General information about COVID-19

1. Where can I get up-to-date information on COVID-19?
   Washington State Department of Health (DOH), doh.wa.gov/coronavirus,
   1-800-525-0127, press #
   Centers for Disease Control and Prevention (CDC), cdc.gov, 1-800-232-4636

2. What are the general symptoms of COVID-19?
   Symptoms may include fever or chills, fatigue, muscle or body aches, cough, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, diarrhea, shortness of breath, or difficulty breathing. People diagnosed with COVID-19 have reported symptoms that may appear in as few as two days or as long as 14 days after exposure to the virus.

Getting tested

1. Should I get tested for COVID-19?
   The Washington State DOH recommends that anyone showing symptoms of COVID-19 and people who have likely been exposed to the virus get tested. However, anyone who is concerned about their health can get tested for COVID-19. Learn more about testing, or find a testing location near you, on the DOH website.
Washington households can order five free COVID-19 tests from the Washington Department of Health at sayyescovidhometest.org.

Many PEBB medical plans are covering at-home COVID-19 tests. Some restrictions may apply; please contact your plan for details. The plans are reaching out to their members to let them know how at-home tests are covered.

At-home COVID-19 tests are eligible expenses for your Medical Flexible Spending Arrangement (FSA) funds. If you are requesting reimbursement for tests, the request should include the date, type of test, and cost.

2. **Will my laboratory COVID-19 test be covered?**

Yes, if it is considered medically necessary — meaning you have symptoms or were directly exposed. As long as the Federal Public Health Emergency remains in effect, you do not need to see an in-network provider to receive coverage.

Please note that COVID-19 tests done for travel, work, or school purposes may not be considered medically necessary and may not be covered by your health plan.

3. **What about Executive Order 20-01?**

The Washington State Insurance Commissioner issued Executive Order 20-01, through October 31, 2022, which required all health carriers in Washington State to:

- Waive copays, coinsurance, and deductibles for any enrollee who requires testing for COVID-19.
- Allow a one-time early refill for prescription drugs.
- Suspend any prior authorization requirement for testing or treatment of COVID-19.
- Allow enrollees to be treated by another provider within a reasonable distance at no additional cost if an insurer does not have enough medical providers in its network to provide testing and treatment for COVID-19.

These requirements expired on October 31, 2022, after which coverage may revert to usual coverage.

**Vaccine information**

1. **Who can get the COVID-19 vaccines and boosters?**

The COVID-19 vaccine is available to everyone age 6 months and older. New bivalent booster shots are also available, with increased protection against new Omicron variants. Learn more about booster shots on the DOH website.

The Centers for Disease Control and Prevention (CDC) and Washington State Department of Health (DOH) recommend adults 18 years and older choose either the Pfizer or Moderna vaccine instead of the Johnson & Johnson vaccine. The Johnson & Johnson vaccine has a very rare risk of blood clots and other complications. Please talk to a health care provider about your options.

Visit DOH’s Vaccine Locator to find providers in your area with available appointments. The locator tool is available in 30 languages. To see the locator in another language, select the
2. **Will my medical plan cover the COVID-19 vaccines and boosters?**
   All PEBB medical plans will cover the COVID-19 vaccine and boosters at no cost to the member.

3. **How do I know the vaccines are safe?**
   The U.S. Food & Drug Administration (FDA) has authorized multiple vaccines for use in the United States. After that, independent medical experts in Washington State reviewed these vaccines for safety and effectiveness. To learn more, read the Department of Health’s FAQs (see “How Do I know if the Vaccine is Safe and Effective?”).

### Coverage of telehealth and other services

1. **Is telehealth/telemedicine covered under PEBB coverage?**
   Yes, as long as it is considered medically necessary. Contact your medical plan using the information below for details.

