Oregon Essential Workforce Health Care Fund

SUMMARY OF MATERIAL MODIFICATIONS

The Board of Trustees of the Oregon Essential Workforce Health Care Fund ("Fund") has adopted the following changes under the Oregon Essential Workforce Health Care Fund Summary Plan Description ("SPD"). Please review this document and keep it with your SPD.

1. Effective January 1, 2026, the fourth and fifth paragraph of the "Combined Medical and Prescription Drug Deductible" subsection under "PPO Plan Medical Benefits" on page 19 of the SPD is revised to read as follows:

   All services except for those listed below will be subject to deductibles described above and the coinsurances listed below under Reimbursement Provisions. The services listed as items (a) through (g) below will have a fixed co-pay per service as specified **if delivered by In-Network PPO providers**. The services listed as item (h) will **not** be subject to the deductibles described above but will still be subject to coinsurance **if delivered by In-Network providers**.

   a. Primary Care Office Visits ($20 copay)
   b. Specialist Office Visits ($40 copay)
   c. Chiropractic, Acupuncture, and Massage Therapy Visits ($40 copay)
   d. Physical Therapy/ Occupational Therapy / Speech Therapy Office Visits ($40 copay)
   e. Urgent Care Visits ($60 copay)
   f. Outpatient Behavioral Health Visits ($20 copay)
   g. Prescription Drugs (see page 36)
   h. Diagnostic X-rays and Laboratory (20% coinsurance)

   Cost sharing for all of these services will be credited towards the Out-of-Pocket Maximums.

2. Effective January 1, 2026, a fifth bullet point of the "Prohibition Against Balance Billing" subsection under "PPO Plan Medical Benefits" on page 20 of the SPD is added as follows:

   - Services from licensed out-of-network ground ambulance service providers in Oregon.

3. Effective January 1, 2026, the following subsection labeled "Doula Services" is added to "PPO Plan Medical Benefits" on page 25 of the SPD after the "Dialysis Treatment" subsection:

   Doula, Lactation Counselor and Lactation Educator Services

The plan covers doula services, lactation counselors, and lactation educators up to a benefit limit of $3,760 (to be modified each year on January 1 by the Oregon Department of Consumer and Business Services) from a trained professional, subject to the deductible and coinsurance.

"Doula" means a trained professional who provides continuous physical, emotional and informational support to an individual during pregnancy, labor and delivery or the postpartum period to help the individual achieve the healthiest and most satisfying experience possible.

"Lactation counselor" means a person certified by the Academy of Lactation Policy and Practice, or its successor organization, as approved by the Health Licensing Office by rule, as a clinical lactation care provider who has demonstrated the necessary skills, knowledge and attitude to provide clinical support to families that are thinking, or have questions, about breastfeeding or that have problems with breastfeeding.

"Lactation educator" means a person certified by the Childbirth and Postpartum Professional Association, or its successor organization, as approved by the office by rule, as a certified lactation educator to educate, counsel and support families by providing evidence-based information about lactation and breastfeeding.

4. Effective January 1, 2026, the following is added to the end of the "Transplants" subsection under "PPO Plan Medical Benefits" on page 34 of the SPD:

   Transplants performed outside the United States are not covered. Procurement costs for any organ or tissue procured outside the United States are not covered.

5. Effective January 1, 2026, the "Copays at In-Network Pharmacies" subsection under "PPO Plan Prescription Drugs" on page 36 of the SPD is revised to remove the following:

   * Maintenance-only. Maintenance drugs in excess of a 30-day supply must be purchased through a CVS retail network pharmacy or by mail. The Fund will allow for two (2) 30-day grace fills for maintenance drugs. After two grace fills, a 90-day supply must be obtained through a CVS retail pharmacy or through the Optum Rx mail order pharmacy. Otherwise, there will be no coverage.

6. Effective January 1, 2026, the "Coinsurance at Out-of-Network Pharmacies" subsection under "PPO Plan Prescription Drugs" on page 36 of the SPD is revised to remove the following:

   * Maintenance-only. Maintenance drugs in excess of a 30-day supply must be purchased through a CVS retail network pharmacy or by mail. The Fund will allow for two (2) 30-day grace fills for maintenance drugs. After two grace fills, a

90-day supply must be obtained through a CVS retail pharmacy or through the Optum Rx mail order pharmacy. Otherwise, there will be no coverage.

7. Effective January 1, 2026, the second paragraph of the "Maintenance Prescription Drugs" subsection under "PPO Plan Prescription Drugs" on page 38 of the SPD is revised to read as follows:

   The Fund covers 30-day and 90-day supply prescriptions for maintenance drugs.

8. Effective January 1, 2026, the "Prescription Drug Exclusions and Limitations" subsection under "PPO Plan Prescription Drugs" on page 39 of the SPD is revised to remove the following:

   8. Maintenance prescription drugs in excess of a 30-day supply that are purchased from other than the mail or network pharmacies, except for 2 30-day grace fills.