June 2020

Extended COBRA and Claims and Appeals Deadlines During the COVID-19 Emergency Period

Dear Participant:

We are pleased to advise you about recent relief provided by the U.S. Departments of Labor and Treasury in light of the challenges facing many of us due to COVID-19, following the President’s declaration of a National Emergency for COVID-19. The relief provides a number of extensions of deadlines for you to take various actions related to the Employees Security Fund of the Electrical Industries – Health and Welfare Plan (the “Plan”).

The Plan will disregard the period from March 1, 2020 until sixty (60) days after the announced end of the COVID-19 National Emergency in determining the following periods and deadlines:

- The 60-day period for electing COBRA continuation coverage, as well as the date for making COBRA premium payments, although you will still be required to make full payment of the COBRA premiums retroactive to the first day for which you are eligible for COBRA coverage, if you elect it. You cannot simply pay the COBRA premium for a single month when you have expenses. To be covered for any month in the extended COBRA election and payment period, you must pay the premium for that month and all preceding months.

- The date to notify the Plan of a COBRA qualifying event or determination of disability.

- The deadline for individuals to file a claim for benefits under the Plan’s claims procedure.

- The deadline for claimants to file an appeal of an adverse benefit determination under the Plan’s claims procedure.

Note that the National Emergency may end on different dates for different states or geographic reasons, as the federal government may decide.

Please see the Plan SPD for additional information regarding COBRA, and the Plan’s claims and appeals procedures.

Sincerely,

Trustees of the Employees Security Fund of the Electrical Products Industries - Health & Welfare Plan
Grandfathered Plan Status

The Employees Security Fund of the Electrical Products Industries – Health & 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. This website has a table summarizing which protections do and do not apply to grandfathered health plans.