

BAC Local Union 15 Fringe Benefit Funds

PO Box 909500 • Kansas City, MO 64190-9500

Phone (816) 777-2668 • Toll Free (833) 479-9428 • Fax (816) 756-3659

BAC LOCAL UNION 15 WELFARE FUND SUMMARY OF MATERIAL MODIFICATION

To: All Eligible Participants
Re: COVID-19 Vaccination Coverage
Date: March 2021

Effective March 10, 2021, the Plan will temporarily increase the coverage for COVID-19 vaccinations to cover 100% of the cost (meaning no Participant cost sharing) of the vaccine administrative fees, for vaccines received from both in and out-of-network pharmacies and providers.

NOTICE: THIS IS A “GRANDFATHERED” GROUP HEALTH PLAN

This group health Plan believes this coverage is a “grandfathered health plan” under the Patient Protection and Affordable Care Act (the Affordable Care Act). As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan means that your plan may not include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for the provision of preventative health services without any cost sharing. 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 and what might cause a plan to change from grandfathered health plan status can be directed to the Fund Office.

You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at 1-866-444-3272 or www.dol.gov/ebsa/healthreform. The EBSA website has a table summarizing which protections do and do not apply to grandfathered health plans.

If you have any questions or concerns about this notice, contact the Fund Office at BAC Local Union 15 Welfare Fund, PO Box 909500, Kansas City, MO 64190. Telephone: (816) 777-2668 or toll free: (833) 479-9428.

Sincerely,

Board of Trustees

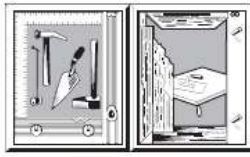
**BAC LOCAL UNION 15 WELFARE FUND
SUMMARY OF MATERIAL MODIFICATION**

To: All Active Participants and Pre-Medicare Retirees
Re: COVID-19 Vaccination Coverage
Date: January, 2021

Effective December 18, 2020 the Plan will cover COVID-19 vaccinations that have emergency use authorization (EUA) or are approved by the Food and Drug Association (FDA) and recommended by the Centers For Disease Control at no cost to the Covered Person if the vaccination is received at a pharmacy in the Sav-Rx network or through an In-Network provider within the Blue KC provider Network. Vaccinations received by Out-Of-Network providers, whether at a pharmacy or in a medical provider setting, will be paid at the Out-of-Network benefit level. This is applicable for all participants with Active coverage and Retirees without Medicare.

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Dear Plan Participant:

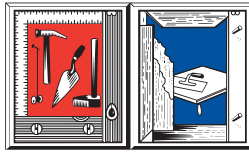
In addition to the Blue KC Virtual Care telehealth services available at \$0 copayment through www.BlueKCVirtualCare.com, the Plan will provide expanded telehealth coverage for \$0 copayment at all BCBS network providers who provide virtual care (telehealth) consultations through **March 31, 2021**. Non-network virtual care services will be covered subject to the Plan's standard deductible and coinsurance cost sharing for non-network services.

This was previously effective April 1, 2020 through September 31, 2020.

If you have any questions or concerns about this notice, contact the Fund Office at BAC Local Union 15 Welfare Fund, PO Box 909500, Kansas City, MO 64190-9500; Telephone: (816) 777-2668.

Sincerely,

Board of Trustees



BAC Local Union 15 Welfare Fund

3100 Broadway, Suite 805 • Kansas City, MO 64111

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BAC LOCAL UNION 15 WELFARE FUND SUMMARY OF MATERIAL MODIFICATIONS

EIN: 23-7386028

Plan Number: 501

To: All Eligible Participants
Re: Families First Coronavirus Response Act
Date: March 23, 2020

Dear Plan Participant:

With the passage of the Families First Coronavirus Response Act on March 18, 2020, the BAC Local Union 15 Welfare Fund (the "Plan") has made the following changes effective March 19, 2020:

