

# Central Pennsylvania Teamsters Health and Welfare Fund

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## CENTRAL PENNSYLVANIA TEAMSTERS HEALTH & WELFARE FUND

### Summary of Material Modification ALL PLANS

**Important Changes Have Been Made to the Plan!  
Please read carefully.  
Keep This Information with Your Plan Document.**

Below is a summary of an amendment made to your benefit plan. Please review this change carefully. This change is effective January 1, 2021.

This Summary of Material Modification describes changes related to the Copayments payable when you use a Network Provider for Physical Therapy Services:

The Plan has been amended to provide that if you use a Network Provider, the Fund will pay Benefits at the Network Rate for up to three (3) modalities of treatment per day, less a Copayment of **\$10** per visit. Previously, the required Copayment was \$20 per visit.