2. **Who do I contact with questions about my PEBB-covered services?**

<table>
<thead>
<tr>
<th>PEBB medical carriers (with links to their websites)</th>
<th>Phone numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Kaiser Permanente NW</strong></td>
<td>1-800-813-2000 (TRS: 711)</td>
</tr>
<tr>
<td></td>
<td>Medicare members: 1-877-221-8221 (TRS: 711)</td>
</tr>
<tr>
<td><strong>Kaiser Permanente WA</strong></td>
<td>1-866-648-1928</td>
</tr>
<tr>
<td></td>
<td>(TTY: 1-800-833-6388 or TRS: 711)</td>
</tr>
<tr>
<td></td>
<td>Medicare members: 1-206-630-4600</td>
</tr>
<tr>
<td></td>
<td>(TTY: 1-800-833-6388 or TRS: 711)</td>
</tr>
<tr>
<td><strong>Premera Blue Cross Medicare Supplement Plan F and Plan G</strong></td>
<td>1-800-817-3049</td>
</tr>
<tr>
<td></td>
<td>(TTY: 1-800-842-5357)</td>
</tr>
<tr>
<td><strong>Uniform Medical Plan</strong></td>
<td>Medical: 1-888-849-3681 (TRS: 711)</td>
</tr>
<tr>
<td></td>
<td>Rx: 1-888-361-1611 (TRS: 711)</td>
</tr>
<tr>
<td><strong>UnitedHealthcare PEBB Balance and UnitedHealthcare PEBB Complete</strong></td>
<td>1-855-873-3268 (TRS: 711)</td>
</tr>
<tr>
<td><strong>UMP Plus – Puget Sound High Value Network</strong></td>
<td>1-855-776-9503 (TRS: 711)</td>
</tr>
<tr>
<td><strong>UMP Plus – UW Medicine Accountable Care Network</strong></td>
<td>1-888-402-4237: (TRS: 711)</td>
</tr>
</tbody>
</table>

3. **Should I order extra prescriptions?**
   If you or one of your household members has a chronic condition and regularly takes prescription drugs, talk to your health care provider, pharmacist, and insurance provider about keeping an emergency supply of medications at home. Through October 31, 2022,
Washington State health carriers allowed a one-time early refill for prescription drugs, based on the Washington State Insurance Commissioner’s Executive Order 20-01. In cases where you have 90-day prescription fills, unless you contact your pharmacy directly, you may not be able to access an early refill until you have less than a 30-day supply.

4. Will my PEBB medical plan offer a premium rebate or discount during the COVID-19 pandemic, similar to my auto insurer?

No. Unlike auto insurance, in which drivers are not likely to make up for the lost daily commute miles as a result of the stay-at-home order, patients may choose to delay elective or non-life-threatening health care services.

During the pandemic, patients are still receiving health care services and treatments—including prescriptions, urgent care, and emergency care. **If you feel that you need urgent or emergency care, you should continue to seek care right away.**

Your medical plan has expanded coverage for services, following federal, state, and local orders. These include:

- Allowing early refills for most covered prescriptions without preauthorization.
- Covering the testing, diagnosis, office visit, and treatment of services related to COVID-19 in full, without having to pay toward your plan’s annual deductible, copays, or coinsurance. This applies to all PEBB medical plans.
- Covering COVID-19-related services from an out-of-network provider because the carrier does not have (or does not have enough of) the type of participating providers to provide the service, without the member having to pay toward the plan’s annual deductible, copays, or coinsurance.
- Covering expanded telehealth services.

Expanded coverage for these services may differ for PEBB Medicare Advantage plans, which are governed by the Centers for Medicare & Medicaid Services (CMS). You can learn more about Coronavirus and health insurance on the [Office of the Insurance Commissioner’s website](https://www.ic.wa.gov) and at [Medicare.gov](https://www.medicare.gov).

Changes to DCAP rules

As a result of the COVID-19 pandemic, you have extra flexibility with your Dependent Care Assistance Program (DCAP) funds. You can continue submitting claims against 2021 DCAP funds through December 31, 2022. If you have any questions about this change, please contact [Navia Benefit Solutions](https://www.naviabenefit.com).

