

March 2020

**TO: All Eligible Hotel Bargaining Unit Participants
AFL Hotel & Restaurant Workers Health & Welfare Trust Fund**

FROM: Board of Trustees

SUBJECT: COVID-19 Testing and Telehealth Services

This is important information regarding health care services for you and your family covered under the Plan:

I. COVID-19 Testing

Effective immediately, you are fully covered by the Plan when your doctor authorizes you to be tested for the coronavirus or COVID-19.

If you are concerned whether you have been exposed to this virus, have your doctor examine you. If your doctor refers you to be tested, you will not have to pay any copayments. This applies whether you are enrolled in the Comprehensive Medical Plan or the Kaiser Permanente Plan.

II. Telehealth Services

Effective immediately, you are also covered for telehealth services. This means that in many situations you may not have to travel to your doctor's office to be examined.

Call your doctor's office to find out how to arrange an appointment with your doctor over the phone or online over the internet.

These telehealth services will be covered as office visits according to your health plan. This applies whether you are enrolled in the Comprehensive Medical Plan or the Kaiser Plan.

III. Bank Hours

With recent events, many have questions on their eligibility and bank hours to better assist you, visit the Trust Fund's website at www.unitehere5trustbenefits.com to view your benefits, eligibility, covered dependents, and current bank hours.

It's free and easy to use. Simply click on the "Home" link on the top righthand corner. For assistance, please contact the Trust Fund Office at 523-0199; neighbor islands, call toll free at 866-772-8989.

If you are unable to contact the Trust Fund Office during normal business hours, inquiries may be emailed to hiaflinfo@brmsonline.com

Disclosure of Grandfathered Status

The Trust Fund believes its group health plans are "grandfathered health plans" under the Patient Protection and Affordable Care Act (the Affordable Care Act). As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan means that your plan may not include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for the provision of preventive health services without any cost sharing. However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, for example, the elimination of lifetime limits on benefits.

Questions regarding which protections apply and which protections do not apply to a grandfathered health plan and what might cause a plan to change from grandfathered health plan status can be directed to the plan administrator, Benefit & Risk Management Services, Inc., at 560 North Nimitz Highway, Suite 209, Honolulu, Hawaii 96817-5315 or 1-808-523-0199. You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at 1-866-444-3272 or www.dol.gov/ebsa/healthreform. This website has a table summarizing which protections do and do not apply to grandfathered health plans.

In accordance with ERISA reporting requirements, this document serves as your Summary of Material Modifications to the Plan. Please keep this important notice with your Plan Document/Summary Plan Description (SPD) for easy reference to all Plan provisions.