

The APEA-AFT Health & Welfare Trust
Employee Benefit Plan

APEA

Amendment Number 2
to the September 2016 SPD Restatement

Effective January 1, 2017


The APEA-AFT Health & Welfare Trust Employee Benefit Plan is hereby amended as follows:


The Plan shall adopt the Caremark Advanced Control Formulary. No payment shall be made for medications which are listed as excluded on the Advance Control Formulary.

The following language shall be added to the Plan:

Formulary refers to a list of covered drugs that serves as a guide within select drug classes for you and your doctor. The formulary is managed by the Prescription Benefits Manager. Non-formulary drugs are not included on the drug list and may be considered non-preferred or excluded. If a drug is not on the list then it may not be covered or may cost you more. You may be responsible for the full cost of a non-formulary drug. The formulary is subject to change in response to market dynamics. An appeals exception process is available to accommodate medical necessity circumstances.

Signed:

 _____ Authorized Signature	10-24-16 _____ Date	Chari Trustee _____ Title
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 _____ Authorized Signature	10-24-16 _____ Date	Trustee _____ Title
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