PEB Board resolutions passed on April 2, 2020

1. When will the Governor’s state of emergency end?

The state of emergency was enacted February 29, 2020. The Governor recently announced that the state of emergency will end by October 31, 2022 (at this time, the national state of emergency remains in effect). The PEBB Program will provide more information as it becomes available at [hca.wa.gov/coronavirus](https://www.hca.wa.gov/coronavirus).
2. **What has the PEB Board done in response to the COVID-19 emergency?**

On April 2, 2020, the PEB Board passed three resolutions to:

- Extend enrollment deadlines for PEBB Continuation Coverage and retiree subscribers to 30 days past the date the Governor ends the state of emergency (or until November 30, 2022) (see Proclamation 20-05). This means employees who are retiring or losing coverage may have extra time to enroll in PEBB retiree insurance coverage or PEBB Continuation Coverage.

- Extend the maximum continuation coverage period to the last day of the second month after the date the Governor ends the state of emergency (or until December 31, 2022). This means that subscribers enrolled in PEBB Continuation Coverage may be covered longer.

- Establish temporary eligibility for PEBB coverage for certain job classes hired or rehired during the state of emergency. This means certain employees responding to the COVID-19 emergency will get coverage faster than under normal PEBB Program eligibility rules.

Read more about these resolutions in the [April 2 full meeting recap](#).

3. **What is the effect of the ending of the Governor’s state of emergency on PEBB eligibility and enrollment?**

Extended enrollment deadlines for Continuation Coverage and retiree coverage will allow individuals who lost coverage at the end of August 2022 some additional time (about a month) to submit their elections.

The extension of the maximum period for Continuation Coverage will end December 31, 2022. Newly hired eligibility established by the PEB Board under PEBB 2020-03 ends October 31, 2022. Employees who gained eligibility under this provision will maintain benefits by meeting the PEBB maintenance rules.

See Question 4 for more information about options.

4. **What options do I have when my continuation coverage benefits end?**

After your continuation coverage ends you and your enrolled dependents may have the following options:

- PEBB retiree insurance coverage if you meet substantive eligibility from WAC 182-12-171, 182-12-180, or 182-12-265. Submit your Retiree Coverage Election (Form A) to determine if you are eligible.

- Washington Health Plan Finder, available under the Affordable Care Act, offers several medical plans, including Washington Apple Health. For details, visit the state health plan marketplace website at wahealthplanfinder.org or call 18559234633 (TTY 1-855-627-9604). If you live outside Washington State, visit the federal health plan marketplace website at healthcare.gov or call 18003182596. If you are eligible for Medicare, you cannot apply for coverage through the Affordable Care Act.

- Contact the Social Security Administration (SSA) about your options to enroll in Medicare. Visit the SSA website at ssa.gov or call 18007721213 (TTY 1-800-325-0778). For Medicare plan options, visit medicare.gov or call 1-800-633-4247 (TTY 1-877-486-2048).
• The group conversion policy allows you to buy coverage from your medical plan. You cannot have Medicare or any other group plan that provides hospital or medical care to use this option. Under the conversion policy, your rates, coverage, and eligibility requirements will change. However, evidence of insurability (proof of good health) is not required to get coverage.

You and your dependents must enroll and pay the first month’s premium to your medical plan no later than 31 days after your continuation coverage ends. Contact your medical plan to apply under the group conversion policy described in your certificate of coverage.

• You cannot convert your dental coverage. Contact your dental plan for more options. You may buy an individual health plan policy. Contact your health plans for more information, or research other plans that meet your needs.

5. I’m starting (or restarting) work to respond to the COVID-19 pandemic. Does the temporary eligibility rule apply to me?
If you were hired in response to the COVID-19 state of emergency in one of these job classes, your PEBB coverage will start sooner than under normal eligibility rules:
• First responders.
• Health care professionals.
• Any positions in a medical facility.
• Public health officials.
• Any COVID-19 research positions.
• Other position types authorized during the state of emergency by the Health Care Authority. (We will communicate more information as it becomes available.)

