AMENDMENT NO. 20-1

TO THE

RULES AND REGULATIONS

OF THE

MEBA MEDICAL AND BENEFITS PLAN

At their February 20, 2020 meeting, the Trustees of the MEBA Medical and Benefits Plan (the “Plan”) amended the Plan’s Rules and Regulations to modify the Plan’s coverage for bariatric surgery, effective January 1, 2020.

1. Article VI, Section 3(j) shall be amended to read as follows (new language shown in bold italics):

(j) Bariatric Surgery

If an Eligible Employee, excluding those Eligible Employees covered under Article IX of the Plan provisions, incurs Covered Medical Expenses in connection with an FDA approved bariatric procedure for the treatment of obesity, such charges shall be payable in accordance with the Plan’s provisions for the payment of hospital, surgical, and medical benefits, subject to the satisfaction of the following criteria: the Eligible Employee must (i) be 18 years old or older; (ii) complete a psychological examination to determine readiness and fitness for surgery and necessary postoperative lifestyle changes, (iii) have a body mass index (BMI) of 40 or BMI equal to or greater than 35 in combination with one or more of the following co-morbid conditions: hypertension, a cardiopulmonary condition, sleep apnea, diabetes mellitus, or any life threatening or serious medical condition that weight has induced; (iv) complete a structured diet program in the two-year period that immediately precedes the request for the bariatric procedure by participation in either (x) one structured diet program for six consecutive months or (y) two structured diet programs for three consecutive months; and (v) the Covered Medical Expenses must be incurred through a Preferred Provider Organization. Coverage for FDA approved bariatric procedures is not available to Dependents of Eligible Employees or to Pensioners or Dependents of Pensioners.

Adopted in Principle: January 1, 2020
Effective Date: January 1, 2020
Language Approved: February 20, 2020

H. Marshall Ainley, Chairman
Edward Hanley, Secretary