

CITY OF EUGENE
EMPLOYEE BENEFITS PLAN

Amendment No. 2022-01

Health Plan Revisions

The City of Eugene Employee Benefits Plan and its component City Health Plan, City Hybrid Plan and City Managed Care Plan (the "Plans") are each amended in the manner prescribed below.

Added language is double-underlined.

All Plans:

Effective 3/5/20, a temporary waiver of copays, coinsurance and deductibles will apply under the Plans for Coronavirus (COVID-19) testing and diagnosis related visits for covered members. This waiver will remain in place until further notification from the City of Eugene.

The temporary cost-share waiver will apply to:

- a) Diagnostic tests to detect the virus that are approved or authorized by the FDA, including the administration of such tests; and
- b) Items and services furnished to individuals during provider office visits (whether in-person or via telehealth), urgent care visits, and emergency room visits that result in an order for, or the administration of, the test described above, but only to the extent such items or services relate to the furnishing or administration of the test or the evaluation of whether the person needs the test.
- c) Effective 1/15/22 and while required by Federal law, testing under this provision will include over the counter COVID-19 diagnostic tests approved or authorized by the FDA that are obtained without an order or individualized clinical assessment by a health care provider.

Benefits under this provision are subject to change or limitations and will be administered in compliance with State and Federal law.

The City of Eugene will have the final determination in ending this temporary waiver and will review relevant guidance from health experts, as well as Federal and State guidelines, in making that decision. Upon ending the temporary waiver, the above services will be subject to the cost share provisions outlined in the member's plan design.

This Amendment 2022-01 and its provisions are approved and accepted.



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CITY OF EUGENE

By: 
Mia Cariaga, Central Services Executive Director

Dated: 01/23/2022

CITY OF EUGENE
EMPLOYEE BENEFITS PLAN

Amendment No. 2021-02

Health Plan Revisions

The City of Eugene Employee Benefits Plan and its component City Health Plan, City Hybrid Plan and City Managed Care Plan (the "Plans") and the FSA Flexible Spending Account and TRA Transportation Reimbursement Account Program, respectively, are each amended in the manner prescribed below.

All Health Plans

1. Effective 7/1/21: Newborn nurse home visiting services are covered for a newborn child up to age six months.
2. Effective 7/1/21: Pre-authorization requirements for all services may be updated based on PacificSource's standard Preauthorization List.
3. Effective 1/1/22: The allowed reimbursement amount for out-of-network emergency air ambulance services will be based on PacificSource standard administration.

Effective 7/1/21: All Health Plans for IAFF-, IAFF-BC-, and Non-Represented Employees

1. Annual limits on Well-Baby/Well-Child preventative care will be removed and replaced with a total number of visits allowed from birth up to age 3 years, based on the Bright Futures preventative care schedule as recommended by the Health Resources & Services Administration (HRSA). Effective 7/1/21, up to 12 preventative Well-Baby/Well-Child Visits will be allowed from birth up to age 3. Preventative exams beginning at age 3 will be covered under Routine Physical. The Summary Plan Document will be amended as needed in the future should there be a change to the total number of visits recommended by HRSA.
2. Physical, Occupational or Speech Therapy, and Pulmonary Rehabilitation Services will no longer require a prescription for services. All outpatient rehabilitation services combined is limited to 30 medically necessary visits per calendar year, unless otherwise specifically allowed as outlined in the Plan Document. Additional visits may be authorized by PacificSource if determined medically necessary. Pre-authorization requirements will be updated.

Effective 7/1/21: City Health Plan for IAFF- and IAFF-BC-Represented Employees

Retail Prescription benefits will be processed at the point of sale and members will no longer be required to file a claim form for reimbursement. Members must show their PacificSource ID card and will only be required to pay the applicable deductible and/or copay or co-insurance. There will be no change to the combined medical and Rx deductible and out of pocket design of this Plan.

Effective 7/1/20: All Dental Plans

Interim caries arresting medicament application is covered twice per tooth per benefit year. Restorations within 3 months of interim caries arresting medicaments are not covered.

Flexible Spending and Account (FSA) Program

Effective only for the 2021 Plan Year, the maximum FSA Dependent Care election will be increased to \$10,500 (\$5,250 for married individuals filing separately). The maximum Dependent Care election for Highly Compensated Individuals may be reduced for the 2021 Plan Year if needed to comply with FSA Non-Discrimination Testing.

This Amendment 2021-02 and its provisions are approved and accepted.


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CITY OF EUGENE

By: 
Mia Cariaga (Aug 12, 2021 13:44 PDT)
Mia Cariaga, Central Services Executive Director

Dated: 08/12/2021

CITY OF EUGENE
EMPLOYEE BENEFITS PLAN

Amendment No. 2021-01

Health Plan Revisions

The City of Eugene Employee Benefits Plan and its component City Health Plan, City Hybrid Plan and City Managed Care Plan (the "Plans") and the FSA Flexible Spending Account and TRA Transportation Reimbursement Account Program, respectively, are each amended in the manner prescribed below.

All Health Plans

1. Effective 12/18/20, all in-network and out-of-network co-payments, co-insurance, and deductibles will be temporarily waived for approved Coronavirus (COVID-19) vaccinations and vaccination administration under the Plans. This waiver will remain in place until further notification from the City of Eugene.

Flexible Spending and Account (FSA) Program

2. In response to the COVID-19 Outbreak and as allowed by the Consolidated Appropriations Act of 2021, the Flexible Spending Account Program will be amended as follows:
 - **2020 Plan Year FSA Dependent Care Maximum Age Increase:** For the 2020 FSA Plan Year and associated Grace Period, the Dependent Care maximum age limit for eligible children will be increased from age 13 to age 14.
 - **2020 Plan Year FSA Grace Period Extension:** The 2020 Flexible Spending Account Grace Period will be extended through 12/31/21. Participants may submit Medical and Dependent Care FSA claims incurred from 1/1/20 through 12/31/21 for reimbursement from their outstanding 2020 Plan Year FSA account balance. Claims must be submitted to the FSA Plan Administrator no later than 12/31/21.
 - **2021 Plan Year FSA Grace Period Extension:** The 2021 Flexible Spending Account Grace Period is extended through 12/31/22. Participants may submit Medical and Dependent Care FSA claims incurred from 1/1/21 through 12/31/22 for reimbursement from their outstanding 2021 Plan Year FSA account balance. Claims must be submitted to the FSA Plan Administrator no later than 12/31/22.
 - **2021 Plan Year FSA Mid-Year Election Changes:** For the 2021 Flexible Spending Account Plan Year, employees may enroll, cancel, increase, or decrease FSA Medical or Dependent Care elections on a prospective basis without a qualifying event. An election may not be reduced below the amount that has been reimbursed to the participant year to date nor below the amount the participant has contributed year to date. Election changes without a qualifying event must be submitted no later than 11/24/21. Coverage will be effective in the pay period following the date the change is submitted.

This Amendment 2021-01 and its provisions are approved and accepted.



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CITY OF EUGENE

By: 
Mia Cariaga (Feb 21, 2021 10:08 PST)
Mia Cariaga, Central Services Executive Director

Dated: 02/21/2021