

April 2020

SUMMARY OF MATERIAL MODIFICATIONS

In response to the current COVID-19 pandemic crisis, the Board of Trustees of the Northeast Carpenters Health Fund has adopted the following temporary changes to the Fund's Summary Plan Descriptions for active Participants and their eligible Dependents in the Albany, Long Island, Westchester, Hudson Valley, and Rockland areas ("Plan"). These changes will remain in effect during the COVID-19 pandemic crisis, as determined by the Board of Trustees, unless terminated earlier at the Trustees' discretion. This document summarizes these changes so you should keep it with your Summary Plan Description ("SPD").

Coverage for COVID-19 Testing

Effective March 18, 2020, the following COVID-19 testing services will be covered In-Network and Out-of-Network with no cost sharing (including deductibles, copayments and coinsurance) and no requirement of prior authorization:

- Diagnosis products for the detection of SARS-CoV-2 or the diagnosis of COVID-19 and the administration of such diagnostic products. The types of tests that will be covered include:
 - 1. Diagnostic testing authorized by the FDA or the Secretary of HHS;
 - 2. Diagnostic testing that is under review, or will be submitted for review, by the FDA for emergency use; and
 - 3. Diagnostic testing authorized by a State, if that State has notified the Secretary of HHS.
- Items and services furnished to a Participant or Dependent during health care provider office visits, urgent care visits, and emergency room visits that result in an order for, or administration of, a diagnosis product, but only to the extent that the item or service relates to the furnishing or administration of the diagnostic test or the evaluation of whether an individual needs a diagnostic test.

Coverage for Treatment of COVID-19

Effective April 1, 2020, the Plan will pay 100% of the reasonable and customary charges for hospital care and other eligible medical expenses for the treatment of COVID-19. The eligible medical expenses will be covered In-Network and Out-of-Network with no cost sharing (including deductibles, copayments and coinsurance).

Coverage for COVID-19 Preventive Services

Effective March 27, 2020, to the extent required by federal law, the Plan will cover items, services, or immunizations intended to prevent or mitigate COVID-19, provided the item, service or immunization meets certain criteria and ratings of the U.S. Preventative Services Task Force or is recommended by the Centers for Disease Control and Prevention. The items, services, and immunizations will be covered In-Network and Out-of-Network with no cost sharing (including deductibles, copayments and coinsurance).

Expansion of Eligibility Provisions

- The restriction prohibiting Participants from self-paying for two consecutive coverage periods is temporarily eliminated for the coverage period from April 1, 2020 through September 30, 2020. Effective April 1, 2020, even if you self-paid for the preceding coverage period, you may self-pay up to 150 hours in order to satisfy the 600 hours requirement or 300 hours to satisfy the 1,200 hours requirement for eligibility for the April 1, 2020 through September 30, 2020 coverage period. However, the rule that you may only self-pay for five coverage periods in your career effective October 2018 continues to apply.
- Effective April 1, 2020, if you have six months with no credited hours in Covered Employment (not including self-pay), your coverage will be extended to the earlier of the end of the current benefit period or December 31, 2020, provided you otherwise meet the eligibility requirements for coverage under the Plan.

20827707v1