

HARRISON TRUST

A FAMILY HEALTH PLAN

WWW.HARRISONBENEFITS.ORG

The Harrison Electrical Workers Self-Funded Trust Plan will waive deductibles and co-pays for COVID-19 testing effective February 11, 2020. READ BELOW FOR ALL BENEFIT UPDATES ON TESTING, PRESCRIPTION, DISABILITY, AND FLEX PLAN BENEFITS.

<u>UPDATES ON WEBSITE</u> – The Harrison website is regularly being updated with information on COVID-19. Also, you are able to obtain all forms from the documents page, and information about your contributions, eligibility, dependents, and claims by logging in. If you have never before used the website, the login process is being changed to a self-registration process. This is anticipated to be completed within the next week.

Interim COVID-19 Benefit for the Trust Plan

The Board of Trustees of the Harrison Electrical Workers Trust ("Trust") approved an interim COVID-19 Benefit, as summarized below. The benefit improves coverage for testing and related provider visits needed for the test. This enhanced coverage is effective February 11, 2020 and you will be notified if the COVID-19 Benefit Period ends.

■ TESTING UNDER THE TRUST PLAN BENEFITS- In-network and out-of-network medical deductibles and copays are waived for the interim COVID-19 Benefit with no-preapproval necessary. The COVID-19 Benefit includes the following, if medically necessary: provider ordered medically approved COVID-19 testing; provider visit for the test, associated lab testing and radiology services in an in-network or out-of-network hospital, emergency or urgent care facility or medical office; follow-up tests and provider visits for tests. All other treatments and services, including hospitalization costs and prescriptions, continue to be subject to the usual benefit limitations and cost shares. Providence and Kaiser have made similar changes to their benefits. For details contact your plan.

If your employer sends you home as you are believed to be ill and the employer requires a doctor's note to return to work, the Trust will pay for this visit at 100%. For this to happen, the doctor's bill must be coded for COVID-19 or **you should use the Teladoc services**.

PRESCRIPTIONS - Effective immediately you are allowed to obtain a one-time refill of your covered prescription medications (except opioids) prior to the expiration of the waiting period between refills. To obtain an emergency override, participants must contact Providence to obtain an override with an explanation they are ill or quarantined due to COVID-19.

- **TIME LOSS** Effective February 11, 2020 if you are unable to work due to having or being exposed to COVID-19 (sick or not disabled, but Quarantined) and certified by a physician, you may qualify for Time Loss benefits. You may also qualify for FMLA or Disability Waivers, and Flex Plan Supplemental Short-Term Disability benefits from your Flex Plan Wage Replacement Account subject to the terms and conditions set forth in the Summary Plan Description. (See more detail of this benefit at end of this letter).
- FLEX PLAN Effective February 11, 2020, if you are sent home from work due to COVID-19, you will not be required to sign the books in order to be paid Supplemental Unemployment from your Flex Plan Wage Replacement Account. You will still need to turn in your Flex claim form, apply for and receive State Unemployment, but you will not have to sign the books at Local 48.

<u>Teladoc – Virtual Doctor Visits ARE FREE TO YOU</u> <u>PTELADOC.</u>

To assist you in receiving needed healthcare during this time, remember you can have an office visit 24/7 by phone, video or mobile app. This is available through Teladoc Health and the visit is no cost to you. Simply call 855-835-2362 to set up a visit, or go online at www.teladoc.com, or download the app. They are experiencing high call volumes at this time, so wait times will be higher than normal. To register you will need your name as spelled on your medical ID card, your date of birth, and your zip code must match Trust records. We encourage you to utilize the Teladoc service to satisfy return to work and benefit eligibility requirements.

The Trust will pay your office visit costs at 100% if an employer is requiring you to have a doctor's note to return to work. Note that the simplest and cheapest way to do this is with Teladoc.

Kaiser offers telehealth. For more information please visit www.kp.org or call 800-813-2000 to set up a visit. Visits are subject to the usual benefit limitations and cost shares.

Providence Health Plan offers telehealth. This is available through Providence Express Care Virtual and the visit is no cost to you. Simply go online www.Virtual.Providence.org to set up a visit.

Cascade Centers Employee Assistance Program

To assist you in maintaining emotional-well being during the COVID-19 outbreak, remember you have access to resources through Cascade EAP. For more information or to set up an appointment call 800-433-2320 or email info@cascadecenters.com. This is free for up to 3 visits (can be virtual) for each person in the family and is available under Trust, Providence, or Kaiser health plans.

COVID-19 Symptoms & NURSELINE

The COVID-19 virus is not fully understood at this time. The Centers for Disease Control and Prevention (CDC) states that coronavirus symptoms may appear in as few as two days, or as long as 14 after exposure. Symptoms can vary by person, usually starting with a fever, followed by a dry cough. Some individuals may have some or none of the symptoms. In some cases, the symptoms may progress to severe acute respiratory infections.

Trust members who may have been exposed to COVID-19 or who have symptoms, such as coughing or a fever, are encouraged to contact their healthcare provider. But, before going into a doctor's office or emergency room, call ahead and tell the facility about the symptoms and any recent travel. Innovative Care Management's **24/7 Nurseline** (800-862-3338) is also available to help Trust members.

TIME LOSS

Effective February 11, 2020 the Time Loss benefit will pay if You are not Disabled and are quarantined due to COVID-19. To be eligible for this benefit, You must meet the conditions shown below:

- Meet the eligibility requirements for Time Loss as outlined in the Summary Plan Description;
- You are involuntarily and necessarily house confined by order of the Board of Health, the U.S. Secretary of Health and Human Services, the CDC, an official health authority, or a Doctor;
- You must provide proof of the quarantine order;
- You must not be Disabled; and
- You must remain under quarantine during the waiting period required and continue to remain under quarantine after the waiting period.

The benefit is \$400 per week. The maximum period of payment is 8 weeks. Successive periods of confinement due to Quarantine will be treated as one period of confinement unless the period of confinement is separated by more than 8 consecutive weeks.

Questions?

Please see complete information about Plan benefits, your contributions, eligibility, dependents, and claims on the website at www.harrisonbenefits.org.