October 2026

BENEFIT FUND FOR HOSPITAL AND HEALTHCARE EMPLOYEES – PHILADELPHIA AND VICINITY
Summary of Material Modifications

Dear Participant,

This notice is a Summary of Material Modifications (SMM) of the Summary Plan Description (SPD) of the Benefit Fund for Hospital and Healthcare Employees – Philadelphia and Vicinity. It describes an important change to your benefits provided under the SPD. You should read this notice carefully; and if you have any questions, you may contact the Fund Office at (215) 735-5720 Option 1. You should also keep this notice with your SPD.

Effective January 1, 2027, the Board of Trustees of the Benefit Fund for Hospital and Healthcare Employees – Philadelphia and Vicinity ("Fund") agreed to the following changes to the Plan of Benefits:

1. **Prescription Copay Assistance Program – Non-Specialty Medications**: Currently, the Fund's prescription drug program does not include a manufacturer copay assistance program for non-specialty medications that reduces the cost of prescription drugs to plan participants and to the Fund. Effective January 1, 2027, the Fund will be implementing a mandatory manufacturer copay assistance program called "Patient Saver" through EmpiRx, the Fund's Pharmacy Benefit Manager, and EmpiRx's partner, Luna Health Services. Patient Saver is designed to help Participants reduce their out-of-pocket costs for eligible non-specialty drugs by utilizing drug manufacturer's copay assistance and coupon cards. Luna Health will contact Participants directly to assist in the enrollment process if Participants are eligible to participate in the program and are utilizing a non-specialty prescription drug that has a copay assistance or coupon card available through the drug's manufacturer.

   If a Participant chooses not to participate in Patient Saver, they may be responsible for the full cost of the medication.

   Participants are not eligible for copay assistance if they are enrolled in Medicare, Medicaid, or any federal or state healthcare program.

Women's Health and Cancer Rights Act of 1998. This Plan provides medical and surgical benefits in connection with mastectomies. Effective January 1, 1999, federal law requires that plans providing these benefits must also provide benefits for certain reconstructive surgery, and that Plan participants be notified of this coverage on an annual basis. This covers reconstruction of the breast on which the mastectomy was performed, surgery on the other breast to produce a symmetrical appearance, and prostheses and treatment for physical complications of all stages of mastectomy, including lymphedemas.

Non-discrimination statement:
The Benefit Fund for Hospital and Healthcare Employees – Philadelphia and Vicinity complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al (215) 735-5720 Opción uno
주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. (215) 735-5720 옵션 1번으로 전화해 주십시오.

Sincerely,

Rhonda Murray
Executive Director