

**To:** Participants of the UNITE HERE Local 11 Health Benefit Fund and their eligible Dependents and COBRA Beneficiaries

**From:** The Trustees of the UNITE HERE Local 11 Health Benefit Fund

JUNE 2026

# Infertility treatment coverage added to all plans!

## Summary of Material Modifications (SMM)

The Board of Trustees of the UNITE HERE Local 11 Health Benefit Fund is pleased to announce the following changes and improvements to the UNITE HERE Local 11 Health Benefit Plan for members enrolled in the MLK Care medical plan, Kaiser Permanente medical plan and HealthNet medical plan. Unless stated otherwise, these changes will go into effect on June 1, 2026.

This SMM supplements the summary plan description dated July 1, 2021 ("SPD"). You should retain this document with your copy of the SPD.



**OH BABY!  
GREAT NEWS!**

Coverage for services to diagnose and treat infertility have been added to all plans. Including:

- Labs & imaging
- Medications, artificial insemination and in vitro fertilization
- Up to three oocyte retrievals per lifetime.

*See changes listed below for more information.*

## MLK CARE

### The following changes apply to members enrolled in the Martin Luther King Community Healthcare Program (MLK Care medical plan):

The Infertility treatment exclusion on page 35 of the Summary Plan Description is eliminated,

- Infertility treatment, including, but not limited to, artificial conception processes (such as in vitro fertilization, gamete intrafallopian transfer (GIFT), zygote intrafallopian transfer (ZIFT), and embryo transplants), fertility drugs, artificial insemination, reversal of a voluntary sterilization procedure, surrogate mothers/pregnancy, donor eggs, or sperm banks.

and a new benefit section is added as summarized below:

### Fertility and Family Building Benefit

Effective June 1, 2026, a new Fertility and Family Building Benefit will be available to all eligible participants enrolled in the MLK Care medical plan (members, dependent spouses/domestic partners, and dependent children under age 26). The Trust has contracted with Progyny to facilitate this benefit and provide you support.

This benefit includes comprehensive treatment coverage (including related medications) through the Progyny Smart Cycle, access to top fertility specialists across the U.S., and unlimited concierge support from a dedicated Patient Care Advocate (PCA). There is no cost to you for each Smart Cycle, and over your lifetime, you may complete up to 3 Smart Cycles.



## Why Progyny?

Progyny's Smart Cycle solution provides comprehensive, equitable and inclusive support for every path to parenthood, including:

- **Concierge support:** Match with a Progyny Care Advocate (PCA), a fertility expert trained to support all paths to parenthood including adoption and surrogacy
- **Family planning and trying-to-conceive resources:** Access personalized guidance for ovulation tracking, nutrition, and mental health, including coverage for male and female fertility testing and genetic carrier screening.
- **Care from top fertility specialists:** Access a network of top Reproductive Endocrinologists and Reproductive Urologists (male reproductive health specialists) across the U.S.
- **Financial coverage for fertility treatment: (e.g., IUI, IVF):** There is no copay for treatments offered through the Progyny Smart Cycle.
- **Progyny Rx:** Progyny Rx works seamlessly with your fertility benefit, requiring a single authorization for both your fertility treatment and your related medications.
- **Doctor-approved resources:** Explore an on-demand library of doctor-approved educational resources you can trust to support your journey.
- **Male reproductive care:** Get coverage for fertility testing/diagnostics and treatment, and hormone management to support hormone levels that may impact conception.

## What will this benefit cost me?

There is \$0 copay for each Smart Cycle, and each eligible participant may complete up to 3 Smart Cycles over their lifetime.

## Who is eligible for the benefit?

Enrolled MLK Care medical plan participants, their dependent spouses/domestic partner, and dependent children under age 26.

## Are medications included?

Yes! Medication that is required with treatment will be coordinated directly through Progyny (not Express Scripts), and there is no copay for medications authorized through the Smart Cycle program.

## How do I find out more?

Starting June 1, 2026, you can contact Progyny at (866) 960-0869 or scan the QR code to learn more.

If you have eligibility or other questions, contact Member Services at (833) 961-3021.





## The following changes apply to members enrolled in Kaiser Permanente medical plan:

Please note: Kaiser Permanente has made the following updates to the Evidence of Coverage (EOC) for this Plan:

In accordance with state law SB 729, effective June 1, 2026, the "Fertility Services" and "Outpatient Pharmacy Services" sections of the non-Medicare EOC's include coverage for the following services:

- Services required to diagnose infertility, including laboratory and imaging services
- Services to treat infertility, including medications, artificial insemination, and in vitro fertilization.

**Changes include up to three oocyte retrievals per birthing participant's lifetime.**

The cost share for fertility services will be the same as the cost share for those services when provided for non-fertility related conditions.



## The following changes apply to members enrolled in Health Net medical plans:

The following changes were made to the Health Net Evidence of Coverage and Plan Document dated July 2025:

	<b>SIMNSA</b> (effective January 1, 2026)	<b>Salud Network</b> (effective July 1, 2025)
Infertility services (all covered services that diagnose, evaluate or treat Infertility)	50%*	See note below**

### Note(s):

Through the Salud Network, infertility services include Prescription Drugs, professional services, inpatient and outpatient care and treatment by injections.

Injections for Infertility are covered only when provided in connection with services that are covered by this Plan.

Infertility services (which include GIFT, IVF, and ZIFT, limited to 3 completed oocyte retrieval cycles per birthing participant's lifetime) and all covered services that prepare the Member to receive these procedures are covered through the Salud Network only for the Health Net Member.

Refer to the "Infertility Services" and "Fertility Preservation" provisions in the "Covered Services and Supplies" section and the "Exclusions and Limitations" section for additional information.

\*Only services that diagnose Infertility are covered under the SIMNSA tier of your Plan. All other Infertility services are not covered under the SIMNSA tier of your Plan.

\*\* Applicable Deductible or Copayment requirements apply to any services and supplies required for Infertility services. For example, if the Infertility service requires an office visit, then the office visit Copayment will apply.