



YOUR PAMCAH-UA LOCAL 675:

Health and Welfare Plan

The Union and Management Trustees of the PAMCAH-UA Local 675 Health and Welfare Plan (the "Plan") understand the significant impact that COVID-19 is having on our economy. We recognize that some of our Local 675 members may be losing health coverage due to reduced hours or layoffs.

To help, the Trustees have extended the length of time you can maintain your health coverage by delaying the lookback period three months, starting from the March 31, 2021 terminations. In addition, they reduced the number of hours needed to qualify for coverage for one qualifying period in 2020, September - November, from 360 hours to 288 hours. The health and welfare of our members is extremely important. We will continue to closely monitor the situation going forward.

Please read through this mailer and the attached Plan Change Notice. They were designed to help you better understand:

How the Fund determines Plan eligibility,

When your coverage begins and ends, and

How to remain eligible for coverage even if you're unemployed and/or totally disabled.



How the Fund Determines Plan Eligibility

To determine your eligibility to maintain coverage, the Fund looks back at the number of hours you worked over the prior four quarterly qualifying periods.

You can meet Plan requirements in one of **FOUR** ways:

- 1 Working 360 hours over the previous qualifying period*
- 2 Working 720 hours over the previous two consecutive periods
- 3 Working 1,080 hours over the previous three consecutive periods
- 4 Working 1,440 hours over the previous four consecutive periods

* In response to the COVID-19 pandemic, the Fund reduced the number of required hours for one qualifying period in 2020, Sept–Nov, from 360 hours to 288 hours. The Fund is currently considering possible additional reductions in the future.



Qualifying Periods:

March, April, May

June, July, Aug

Sept, Oct, Nov

Dec, Jan, Feb



Do you have questions?

Reach out to the Trust Fund Office (808-536-4408).

When Coverage Begins

- 1** **Abbreviated coverage** (medical-only coverage for you) starts on the second calendar month after you work at least 120 hours.
- 2** **Full coverage** (includes prescription drug, dental, and vision) for you and your family starts the first day of the second calendar month after the three-month period in which you work at least 360 hours.

Example You're hired on January 1, and work 120 hours during January and February. Abbreviated coverage starts April 1. You continue working and have 360 hours from January through March. Your full coverage begins May 1.



Maintaining Your Coverage

Each quarter, the Plan determines your eligibility to continue, or maintain, coverage. The new, extended lookback period means the Plan first looks back at the previous qualifying period to see if you meet the hours requirement. If you don't, the Plan will look back at the previous two qualifying periods, then three qualifying periods, then the entire previous year. (As a reminder: in response to the COVID-19 pandemic, the Fund reduced the number of required hours for one qualifying period in 2020, Sept–Nov, from 360 hours to 288 hours.)



Where Are We Now

We have finished the qualifying period Dec 2020–Feb 2021. Now the Fund will look back over the past four qualifying periods to determine whether you have enough hours for coverage to continue for the next three-month period: Apr–June.

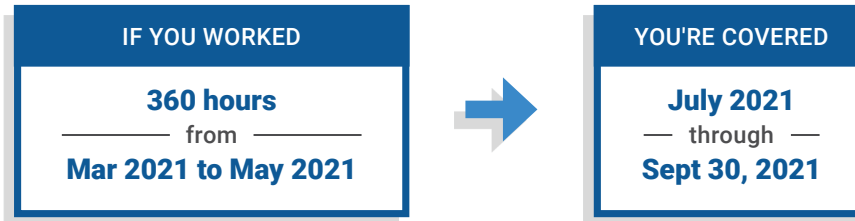




What Happens Next

Starting March 1, 2021, you begin to accumulate hours for the next qualifying period. You qualify for three months of full coverage when you meet the required hours.

Example



Conversely, if you don't work the required number of hours, you still have three additional qualifying periods in which to make up the time.



New Eligibility Requirements During Periods of Unemployment and Disability

The Fund subsidizes work hour credits so that your coverage is continued even if you're unemployed and/or disabled. Basically, this means the Fund provides free coverage when your Employer is not contributing fringe benefits on your behalf.

UNEMPLOYMENT COVERAGE

Effective May 1, 2020

If, after meeting initial eligibility requirements, you experience a period of unemployment, the Plan will credit you with 35 hours for each week you're receiving unemployment compensation, up to a maximum of 840 hours during any six consecutive months. These credits are for Plan eligibility purposes.

To receive these credits, you must take the following steps:



SIGN IN to the Union's "Out of Work List," and remain available for work in the jurisdiction of UA Local 675.



SHOW PROOF that you're eligible to receive unemployment benefits.



SIGN UP at <http://labor.hawaii.gov/ui/>

DISABILITY COVERAGE

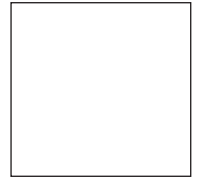
Effective May 1, 2020

If you cannot work due to Total Disability, you will be credited with 35 hours for each week you are totally disabled, up to a maximum of 840 hours during any six-consecutive-months period.

To receive these credits, you must meet initial eligibility requirements for Total Disability.



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Look inside for important information about changes to your Health and Welfare Plan.