

April 2020

Summary of Material Modification to the Plans

This summary of material modifications to the Plans listed below is being provided to you to highlight important changes to coverage and programs under the Plans. If you have any questions regarding these changes or if you are unsure if these changes apply to you, please contact the company that administers your benefits for more information regarding the coverage requirements for these services, or call the number on the back of your medical ID card.

The changes apply to the following Plans:

- The National Railway Carriers and United Transportation Union Health and Welfare Plan (the “NRC/UTU Plan”) (Governing Committee, Plan Administrator)
- The Railroad Employees National Health and Welfare Plan (the “National Plan”) (Joint Plan Committee, Plan Administrator)

Waiver of Cost-Sharing for Testing and Diagnostic Services for COVID-19

Effective from April 1, 2020 until the end of the COVID-19 public health emergency, pursuant to the Families First Coronavirus Response Act, the following changes will be made to Plan coverage:

- Testing for COVID-19 and products related to such testing shall be 100% covered without application of the fixed-dollar copayments, deductible or coinsurance; and
- No fixed-dollar co-payments for office visits (including primary care, urgent care, emergency room, and telehealth) will be charged to members when the visit relates to COVID-19 diagnosis or assessment, and any items or services provided during such visit for COVID-19 diagnosis or assessment will be 100% covered without application of the deductible or coinsurance.

Please note that the waiver of cost-sharing described above is required by applicable law and is subject to modification if such applicable law expires or is amended.

Additionally, until the end of the COVID-19 public health emergency, you are permitted to receive mental health and substance abuse care from your provider through digital or telephonic means. In other words, instead of physical office visits, mental health and substance abuse care provider services may be received via online video or chat (including video capabilities on your phone) or via a telephone call. Fixed-dollar copayments are not waived for these digital or telephone visits, so the applicable copayment is required just as if it were a physical office visit.

Expanded Coverage for Gender Dysphoria

Effective April 1, 2020, the Plans will cover services related to gender reassignment surgery. Coverage for these services will be subject to the Plans’ deductible, co-payments, coinsurance, and out-of-pocket maximums. The coverage is also subject to the medical management practices of the company that administers your benefits. Please contact the company that administers your benefits for more information regarding the coverage requirements for this service.

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This summary of material modifications is intended to summarize a change in Plan provisions. Except as described in this summary of material modifications, in the event of any inconsistency between this summary of material modification and the Plans’ formal documentation, the Plans’ formal documentation will control.