

2024 REQUIRED HEALTH PLAN NOTICES

PURPOSE OF THIS DOCUMENT

This packet includes several notices which Federal law requires to be distributed to participants in the Southern Methodist University Health & Wellness Plan (the “Plan”). These notices relate to the health benefits provided under the Plan.

TABLE OF CONTENTS

Women's Health & Cancer Rights Act

Page 2

This Notice describes the coverage provided, as required by law, for mastectomies.

If you have had or are going to have a mastectomy, you may be entitled to certain benefits under the Women's Health and Cancer Rights Act of 1998 (WHCRA). For individuals receiving mastectomy-related benefits, coverage will be provided in a manner determined in consultation with the attending physician and the patient, for:

All stages of reconstruction of the breast on which the mastectomy was performed;

Surgery and reconstruction of the other breast to produce a symmetrical appearance;

Prostheses; and

Treatment of physical complications of the mastectomy, including lymphedema.

These benefits will be provided subject to the same deductibles and coinsurance applicable to other medical and surgical benefits provided under this plan. Please see the Plan's summary plan description for details of the Plan's deductible, benefit percentage, and copayment requirements.

If you would like more information on WHCRA benefits, visit www.dol.gov/dol/topic/health-plans/womens.htm.

Newborn & Mother

Important Notice from SMU About Your Prescription Drug Coverage and Medicare

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with SMU and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.

There are some important things you need to know about your current coverage and Medicare's prescription drug coverage:

For the \$2,000 Deductible PPO Plan

SMU has determined that the prescription drug coverage offered by SMU's plan is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage. Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

When Can You Join A Medicare Drug Plan?

You can join a Medicare drug plan when you first become eligible for Medicare and each year from October 15th through December 7th. However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two-month Special Enrollment Period to join a Medicare drug plan.

What Happens To Your Current Coverage If You Decide to Join A Medicare Drug Plan?

If you decide to join a Medicare drug plan, your current SMU coverage will be affected. If you enroll for Medicare Part D coverage, you must drop your SMU medical and prescription drug coverage. If you do decide to join a Medicare drug plan and drop your current SMU coverage, be aware that you and your dependents

Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the **Medicare & You** handbook for their telephone number) for personalized help.

Call 1-800-8 0 0

Continuation Coverage Rights Under COBRA

INTRODUCTION

You are receiving this notice because you have recently become covered under a group health plan (the

becoming entitled to Medicare benefits (under Part A, Part B, or both), the employer must notify the Plan Administrator of the qualifying event.

You Must Give Notice of Some Qualifying Events

For the other qualifying events (divorce or legal separation of the employee and spouse or a dependent child's losing eligibility for coverage as a dependent child), you must notify the Plan Administrator within 60 days after the qualifying event occurs.

You must provide this notice to:

Name of Entity: Southern Methodist University

Contact/Office: Department of Human Resources

Address: P.O. Box 750232, Dallas, Texas 75275-0232

Phone Number: 214-768-3311

HOW IS COBRA COVERGE PROVIDED

IF YOU HAVE QUESTIONS

Questions concerning your Plan or your COBRA continuation coverage rights should be addressed to the contact

Notice of Privacy Practices

Health and Wellness Plan: Notice of Privacy Practices

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN ACCESS THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Southern Methodist University's Pledge to You

This notice is intended to inform you of the privacy practices followed by the ***Southern Methodist*** (the Plan) and the Plan's legal obligations regarding your protected health information under the Health Insurance Portability and Accountability Act of 1996 (HIPAA). The notice also explains the privacy rights you and your family members have as participants of the Plan. It is effective on ***October 01, 2013***.

The Plan often needs access to your protected health information in order to provide payment for health services and perform plan administrative functions. We want to assure the participants covered under the Plan that we comply with federal privacy laws and respect your right to privacy. **SMU** requires all members of our workforce and third parties that are provided access to protected health information to comply with the privacy practices outlined below.