These positions are eligible for the employer contribution toward PEBB benefits in any month they work a minimum of eight hours. If you become eligible under these temporary eligibility criteria, **PEBB coverage will begin the first day of the month in which you become eligible**. For example, if you become eligible on April 15, your PEBB benefits are effective April 1.

PEBB benefits for this resolution include medical, dental, basic life, basic accidental death and dismemberment (AD&D), and basic long-term disability (LTD) insurance. You are **not** eligible to enroll in supplemental life, supplemental AD&D, nor supplemental LTD insurance.

Read [the full meeting recap](#) to learn more about these job categories.

6. How long will this temporary eligibility window last?
The temporary eligibility policy will remain in effect until October 31, 2022. Once the COVID-19 state of emergency is terminated, the temporary criteria for establishing eligibility ends and the standard PEBB benefits and maintenance eligibility rules apply.

7. I’m starting a new job as a state employee this month, but it isn’t related to COVID-19. Does this resolution apply to me?
No. This resolution is designed to provide PEBB benefits as quickly as possible to those who are starting (or restarting) work in positions that directly respond to the COVID-19 pandemic. However, [normal PEBB Program eligibility rules](#) will apply to your position. If you
Continuing eligibility for PEBB benefits during the COVID-19 outbreak ends on October 31, 2022

The first two questions generally apply to all employees who are eligible for benefits under the Public Employees Benefits Board (PEBB) Program, except for seasonal workers and higher-education faculty who are anticipated not to work for the entire instructional year or equivalent nine-month period.

1. I’m an employee currently enrolled in PEBB benefits. If I’m unable to work because I am sick (or need to care for others who are sick) for a month or more, can I keep my PEBB benefits?

It depends on how much paid leave you have available. For any calendar month you are in pay status for eight hours (that is, use paid leave or shared leave), you will maintain the employer contribution toward PEBB benefits.

The pay you receive related to your submitted leave may also cover some or all of your PEBB monthly premiums (medical, supplemental life insurance, supplemental accidental death and dismemberment insurance, and supplemental long-term disability insurance), as well as Medical Flexible Spending Arrangement or health savings account (HSA) contributions. If your pay does not cover all owed premiums or contributions, contact your payroll or benefits office.

If you don’t have and use at least eight hours of paid or shared leave for a month, you will lose eligibility for the employer contribution toward PEBB benefits. The HCA will mail a PEBB Continuation Coverage Election Notice to you, explaining how you can elect to continue your PEBB insurance coverage on a self-pay basis through PEBB Continuation Coverage (Unpaid Leave). When you return to work, you will most likely regain your eligibility for the employer contribution and can reenroll in PEBB insurance coverage as an employee. If you elected PEBB Continuation Coverage (Unpaid Leave), you can re-enroll in coverage as an employee without a break in coverage.

2. I’m an employee who pays for supplemental or optional coverage (such as supplemental life, supplemental accidental death and dismemberment (AD&D), employee-paid long-term disability, and/or auto/home insurance) through payroll deductions. What happens to these coverages?

Each of these coverages will be handled a little differently. Here is what you need to know:

- **Supplemental life and AD&D insurance:** Your PEBB supplemental life and AD&D insurance will continue as long as you are in pay status for at least eight hours before the end of the calendar month. If you don’t have at least eight hours of paid leave available, you can elect to maintain supplemental life and AD&D insurance while on PEBB Continuation Coverage (Unpaid Leave). If your paycheck does not cover these supplemental premiums, MetLife will “auto-flip” you to direct bill via mail after two...
months of $0 payroll deductions.

