The Fidelity Deposit and Discount Bank Group Health Plan Summary of Material Modifications (SMM)

Following are important updates that will be made to your Health Plan ("Plan"). Please review this information carefully. Because these modifications amend the terms of your Plan, keep this summary with your Plan Document/Description of Coverage for reference.

Plan Benefits

This information is **very important** to you and your dependents. Please take time to read it carefully.

COVID-19 Benefit Changes Effective May 31, 2023

The federal government has announced the Public Health Emergency (PHE) for COVID-19 will end on May 11, 2023.

As a result, effective May 31, 2023, cost-share waivers for the following benefits and coverage will return to regular plan benefits and subject to the copayments, coinsurances, deductibles, exclusions and provisions described in the Summary of Benefits and Coverage and/or Plan Booklet.

- 1. COVID diagnostic tests (i) that have been approved under applicable law, (ii) that have been developed in, and authorized, by a state (subject to notice to the Department of Health and Human Services ("HHS")), or (iii) that HHS has deemed to be appropriate to detect the virus that causes COVID-19, including the administration of such tests. Tests which are not FDA-approved, and at-home over-the-counter (OTC) COVID tests, will no longer be covered.
- 2. Items and services furnished to individuals during provider office visits (whether inperson or via telehealth), urgent care visits, and emergency room visits that result in an order for, or the administration of, a diagnostic test described above, but only to the extent such items or services relate to the furnishing or administration of the test or the evaluation of whether the person needs the test.
- 3. Medically necessary services required for the treatment of COVID-19.
- COVID vaccines and other preventive services rendered by non-participating providers.

Qualifying coronavirus preventive services that transition under Section 2713 of the Affordable Care Act's (ACA) Preventive Services Requirements – such as vaccines recommended by the Advisory Committee on Immunization Practices (ACIP) – will continue to be covered at 100%, without cost-sharing to you, when services are rendered by Participating providers.

The national emergency extended deadlines for:

- COBRA elections
- COBRA premium payment
- Electing HIPAA special enrollment
- Filing claims, appeals, and requests for external review

will return to normal timeframes beginning July 10, 2023.

Receipt of this notice does not constitute a determination of your eligibility. If you wish to verify eligibility, or if you have any questions regarding the Plan changes, please contact Highmark's Customer Service Center at 800-241-5704.

In accordance with ERISA reporting requirements this document serves as your Summary of Material Modifications to the Plan, and we are advising you of these Plan changes within 60 days of the adoption of those changes.