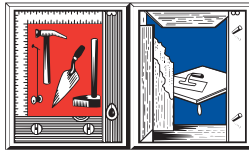
- The Plan will continue to cover all Coronavirus-2019 (COVID-19) diagnostic testing at 100% (no member cost share). This coverage will extend to all related services and facility fees, and also waives any prior authorization requirements otherwise applicable under the Plan.
- In addition to the Blue KC Virtual Care telehealth services available at \$0 copayment through www.BlueKCVirtualCare.com, the Plan will provide expanded telehealth coverage for \$0 copayment at all BCBS network providers who provide virtual care (telehealth) consultations through June 30, 2020. Non-network virtual care services will be covered subject to the Plan's standard deductible and coinsurance cost sharing for non-network services.

If you have any questions or concerns about this notice, contact the Fund Office at BAC Local Union 15 Welfare Fund, 3100 Broadway Ste. 805 Kansas City, MO 64111; Telephone: (816) 777-2668.

Sincerely,

Board of Trustees

This Summary of Material Modification highlights certain features of the BAC Local Union 15 Welfare Fund. You can find full details in the documents (Summary Plan Description, Plan Document, etc.) that establish your Plan provisions. If there is a discrepancy between the wording here and the documents that establish your Plan, the document language will govern. The Trustees reserve the right to amend, modify or terminate your Plan at any time.



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BAC LOCAL UNION 15 WELFARE FUND SUMMARY OF MATERIAL MODIFICATIONS

EIN: 23-7386028

Plan Number: 501

To: All Eligible Participants
Re: Exclusion of gene therapy treatments
Date: August, 2019

Change to plan regarding gene therapy

The purpose of this Summary of Material Modification (SMM) is to inform you of an important change in the benefits offered by the BAC Local Union 15 Welfare Fund (the “Fund” or “Plan”). We are writing to let you know of a change, effective July 22, 2019, to the Benefit Exclusions and Limitations. This change will help us continue to provide you and your family with the comprehensive coverage you need that is affordable for you and the Plan. Please read this SMM in its entirety.

Gene therapy is treatment that involves replacing a gene that causes a medical problem with one that does not, adding genes to help the body fight or treat disease, or inactivating genes that cause medical problems. Though the Plan currently contains an exclusion regarding genetic therapies, the exclusion clarifies that newly approved gene therapy will not be covered under the Plan. Some examples of gene therapy include Chimeric Antigen Receptor T-Cell (CAR-T) Therapies such as Kymriah and Yescarta, as well as other therapies, such as, and Luxturna and Zolgensma – but this is not a comprehensive list and new applications for gene therapies are submitted and approved by the FDA every year

If you have any questions or concerns about this notice, contact the Fund Office at BAC Local Union 15 Welfare Fund, 3100 Broadway Ste. 805 Kansas City, MO 64111; Telephone: (816) 777-2668.

Sincerely,

Board of Trustees

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**BAC LOCAL UNION 15
WELFARE AND PENSION FUNDS**

Managed for the Trustees by:
TIC INTERNATIONAL CORPORATION
6405 Metcalf, Suite 200 • Overland Park, Kansas 66202
(913) 236-5490 • Fax: (913) 236-5499

February 9, 2018

TO: ALL ELIGIBLE PARTICIPANTS OF THE BAC LOCAL UNION 15 WELFARE FUND

RE: NEW BARIATRIC SURGERY AMENDMENT

Effective September 1, 2017, the Plan has added a Bariatric Surgery Benefit. The Benefit must be medically necessary and requires pre-authorization and is available only to an Eligible Employee and Spouse through an In-Network, Blue Distinction Center. The Benefit has a \$20,000 Lifetime Maximum.

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Questions regarding which protections apply and which protections do not apply to a grandfathered health plan and what might cause a plan to change from grandfathered health plan status can be directed to the Fund Office.

You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at 1-866-444-3272 or www.dol.gov/ebsa/healthreform. The EBSA website has a table summarizing which protections do and do not apply to grandfathered health plans.