**Employee-paid long-term disability (LTD) insurance:** You cannot maintain LTD insurance while on PEBB Continuation Coverage (Unpaid Leave) except for while on educational leave or leave under the Uniformed Services Employment and Reemployment Rights Act (USERRA). Your PEBB employee-paid LTD insurance will continue as long as you are in pay status for at least eight hours per calendar month. If you do not have at least eight hours in pay status, your LTD insurance will be automatically reinstated effective the first day of the month you are in pay status eight or more hours. **Auto/home insurance:** Please contact Liberty Mutual at 1-800-706-5525 or visit one of their Washington offices to ask about alternate payment options to continue your coverage.

3. **I’m a higher-education faculty who was not anticipated to work for the entire instructional year or equivalent nine-month period. How might my eligibility for benefits under the PEBB Program be affected by changes to my quarter work schedule (including closure of my institution)?**

HCA has received requests for insight and guidance about how higher-education institution closures due to novel coronavirus (COVID-19), which decreases the employee’s workload, affect employees’ eligibility for PEBB benefits. Closures may include:

- Complete closure of an institution.
- Converting services/classes to remote or e-learning.
- Cancelling services/classes that cannot be converted to remote or e-learning.

Any decreases in workloads for closures and cancelled classes in the upcoming quarter should be reviewed in the context of PEBB administrative policy 17-3 (see below).

Under this policy, when the employer decreases the workload, the employer contribution for benefits can be maintained for the quarter/semester in each month when the faculty member is at least in “pay status for 5% of full-time.”

Employers may identify relevant work that can still be performed to maintain pay status equal to at least 5 percent of full time each month. Examples may include:

- Reviewing or revising curriculum.
- Pursuing professional development in their area of studying/teaching.
- Completing any state- or institution-mandatory trainings.
- Performing academic research.

HCA is committed to monitoring the impacts to higher-education employees and will work with the higher-education institutions on any issues where the impacts of the COVID-19 pandemic affect employee eligibility.

The relevant section of PEBB administrative policy 17-3 follows:

2. **Decrease in workload. The statements below apply only to temporary decreases in faculty workloads.**

   a. A decrease in workload does not include:

      i. When the employee or employer terminates the employment relationship. See
WAC 182-12-131(7) for rules about this circumstance.

ii. Renegotiations of the employment terms and conditions (i.e., the employee voluntarily moves to a new position). See WAC 182-12-131(7) for rules regarding this circumstance.

iii. A decrease in workload under a new contract (for instance, a decrease in workload between contracts for different quarters/semesters).

iv. A decrease in workloads due to a layoff. See WAC 182-12-129 and PEBB Program Administrative Policy 17-2 for eligibility criteria following a layoff.

b. For benefits-eligible faculty who are not anticipated to work for the entire instructional year (established eligibility under WAC 182-12-114 (3)(a)(ii) or (iii)):

i. When the employee decreases the workload such that they cannot maintain the employer contribution under WAC 182-12-131, the employer contribution ends the first of the month following the drop in workload.

ii. When the employer decreases the workload, the faculty is eligible for the employer contribution each month in which they are in pay status for 5% of full-time until the end of the quarter or semester in which the faculty is contracted to work. Note: Faculty with anticipated end dates are not eligible for the layoff rights outlined in WAC 182-12-129 and PEBB Program Administrative Policy 17-2.

c. For benefits-eligible faculty who are anticipated to work for the entire instructional year (established eligibility under WAC 182-12-114 (3)(a)(i) or (iii)): Whether the employee or employer initiates the decrease, the faculty is eligible for the employer contribution each month in which they are in pay status for 5% of full-time (see RCW 41.05.065 (4)(j)) until the end of the quarter or semester in which the faculty was expected to work. Leave from the benefits-eligible position must be approved by the employing agency. Note: Faculty with anticipated end dates are not eligible for the layoff rights outlined in WAC 182-12-129 and PEBB Program Administrative Policy 17-2.

4. I’m an employee of a political subdivision (county, city, hospital district, transportation authority, etc.). How can I maintain my PEBB coverage if my employer closes?
In some instances, your employer may have options to maintain your benefits eligibility in addition to the information provided in the first question. Your payroll or benefits office will let you know if this is the case.