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## **MEMORANDUM**

To: Eligible Participants and Retirees of the Joint Welfare Fund of Local 164, IBEW

Date: February 9, 2021

From: Board of Trustees, IBEW Local Union No. 164 Welfare Fund

**Re:** Summary of Material Modification to the Joint Welfare Fund of Local 164, IBEW

EIN: 22-1537766

Modification to the Growth Hormone Benefit, Modification to the Death Benefit

Retroactive to January 1<sup>st</sup>, 2021, the Board of Trustees has modified the Growth Hormone Benefit **only** for patients diagnosed with Prader-Willi Syndrome. If a patient is diagnosed with Prader-Willi Syndrome the annual dollar maximum is increased to \$25,000 per calendar year and the three year maximum for treatment is waived. For any diagnosis other that Prader-Willi Syndrome the benefit remains the same as listed on page 26 of the Summary Plan Description:

## Growth Hormone Therapy (page 26 of the Summary Plan Description)

The Plan covers growth hormone therapy to a maximum annual allowance of \$10,000. Reimbursement will only be made for claims pre-authorized through Fabian & Byrn LLC. Medical policy will monitor the treatment and confirm continued medical necessity for therapy every year. The Plan will only reimburse growth hormone therapy for a maximum of three years.

Retroactive to January 1<sup>st</sup>, 2020, the Board of Trustees has modified the Death Benefits on page 40 of the Summary Plan Description.

For Active Participants: A benefit of \$50,000 will be paid to any beneficiary on behalf of an active participant who dies due to any cause while this plan is in effect and eligibility is maintained.

For Pensioners: A benefit of \$5,000 will be paid to any beneficiary on behalf of a retired participant who dies due to any cause while this plan is in effect.

As always, the Board urges members to use benefits wisely to preserve the Fund. It is advantageous to both members and the Fund for participants to use in-network providers.