

INTERMOUNTAIN IRONWORKER'S TRUST FUND

Pension
Health and Welfare
Tax Deferral

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Summary of Material Modifications

March 2020

This is a Summary of Material Modifications (“SMM”) to the Ironworkers Intermountain Health & Welfare Plan and Summary Plan Description (“Plan”) dated November 1, 2016. This SMM describes changes to certain benefits under the Plan and other important information. Refer to the Plan, and other updates and SMMs, for a complete description of Plan benefits, coverage, limits, and exclusions.

Coverage of COVID-19 Testing and Related Items and Services

In compliance with the *Families First Coronavirus Response Act* and the *Coronavirus Aid, Relief, and Economic Security Act* (“CARES Act”), effective March 18, 2020, the Plan will cover testing for COVID-19 at 100% without participant cost-sharing through deductibles, co-payments, or co-insurance, and without requirements for prior authorization or other medical management. This includes diagnostic products to detect SARS-CoV-2 or to diagnose the COVID-19 virus as described in Section 3201 of the CARES Act.

Coverage also includes items and services furnished to you during health care provider in-person and telehealth visits, urgent care center visits, and emergency room visits that result in an order for or administration of a covered SARS-CoV-2 or COVID-19 diagnostic product to the extent the items and services relate to furnishing or administering the test or to evaluating your need for a test.

Note that Covered Charges to treat COVID-19 will be subject to the Plan’s normal cost-sharing requirements, including Plan deductibles, co-payments, and co-insurance, and subject to the Plan’s out-of-pocket maximums.

Prescription Drug Coverage

Those concerned with not being able to refill a medication should contact their pharmacy to determine whether the re-fill request can be accommodated sooner than allowed. It is the responsibility of the pharmacist to ensure filling the medication early is appropriate. A conversation with the pharmacist may be necessary. If the pharmacist approves the early refill, they have the instructions needed for processing your request.

Teladoc and other telehealth office visits

If you need medical support for a minor injury or illness, or believe you are experiencing symptoms of COVID-19, you may use the telemedicine services offered through Teladoc, which allows you and your family members to access free of charge a board-certified physician via phone or video 24/7. However, Teladoc physicians cannot currently order tests for COVID-19. Enclosed is information from Teladoc.

In addition, the Plan now covers video and telephone visits with your own health care provider as if the telehealth visit were an in-person office visit, effective for claims incurred on and after March 18, 2020 through December 31, 2020. Coverage is subject to the Plan’s other terms and conditions, such as medical necessity and cost sharing requirements. You should contact your health care provider directly for information on whether they offer telephonic or video office visits.

Precertification of Diagnostic Radiology

Precertification is required for all inpatient admissions and certain other services and supplies. Previously, the Plan would reduce its reimbursement of diagnostic radiology (PET, CT, nuclear cardiology procedures, MRIs) by \$200 if the procedure was not pre-certified. This \$200 reduction was eliminated for diagnostic radiology Covered Charges incurred on or after August 1, 2019. All of the Plan's other limits and exclusions (such as eligibility and Medically Necessary requirements) continue to apply.

If you have any questions, please contact the Administrative Office by telephone at 888-867-9510.