

Frequently Asked Questions

Question: Does my company have to be a member of the Master Builders Association of King & Snohomish Counties to participate in the MBA Health Insurance Trust?

Answer: Participation in the MBA Trust requires the company to be a current member of a sponsoring or endorsing trade association or organization (Master Builders Association of King & Snohomish Counties, Associated Builders & Contractors, Associated Builders & Contractors - Inland Pacific Chapter, Northwest Marine Trade Association, Painting and Decorating Contractors of America, Safety Management Advocacy Resources Training). **Annual Membership Dues and Access Fees (if applicable) must be maintained each year to continue participation in the MBA Trust.**

Question: Are we required to cover all employees?

Answer: Employee/Subscriber participation levels are required on the MBA Trust program. For details, please see the Minimum Employee/Subscriber Participation Requirements included on the MBA Trust Program Requirements (pages 1-2) in this guide.

Question: Are we required to cover dependents of our employees?

Answer: Companies may offer their employees the opportunity to enroll their eligible family members. The company is not obligated to make any dependent contributions. If an employee does not enroll their dependents when they initially enroll, they may add them only if there is a HIPAA qualifying event or must wait until the next Open Enrollment period to add them to coverage. An eligible dependent is defined as a subscriber's lawful spouse or child (natural, adopted, stepchild, legally placed minor). A child must be unmarried and under the age of 25 to be eligible for coverage under this plan.

Question: Does the MBA Trust offer coverage for Domestic Partners?

Answer: The MBA Trust offers all companies to include benefits for Domestic Partners. The company must have adopted its own written internal policy defining Domestic Partners and provide a copy of the policy to the Trust Administrators. If you have any questions about the requirements needed to offer this benefit, contact the MBA Trust office for more information.

Question: Do we have to enroll all our employees on one plan?

Answer: Companies with 10 or more full-time, covered eligible employees may elect to offer two medical plans. Under this Dual-Choice option, employees may choose between one Preferred or Traditional medical plan and one Point-of-Service medical plan selected by the company. If a Dual Choice is offered, the employee/subscriber and their covered family members must be enrolled on the same medical plan. An employee/subscriber may only change medical plans at Open Enrollment (September 1st of each year). A minimum of 2 employees must be enrolled on each plan to maintain a dual-choice offering.

Question: How can we obtain a list of providers covered by the medical plan we choose?

Answer: There are several ways to obtain this information. Although printed directories are available upon request, the most up-to-date list of providers is available through the MBA Trust insurance carriers' websites. In addition, members may contact the carriers' customer service department to verify that a provider has a contract under a particular plan. See below for contact information:

Regence BlueShield	www.regence.com	1-800-330-7206
Group Health Options	www.ghc.org	1-888-901-4636
Asuris Northwest Health	www.asurisnorthwesthealth.com	1-888-344-5587
Margellan Health Services	www.magellanhealth.com	1-800-523-5668

Question: Are our employees covered if they work or travel outside of Washington?

Answer: Yes, all MBA Trust plans provide worldwide coverage for employees and their covered dependents.

- Employees covered by a Regence BlueShield plan are able to obtain the highest level of benefits and are protected from “balance billing” from providers by accessing the services of a Blue Cross or BlueShield provider in other states. When traveling, check the website (www.bluecares.com) or simply call 800-810-BLUE (2583) to find a doctor in that area.
- Employees covered by Group Health Options are covered worldwide. Contact Group Health at 888-901-4636 or on the website (www.ghc.org) for more details.
- Employees covered by Asuris Northwest Health are covered worldwide. Contact Asuris Northwest Health at 888-344-5587 or on the website (www.asurisnorthwesthealth.com) for more details.
- Employees covered by the Magellan Health Services Employee Assistance Program have 24-hour access to the call center and online services. In addition, Magellan Health Services contracts with providers in all markets to assure your employees get the assistance they need. Contact Magellan Health Services at 800-523-5668 or on the website (www.magellanhealth.com) for more details.

Question: Are prescription drugs covered on the MBA Trust benefit plans?

Answer: Both Retail and Mail Order prescription drug benefits are included on all Trust medical plans. Most plans include copay/co insurance drug cards, meaning that the employee pays a flat copay or coinsurance percentage amount at the pharmacy when filling a prescription. Obtaining prescriptions through mail order saves money and time. Employees may obtain a 90-day supply through mail order rather than the 30-day maximum limited at their local retail pharmacy. Please see the Trust Benefit Plans for more details.

Question: Are benefits provided by Alternative Providers, such as naturopaths or acupuncturists, included on MBA plans?

Answer: Yes, coverage for treatment by alternative providers is included on all MBA Trust medical plans. Benefits for services such as acupuncture, massage therapy, nutritional, chiropractic and naturopathy may be limited to a specific dollar amount annually. Contact the MBA Trust office for more information.

