

AMENDMENT NO. 20-5

TO THE

RULES AND REGULATIONS

OF THE

MEBA MEDICAL AND BENEFITS PLAN

At their April 22, 2020 meeting, the Trustees of the MEBA Medical and Benefits Plan (the “Plan”) amended the Plan’s Rules and Regulations to provide for coverage of SARs-CoV-2 and COVID-19 testing and coronavirus preventive services without imposing cost sharing requirements, effective March 18, 2020.

1. Effective March 18, 2020, Article VI, Section 3(e) shall be amended to add new paragraphs (38), (39), and (40) to read as follows:

- (38) SARs-CoV-2 and COVID-19 diagnostic testing, (including in vitro diagnostic products that are (i) approved, cleared, or authorized by the U.S. Food and Drug Administration, (ii) developed in and authorized by a State that has notified the Secretary of Health and Human Services of its intention to review tests intended to diagnose COVID-19, or other tests that the Secretary determines appropriate in guidance), as well as items and services furnished to the Eligible Employee or Dependent during healthcare provider visits (which includes in-person visits and telemedicine visits), urgent care center visits, and emergency room visits to obtain such testing. The benefit payable by the Plan shall be 100% of such testing, items and services, regardless of whether such testing is provided by a PPO provider. Coverage, with no cost-sharing (including deductibles, copays, and coinsurance) is limited to the period covered by the public health emergency declaration associated with COVID-19. Notwithstanding the preceding, in no event is the Plan obligated to pay a non-PPO Provider more than the lesser of (i) the cash price of such service as listed by the provider on a public internet website or (ii) the rate negotiated by the Plan with such provider for such service.
- (39) Coronavirus preventive services. A coronavirus preventive service is an item, service, or immunization that is intended to prevent or mitigate COVID-19, and which has received an “A” or “B” rating under the recommendations of the United States Preventive Services Task Force (USPSTF), or which has a recommendation from the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention (CDC). The benefit payable by the Plan shall be 100% of a coronavirus preventive service, effective not later than the 15th business day after a recommendation has been made by the appropriate authority.
- (40) Covered Medical Services unrelated to COVID-19 provided by a PPO provider via telephone conference, video conference, or similar technology, subject to any applicable Plan rules and cost-sharing requirements (e.g., deductible, co-insurance, pre-

authorization, etc.) that would apply to an in-person visit for the same service. Coverage under this paragraph is limited to the period covered by the public health emergency declaration associated with COVID-19.

Adopted in Principle: April 22, 2020

Effective Date: March 18, 2020

Language Approved: June 25, 2020



H. Marshall Ainley, Chairman



Ed Hanley, Secretary

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