

**Carpenters Health and Welfare Trust Fund for California  
CLAIM FORM—Home COVID-19 TEST KIT**



**Please complete this form (type or print) and submit to the Fund Office with  
1) the original receipt of purchase and 2) UPC Code from the kit purchased.**

<b>Mail To:</b>		
<b>Carpenters Health and Welfare Trust Fund for California</b>		
<b>265 Hegenberger Rd., Suite 100</b>		
<b>Oakland, CA 94621</b>		

<b>MY INFORMATION</b>	FIRST NAME	MI	LAST NAME
	SOCIAL SECURITY NO. or UBC ID NO.		BIRTHDATE
	STREET ADDRESS		
	CITY	STATE	ZIP CODE
<b>ATTESTATION</b>	FIRST AND LAST NAME OF PERSON TESTED FOR COVID		DATE OF BIRTH OF PERSON TESTED FOR COVID
	I hereby attest the purchase of the test kit is for illness or contact with COVID-19 for the above named person tested for COVID-19 and is not for the purpose of surveillance or return-to-work reasons.		
	I understand the Plan limits coverage to test kits that are approved by the FDA and the maximum number of test kits covered by the Plan is 8 per covered individual in a 30-day period.		
	I hereby certify under penalty under the laws of the State of California, that the information given in this form is true, correct and complete to the best of my knowledge.		
Participant's Signature: _____			Date: _____

Because this Plan is a “grandfathered health plan,” we are required by law to provide this notice to you:

**Grandfathered Health Plan:** The Board of Trustees of the Carpenters Health and Welfare Trust Fund for California believes the Indemnity Medical Plan is a “grandfathered health plan” under the Patient Protection and Affordable Care Act (“the Affordable Care Act”). As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan means that your plan may not include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for the provision of preventative health services without any cost sharing. However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, for example the elimination of lifetime limits on benefits. Questions regarding which protections apply and which protections do not apply to a grandfathered health plan and what might cause a plan to change from grandfathered health plan status can be directed to the plan administrator or the Department of Labor at 1-866-444-3272 or [www.dol.gov/ebsa/healthreform](http://www.dol.gov/ebsa/healthreform). This website has a table summarizing which protections do and do not apply to grandfathered health plans.