If you have any questions or concerns about this notice, contact the Fund Office at BAC Local Union 15 Welfare Fund, 6405 Metcalf Suite 200, Overland Park, KS 66202; Telephone: (913) 236-5490.

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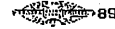
Board of Trustees



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December 29, 2016

TO: ALL ELIGIBLE PARTICIPANTS OF THE BAC LOCAL UNION 15 WELFARE FUND

RE: NEW URGENT CARE TELEHEALTH BENEFIT

In order to comply with the Affordable Care Act (ACA), effective January 1, 2017, the Plan will no longer exclude services or supplies related to sex transformation.

Effective March 1, 2017, the Plan has added a benefit for the Telehealth Amwell Program. This program will allow you access to urgent health care 24/7 through a program run by Blue Cross of Kansas City. This program allows you to visit with a doctor either online using a computer (with a webcam) or through your smartphone. The doctors are available 24 hours a day / 7 days a week and will be able to answer questions, make diagnosis and in some cases prescribe basic medications, when needed. You do not need to meet your deductible before receiving the benefit. There is \$10 copay you must pay to use the Telehealth Amwell Program. After your \$10 copay the Fund pays the rest. Prior to using the program you must complete the following easy steps:

- Download the Amwell app onto your smartphone or tablet.
- Open the app and enroll.
- To visit, use the app to select medical or children's medical (there may be other options, but medical and children's medical are the only services covered by the plan).
- Complete information regarding illness/symptoms and insurance (including your subscriber ID).

Enclosed is more detailed information about the program and how to complete the above steps.

If you have any questions or concerns about this notice, contact the Fund Office at BAC Local Union 15 Welfare Fund, 6405 Metcalf Suite 200, Overland Park, KS 66202; Telephone: (913) 236-5490.

Sincerely,

Board of Trustees

(OVER)

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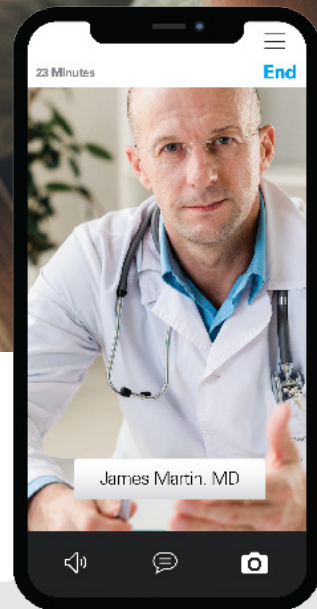
You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at 1-866-444-3272 or www.dol.gov/ebsa/healthreform. The EBSA website has a table summarizing which protections do and do not apply to grandfathered health plans.

THE NEW BLUE KC VIRTUAL CARE APP IS ALWAYS ON.

SO YOU HAVE AFFORDABLE ACCESS TO 24/7 HEALTHCARE.

Schedule a video visit with a board-certified doctor or behavioral health therapist right from your smartphone, tablet or computer. Blue KC Virtual Care is convenient for everyday medical and behavioral health care.

ALWAYS PRIVATE AND SECURE.



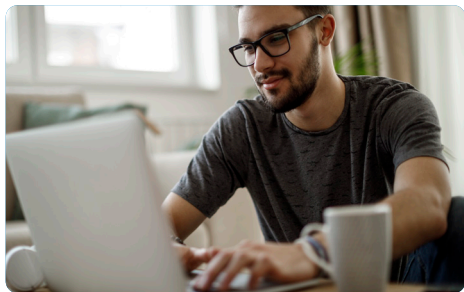


OUR APP SUPPORTS **URGENT OR SICK CARE NEEDS.**

Treatment for common conditions like:
sinus pain, mild asthma, mild allergic
reactions, minor headaches, cold sores, sprains,
pink eye, nausea, vomiting, diarrhea, bumps,
cuts, scrapes, coughs, sore throat, eye irritation,
minor fever, colds, rashes, minor burns.

