Coronavirus (COVID-19) Diagnosis and Testing

Helping you understand your Pension, Hospitalization and Benefit Plan ("PHBP") benefits:

Call your doctor if you are experiencing symptoms of coronavirus. Your doctor will determine whether you need to be tested.

Until further notice you will not be subject to a copayment in the following settings:

- **Doctor’s office (including both in-person and telehealth visits)** – The $35 copayment for the doctor’s visit will be waived if you are diagnosed with the virus that causes COVID-19 or if you receive a COVID-19 diagnostic test.
- **Urgent care center** – The $35 copayment for the urgent care visit will be waived if you are diagnosed with the virus that causes COVID-19 or if you receive a COVID-19 diagnostic test.
- **Emergency room** – The $100 copayment will be waived if you are diagnosed with the virus that causes COVID-19 or if you receive a COVID-19 diagnostic test. The inpatient hospital copayment will apply if the patient is admitted.
- **Diagnostic lab** - The Plan does not require you to pay a copayment for diagnostic testing, including testing for COVID-19. At this time, COVID-19 testing is not being administered at free-standing laboratories such as LabCorp and Quest Diagnostics. If and when testing becomes available at free-standing in-network labs, there will be no participant copayment, like all other lab testing under your health plan.

Additionally, preauthorization requirements for any hospital-based COVID-19 testing and related items or services will be waived.

The changes listed above are effective until either the national emergency declared by the President or the public health emergency declared by the Secretary of the U.S. Department of Health and Human Services is lifted.

Please note that if you use a non-Network doctor or urgent care center you will be responsible for any charges that exceed the Plan’s Network Allowance. This is known as “balance billing.”

Copayments will still apply for office, urgent care, and emergency room visits for any other reason. For example, patients seeking care for conditions unrelated to COVID-19 would be subject to the applicable copayment.

The Plan is committed to easy access to information, care, benefits, and service for our members, and ensuring you can access the care you need.

You can call the MagnaCare JIB dedicated line at 1-877-624-6210 with any additional questions or concerns.