



NATIONAL AUTOMATIC SPRINKLER INDUSTRY WELFARE FUND • PENSION FUND



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IMPORTANT NOTICE FOR ACTIVES, PRE-MEDICARE RETIREES, AND PRE-MEDICARE ELIGIBLE DEPENDENTS NEW ID CARD | NEW UTILIZATION REVIEWER AND CASE MANAGER EFFECTIVE FEBRUARY 1, 2026

January 2026

Dear Participant:

The Trustees of the National Automatic Sprinkler Industry (“NASI”) Welfare Fund have retained a new utilization reviewer and case manager, Acentra Health (“Acentra”), for pre-Medicare participants effective February 1, 2026.

EXECUTIVE SUMMARY

• In General

- Acentra is replacing American Health Holding (“AHH”) as the Fund’s utilization reviewer and case manager.
- This change is effective February 1, 2026.
- AS A RESULT, YOU WILL BE ISSUED A NEW NASI MEDICAL ID CARD FROM BLUE CROSS BLUE SHIELD. YOUR NEW ID CARD WILL INCLUDE ACENTRA’S PHONE NUMBER ON THE BACK OF THE CARD. YOU SHOULD EXPECT TO RECEIVE YOUR NEW ID CARD WITHIN THE NEXT FEW WEEKS.

• Utilization Review

- The Fund will use Acentra’s utilization review services to determine whether medical services you receive are Medically Necessary and covered by the Fund’s plan of benefits.
- Acentra’s utilization review services include optional pre-service evaluations.
- An optional pre-service evaluation is a review of medical treatment in advance to determine the likelihood of whether it will be covered. You or your doctor may request such a non-binding and free assessment by calling 888-264-9903. Optional pre-service evaluations are highly encouraged but not required.
- For instance, if you need surgery or anticipate staying at the hospital, we strongly encourage you or your doctor to contact Acentra in advance of your procedure or hospital admission.

• Case Management

- Acentra also offers case management. Case management is a valuable service intended to help you navigate the healthcare system, especially if you have a serious illness or complex medical situation.
- For example, if you are hospitalized, a case manager can serve as your advocate, coordinate your treatment plan with your doctor, and help address your questions.
- A case manager may contact you or your doctor directly if you or your doctor contacts Acentra in advance of a planned hospital admission or surgical procedure. In addition, a case manager may contact you directly based on a review of your medical claims, if, for instance, you make repeated visits to the emergency room. In that case, Acentra may contact you to discuss alternate, less expensive settings for future treatment, depending on your individual circumstances.
- If you have an ongoing case managed by AHH, your case will be closed with AHH and transferred to Acentra. Acentra will contact you regarding your case, but you should feel free to contact Acentra in the meantime to discuss your situation.
- You may contact Acentra about case management by calling 888-264-9903.

ADDITIONAL INFORMATION RELATED TO THE EXECUTIVE SUMMARY

New Medical ID Cards

In the coming weeks, you will receive a new NASI medical identification card directly from Blue Cross Blue Shield that includes Acentra's contact information on the back of the card. Per usual, please present this card when seeking treatment at your doctor's office, urgent care center, hospital, or other covered healthcare setting. You should also present it at your pharmacy when filling a prescription.

Utilization Review

Acentra offers utilization review services, including optional pre-service evaluations. The purpose of an optional pre-service evaluation is to inform you of the *likelihood* of whether a contemplated service, such as a hospital admission or surgical procedure, meets the Fund's Medical Necessity standard and other rules for coverage. Such advance determination is not required. However, it may be advisable to use this non-binding and free service. With this in mind, we strongly encourage you to obtain an optional pre-service evaluation for the following services:

- Inpatient Services
- Intensive Outpatient Services
- Surgical Procedures
- Diagnostic Testing
- Skilled Nursing Facility (SNF)
- Durable Medical Equipment (DME)
- Private Duty Nursing
- Long-Term Acute Care (LTAC)
- Home Infusions
- Hospice
- Therapies (Physical, Speech, Occupational)

If your service is not listed above, you may still ask Acentra to perform an optional pre-service evaluation. In addition, for clarity, an optional pre-service evaluation is not a guarantee nor denial of benefits. If the evaluation is negative, you are still free to obtain the service and submit a claim, which will be evaluated based on, among other things, the information submitted in support of the claim.

You or your provider may request an optional pre-service evaluation from Acentra by calling 888-264-9903 or by visiting NASIfund.Acentra.com.

Case Management

Healthcare is complicated and it is common to be confused about how to navigate working with healthcare professionals and resources. You may not know who to talk to, what questions to ask, or where to go for help.

Acentra case managers can help you make informed decisions in consultation with your doctor about your treatment. The goal of case management is to provide you with education and support for your healthcare needs. Case managers include registered nurses and licensed clinical social workers, and their assistance is offered at no cost to you. Acentra's case management team uses a collaborative process—between you, your provider, and your case manager—to assess, plan, facilitate, and advocate to ensure your care is well-coordinated and effective.

You or your provider may contact Acentra directly for case management services at 888-264-9903 or Acentra may independently contact you based on your prior health claims. For example, if you receive repeated treatment at an emergency room, Acentra may contact you to discuss alternate, less expensive settings for future care.

If you have an ongoing case managed by AHH, your case will be closed with AHH and transferred to Acentra. Acentra will contact you regarding your case, but you should feel free to contact Acentra in the meantime to discuss your situation.

Conclusion

As always, if you have any questions about this correspondence, or the Fund in general, please feel free to contact the Fund Office.

This notice, known as a summary of material modifications, is intended as a non-technical summary of certain changes to the rules of the NASI Welfare Fund, so it does not contain all the details. It modifies the information set forth in the Fund's Summary Plan Description and Plan Document ("Plan") that was previously provided to you. In the event of a discrepancy between this notice and the official Plan document, the official Plan document, as interpreted and applied solely by the Trustees pursuant to their exclusive discretionary authority, will prevail. The Trustees reserve the right to modify the official Plan document and the benefits offered by the NASI Welfare Fund at any time. This notice applies only to active employees, pre-Medicare eligible retirees, and pre-Medicare eligible dependents. It does not apply to Medicare-eligible participants covered by Aetna's Medicare Advantage and Prescription Drug Program.