

**U. A. PLUMBERS LOCAL UNION NUMBER 68 GROUP PROTECTION PLAN**  
**468 LINK ROAD**  
**POST OFFICE BOX 8726**  
**HOUSTON, TEXAS 77249-8726**  
**Telephone: (713) 869-2592 Toll Free: (800) 833-2980**

**NOTICE TO PARTICIPANTS**

The Board of Trustees of the U.A. Plumbers Local Union Number 68 Group Protection Plan (the “Plan”) would like to advise you of several changes and clarifications to your coverage. These changes and clarifications are effective immediately.

**Exclusion of Gene Therapy**

Coverage is hereby excluded for charges related to gene therapy. Gene therapy typically involves replacing a gene that causes a medical problem with one that does not, adding genes to help the body fight or treat disease, or inactivating genes that cause medical problems. Coverage for gene therapy is excluded even if the therapy has received approval from the U. S. Food and Drug Administration (FDA). Examples of gene therapy include, but are not limited to, Chimeric Antigen Receptor T-Cell (CAR-T) Therapies, such as Kymriah and Yescarta, as well as Luxturna and Zolgensma.

**Immunizations**

The list of immunizations in the Schedule of Benefits of your Summary Plan Description is hereby expanded, as shown below, to address covered immunizations not specifically addressed in the Schedule of Benefits.

<b>MEDICAL BENEFITS</b>	<b>PPO</b>	<b>NON-PPO</b>
Covered Immunizations Not Previously Mentioned (for Individuals under Age 19) (for example, Measles, Mumps and Rubella, Varicella and Haemophilus influenzae type b)	Plan pays 80% of the PPO Eligible Expense; Calendar Year Deductible waived	Plan pays 60% of Reasonable and Customary Eligible Expenses; Calendar Year Deductible waived
Covered Immunizations Not Previously Mentioned (for Individuals Age 19 and Over) (for example, Measles, Mumps and Rubella, Varicella and Haemophilus influenzae type b)	Plan pays 100% of the PPO Eligible Expense; Calendar Year Deductible waived	Plan pays 60% of Reasonable and Customary Eligible Expenses; Calendar Year Deductible waived

In addition, the following change is made to Section 7.03.C.8 of your Summary Plan Description. Section 7.03.C.8 of your Summary Plan Description lists covered immunizations for Eligible Dependent children up to age 14. All references to “age 14,” “14 years” and “14<sup>th</sup> year” in Section 7.03.C.8 are hereby replaced with “age 19,” “19 years” and “19<sup>th</sup> year,” respectively.

## **Eligible Dependents**

Section 17.09.C of your Summary Plan Description indicates that “A child who is age 19 or older will not be eligible for coverage under the Plan if the child is eligible for employer-based coverage (including employer-based coverage through the adult dependent’s spouse) other than coverage through a parent.”

This Section 17.09.C is hereby deleted. As a result, a child who is age 19 or older may be eligible for coverage under the Plan even if the child is eligible for employer-based coverage other than coverage through a parent.

## **Over-the-Counter Medical Equipment**

This is to clarify that the Plan covers durable medical equipment, such as hospital beds, wheelchairs and breathing assistance apparatuses; however, over-the-counter medical equipment is not covered under the Plan.

## **PLAN’S STATUS AS A “GRANDFATHERED HEALTH PLAN”**

The U.A. Plumbers Local Union Number 68 Group Protection Plan (the Plan) believes this Plan is a “grandfathered health plan” under the Affordable Care Act. As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan means that your Plan may not include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for the provision of preventive health services without any cost sharing. However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, for example, the elimination of lifetime limits on benefits.

Questions regarding which protections apply and which protections do not apply to a grandfathered health plan and what might cause a plan to change from grandfathered health plan status can be directed to the Fund Office at:

U.A. Plumbers Local Union Number 68 Group Protection Plan  
468 Link Road  
Post Office Box 8726  
Houston, Texas 77249-8726  
Telephone: (713) 869-2592 Toll Free: (800) 833-2980

You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at 1-866-444-3272 or [www.dol.gov/ebsa/healthreform](http://www.dol.gov/ebsa/healthreform). This website has a table summarizing which protections do and do not apply to grandfathered health plans.

If you have any questions concerning this notice, please contact the Fund Office.

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Your receipt of this Notice is not a certification that you are eligible to receive any benefits under the Plan. You must satisfy the Plan’s eligibility requirements to receive benefits. If you have any questions, please contact the Fund Office.