## **Sheet Metal #10 Benefit Fund**

OFFICE OF THE ADMINISTRATOR 1681 East Cope Ave, Suite B, Maplewood, MN 55109 651-770-0991 Fax 651-770-1351 1-800-396-2903

#### **March 2020**

# IMPORTANT ANNOUNCEMENT FOR ACTIVE AND PRE-MEDICARE RETIRED PARTICIPANTS

## **Summary of Material Modifications**

The Trustees of the Sheet Metal #10 Benefit Fund announce the following changes to the Plans for both Active and Pre-Medicare Retired Participants. The changes relate to coverage of certain services related to COVID-19. These changes are effective March 18, 2020.

Specifically, the Plans have extended coverage at 100% with no cost-sharing as follows:

#### **COVID-19 Testing**

- The Plan will cover 100% of the cost:
  - o For in vitro diagnostic testing for the COVID-19 virus that is either:
    - authorized by the FDA, or
    - otherwise specifically authorized by federal law or regulation.

A covered test is referred to herein as a "COVID-19 Test";

- For evaluation by a healthcare provider to determine whether you need a COVID-19 Test; and,
- For services to administer a COVID-19 Test.
- Coverage for this amendment applies without regard to whether the COVID-19 Test is provided in-network or out-of-network. For out-of-network charges, the Plan will cover the full billed amount regardless of whether the amount exceeds the reasonable and customary amount. No prior authorization or medical management requirements apply to in vitro diagnostic testing for the COVID-19 virus. Coverage under this amendment applies without regard to the site of care (e.g., office, urgent care, emergency room, e-visits). The coverage under this amendment does not apply to any items and services you receive during a visit to a healthcare provider other than those expressly described above.
- Participants are strongly encouraged to contact their doctor for guidance before seeking COVID-19 testing.
- Coverage for this amendment applies through December 31, 2020.

#### **Telehealth Services Related to COVID-19**

The Plan currently covers telehealth medical visits through Doctor on Demand at 100%.

<u>Telehealth – COVID-19 Related Visits:</u> Effective March 18, 2020, the Trustees are temporarily expanding the Plan's telehealth visit benefit for COVID-19 related visits. Specifically, the Plan will cover telehealth medical visits related to COVID-19 at 100% regardless of whether the provider is in or out-of-network. This temporary expansion of coverage for COVID-19 telehealth visits will last through December 31, 2020.

<u>Telehealth – Non-COVID-19 Visits</u>: Effective March 18, 2020, the Trustees are temporarily expanding the Plan's telehealth benefit to provide 100% coverage with no cost-sharing for all in-network medical and behavioral health visits not associated with the diagnosis of COVID-19. Out-of-network telehealth visits, other than for COVID-19 related visits, are not covered by the Plan. This temporary expansion of the telehealth benefit will remain in effect through June 30, 2020.

Participants are strongly encouraged to contact their doctor for guidance before seeking COVID-19 testing.

#### **COVID-19 Information**

The available information about how the virus that causes COVID-19 spread is largely based on what is known about similar coronaviruses. However, COVID-19 is a new disease and there is more to learn about its transmission, the severity of illness it causes, and to what extent it may spread in the United States. According to the CDC, a person may develop symptoms of the COVID-19 virus within 14 days of exposure. Symptoms include feeling sick with an acute respiratory illness, such as a fever, cough, or difficulty breathing. As there is no present vaccine to prevent COVID-19, the CDC recommends the following to prevent the spread of the virus:

- 1. Wash hands often with soap and water for at least 20 seconds, and if soap and water are not available, use an alcohol-based hand sanitizer with at least 60% alcohol;
- 2. Avoid touching eyes, nose, and mouth with unwashed hands;
- 3. Avoid close contact with people who are sick;
- 4. Stay home when sick;
- 5. Cover coughs or sneezes with tissues or cough into the elbow area, then discard the tissue in the trash and follow up with handwashing; and
- 6. Clean and disinfect frequently touched objects and surfaces regularly

More information about COVID-19 may be found at the following links:

- Centers for Disease Control and Prevention: www.cdc.gov
- Minnesota Department of Health: https://www.health.state.mn.us/
- MN Building Trades: https://mntrades.org/covid-19-resources/
- World Health Organization: https://www.who.int
- Doctor on Demand (self-assessment tool): https://www.doctorondemand.com/coronavirus

Members are encouraged to visit the Plan's website at http://smw10.org/Benefits for further updates.