- No appointment necessary and
24/7 availability
- Affordable visits based on your plan's benefits*
- Always private and secure

*Spira Care Members pay \$0 for urgent/sick virtual care visits.
Does not apply for Spira HSA members.



OUR APP SUPPORTS **BEHAVIORAL HEALTHCARE NEEDS.**

Treatment for conditions such as: anxiety,
bereavement/grief, bipolar disorder,
depression, OCD, PTSD/trauma, panic attacks.

- Psychologists and counselors are available for
scheduled sessions
- Affordable visits based on your plan's benefits,
and vary by provider type
- Therapy services are provided by a network
of doctoral level psychologists and master's
degree level therapists trained and licensed in
virtual care prevention and therapy techniques

BLUE KC VIRTUAL CARE

Download the Blue KC
Virtual Care app or visit

BLUEKCVirtualcare.com

Spira Care and Spira Care (HSA Eligible)
members only should use service key
SPIRA when registering.



Do you use Amwell? You can
deactivate your account simply by
downloading the Blue KC Virtual Care app.



Kansas City

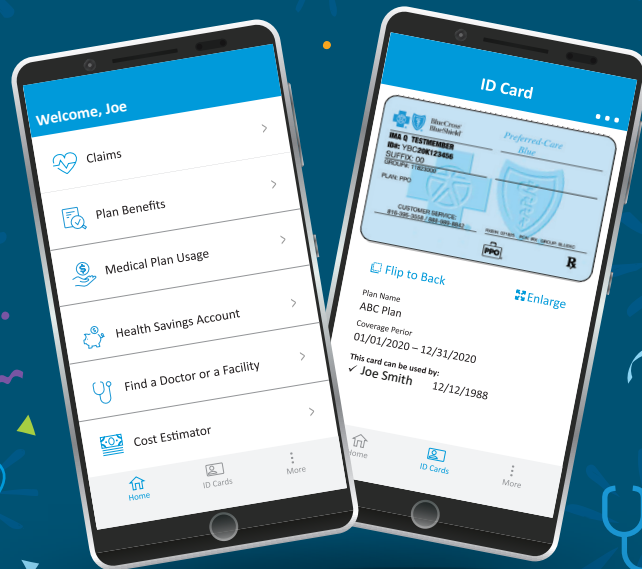
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independent licensee of the Blue Cross Blue Shield Association.

Thank you for trusting Blue Cross and Blue Shield of Kansas City (Blue KC). We are committed to providing you with excellent service to help you make the most of your healthcare plan.

DOWNLOAD THE **MyBlueKC** MOBILE APP



Access your health insurance information anytime, wherever you go.



ACCESS YOUR ACCOUNT.

Use your Blue KC member ID card to register and connect:



Log into
MyBlueKC.com



Download the
MyBlueKC mobile app

Digital ID Cards

Easily view, text or email a digital version of your member ID card.

Policy Information

View your member plan booklet*, summary of benefits and coverage, recent claims, and plan usage.

**If you don't have access to the Internet, you can request a copy of your member plan booklet by contacting our Customer Service team at the number listed on your ID card.*

Find a Doctor

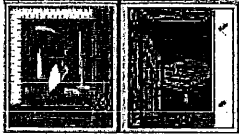
Search for a doctor, hospital or other healthcare provider in your network using many features like search filters, cost estimates, comparison options, provider reviews and quality information.

Connect with Us

- **ONLINE** – [MyBlueKC.com](https://www.MyBlueKC.com) or download the **MyBlueKC** mobile app
- **BY PHONE** – Contact Customer Service at the number on your ID card.



