

**SUMMARY OF MATERIAL MODIFICATION for the GEO Unit Health & Welfare
Plan UAW/UMass Health & Welfare Trust Fund**

This summary of material modification (SMM) describes changes to the UMass Health & Welfare Trust Fund's plan benefits and administrative processes and supplements the Summary Plan Description (SPD) for the Plan. The effective date of each of these changes is indicated below. You should read this SMM very carefully and retain this document with your copy of the SPD for future reference. THIS SUMMARY HAS BEEN DELIVERED TO YOU BY ELECTRONIC MEANS. YOU HAVE THE RIGHT TO RECEIVE A WRITTEN SUMMARY AND MAY REQUEST A COPY OF THIS SUMMARY ON A WRITTEN PAPER DOCUMENT AT NO CHARGE BY CONTACTING THE PLAN ADMINISTRATOR: (413) 345-2156 or uawdental@external.umass.edu

1) Summary of Administrative Changes for the 2023-24 Plan Year

- (a) SSN requirement: For the Altus Dental plan effective 9/1/22, the UMass Employee ID+0 will be used in lieu of the SSN (social security number) to enroll all eligible employees. For the EyeMed Vision plan and the MeLaw Legal Plan, effective 9/1/23 the UMass Employee ID+0 will be used in lieu of the SSN (social security number).
- (b) Effective 9/1/23, the employee's SSN (social security number) will continue to be required for enrollment in the free, basic life insurance and the paid, supplementary life insurance, per the requirements of MetLife.
- (c) Effective 9/1/23, the URL for the enrollment portal is <https://portal.hwtf.org/login>
- (d) Open enrollment periods for plan year 2023-24 are as follows:
 - Aug 15 - Sept 15
 - Oct 15 - Oct 31
 - Nov 15 - Nov 30
 - Jan 15 -Jan 31
 - March 15 - March 31
 - May 15 - May 31

2) Summary of Benefit Changes for the 2023-24 Plan Year

- a) EyeMed Vision Plan: Effective 9/1/23, the vision frame allowance increased from \$175 to \$185 (see Summary Plan Description).
- b) New Prepaid Program: Effective 9/1/23, there will be a limited number of prepaid 20 class cards available for Cadence Yoga, Sunderland, MA. These are available on a first come, first served basis . Acceptance of a prepaid wellness benefit comes with terms and conditions specific to the provider.

3) Effective 9/1/2023, the COBRA coverage rates are:

Altus Dental

Single: \$31.37/month
Single + 1: \$62.83/month
Family \$107.84/month

EyeMed Vision

Single: \$4.00/month
Single + 1: \$7.59/month
Family \$11.15/month

All rates above include a 2% administrative fee. Rates effective 9/1/23.