Protected Health Information

Your protected health information is protected by the HIPAA Privacy Rule. Generally, protected health information is information that identifies an individual created or received by a health care provider, health plan or an employer on behalf of a group health plan that relates to physical or mental health conditions, provision of health care, or payment for health care, whether past, present or future.

How SMU May Use Your Protected Health Information

Under the HIPAA Privacy Rule, SMU may use or disclose your protected health information for certain purposes without your permission. This section describes the ways we can use and disclose your protected health information.

Payment. SMU uses or discloses your protected health information without your written authorization in order to determine eligibility for benefits, seek reimbursement from a third party, or coordinate benefits with another health plan under which you are covered. For example, a health care provider that provided treatment to you will provide us with your health information. SMU uses that information in order to determine whether those services are eligible for payment under the SMU group health plan.

Health Care Operations. SMU uses and discloses your protected health information in order to perform plan administration functions such as quality assurance activities, resolution of internal grievances, and evaluating plan performance. For example, SMU reviews claims experience in order to understand participant utilization and to make plan design changes that are intended to control health care costs. Other examples of health care operations include, but are not limited to, (1) contracting for services with business associates; (2) quality assessment and improvement activities; (3) audit services, legal services, and data aggregation; (4) business planning and development; (5) administrative activities relating to compliance; and (6) customer service. SMU is also permitted to share protected health information during a corporate restructuring such as a merger, sale, or acquisition.

However, SMU is prohibited from using or disclosing protected health information that is genetic information for our underwriting purposes.

Treatment. Although the law allows use and disclosure of your protected health information for purposes of treatment, as a health plan we generally do not need to disclose your information for treatment purposes. Your physician or health care provider is required to provide you with an explanation of how they use and share your health information for purposes of treatment, payment, and health care operations.

Other Uses and Disclosures without Authorization. There are a number of situations that would permit use or disclosure of protected health information without an authorization.

As permitted or required by law. SMU may also use or disclose your protected health information without your written authorization for other reasons as *permitted* by federal, state, or local law.

Disclosures for Public Health Activities.

Public Health Authorities. The Plan may disclose your protected health information to public health authorities who need the information to prevent or control disease, injury, or disability or

Your request for an accounting must be submitted in writing to the person listed below. You may request an accounting of disclosures made within the last six years. You may request one accounting free of charge within a 12-month period.

Right to Request Restrictions. You have the right to request that we not use or disclose information for treatment, payment, or other administrative purposes except when specifically authorized by you, when required by law, or in emergency circumstances. You also have the right to request that we limit the protected health information that we disclose to someone involved in your care or the payment for your care, such as a family member or friend. Your request for restrictions must be submitted in writing to the person listed below. We will consider your request, but in most cases are not legally obligated to agree to those restrictions.

Right to Request Confidential Communications. You have the right to receive confidential communications containing your health information. Your request for confidential communications must be submitted in writing to the person listed below. We are required to accommodate reasonable requests. For example, you may ask that we contact you at your place of employment or send communications regarding treatment to an alternate address.

Right to be Notified of a Breach. You have the right to be notified in the event that we (or one of our Business Associates) discover a breach of your unsecured protected health information. Notice of any such breach will be made in accordance with federal requirements.

Right to Receive a Paper Copy of this Notice. If you have agreed to accept this notice electronically, you also have a right to obtain a paper copy of this notice from us upon request. To obtain a paper copy of this notice, please contact the person listed below.

Our Legal Responsibilities

SMU is required by law to maintain the privacy of your protected health information, provide you with this notice about our legal duties and privacy practices with respect to protected health information and notify affected individuals following a breach of unsecured protected health information.

SMU may change our policies at any time and reserve the right to make the change effective for all protected health information that we maintain. In the event that SMU makes a significant change in our policies, SMU will provide you with a revised copy of this notice. You can also request a copy of our notice at any time. For more information about SMU's privacy practices, contact the person listed below.

If you have any questions or complaints, please contact:

Sheri Starkey
Associate Vice President and Chief Human Resource Officer
SMU
PO Box 750232
Dallas TX 75275
214-