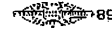
Kansas City



**BAC LOCAL UNION 15
WELFARE AND PENSION FUNDS**

Managed for the Trustees by:
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May 18, 2016

TO: ALL ELIGIBLE PARTICIPANTS OF THE BAC LOCAL UNION 15 WELFARE FUND
RE: PREVENTIVE/ROUTINE CARE BENEFIT OUT-OF-NETWORK CO-PAYMENT AND CHILD COVERAGE WAIVER ADDITION

The Board of Trustees wish to clarify that effective January 1, 2015, out-of-network charges previously covered under the Routine Care Benefit and prior to January 1, 2015, will continue to be covered at 100 percent up to \$315. Thereafter a 30-percent co-insurance will apply to covered charges over \$315.

Effective December 1, 2015, the Board of Trustees has agreed to revise the plan's rules to allow an Eligible Dependent child of a Retiree to waive coverage from the Plan. In order to waive coverage, the Retiree must request the waiver of coverage from the Fund Office in writing and submit documentation of enrollment in another employer-provided health care program. The child would be allowed to re-enroll in the Plan upon the termination of the employer-provided health care program. The child's coverage would again be effective the first day of the month following the date the Fund Office receives completed re-enrollment paperwork for the child.

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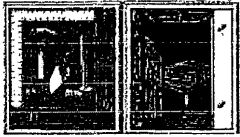
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Sincerely,

Board of Trustees



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WELFARE AND PENSION FUNDS**

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April 13, 2015

TO: ALL ELIGIBLE PARTICIPANTS OF THE BAC LOCAL UNION 15 WELFARE FUND

RE: PREVENTIVE SERVICES BENEFIT IMPROVEMENT

The Plan document provides that the Board of Trustees have the right to amend the Plan. The Trustees have made the following changes effective January 1, 2015.

Change in Preventative Care Benefits

The Trustees wish to provide you a broader range of preventive care benefits to help you and your families maintain a better state of health. As such, the Plan is amended effective January 1, 2015 to enhance the Preventive Care benefits covered under the Plan as shown on the attached list. At that date, the Plan will terminate the Routine Care benefit currently covered through Concentra. In addition, the preventive services currently covered under the Plan will be superseded by the new Preventive Care Benefits described in the attached list.

The listing may change from time to time based upon the recommendation of the United States Preventive Services Task Force, the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention and the Health Resources and Services Administration.

The Plan will pay these Preventive Care Benefits at 100% when obtained from an In-Network provider. Preventive Care Benefits obtained through an Out-of-Network provider are paid the same as any other service obtained at an Out-of-Network provider.

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Sincerely,

Board of Trustees

BAC LOCAL UNION 15 WELFARE FUND

The following list of Preventive Care Services covered under the Plan. The listing may change from time to time based upon the recommendation of the United States Preventive Services Force, the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention and the Health and Resources and Services Administration.

Covered Preventive Care Benefits for Adults

- **Abdominal Aortic Aneurysm** one-time screening for men of specified ages who have ever smoked
- **Alcohol Misuse** screening and counseling
- **Aspirin** use for men ages 45 to 79 and women ages 55 to 79 when the benefit to a reduction in myocardial infarction or stroke outweighs the potential harm
- **Blood Pressure** screening for all adults
- **Cholesterol** screening for adults of certain ages or at higher risk
- **Colorectal Cancer** screening for adults over 50
- **Depression** screening for adults
- **Type 2 Diabetes** screening for adults with high blood pressure
- **Diet** counseling for adults at higher risk for chronic disease
- **Fall prevention** physical therapy and vitamin D supplements in adults age 65 or older who are at increased risk for falls
- **Hepatitis B** screening in persons at high risk
- **Hepatitis C** screening in persons at high risk and persons born between 1945 and 1965
- **HIV** screening for all adults at higher risk
- **Immunization** vaccines for adults – doses, recommended ages, and recommended populations vary:
 - Hepatitis A
 - Hepatitis B
 - Herpes Zoster
 - Haemophilus influenza type b (Hib) vaccination
 - Human Papillomavirus
 - Influenza
 - Measles, Mumps, Rubella
 - Meningococcal
 - Pneumococcal
 - Tetanus, Diphtheria, Pertussis
 - Varicella
- **Intimate Partner Violence** Screening for women of childbearing age
- **Lung Cancer** Screening annually by low dose computed tomography in adults age 55 to 80 years who have a 30 pack-year smoking history and currently smoke or have quit in the last 15 years.
- **Obesity** screening and counseling for all adults
- **Sexually Transmitted Infection (STI)** prevention counseling for adults at higher risk

