



Benefit Changes Effective January 1, 2023

This notice is to provide you with information regarding **changes** to your medical benefits which will become effective for claims incurred on and after January 1, 2023. We encourage you to carefully review this notice and if you have any questions regarding these changes or your benefit plans, you can contact the Fund Office at 770-997-9910 or 1-800-241-3473. For more details on these changes and the benefits available, you can view the Benefit Basics sheets available in your open enrollment portal or the Summaries of Benefits and Coverage (SBCs) available online at atlanta.ufcwemprfund.org.

2023 In-Network Calendar Year Deductible

Basic Level \$1,250 per Individual / \$2,500 per Family
Standard Level \$1,000 per Individual / \$2,000 per Family

2023 In-Network Maximum Out-of-Pocket Limit

All Levels \$8,000 per Individual / \$16,000 per Family

Higher Benefit for Utilizing a BDC or BDC+ Facility for Certain Surgical Procedures

Anthem’s networks recognize certain facilities that excel in delivering safe, effective treatment for specific procedures. Facilities that meet the established set of rigorous standards are awarded the Blue Distinction Center (BDC) designation. Because of the benefit of using these facilities of distinction, we are offering a higher level of coverage when the services are provided by a BDC/BDC+ facility. This higher benefit means that the Plan will pay 10% more of the covered charge for a BDC/BDC+ facility than if you use another facility. For example, if the cost of a procedure is \$10,000 you would save \$1,000 by using a BDC/BDC+ facility.

The services that have been identified for steerage to BDC/BDC+ facilities are as follows:

- Bariatric Surgery
- Cardiac Care – Inpatient cardiac care services, such as coronary artery bypass graft surgery, heart valve surgery and angioplasty (percutaneous coronary intervention).
- Knee and Hip Replacement
- Spine Surgery – Inpatient spine surgery services, such as discectomy, fusion and decompression procedures.
- Transplants – Heart, lung, liver, pancreas and bone marrow/stem cell transplants.

If you use any other in-network facility that is not designated as BDC or BDC+ for one of the above surgeries, the Plan’s regular coinsurance will apply. If you use a non-network facility, the facility charges will not be covered. The chart below shows how the coinsurance percentage will be impacted by this change for surgical claims incurred on or after January 1, 2023:

	BDC/BDC+ Identified Services			Other Covered Services	
	BDC/BDC+ Facility	Other In-Network Facility	Non-Network Facility	In-Network Provider	Non-Network Provider
BASIC LEVEL	You pay 20%	You pay 30%	Not Covered	You pay 30%	You pay 50%
STANDARD LEVEL	You pay 10%	You pay 20%	Not Covered	You pay 20%	You pay 50%

IF YOU NEED ONE OF THE IDENTIFIED BDC/BDC+ SURGICAL PROCEDURES the best place to start is by contacting Anthem at the number on your ID card. Customer Service can help you find the appropriate provider and help guide you through the process.

This notice is a Summary of Material Modifications (“SMM”) providing you with information regarding changes to your Plan benefits effective January 1, 2023. This SMM should be kept with your copy of the Summary Plan Description. If you have any questions, contact the Fund Office. If there is any discrepancy between the terms of the Plan, as modified, and this SMM, the provisions of the Plan will control.



Travel Benefits When Utilizing a BDC or BDC+ Facility for Certain Surgical Procedures

While many of you will have convenient access to a BDC or BDC+ facility for your needed care, we understand that sometimes you will have to travel to get the facility that is best for your specific situation. The cost of travel shouldn't stand in the way of getting the highest level of medical care, so the Plan is implementing a travel benefit to cover costs associated with necessary airfare, mileage and hotel accommodations when you schedule one of the surgeries described above at a BDC/BDC+ facility outside of your area. This benefit will also cover required travel for required pre- and post-surgical visits and will cover the costs of one travel companion. The Plan will pay 100% up to \$10,000 per participant per surgical procedure (limitations may apply to coverage levels for specific services). To make this travel even easier, the Plan will provide you with a travel concierge service that can book your travel arrangements for you and pay for your expenses up front, so that you don't have to be out-of-pocket and file for reimbursement later.

IF YOU NEED ONE OF THE IDENTIFIED BDC/BDC+ SURGICAL PROCEDURES the best place to start is by contacting Anthem at the number on your ID card. Customer Service can help you find the appropriate provider and help guide you through the process, including getting you in touch with the travel concierge if necessary.

Expanded Coverage for Previously Excluded Services

Effective for claims incurred on and after January 1, 2023, your benefit plans will now provide access to the following services when medically necessary:

- Acupuncture
- Bariatric Surgery
- Treatment for Substance Use Disorders

Removal of Visit Limits on Private Duty Nursing and Home Health Care

Effective for claims incurred on and after January 1, 2023, the 40-visit limit per year for private duty nursing and home health care will no longer apply.

Certification of Disability for Weekly Disability Benefits

Effective for weekly disability claims incurred on and after January 1, 2023, the list of physician types from which the Fund will accept certification of disability is expanding from doctor of medicine (MD) and doctor of osteopathy (DO), to include a doctor of dental surgery (DDS), doctor of medical dentistry (DMD), doctor of chiropractic (DC), doctor of podiatry (DPM). Diagnosis and treatment of the disabling condition must be within the scope of the license of the certifying physician.

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