

STEUBENVILLE ELECTRICAL WELFARE FUND
626 North Fourth Street
Steubenville, Ohio 43952
Telephone: (740) 282-1251

SUMMARY OF MATERIAL MODIFICATIONS
FOR THE COMBINED PLAN DOCUMENT AND SUMMARY PLAN DESCRIPTION
OF THE STEUBENVILLE ELECTRICAL WELFARE FUND

The Board of Trustees of the Steubenville Electrical Welfare Fund (the “Fund” or “Plan”) has updated your Combined Plan Document and Summary Plan Description (the “Plan Document”), which became effective on January 1, 2021. This “Summary of Material Modifications” explains the changes and should be kept with your Plan Document.

Gene Therapy Coverage

Effective September 1, 2022, the Plan no longer covers any gene therapy treatments, including, but not limited to, all related drugs, products, services, supplies, and procedures, even if they are medically necessary and preauthorized by a treating physician.

Continuation of Eligibility

Effective June 1, 2022, the Board of Trustees clarified two provisions in Section 4.5 of the Plan Document. First, under Section 4.5(A), if there is a credit balance in a deceased member’s Reserve Bank, benefits under the Plan will continue for his or her surviving spouse until the Reserve Bank is depleted. If the balance amount in the deceased member’s Reserve Bank is less than the cost of one (1) month’s coverage, the coverage under the Plan will cease unless the surviving spouse is eligible for coverage and elects to self-pay. Second, Section 4.5(B)(1) of the Plan Document, for the disabled member, his or her Reserve Bank can be used to self-pay for up to six (6) months, after which time the Reserve Bank will be forfeited. If the Reserve Bank were to become depleted before six (6) months, the member would need to obtain coverage through Medicare or by some other means.

Reserve Banks

Effective June 1, 2022, the Board of Trustees clarified two provisions in Section 4.6 of the Plan Document. First, under Section 4.6(A), a member can use the partial balance of his or her Reserve Bank to self-pay, but the Reserve Bank would be forfeited if the member does not self-pay. Also, the member can use the Reserve Bank and add to it, but if the member does not use the Reserve Bank to self-pay, he or she would forfeit the balance in his or her Reserve Bank. Second, under Section 4.6(B) of the Plan Document, a member can use his or her Reserve Bank for up to six (6) months to maintain coverage during unemployment, layoffs, underemployment, or retirement. But if the member does not use the Reserve Bank to self-pay, he or she would forfeit the balance in his or her Reserve Bank.

Employee Assistance Program (“EAP”) Services

Effective July 1, 2022, the Plan provides an Employee Assistance Program (“EAP”) for EAP-eligible persons and their households at no cost. The EAP services are provided by Aetna and include a wide array of free or low-cost resources, including unlimited telephonic consultations, face-to-face or televideo counseling, worklife support counseling, legal resources, financial resources, ID theft assistance, member

website access, chat therapy, management consultations and referrals, account management, crisis response services, a mobile app, and periodic flyers, email newsletters, utilization reports, and wallet cards. The program is available to all EAP-eligible persons and their households for up to six (6) sessions per issue, per Plan year. For additional information, you should contact the Fund Office or Aetna.

Wellness Services

As noted in a previous notice, the Board of Trustees clarified the wellness coverage under Section 13.30 of the Plan Document. Effective June 1, 2022, under new Section 13.30(H), anyone who completed a Life Line screening in 2021 will remain at the Fund’s lower deductible, effective January 1, 2023, regardless of whether he or she completed a preventive screening and/or physical in 2022. In addition, anyone who did not get a Life Line screening in 2021, but who completed a preventive screening and/or physical with his or her primary care physician prior to November 1, 2022 (and can provide proof of the screening and/or physical), will be moved to the lower deductible, effective January 1, 2023. Starting January 1, 2023, everyone will be required to get a primary care screening between October 1, 2022 and September 30, 2023 to remain at the lower deductible for the following plan year beginning January 1, 2024. In subsequent years, everyone will need to get a primary care screening within the 12-month period ending on each September 30 (e.g., between October 1, 2023 and September 30, 2024).

List of Trustees

Effective August 16, 2022, the current Trustees are as follows:

UNION TRUSTEES

Ryan Omais (Chairman)
Kevan Brown
Leonard Corona
Eric Nutter (Alternate Trustee)

MANAGEMENT TRUSTEES

Robert E. Wickham (Secretary/Treasurer)
Phil Bolden
Jason Walden
Thomas Shreves (Alternate Trustee)

As stated above, this notice serves as a Summary of Material Modifications and should be kept with your copy of the Plan Document for future reference.

If you have any questions about these changes to the Fund, please feel free to contact the Fund Office at (740) 282-1251.

Sincerely,

BOARD OF TRUSTEES

September 2022