

**AMENDMENT TO THE RESTATED
UA LOCAL 190 HEALTH AND WELFARE PLAN AND THE UA LOCAL 190 MEDICARE
RETIREE HEALTH AND WELFARE PLAN**

THIS AMENDMENT is approved and adopted at Ann Arbor, Michigan, on November 29, 2021, by the Trustees of the UA LOCAL 190 HEALTH AND WELFARE PLAN (“Plan”) and the Trustees of the UA Local 190 MEDICARE RETIREE HEALTH AND WELFARE PLAN (“Medicare Retiree Plan”).

Pursuant to a resolution adopted by the Trustees at their meeting of June 19, 2017, the Trustees amended and restated the Plan, Medicare Retiree Plan and Summary Plan Description in their entirety, effective June 1, 2017. The restated Plan, Medicare Retiree Plan and Summary Plan Description are hereby amended effective January 1, 2022 as follows:

- 1) Under Section 1, “General Plan Information, Information Required by ERISA, Rights and Obligations under the Plan and Administrative Rules,” the subsection entitled “**Claim Year**” is replaced by the following:

The calendar year (January 1 – December 31) is used for tabulating the accrual of Miscellaneous Benefits, which are limited to \$1,000 for each calendar year, and Prescription Medicine Benefits, which are limited to \$2,000 for each calendar year for all Members except Medicare-Eligible Retirees, Medicare-Eligible Spouses and Medicare-Eligible Children residing in the United States and covered under the Medicare Plus Blue Group PPO Medicare Advantage Plan. Prescription Medicine Benefits are limited to \$2,500 for each calendar year for Medicare-Eligible Retirees, Medicare Eligible Spouses and Medicare-Eligible Children residing in the United States and covered under the Medicare Plus Blue Group PPO Medicare Advantage Plan. Certain benefits under the Blue Cross Blue Shield administered Health Care Plan are limited based on the calendar year, such as preventive care, chiropractic visits, and skilled nursing care. The calendar year is also used for tabulating the limits on benefits under Delta Dental and the Employee Assistance Program.

- 2) Under Section 8, “Health Care Coverage-Basic Benefits Administered by Blue Cross Blue Shield, under the subsection entitled “**Standard Coverage Out-of-Pocket Maximum**” the final bullet is replaced by the following:

- Prescription Medicine expenses after your \$2,000 allowance is used up; or if you are covered under the Medicare Plus Blue Group PPO Medicare Advantage Plan as a Medicare-Eligible Retiree, Medicare-Eligible Spouse or Medicare-Eligible Child residing in the United States, Prescription Medicine expenses after your \$2,500 allowance is used up.

3) Under Section 10, “Miscellaneous Benefits and Prescription medicine Benefits,” under the subsection entitled “***What do I do if I need a prescription filled?***” the first paragraph is replaced by the following:

The Fund provides a Prescription Medicine Benefit separate from the Blue Cross Blue Shield Basic Benefits. The maximum reimbursement for a year is \$2,000, unless you are covered under the Medicare Plus Blue Group PPO Medicare Advantage Plan as a Medicare-Eligible Retiree, Medicare-Eligible Spouse or Medicare-Eligible Child residing in the United States, in which case the maximum reimbursement for a year is \$2,500.

IN WITNESS WHEREOF, this Amendment to the UA Local 190 Health and Welfare Plan, UA Local 190 Medicare Retiree Health and Welfare Plan and SPD has been approved and executed by the Trustees.

TRUSTEES representing UA Local 190
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