



## IBEW LOCAL 595 TRUST FUNDS



### IBEW LOCAL 595 HEALTH & WELFARE TRUST

#### Summary of Material Modifications

July 2020

#### **NOTICE TO ALL PARTICIPANTS REGARDING**

*Adoption of Further Temporary Covid-19 ("Coronavirus") Extension Relief Plan  
Changes*

#### **FOR THE IBEW LOCAL 595 HEALTH & WELFARE PLAN**

The Trustees of the IBEW Local 595 Health & Welfare Trust Fund have approved additional changes to the Health & Welfare Plan ("Plan") in response to the continued significant impacts of the novel coronavirus disease, COVID-19, pandemic ("Coronavirus") on the construction industry, resulting in work shortages and layoffs in Covered Employment.

Effective immediately, your Board of Trustees has extended relief measures to assist Plan members impacted by the pandemic by extending eligibility for Plan coverage, as follows:

The Plan will provide full continuation coverage for the August 2020 coverage month, and 50% coverage for up to four months through the remainder of the 2020 calendar year (September, October, November, and December 2020), provided that your Dollar Bank reserves have been exhausted, and any of the following circumstances apply:

- You lose Plan coverage because of workforce reductions, furloughs, or layoffs related to the Coronavirus; or
- You are unable to work after testing positive for the Coronavirus; or
- You decline work or are unable to work due to having or being exposed to COVID-19 or are caring for family members who may be at higher risk for severe illness.)

For Plan members who are enrolled in a Buy Up Plan option, in order to receive the 50% Plan covered extended coverage months ("COVID 50% Subsidy"), you must submit payment for 50% of the Buy Up amount. For the August 2020 extended coverage month, the Buy Up payment will be waived.

If you have exhausted your Dollar Bank reserves and consequently lose eligibility for coverage months of September, October, November, and/or December 2020, the Fund Office will send you information regarding the payment due to Plan if you elect the COVID 50% Subsidy. Your payment must be received within 30 days from the date of the Plan's invoice. The Fund Office will also send you information regarding your COBRA entitlement, which you may elect if you decline or fail to timely submit payment for the COVID Subsidy. Note, however, that unlike COBRA continuation coverage, all

months of extended eligibility provided to you by the Board of Trustees due to the Coronavirus, including the COVID Subsidy coverage, will be deemed Active Coverage for Retiree Coverage crediting purposes under the Plan.

Finally, please note that you will not be eligible for continuation coverage under this Section if: your unemployment is voluntary or unrelated to the Coronavirus; or you have worked in non-Covered Employment for a non-signatory employer. Extended coverage will terminate during this period if you return to Covered Employment.

Please keep this Summary of Material Modification with your Summary Plan Description. These important changes affect the health benefits that are provided to you and your family. If you have any questions, please contact the Fund Office at (888) 512-5863 or (925) 208-9996.