

WISCONSIN ELECTRICAL EMPLOYEES BENEFIT FUNDS
2730 DAIRY DRIVE SUITE 101
MADISON WI 53718
(608) 276-9111 or fundoffice@weebf.org

To All Covered Persons:

The Trustees of the Wisconsin Electrical Employees Health and Welfare Plan regularly review Plan rules and make changes when necessary. Please take time to read this notice, which is called a summary of material modifications or "SMM," carefully because it contains important information regarding changes to the 2025 summary plan description ("SPD"). You should keep this SMM with your SPD for future reference. To the extent applicable, this SMM also updates the summary of benefits and coverage or "SBC" for the 2025 coverage period.

The Trustees have agreed to add a new eligibility rule for members to qualify for the Plan's retiree coverage. Effective February 4, 2025, to be eligible to enroll in the retiree coverage after you retire, you must have either 24 consecutive months of coverage under the Plan (whether through Employer contributions, use of your dollar bank, or by self-pay) or you must have maintained regular coverage under the Plan, meaning you maintained Plan coverage (whether through Employer contributions, use of your dollar bank, or by self-pay) for at least 9 of the 12 months each calendar year, for the five years immediately prior to retirement.

For example:

	<u>Eligible for Retiree Benefits?</u>
Tim is 55, is applying for retirement and has been continuously covered by the Active Plan for the last 2 years, using his dollar bank for any month in which his Employer contributions were not sufficient for coverage.	Yes
Greg is 57, is applying for retirement and has been covered by the Active Plan for the last 5 years but has chosen not to self-pay for a month or two each year.	Yes
Roger is 56, is applying for retirement and has been covered by the Active Plan for the last year. Prior to that, he had worked outside the industry.	No

The Trustees have also added two new prescription drug programs: a mandatory biosimilar program and the Impact high-cost specialty medication program. Under the mandatory biosimilar program, if a biosimilar is available and medically appropriate for you, you must utilize the biosimilar or you will pay the difference in cost. Through the Impact program, if you use certain high-cost specialty drugs, your drugs will continue to be mailed directly to your home but you will be required to attend a teleconference with the specialty drug pharmacy each year.

To implement these changes, the following sections of your SPD dated 2025 are revised as of the dates set forth below:

1. Effective February 4, 2025, **Eligibility for Benefits** in the **RETIREE BENEFITS** section of your SPD (pages 48-49) is replaced with the following:

Eligibility for Benefits

To enroll in Retiree Benefits as an Early Retiree, you must meet ALL of the following requirements:

1. Be at least 55 years of age;
2. Be covered by the Plan as an Active Employee, Self-Pay Active Hourly Employee or Self-Pay Disabled Employee for:

- a. The 24 consecutive months immediately before your retirement date or
- b. At least 9 of the 12 months in each of the five calendar years immediately before your retirement date;
3. Cease from working in the industry; and
4. Advise the Fund Office in writing that you are an Early Retiree.

To enroll in Retiree Benefits as a Retiree, you must meet ALL of the following requirements:

1. Be at least 65 years of age;
2. Be covered by the Plan as an Active Employee, Self-Pay Active Hourly Employee or Self-Pay Disabled Employee for:
 - a. The 24 consecutive months immediately before your retirement date or
 - b. At least 9 of the 12 months in each of the five calendar years immediately before your retirement date;
3. Cease from working in the industry; and
4. Advise the Fund Office in writing that you are a Retiree.

A Self Pay Disabled Employee will be eligible as a Retiree upon the Employee's entitlement to Medicare Parts A and B and satisfaction of the other requirements identified above. An Early Retiree enrolled in the Retiree Benefits will become a Retiree upon attaining age 65.

IMPORTANT: You must enroll in Medicare Parts A and B and fully complete the insurance enrollment forms to be eligible for Plan benefits after age 65. If you do not enroll in Medicare Part A and B and submit the enrollment forms, you and your Dependents will lose coverage under the Plan.

Individuals retiring should contact the Social Security Administration at least 90 days in advance of their 65th birthday. Participants should notify the Fund Office at 608-276-9111 prior to the effective date of their retirement.

You may remove a Dependent upon enrolling in Retiree coverage. Your Dependent will not be eligible for Plan coverage unless they have a special enrollment qualifying event.

2. Effective July 1, 2025, the second paragraph under **Co-payment and Out-of-Pocket Maximum** in the **PRESCRIPTION DRUG EXPENSE BENEFITS** section of the SPD (page 27) is replaced with the following:

If you choose a brand name prescription drug when a generic equivalent or biosimilar is available, you must pay the difference in cost between the generic or biosimilar prescription drug and the brand name prescription drug in addition to the co-payment for the brand name drug. This rule does not apply if your treating Physician provides a written letter of Medical Necessity requiring use of the brand name medication.

3. Effective July 1, 2025, the Specialty Drugs section of the **PRESCRIPTION DRUG EXPENSE BENEFITS** section of the SPD (page 28) is replaced with the following:

Specialty Drugs

The Plan will cover specialty drugs and medications for uses or diagnoses for which the drug or medication has been approved by the FDA. Specialty drugs must be precertified by the Pharmacy Network provider.

If you fail to have a specialty drug precertified, the Plan will not cover the drug and you must pay the full cost.

The Plan utilizes various programs to help with the rising cost of certain specialty drugs. The High Impact Advocacy Program and Patient Assistance Programs utilize pharmaceutical manufacturer coupons and other assistance to reduce or eliminate your out-of-pocket expense. The Impact Program utilizes certain specialty pharmacies to save you and the Plan money. If a drug you are taking qualifies for the Impact Program, your copay is waived and you will continue to receive your drugs delivered straight to your house but you will be required to attend an annual teleconference with the pharmacy. If you are taking a prescription drug that qualifies for one of these programs, you will receive additional information from the Plan's Pharmacy Network provider. Note that the drugs included in these programs can change from time to time without notice.

Please contact the Fund Office at the number listed above with any questions you may have.

Sincerely,

THE BOARD OF TRUSTEES

This notice, which serves as a summary of material modifications or "SMM," contains only highlights of the Wisconsin Electrical Employees Health and Welfare Plan. Full details are contained in the Plan documents. If there is a discrepancy between the wording here and the documents that establish the Plan, the Plan document language will govern. The Trustees reserve the right to amend, modify, or discontinue all or part of the Plan at any time.