



MO-KAN TEAMSTERS TRUST FUNDS

PO BOX 909500 • KANSAS CITY, MISSOURI 64190-9500
816.756.3313 • FAX 816.756.3659 • TOLL FREE 1.866.756.3313



PRIVACY NOTICE AVAILABILITY

The Privacy Rule requires the Mo-Kan Teamsters Health and Welfare Fund to follow certain procedures to protect the privacy of your personal health information maintained by the Welfare Fund. The Fund's Privacy Notice describes how medical information about you may be used and disclosed and how you can get access to this information. An updated notice effective February 16, 2026 with changes to PHI relating to Substance Use Disorders is available. This information is available on the Fund website (<https://www.mokanteamstersbenefits.com/>) or you may request a copy of the Fund's Privacy Notice by contacting the Fund Office at: Wilson-McShane Corporation, PO Box 909500, Kansas City, MO 64190-9500, telephone (816) 777-2668 or toll free (833) 479-9428.

ANNUAL NOTICE REGARDING MASTECTOMY COVERAGE

The Trustees of your Welfare Plan are issuing this notice in compliance with the Women's Health and Cancer Act of 1998. Your Welfare Plan provides the benefits required by this law. You have a right to this notice and the Trustees are providing the notice for your information so that you may be assured that you are treated in accordance with federal law if the need arises.

REQUIREMENTS UNDER THE WOMEN'S HEALTH AND CANCER RIGHTS ACT

Under federal law, group health plans and health insurance issuers offering group health insurance coverage that includes medical and surgical benefits with respect to a mastectomy shall include medical and surgical benefits for breast reconstructive surgery as part of a mastectomy procedure. Breast reconstructive surgery in connection with a mastectomy shall at a minimum provide for: (1) reconstruction of the breast on which the mastectomy has been performed; (2) surgery and reconstruction of the other breast to produce a symmetrical appearance; and (3) prostheses and physical complications for all states of mastectomy, including lymphedema, in a manner determined in consultation with the attending physician and the patient. As part of the Plan's Schedule of Benefits, such benefits are subject to the plan's appropriate cost control provisions such as deductible and coinsurance.