



## SOUTHERN CALIFORNIA DRUG BENEFIT FUND

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### Notice of End of COVID 19 Federal Public Health Emergency and National Emergency

The Southern California Drug Benefit Fund (the “Fund”) provided additional benefits during the federal COVID-19 pandemic Public Health Emergency, including COVID-19 testing and treatment at no cost share to participants as required by law. Fund participants were also given extensions on certain deadlines related to electing and paying for COBRA, filing claims and appeals, and other deadlines during the federal COVID-19 National Emergency.

This notice is to advise you that the benefits and coverage rules during the COVID-19 Public Health Emergency (PHE) and National Emergency (NE) are changing as described below since both PHE and NE have ended on May 11, 2023.

#### COVERAGE OF COVID-RELATED SERVICES

##### 1. *For Actives, Retirees and Covered Dependents in Indemnity PPO Plans*

The following coverage is in effect beginning May 12, 2023 for active and retired participants under the Indemnity PPO Plan.

- **COVID-19 Testing and Related Doctor’s Visits**—The Plans’ normal member cost-sharing (deductibles, coinsurance and copayments) apply to COVID-19 testing, antibody testing to determine whether you were previously infected with COVID-19, related office visits (including virtual and telehealth visits), urgent care and emergency room visits where the test is ordered or administered.
- **COVID-19 Vaccines**—COVID-19 vaccines will be covered as preventive care at no cost sharing if obtained from an in-network PPO provider or at a Participating Pharmacy. Vaccines obtained out-of-network will be subject to deductible and coinsurance.
- **Telehealth Visits**—Access to Anthem Live Health Online will continue to be available with the same cost-sharing as services and treatments rendered in person. Doctors are available 24/7 for virtual visits. Register your personal account on Anthem’s Sydney app.
- **OTC/At-Home COVID-19 Tests**—The Plan will cover two (2) at-home COVID-19 tests per person per month at no cost to you at Participating Pharmacies.

##### 2. *For Actives, Retirees and Covered Dependents in an HMO*

- As required by the State of California, your HMO plan will continue the same coverage for COVID vaccines, COVID testing, and COVID at-home tests as during the Public Health Emergency until November 11, 2023. Contact your HMO or your HMO doctor if you have any questions.

- **COVID-19 Vaccines** – COVID-19 vaccines will be covered as preventive care at no cost sharing if obtained from an HMO provider or at a Participating Pharmacy.

## **END OF OTHER COVID-19 RELATED ACCOMMODATIONS**

In the early days of the pandemic, certain plan rules were relaxed in light of shelter-in-place orders and the impact of the pandemic. As the pandemic has passed, note the following:

- Refill-Too-Soon limitations have been reinstated under the Indemnity Prescription Drug plan.
- To meet eligibility requirement, Actives must work the Qualifying Hours.

## **TEMPORARY EXTENSION OF CERTAIN PLAN DEADLINES DURING THE COVID-19 NATIONAL EMERGENCY (Applies to all Participants)**

During the National Emergency, the Plans' deadlines for participant filing of claims for benefits, electing and paying for COBRA continuation coverage, and requesting special enrollment were suspended until the earlier of: (i) one year from the date the participant(s) were first eligible for relief; or (ii) 60 days after the end of the National Emergency (May 11, 2023). Therefore, the deadlines will begin to run again starting July 10, 2023, if not already expired.

Subject to the end of the extensions explained in the paragraph above, the following regular Plan deadlines will resume:

### **1. Certain COBRA continuation coverage-related deadlines, including:**

- i. the 60-day period during which a qualified beneficiary may elect COBRA coverage;
- ii. the due dates for making COBRA premium payments; and
- iii. the date by which an individual must provide notice to the Plan of a COBRA qualifying event or a disability determination by the Social Security Administration.

### **2. HIPAA Special Enrollment Deadlines:**

- i. If you want to add a new Spouse/Domestic Partner/Dependent Child to your HMO coverage, you have 60 days from the date of the Qualifying Event.
- ii. If you want to add a new Spouse/Domestic Partner/Dependent Child to your PPO coverage, you have 90 days from the date of the Qualifying Event.
- iii. If you want to add a Spouse/Domestic Partner/Dependent Child because they lost other coverage, you have 30 days from the date they lost coverage.

### **3. ERISA Claims, Appeals, and External Review Deadlines, including:**

- i. the date by which a participant must file a claim for Plan benefits (normally 12 months);
- ii. the date by which a participant must file an appeal of an adverse determination (denial) of a claim for benefits (normally 180 days); and

- iii. the date by which a participant must file a request for an external review or file information to perfect an incomplete request for external review (when available) (normally four months).

**Please see the following examples for an explanation of how the end of the deadline extensions will work.**

*Example #1:* You received a denial of your benefit claim from the Fund on December 15, 2021. Under the usual Plan terms, you have 180 days to appeal that decision (that is, until June 13, 2022). However, under the extension guidance described above, the time period you have to file your appeal with the Plan is extended for one year, until December 15, 2022. This means that the 180-day period you have to appeal that adverse benefit determination now ends on June 13, 2023 (180 days after December 15, 2022).

*Example #2:* You received a COBRA notice on April 1, 2023. Under the usual Plan terms, you have 60 days to elect COBRA (that is, until May 31, 2023). However, under the extension guidance described above, the time period you have to elect COBRA is extended until July 10, 2023 (60 days after the end of the National Emergency), and so the 60-day period you have to elect COBRA now ends on September 8, 2023.

**Refer to your SPDs for the usual benefit claim-related deadlines that apply to your coverage(s) and the Plans.**