- **Tobacco Use** screening for all adults and cessation interventions for tobacco users
- **Syphilis** screening for all adults at higher risk

Covered Preventive Care Benefits for Women, Including Pregnant Women

- **Anemia** screening on a routine basis for pregnant women
- **Bacteriuria** urinary tract or other infection screening for pregnant women
- **BRCA** counseling about genetic testing for women at higher risk
- **Breast Cancer Mammography** screenings every 1 to 2 years for women over 40
- **Breast Cancer Chemoprevention** counseling for women at high risk
- **Breast Feeding** interventions to support and promote breast feeding; coverage for breast pumps at the rate of one pump per year
- **Cervical Cancer** screening for sexually active women
- **Chlamydia Infection** screening for younger women and other women at higher risk
- **Contraceptives and Related Counseling** including prescription contraceptives (generic when available); no coverage for abortifacient drugs
- **Folic Acid** supplements for women who may become pregnant
- **Gestational Diabetes mellitus screening** for asymptomatic pregnant women after 24 weeks of gestation
- **Gonorrhea** screening for all women at higher risk
- **Hepatitis B** screening for pregnant women at their first prenatal visit
- **Osteoporosis** screening for women over age 60 depending on risk factors
- **Rh Incompatibility** screening for all pregnant women and follow-up testing for women at higher risk
- **Tobacco Use** screening and interventions for all women, and expanded counseling for pregnant tobacco users
- **Syphilis** screening for all pregnant women or other women at increased risk

Covered Preventive Care Benefits for Children

- **Alcohol and Drug Use** assessments for adolescents
- **Autism** screening for children at 18 and 24 months
- **Behavioral** assessments for children of all ages
- **Blood Pressure** screening for children
- **Cervical Dysplasia** screening for sexually active females
- **Congenital Hypothyroidism** screening for newborns
- **Depression** screening for adolescents at higher risk
- **Developmental** screening for children under age 3, and surveillance throughout childhood
- **Dyslipidemia** screening for children at higher risk of lipid disorders
- **Fluoride Chemoprevention** supplements for children without fluoride in their water source up to age 5
- **Gonorrhea** preventive medication for the eyes of all newborns
- **Hearing** screening for all newborns
- **Height, Weight and Body Mass Index** measurements for children
- **Hematocrit or Hemoglobin** screening for children

- **Hemoglobinopathies** or sickle cell screening for newborns
- **HIV** screening for adolescents at higher risk
- **Immunization** vaccines for children from birth to age 18 – doses, recommended ages, and recommended populations vary:
 - Diphtheria, Tetanus, Pertussis
 - Haemophilus influenza type b
 - Hepatitis A
 - Hepatitis B
 - Human Papillomavirus
 - Inactivated Poliovirus
 - Influenza
 - Measles, Mumps, Rubella
 - Meningococcal
 - Pneumococcal
 - Rotavirus
 - Varicella
- **Iron** supplements for children ages 6 to 12 months at risk for anemia
- **Lead** screening for children at risk of exposure
- **Medical History** for all children throughout development
- **Obesity** screening and counseling
- **Oral Health** risk assessment for young children
- **Phenylketonuria (PKU)** screening for this genetic disorder in newborns
- **Sexually Transmitted Infection (STI)** prevention counseling and screening for adolescents at higher risk
- **Skin Cancer** behavioral counseling for young adults age 10 to 24 who have fair skin about minimizing their exposure to UV radiation.
- **Tobacco use** interventions to prevent initiation of tobacco use in school-aged children and adolescents.
- **Tuberculin** testing for children at higher risk of tuberculosis
- **Vision** screening for all children