

I. Congregational Employee Plan Health Coverage and COVID-19

- **The Corinthian Plan health coverage (known specifically as the Congregational Employee Plan) will cover** the following for participants without applying the normal deductible cost-sharing requirements: Diagnostic testing for COVID-19 along with related items and services. Related items and services are those provided during a health care provider office visit (including telehealth visit), urgent care center visit, and emergency room visit that results in an order for or administration of COVID-19 testing, but only to the extent those items and services relate to the furnishing or administration of COVID-19 testing or the evaluation of the individual's need for COVID-19 testing. Normal deductible cost sharing will be applied to unrelated items/services.
- **Update on CEP health coverage.** Temporarily, the CEP health plan will cover COVID-19 in-network, inpatient hospital care without applying the normal deductible cost-sharing requirements. This waiver, effective for services incurred from 2/1/20 through 9/30/20, will continue to be reviewed.
- **Expenses for other COVID-19 treatment** will be subject to the normal deductible cost-sharing requirements of the CEP health plan.
- **The Amwell telemedicine benefit of the CEP health plan is expanding** to temporarily waive the deductible cost-sharing requirement for all Amwell virtual physician visits. The waiver applies to all Amwell telemedicine and virtual visits regardless of whether the visit is related to the diagnosis or treatment of COVID-19 (this includes General Medicine, Behavioral Health, and Tele Dermatology visits). This expanded benefit is effective 3/13/20 through 9/30/20. If a member has been charged for an Amwell telemedicine or virtual physician visit, Amwell will reprocess the claim and credit the card that was charged for the visit, going back to 3/13/20.
- **The CEP health plan also covers non-Amwell virtual visits with a physician.** Non-Amwell virtual visits will be subject to the normal deductible cost-sharing requirements of the CEP health plan.

- **Temporary extension of certain deadlines for CEP health plan participants.** The Outbreak Period* is disregarded and not counted when determining plan deadlines for:
- Special Enrollment
 - Filing a benefit claim
 - Appeals of adverse benefit determinations
 - Requests for external review
 - Completion of an incomplete request for external review

*The Outbreak Period is the period beginning March 1, 2020 and ending 60 days after the announced end of the COVID-19 National Emergency.

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