CENTRAL LABORERS' WELFARE FUND

SUMMARY OF MATERIAL MODIFICATIONS

CIALIS FOR DAILY USE

On March 23, 2021, the Trustees of the Central Laborers' Welfare Fund adopted the following changes to the Fund's Plan provisions, with an effective date of July 1, 2021:

The Summary Plan Description, specifically Prescription Drug Exclusion #13 and Prescription Drug Exclusion #17, are amended to read as follows:

Prescription drug benefits are not payable under the Plan for the charges described below:

Prescription Drug Exclusion #13:

Charges for erectile dysfunction medications, except for purchases of Viagra, Levitra and Cialis, or their generic equivalent. However, purchases of Viagra and Levitra, or their generic equivalents, will be limited to a quantity not to exceed 12 pills per month. Purchases of Cialis, or its generic equivalent, other than Cialis 2.5 mg or Cialis 5mg, will be limited to a quantity not to exceed 12 pills per month. Cialis, or its generic equivalent 2.5 mg or Cialis 5mg, will be limited to a quantity not to exceed 30 pills per month or 90 pills in a 90-day period when purchased at a CVS retail store or through CVS/Caremark mail order, for the diagnoses of benign prostatic hypertrophy and erectile dysfunction.

Prescription Drug Exclusion #17:

(Prescription Drug Exclusion #17 is eliminated.)

INVISALIGN CLEAR ALIGNERS

On March 23, 2021, the Trustees of the Central Laborers' Welfare Fund adopted the following changes to the Fund's Plan provisions, with an effective date of July 1, 2021:

The Summary Plan Description, specifically Orthodontic Services, is amended to read as follows:

Orthodontic Services – Effective July 1, 2021

Orthodontic treatment is allowable for Eligible Dependent Children and only for services or charges incurred on or after January 1, 2001.

Orthodontic treatment is allowable for Eligible Participants and Spouses and only for services or charges incurred on or after January 1, 2007.

Orthodontic services are covered up to 50%, with a lifetime maximum of $1,500. Orthodontic expenses are also subject to the calendar year maximum of $2,500 for Dental Benefits. This means that if you, your spouse or eligible Dependent child reaches the $2,500 maximum for dental expenses in a calendar year, you, your spouse or Dependent child's orthodontic services will not be covered that year and vice versa.

If you have arranged a payment plan with your orthodontist, you will need to provide the Plan with information confirming when orthodontic treatment will begin and whether payments are being made as

scheduled. Payments are made directly to the orthodontist, so you should encourage the orthodontist to submit bills for services directly to the Fund Office. The Welfare Fund will not make payments on the basis of payment coupons, and reimbursements for orthodontic expenses will not be made directly to you.

Orthodontic benefits are limited by the calendar year and lifetime dollar maximums listed in the Schedule of Benefits.

Regarding any eligible treatment started prior to June 30, 2021, Orthodontic benefits are not payable under the Plan for the charges associated with any "Invisalign" or similar treatment that utilizes a removable aligner with the exception of a retainer used as a part of the plan of care associated with treatment that has utilized traditional orthodontic appliances which incorporate the use of brackets, bands, wires, springs and/or other related materials to correct the abnormal alignment of the teeth.

Regarding any treatment started on or after July 1, 2021, orthodontic benefits are payable under this Plan for charges associated with treatments such as *Invisalign* that utilize a Food and Drug Administration (FDA) approved removable aligner, where the treatment is managed by a licensed dentist or orthodontist who determines whether and at what age the treatment is appropriate given the development of teeth and their arrangement in the mouth. No benefits are payable for "do-it-yourself" kits, including those ordered online or by mail, and/or where the treatment is not managed by a licensed dentist or orthodontist. Benefits are payable subject to the dental network contracted rate or, for services performed and not subject to network discounts, then the reasonable and customary charges for conventional orthodontics.

Regarding any treatment started on or after July 1, 2021, orthodontic benefits are payable under this Plan for charges associated with treatments such as traditional brackets, bands, wires, springs and/or other related materials to correct the abnormal alignment of the teeth, where treatment is managed by a licensed dentist or orthodontist.

The Central Laborers' Welfare Fund's online Summary Plan Description has been updated with the amended language above. You may request a hard copy of the Summary Plan Description by contacting the Fund Office at 1-800-252-6571.

GRANDFATHERED PLAN NOTICE

THE CENTRAL LABORERS' WELFARE FUND ("FUND") BELIEVES THAT IT IS A "GRANDFATHERED HEALTH PLAN" UNDER THE PATIENT PROTECTION AND AFFORDABLE CARE ACT (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 THE FUND MAY NOT INCLUDE CERTAIN CONSUMER PROTECTIONS OF THE AFFORDABLE CARE ACT THAT APPLY TO OTHER PLANS, SUCH AS, 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, SUCH AS, FOR EXAMPLE, THE ELIMINATION OF LIFETIME LIMITS ON BENEFITS. THE FUND WILL NOTIFY YOU WHEN CERTAIN OTHER CONSUMER PROTECTIONS ARE ADOPTED.

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 WELFARE FUND DIRECTOR, CYNTHIA SMITH-BRANNAN, AT 1-800-252-6571. 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. THE WEB SITE HAS A TABLE SUMMARIZING WHICH PROTECTIONS DO AND DO NOT APPLY TO GRANDFATHERED HEALTH PLANS.

This Summary of Material Modifications may contain only highlights of certain features of the Central Laborers' Welfare Fund. Full details are contained in the documents that establish the Plan provisions. If there is a discrepancy between the wording here and the documents that establish the Plan, the document language will govern. The Trustees reserve the right to amend, modify or terminate the Plan at any time. You and your eligible Dependents do not acquire any vested right to Plan benefits either before or after you retire.