COVID-19 Pandemic – What We’re Doing to Help Our Boilermaker Families

COVID-19 Hours (non-premium based active eligible participants)

Due to the Novel Coronavirus (COVID-19) pandemic, the Health & Welfare Board of Trustees have taken unprecedented action to ensure qualifying participants do not lose Health & Welfare Plan coverage. Participants who qualify, will be granted 300 hours to meet continuing coverage requirements. Any COVID-19 hours that are granted in excess of continuing coverage requirements will be applied to the reserve bank. COVID-19 hours will be granted in whole and limited to once per lifetime per qualifying participant.

Qualifying Participants

Qualifying Participants for COVID-19 hours are:

- Covered by an alumni agreement, collective bargaining agreement, or a non-bargaining unit participation agreement; and
- An eligible employee covered under active H/G/GR coverage for the February 1, 2020 - April 30, 2020 benefit quarter through hours of work or reserve bank hours.

Non-Qualifying Individuals

- A retiree who has been awarded an annuity starting date (ASD) or disability entitlement date
- Participants eligible in accordance with Article 13 Active M coverage
- Participants eligible in accordance with Article 20 COBRA continuation coverage
- Participants eligible in accordance with Article 23, Section 23.1. Disability Credit Hours
- Dependents eligible in accordance with Article 22, Section 22.1.(a) Surviving Dependent Extension of Active Coverage

Granted Hours

Granted COVID-19 hours will be the same coverage type that the qualifying participant is eligible for as of April 30, 2020 or immediately following the preceding benefit quarter in which COVID-19 hours are granted. For example, if a qualifying participant is eligible for active G coverage as of April 30, 2020, he or she will be granted COVID-19 hours towards active G coverage.

How COVID-19 Hours Are Applied

To allow 300 COVID-19 hours to be applied in whole, the following will be used to determine the date in which hours will be applied:

As of April 30, 2020, if a qualifying participant’s reserve bank hours are:

1) **600 hours or less**, 300 COVID-19 hours will be granted to continue coverage or will be credited towards reserve bank. Granted hours will be applied towards the January 1, 2020 - March 31, 2020 eligibility quarter to continue coverage in a future benefit quarter; or are

2) **More than 600 hours**, 300 COVID-19 hours will be granted towards the eligibility quarter in which the number of reserve bank hours are 600 or less; or

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1 Article and section references can be found in the 2018 Evidence of Coverage and Summary Plan Description (SPD) and its amendments at www.bnf-kc.com, under downloads.
As of April 30, 2020, a Participant is not eligible for coverage but:

3) **Hours of work are contributed after April 30, 2020 towards the eligibility quarter of January 1, 2020 - March 31, 2020** that provides the required number of hours to meet eligibility requirements for a qualifying participant, COVID-19 hours will be granted as stated in numbers one and two listed above, provided the hours of work are received before the sunset date of April 30, 2022.

**Sunset**

Any COVID-19 hours that have not been granted as of April 30, 2022 will be forfeited.

**Questions**

If you have questions regarding this benefit, please call 866-342-6555.

**COVID-19 Diagnostic Visits and Testing**

Diagnostic visits for COVID-19 with in-network providers, whether at a provider’s office, urgent care center, or emergency room are payable at 100% of covered expenses. In addition, FDA-approved testing is payable at 100% of covered expenses.

**Questions**

If you have questions regarding this benefit, please call Cigna at 800-235-7748.

**No Pre-authorization Required**

For services received in the state of New York, notification requirements and utilization management review requirements for COVID-19 medical care are not required through May 31, 2020.

**Questions**

If you have questions regarding this benefit, please call Cigna at 800-235-7748.

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2 The information described under COVID-19 Diagnostic Visits and Testing and No Pre-authorization Required is not applicable for individuals who have coverage under the Fund’s Medicare Advantage Plan administered through United HealthCare (UHC). These individuals can learn more about the resources available to them at [www.uhc.com/health-and-wellness/health-topics/covid-19](http://www.uhc.com/health-and-wellness/health-topics/covid-19).