## October 22, 2021

#### SUMMARY OF MATERIAL MODIFICATION

# Dear Participant and COBRA Beneficiaries:

This document is a Summary of Material Modification ("SMM") intended to notify you of important plan changes to the plan of benefits for the Railroad Maintenance and Industrial Health and Welfare Fund ("Fund" or "Plan") under both Plan D and Plan E. This summary is intended to satisfy the requirements for issuance of a SMM under the Employee Retirement Income Security Act of 1974, as amended. You should take the time to read this SMM carefully and keep it with the Summary Plan Description ("SPD"). This SMM does not contain a full restatement of the terms of the SPD. If you have any questions regarding these changes, please contact the Fund Office at the above-noted number.

# **Changes to Prescription Drug Benefit Program**

Effective August 1, 2021, the Railroad Maintenance and Industrial Health and Welfare Fund implemented two Prescription Drug Cost Reduction Programs with the assistance of its Pharmacy Benefit Manager, Optum Rx. Under the first program, if you are receiving a prescription drug for which there is an overthe-counter equivalent, the Fund will no longer cover the prescription drug in accordance with applicable law under its Prescription Drug Benefit Program. Most of the drugs affected by this provision deal with allergies or acid reflux. For a complete list of the drugs affected by this provision, please contact OptumRx at 1-833-516-3121.

Under the second program, which is referred to as the Vigilant Drug Program, higher-cost generic drugs are excluded when there is a therapeutically equivalent, lower cost drug. For a complete list of the higher-cost generic drugs at issue, please contact OptumRx at 1-866-516-3121.

Finally, please note that the SAV Program referenced in your SPD has been replaced by a new program. Under this new program, OptumRx will facilitate your enrolment into a manufacturer sponsored program or other rebate program if you are taking certain specialty medications. This process will help reduce or eliminate your out-of-pocket expense. Once the specific manufacturer sponsored coupon program or other rebate program ceases or expires, the normal 30% copayment for specialty drugs will apply. Please also note that amounts reduced or eliminated under this program are not applied to your maximum out-of-pocket expense.

### Opt Out for Dental Benefits (Plan D and Plan E) and Opt Out for Vision Benefits (Plan E only)

Effective January 1, 2020, you and your Dependents may opt out of dental coverage or vision coverage if you wish. If you or your Dependents desire to opt out of these limited scope benefits, please contact the Fund Office.

# Clarification of Coverage Related to COVID-19 Diagnostic Testing Coverage

The Fund Office has received questions concerning whether COVID-19 Testing and Screening for employment purposes or public health surveillance is covered by the Fund. Under the Families First Coronavirus Response Act and the Coronavirus Aid, Relief, and Economic Security Act, the Fund is only required to cover COVID-19 testing and screening *for diagnostic purposes* during the National Health Emergency related to COVID-19. This means that the Fund does not cover testing/screening required by your employer, for general public health surveillance, or for any other purpose not primarily intended for the individualized diagnosis or treatment of COVID-19. If you have any questions as to whether a specific COVID-19 test will be covered by the Fund, please contact the Fund Office.

As always, you are encouraged to contact the Fund Office at the number shown above with any questions you may have.

With Best Regards,

Your Board of Trustees