

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 2026 coverage period.

Retiree Coverage Eligibility

Effective October 28, 2025, the Trustees revised the eligibility requirements for the Plan's retiree coverage to require participants to provide 30 days advance written notice of retirement before retiree coverage is effective.

Coverage for Injectable Prescription Drugs

Effective October 28, 2025, the Trustees clarified that injectable drugs purchased at a PPO Provider and administered at home are applied to the \$10,000 annual prescription drug maximum.

Medical Out-Of-Pocket Maximum

Effective January 1, 2026, the Trustees amended the Plan to increase the Annual Out-of-Pocket Maximum for Medical Benefits to \$1,550/individual, \$4,650/family.

Disability Credits and FMLA Employer Contributions

Effective February 10, 2026, The Trustees have added a new rule for determining the required Employer contribution for disabled Active Hourly Employees who continue coverage under the Family and Medical Leave Act of 1993 ("FMLA"). Under the FMLA, the Plan will continue your health coverage until the end of your leave, as long as your Employer is subject to FMLA requirements, properly grants you FMLA leave, and makes the required notifications and contributions for coverage. If you are a disabled Active Hourly Employee, the amount of your Employer's required FMLA contribution will be reduced (that is, offset) by any disability credits that you receive under the Plan's Short Term Disability benefit.

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

1. Effective February 10, 2026, the second paragraph of **Family and Medical Leave Act ("FMLA")** in the **CONTINUATION COVERAGE** section of your SPD (pages 13-14) is revised to read as follows:

During your leave, your health coverage under the Plan will continue until the end of your leave, as long as your Employer is subject to FMLA requirements, properly grants you FMLA leave and makes the required notifications and contributions to the Fund. If you are a disabled Active Hourly Employee, your Employer's required FMLA contribution will be reduced by the amount of any disability credits that you receive under the Plan's Short Term Disability benefit. If your Employer stops making contributions to the

Fund or you exhaust your FMLA leave, you may be eligible to continue coverage under the Plan by election COBRA continuation coverage.

2. Effective October 28, 2025, **Eligibility for Benefits** in the **RETIREE BENEFITS** section of your SPD (pages 48-49) is revised to add a new paragraph requiring 30 days advance written notice of retirement before retiree coverage is effective:

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.

Coverage will be effective the first of the month following thirty days advance written notice.

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.

3. Effective January 1, 2026, the **Annual Out-of-Pocket Maximum** row in the **Medical Benefits** section of the **SCHEDULE OF BENEFITS** (page 60) is amended to read as follows:

Annual Out-of-Pocket Maximum	PPO	Non-PPO
Individual	\$1,550	Unlimited
Family	\$4,650	Unlimited
<ul style="list-style-type: none"> ➤ <i>Only PPO charges and Protected Services are applied to the PPO out-of-pocket maximum</i> ➤ <i>Does not include calendar year deductible, prescription drug expenses, dental or vision expenses, excluded services, amounts in excess of any maximums or balance billed charges.</i> 		

4. Effective October 28, 2025, the **Annual Maximum** row in the **Prescription Drug Benefits** section of the **SCHEDULE OF BENEFITS** (page 62) is amended to read as follows:

Annual Maximum	\$10,000, then the Plan pays 50% up to the annual out-of-pocket maximum
<ul style="list-style-type: none"> ➤ <i>Only PPO charges and Protected Services are applied to the PPO out-of-pocket maximum</i> ➤ <i>Does not include calendar year deductible, prescription drug expenses, dental or vision expenses, excluded services, amounts in excess of any maximums or balance billed charges.</i> 	

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.

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