

March 2020

## Coronavirus (COVID-19) Diagnosis and Testing

Helping you understand your **Employee Security Fund Health & Welfare Plan (ESF)** benefits:

Call your doctor if you are experiencing symptoms of coronavirus. Your doctor will determine whether you need to be tested.

**Until further notice you will NOT be subject to a copayment in the following situations:**

- **Doctor's office (including both in-person and telehealth visits)** – The \$50 copayment for the doctor's visit will be waived **if you are diagnosed with the virus that causes COVID-19** or if you receive a COVID-19 diagnostic test.
- **Urgent care center** – The \$50 copayment for the urgent care center visit will be waived **if you are diagnosed with the virus that causes COVID-19** or if you receive a COVID-19 diagnostic test.
- **Emergency room** - The \$100 copayment will be waived **if you are diagnosed with the virus that causes COVID-19** or if you receive a COVID-19 diagnostic test. The inpatient hospital copayment will apply if you are admitted.

Please note that if you use an out-of-network doctor or urgent care center you will be responsible for any charges that are in excess of the Network Fee Schedule. This is known as "balance billing."

- **Diagnostic Lab** – The \$30 copayment for lab work will be waived if you receive a COVID-19 diagnostic test from a Network lab. **At this time, COVID-19 testing is not being administered at free-standing laboratories such as LabCorp and Quest Diagnostics. If and when testing becomes available at free-standing Network labs, there will be no participant copayment. Please note that the Plan will not pay for tests performed by non-Network labs.**

**Additionally, preauthorization requirements for any hospital-based COVID-19 testing and related items or services will be waived.**

**The changes listed above are effective until either the national emergency declared by the President or the public health emergency declared by the Secretary of the U.S. Department of Health and Human Services is lifted.**

Please note that copayments will still apply for office, urgent care center, and emergency room visits and for diagnostic tests for any other reason. For example patients seeking care for conditions unrelated to COVID-19 would be subject to any applicable copayment.

The Plan is committed to easy access to information, care, benefits, and service for our members, and ensuring you can access the care you need.

**You can call the MagnaCare ESF dedicated line at 1-877-548-0138 with any additional questions or concerns.**

## **“Grandfathered” Plan Status**

The Employees Security Fund of the Electrical Products Industries Health and Welfare Plan believes this Plan 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 your plan may not include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for the provision of preventive 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 the Joint Industry Board of the Electrical Industry at 718-591-1100. 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](http://www.dol.gov/ebsa/healthreform). This website has a table summarizing which protections do and do not apply to grandfathered health plans