

TO: All Plan Participants  
FROM: Pima County or its designee  
DATE: 10/1/2020

# Summary of Material Modifications to the Pima County Employee Medical Plan

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**This Summary of Material Modification ("SMM") modifies some of the information contained in the Summary Plan Description ("SPD") for the Pima County Employee Medical Plan (the "Plan").**

This is a summary of the modifications that should be read in conjunction with the Summary Plan Description that has already been distributed to you.

Note: In the event of any discrepancy between this SMM and the SPD, the provisions of this SMM will govern.

## Modification(s)

- **Through December 31, 2020, the Plan will waive member cost sharing for any covered Behavioral and Mental Health telemedicine visits — regardless of diagnosis.** Member cost shares waived for all in-network outpatient behavioral and mental health telemedicine visits.
- **Through December 31, 2020, cost-sharing and copay waivers for COVID-19-related Inpatient treatment.** The Plan will waive cost-sharing and copays for inpatient hospital admissions related to COVID-19.

*Please Note: This SMM is intended to provide you with an easy-to-understand description of certain changes to the Welfare Benefit Plan (Plan). While every effort has been made to make these descriptions as complete and as accurate as possible, these SMM notice cannot contain a full restatement of the benefits covered in the Plan. In the event of any discrepancy between the SMM and the Summary Plan Description ("SPD"), the provisions of the SMM will govern. If any conflict should arise between the SMM and the Plan, or if any point is not discussed in the SMM or is only partially discussed, the benefit plan component documents of the Plan will govern.*

*The Plan Administrator or its duly authorized designee reserves the right, in its sole and absolute discretion, to amend, modify, or terminate the terms of the Plan.*

TO: All Plan Participants  
FROM: Pima County or its designee  
DATE: 06/22/2020

# Summary of Material Modifications to the Pima County Employee Medical Plan

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## **Modification(s)**

**Special Coverage Provision: COVID-19:** An Employee who is classified by the employer as an Eligible Employee on or after March 01, 2020, and who is furloughed, has a reduction in hours, or is on a leave of absence beginning on or after that date, due to the COVID-19 pandemic, shall be treated as an Employee on an approved temporary leave of absence for purposes of eligibility under the Plan and shall remain an Eligible Employee until (1) that Employee's furlough, reduction of hours, or leave of absence has ended and the Employee returns to a full-time schedule, or (2) the Employee's coverage terminates for other reasons set forth in the Plan including termination of employment. For any Employee affected by this provision, employer will pay the employer share of premiums and the Employee will pay their share of premiums at the same level of coverage for which the Employee is enrolled (e.g., individual coverage, individual plus spouse, individual plus child(ren), or individual plus family coverage). If the Employee's furlough, reduction of hour's, or leave of absence ends and the Employee resumes a full-time schedule, the Employee will again be subject to the standard eligibility terms of the Plan and will again be responsible for the Employee portion of premiums. At the time the Employee's coverage ends, the Employee may be eligible for continuation of coverage under COBRA and will be responsible for full cost of premiums (employer and Employee for the Employee's level of coverage) under the standard terms of the Plan.

**Effective March 6, 2020, health plan members have access to the following resources:**

- **The Plan will waive cost-sharing for all diagnostic testing related to COVID-19.** This policy covers the cost of a physician-ordered test and the office, clinic or emergency room visit that results in the administration of or order for a COVID-19 test. The test can be done by any approved laboratory. The policy also aligns with new Families First legislation and regulation requiring all health plans to provide coverage of COVID-19 testing without cost share. Per guidance from the Centers for Medicare & Medicaid Services (CMS), the Department of Labor and the Department of the Treasury, the Plan will cover serological (antibody) testing with no cost-sharing.
- **Through September 30, 2020, the Plan will waive member cost sharing for any covered telemedicine visits — regardless of diagnosis.** Health plan members should use telemedicine as their first line of defense in order to limit potential exposure in physician offices. Cost sharing will be waived for all Teladoc® virtual visits. Cost sharing will also be waived for real-time virtual visits offered by in-network providers (live video-conferencing and telephone-only telemedicine services). Members may use telemedicine services for any reason, not just COVID-19 diagnosis.
- **Cost-sharing and copay waivers for COVID-19-related treatment.** The Plan will waive cost-sharing and copays for inpatient hospital admissions related to COVID-19. This policy is effective through September 30, 2020.
- **Pharmacy – Early prescription refill** – All in-network pharmacies have the ability to enter early refill overrides for up to three (3) 30 days supplies on maintenance medications through June 14, 2020. This does not include controlled substances or specialty medications (with the exception of HIV and Transplant medications which are eligible for 30 day overrides). For any difficulties obtaining early refills, CVS members can call the CVS Customer Care number located on the back of their medical ID card for assistance.

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