

UFCW LOCAL 1262 AND SHOPRITE WELFARE FUND

1389 BROAD STREET, CLIFTON, N.J. 07013
973-778-5800 (TTY:711)

ADMINISTRATOR
FRANK M. VACCARO

INFORMATION REGARDING YOUR MEDICAL COVERAGE RELATED TO COVID-19

IMPORTANT ANNOUNCEMENT ABOUT YOUR HEALTH BENEFITS

Please keep this with your summary plan description

In response to the COVID-19 pandemic, a public health emergency was declared. As a result of this declaration, health plans were generally required to provide coverage for:

- COVID-19 diagnostic tests and related to services with no participant cost sharing, prior authorization or medical management;
- certain items, services, or immunizations intended to prevent or mitigate COVID-19 with no participant cost-sharing obligation; and
- a specified number of FDA-authorized over the counter at home COVID tests.

This public health emergency has ended effective May 11, 2023. As a result, the Fund is no longer required to provide coverage for these services. However, the Fund's Board of Trustees has decided to continue covering the cost of certain COVID-19 related services, subject to certain limitations. Therefore, effective May 12, 2023, the following changes are being made to your health coverage:

1. With Participating Providers only, the Fund will provide coverage for the cost of diagnostic products for the detection of SARS-CoV-2 or the diagnosis of COVID-19 that are approved, cleared or authorized by the FDA, and the administration of such diagnostic products; (2) items and services furnished to you during health care provider office visits (including telehealth visits), urgent care visits, and emergency room visits that result in an order for, or administration of, such a diagnosis product, but only to the extent that the item or service relates to the furnishing or administration of the diagnostic test or the evaluation of whether an individual needs a diagnostic test; (3) in vitro diagnostic testing for which a developer has requested, or intends to request, emergency use authorization from the Food and Drug Administration ("FDA"), unless such request has not been timely submitted to the FDA for consideration or until such request has been denied by the FDA; (4) in vitro diagnostic testing authorized by a State that has notified the Secretary of Health and Human Services ("HHS") of its intention to review such tests to diagnose COVID-19; and (5) any COVID-19 diagnostic testing that the Secretary of HHS determines to be appropriate and for which guidance has been issued.

For these services, the Fund will cover the cost of these services if rendered by a Participating Provider, subject to any applicable co-payment, co-insurance and deductible. No coverage will be provided for services with a Non-Participating Provider unless coverage is required by applicable federal law.



2. The Fund will cover, with no cost-sharing, immunizations intended to prevent or mitigate COVID-19, provided they meet certain criteria and ratings of the U.S. Preventative Services Task Force or recommended by the Centers for Disease Control and Prevention for the individual involved, but only to the extent required under the Affordable Care Act's preventative services coverage requirements.
3. The Fund will cover the cost of up to four (4) FDA-authorized over the counter at-home COVID tests (not test kits) per family per month at no cost to you. This coverage is only available at pharmacies that participate in the Express Scripts network and only when purchased at the pharmacy, not at the cashier station.

Please contact the Fund Office with any questions.