

**Summary of Material Modifications**  
**Prepared for Genuine Financial Holdings LLC dba HireRight LLC Participants**  
**Effective Date Varies by Provision – See Below**

---

This document is a Summary of Material Modifications (“Summary”) intended to notify you of important changes made to the Blue Cross of California medical plans (“the Plan”) offered through Genuine Financial Holdings LLC dba HireRight LLC. You should take the time to read this Summary carefully and keep it with the Summary Plan Description document that was previously provided to you. If you need another copy of the Summary Plan Description or if you have any questions regarding these changes to the Plan, please contact Human Resources during normal business hours at 3349 Michaelson Drive, Suite 150, Irvine, CA, 92612, email [benefits@hireright.com](mailto:benefits@hireright.com) or visit our website at [yourbenefitscenter.com](http://yourbenefitscenter.com).

**Eligibility**

Effective March 1<sup>st</sup>, 2020 through March 31<sup>st</sup>, 2021 the following eligibility changes were made in response to COVID-19:

**Actively At Work** - will deem an employee to be actively at work, for eligibility purposes, as long as the employer:

- considers the employee to be “employed”
- is collecting contributions toward insurance
- is paying the insurance premiums for that employee in a timely manner

Coverage must continue to be offered on a uniform, non-discriminatory basis to all employees and employee contributions must be no greater than those in effect immediately prior to March 1<sup>st</sup>, 2020.

**Testing and Associated Office (or other) Visits**

Effective April 1<sup>st</sup>, 2020 through January 31<sup>st</sup>, 2021, medical plans will provide coverage without cost sharing for COVID-19 testing, any diagnostic products for the detection of COVID-19, and any healthcare provider office visits, urgent care visits, or emergency room visits that result an order for COVID-19 testing. Recent federal guidance clarifies that a health care provider need not be “directly” responsible for providing care to the patient to be considered a qualifying clinician, as long as the clinician makes an individualized clinical assessment to determine whether the test is medically appropriate for the individual in accordance with current accepted standards of medical practice. This is effective throughout the duration of the public emergency.

## **Telehealth Visits**

Telehealth services are available from Anthem's authorized telehealth service, LiveHealth Online, as well as other network providers who deliver virtual care through internet video and audio services.

- Cost Share Waivers are in place for:
  - cost-sharing for telehealth visits from in-network providers for COVID-19 treatment from March 17 through Jan, 31, 2021
  - cost-sharing for telehealth visits from Anthem's telehealth provider, LiveHealth Online, for non-COVID-19 services March 17, 2020 through March 31, 2021
  - cost-sharing for audio-only, in-network provider telephone only visits through March 31, 2021

## **Treatment and Associated Office (or other) Visits**

Effective April 1, 2020 through January 31<sup>st</sup>, 2021 medical plans, will provide coverage without cost sharing for COVID-19 treatment and any in-network healthcare provider office visits, urgent care visits, or emergency room visits that result in an order for COVID-19 treatment.

## **Antibody Testing**

In accordance with the Federal Cares Act Anthem will waive cost sharing for diagnostic testing, including antibody testing, for COVID-19. This coverage includes tests administered in hospital or other medical facilities, freestanding laboratories or medical offices, pharmacies and drive-up testing sites.

## **COVID- 19 Prior Authorization**

COVID-19 related prior authorizations are suspended. From March 26 through Dec. 31, 2020, Anthem will cover respiratory services for acute treatment of COVID-19 and will suspend prior authorization requirements on durable medical equipment and respiratory services critical for the treatment of COVID-19, including oxygen supplies, respiratory devices, continuous positive airway pressure, CPAP devices, non-invasive ventilators, and multi-function ventilators.

From March 1 through May 30, 2020, Anthem suspended select prior authorization requirements to allow care providers to focus on caring for patients diagnosed with COVID-19, including suspension of prior authorization requirements for patient transfers, prior authorization requirements for skilled nursing facilities.

## **COVID-19 At-Home Diagnostic and Serology (antibody) Test Kits:**

Under the rule, Anthem will cover an FDA-approved COVID-19 home or self-administered diagnostic test when:

- You are symptomatic or have been potentially exposed, and a doctor has ordered the test.
- You are an asymptomatic essential worker, and have placed the order through Anthem.