare and Medicaid Services.

If you have any questions concerning preventive prescription drugs, please call Express Scripts at 1-800-818-0883.

If you have any questions concerning preventive medical items or services, please call MagnaCare at 1-877-624-6210.

Sincerely,

Trustees of the Pension, Hospitalization
and Benefit Plan of the Electrical
Industry