#### STATEMENT OF NONDISCRIMINATION

The Sheet Metal #10 Benefit Fund ("Fund") complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. The Fund does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

The Fund provides free aids and services to people with disabilities to effectively communicate with us, such as:

- Qualified sign interpreters
- Written information in other formats (large print, audio, and accessible electronic formats)
- Provides free language services to people whose primary language is not English, such as:
  - Qualified interpreters
  - o Information written in other languages

If you need any of the above noted services, contact the Plan Administrator at 952-854-0795.

If you believe that the Fund has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can contact the Plan Administrator at 952-854-0795 or you may file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <a href="https://ocrportal.hhs.gov/ocr/portal/lobby.jsf">https://ocrportal.hhs.gov/ocr/portal/lobby.jsf</a>, or by mail or phone at:

U.S. Department of Health and Human Services 200 Independence Avenue, SW Room 509F, HHH Building Washington, DC 20201 1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html

### Minnesota/North Dakota/South Dakota Languages

Language	Translation
English	Attention: If you speak (insert language), language assistance services, free of charge, are available to you. Call 1-952-854-0795.
Spanish	Atención: Si usted habla (español), tenemos disponible para usted el servicio de ayuda en su idioma sin costo alguno. Llame al 1-952-854-0795.
Hmong	Faj Seeb: Yog hais tias koj hais (Hmoob), kev pab cuam pab txhais lus, dawb tsis tau them, yeej muaj muab rau koj. Hu 1-952854-0795.
Cushite	Hubachiisa: Yoo kan afaan Oromoo dubbattan ta'e tajaajilli gargaarsa hiikoo afaanii ni argattu. Lakk. 1-952-854-0795 tiin bilbilaa.
Vietnamese	Nếu quý vị nói (tiếng Việt), chúng tôi có dịch vụ hỗ trợ ngôn ngữ sẵn sàng phục vụ quý vị miễn phí. Vui lòng gọi: 1-952-854-0795
Chinese	请注意:如果您讲中文,则您可以获得免费的语言协助服务。请致电: 1-952-854-0795。

Внимание: Если Вы говорите на (Русском), услуги лингвистической

поддержки доступны Вам бесплатно.

Звоните 1-952-854-0795.

ໝາຍເຫດ: ຖ້າທ່ານເວົ້າພາສາລາວ,

Laotian ມີການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາໂດຍບໍ່ເສຍຄ່າໃຫ້ແກ່ທ່ານ. ໂທຫາ 1-952-

854-0795.

Russian

Amharic ማሳሰቢያ: የሚናንሩት (አማረኛ) ቋንቋ ከሆነ ከክፍያ ነጻ የሆነ የቋንቋ እንዛ አንልግሎት

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Hinweis: Wenn Sie (Deutsche) sprechen, stehen Ihnen kostenlose

German Sprachhilfsdienste zur Verfügung. Rufen Sie unter 1-952-854-0795 an.

ចំណាំ៖ ប្រសិនបើអ្នកនិយាយ (ភាសាខ្មែរ)

Cambodian សេវាកម្មជំនួយខាងភាសាដោយឥតគិតថ្លៃនឹងមានសម្រាប់អ្នក។ សូម

ទូរស័ព្ទទៅកាន់ 1-952-854-0795 ។

ملاحظة: إذا كنت تتحدث (العربية)، فيرجى العلم بأنه يمكنك الاستفادة من خدمات المساعدة اللغوية

مجانًا. اتصل بالرقم: 1-952-854-0795.

Attention : Si vous parlez (Français), des services langagiers vous sont offerts

French gratuitement. Veuillez composez le 1-952-854-0795.

참고: 한국어 지원 서비스를 무료로 제공합니다. 문의전화 1-952-854-

0795

Attention: Kung nagsasalita ka ng (Tagalog), may magagamit kang mga

Tagalog libreng serbisyo sa wika. Tumawag sa 1-952-854-0795.

#### Notice Regarding "Grandfathered" Status

This notice must accompany any Plan materials that are sent to participants.

The Sheet Metal #10 Benefit Fund believes its plan of benefits is a "grandfathered health plan" under the Patient Protection and Affordable Care Act (the Affordable Care Act). As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan means that the Sheet Metal #10 Benefit Fund may not include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for the provision of preventative health services without any cost sharing. However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, for example, the elimination of lifetime limits on benefits.

Questions regarding which protections apply and which protections do not apply to a grandfathered health plan and what might cause a plan to change from grandfathered health plan status can be directed to the Plan Administrator at Sheet Metal #10 Benefit Fund, Attn: Plan Administrator, 1681 East Cope Avenue, Suite B, Maplewood, MN 55109; (651) 770-0991. You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at 1-866-444-3272 or www.dol.gov/ebsa/healthreform. This website has a table summarizing which protections do and do not apply to grandfathered health plans.