Question: Is dental coverage available through the MBA Trust?

Answer: Yes, group dental may be added to the company's MBA benefit package. More detailed information on plans can be found in your MBA Trust Proposal. **Please Note:** This is not a freestanding benefit. Enrollment must match medical plan enrollment. If the company elects dental coverage, all employees and/or dependents covered on the medical plan will get dental coverage. Employees and/or dependents not covered on the medical plan will not have access to the dental coverage.

Question: Is vision coverage available through the MBA Trust?

Answer: Yes, there are two plans to choose from. **Please Note:** This is not a freestanding benefit. Enrollment must match medical plan enrollment. If the company elects vision coverage, all employees and/or dependents covered on the medical plan will get vision coverage. Employees and/or dependents not covered on the medical plan will not have access to the vision coverage.

Question: Can I increase the amount of Basic Life Insurance I provide my employees?

Answer: You may increase the Basic Life Insurance benefit in \$5,000 increments to \$100,000 if your company has more than 10 enrolled subscribers. For companies with less than 10 enrolled subscribers, the maximum benefit you can offer is \$30,000.

Question: Does the MBA Trust offer my employees the opportunity to buy more Life Insurance than the company provides?

Answer: You may allow your employees to apply for up to \$500,000 of Additional Term Life Insurance for very reasonable rates. Additional Life Insurance may be applied for in \$10,000 increments with a minimum benefit of \$30,000. For companies of 10 or more enrolled employees, individuals can apply for Additional Term Life Insurance within the first 30 days of the company's effective date with the MBA Trust and would be automatically approved for a minimum benefit of \$ 50,000 at the applicable rate regardless of their health conditions.

Question: Are there waiting periods on MBA medical plans?

Answer: MBA medical plans include a three-month waiting period for pre-existing conditions and a six-month waiting period for transplant-related expenses. However, full portability (i.e., crediting of time covered under a previous plan) for pre-existing conditions is available through the MBA Trust in accordance with State and Federal insurance regulations. Waiting periods for transplant-related expenses are not portable; therefore, all participants will be subject to the six-month waiting period regardless of the length of time on a prior plan.

Question: Are there waiting periods on MBA dental plans?

Answer: Preventive and basic dentistry are not subject to a waiting period. There is a six-month waiting period for major dentistry or orthodontia benefits (if applicable) only. Major dentistry includes treatment for crowns, bridges and dentures, etc.. Groups enrolling in the MBA Trust that previously had a group dental plan may receive credit towards this waiting period upon the company's initial enrollment. Employees hired after your company's initial enrollment with the Trust will be subject to this waiting period regardless of any prior coverage from a previous employer's group dental plan.

Question: Does the MBA Trust offer a Health Savings Account (HSA) Plan?

Answer: Yes, the MBA Trust offers a High Deductible Health Plan (HDHP) that is qualified to be used with Health Savings Accounts (HSAs). All companies can select these plans. Companies with 25 or more enrolled employees can offer the HDHP plan in conjunction with certain MBA Trust plans.

Question: Can my employees receive credit for Annual Deductible accumulated under our prior group plan?

Answer: Companies transferring directly from a group medical plan to the MBA Trust program are eligible to receive full credit of deductible (year-to-date) satisfied under that plan for each covered participant upon initial enrollment. Documentation from the previous insurance carrier is required to obtain these credits.

- Companies can request a group listing of deductible credits from most carriers. A fee may be charged by the carrier.

OR;

- Each employee may submit a copy of his or her most recent Explanation of Benefits (EOB) indicating deductible satisfied for each family member.

This information must be provided to the MBA Trust Administrator within 30-days of the company's effective date of coverage to obtain the deductible credit.

Question: What is COBRA and how is it handled?

Answer: COBRA is a federal law affecting continuation of employer-based health coverage beyond the point when termination of coverage would normally occur. MBA Trust companies subject to federal COBRA Continuation Coverage regulations (generally, companies with 20 or more full and part-time employees) are provided with COBRA services at no extra charge.

The MBA Administrator provides the billing and collection of contributions from COBRA participants. The company is required to provide Notification Requirements. Sample documents are provided at no charge to member companies.

Question: How are we billed for coverage through the MBA Trust?

Answer: Detailed monthly billing statements are sent to each participating company 1 to 2 weeks in advance of the billed month. We encourage you to review your billing statement monthly to assure all changes submitted have been processed and that no ineligible person is still on your plan. Payments are due on the first day of the billed month and become "delinquent" if not received before the 15th day of the billed month. Program cancellation will result if full payment is not received within 45-days of the payment due date.

Question: If we cancel or terminate our coverage through the MBA Trust, can we enroll again at a later date?

Answer: Any company terminating or canceling coverage from the MBA Trust for any reason is not eligible to reapply for a minimum of 24-months following its termination date.