

Important Notices

Notice Regarding RCAB Health Benefit Trust Wellness Program

The RCAB Health Benefit Trust's Wellness Program ("Wellness Program") is a voluntary wellness incentive program available to all eligible employees and spouses enrolled in one of the RCAB Health Plans. The Wellness Program is administered according to federal rules permitting employer-sponsored wellness programs that seek to improve employee health or prevent disease, including the Americans with Disabilities Act of 1990, the Genetic Information Nondiscrimination Act of 2008, and the Health Insurance Portability and Accountability Act, as applicable, among others. If you choose to participate in the Wellness Program, you will be asked to complete a voluntary health assessment through the Blue Cross Blue Shield of Massachusetts *ahealthyme* site that asks a series of questions about your health-related activities and behaviors and whether you have or had certain medical conditions (e.g., cancer, diabetes, or heart disease). You are not required to complete the *ahealthyme* health assessment or other medical examinations. The information from your *ahealthyme* health assessment will be used to provide you with information to help you understand your current health and potential risks. You also are encouraged to share your results or concerns with your own doctor.

Eligible employees and spouses can earn HRA or HSA points by participating in activities listed on the flyer in this booklet. One point is equal to \$10. Each enrolled employee or spouse can receive credit for a maximum of 1,000 points (if enrolled in the Enhanced or Basic PPO Plan) or 500 points (if enrolled in the RCAB High Deductible Health Plan "HDHP") per Plan Year through participation in the Blue Cross Blue Shield of Massachusetts *ahealthyme* Program and MoveSpring Challenge Program. Points for completed wellness incentives will be deposited into HRA accounts (or HSA accounts for those enrolled in the HDHP) with HealthEquity. An additional \$150 HRA or HSA contribution per enrolled employee and spouse per Plan Year can be earned as a Wellness Rewards reimbursement for qualified expenses. Visit catholicbenefits.org/health/wellnessrewards.pdf for information.

If you are unable to participate in any of the health-related activities or achieve any of the health outcomes required to earn an incentive, you may be entitled to a reasonable accommodation or an alternative standard. You may request a reasonable accommodation or an alternative standard by contacting Donna Ynaya Porter, RCAB Benefits Department, at dporter@rcab.org.

Protections from Disclosure of Medical Information

We are required by law to maintain the privacy and security of your personally identifiable health information. Although the RCAB Health Benefit Trust may use aggregate information they collect to design a program based on identified health risks in the workplace, we will never disclose any of your personal information either publicly or to the employer, except as necessary to respond to a request from you for a reasonable accommodation needed to participate in the Wellness Program, or as expressly permitted by law. Medical information that personally identifies you that is provided in connection with the Wellness Program will not be provided to your supervisors or managers and may never be used to make decisions regarding your employment.

Your health information will not be sold. In addition, your information will not be exchanged, transferred, or otherwise disclosed, except to the extent permitted by law, to carry out specific activities related to the Wellness Program, and you will not be asked or required to waive the confidentiality of your health information as a condition of participating in the Wellness Program or receiving an incentive. Anyone who receives your information for purposes of providing you services as part of the Wellness Program will abide by the same confidentiality requirements.

In addition, all medical information obtained through the Wellness Program will be maintained separately from your personnel records, information stored electronically will be encrypted, and no information you provide as part of the Wellness Program will be used in making any employment decision. Appropriate precautions will be taken to avoid any data breach, and in the event a data breach occurs involving information you provide in connection with the Wellness Program, we will notify you immediately and take appropriate mitigating action as needed.

You may not be discriminated against in employment because of the medical information you provide as part of participating in the Wellness Program, nor may you be subjected to retaliation if you choose not to participate.

If you have questions or concerns regarding this notice, or about protections against discrimination and retaliation, please contact Donna Ynaya Porter, RCAB Benefits Department, at dporter@rcab.org.

Hospital Stays for New Mothers and Newborns

Under federal law, health plans may not restrict benefits for any length of stay in a hospital for new mothers and their newborn child(ren) to less than 48 hours following a vaginal delivery, or less than 96 hours following a cesarean section. The mother and newborn's attending provider is not required to obtain authorization from the health plan for prescribing a length of stay over 48 (or 96) hours and may also discharge the mother and newborn (after consulting with the mother) earlier than 48 (or 96) hours.

Women's Health and Cancer Rights Act

The Roman Catholic Archdiocese of Boston Health Benefit Trust Health Plan (the "Plan"), as required by the Women's Health and Cancer Rights Act of 1998, provides benefits for mastectomy-related services including all stages of reconstruction and surgery to achieve symmetry between the breasts, prostheses, and complications resulting from a mastectomy, including lymphedema. Contact the RCAB Benefits Department at (617) 746-5640 for more information.

HIPAA Special Enrollment

If you have declined enrollment in the Plan for you or your dependents (including your spouse) because of other health insurance coverage, you or your dependents may be able to enroll in some coverages under this plan without waiting for the next open enrollment period, provided that you request enrollment within 30 days after your other coverage ends. In addition, if you have a new dependent as a result of marriage, birth, adoption or placement for adoption, you may be able to enroll yourself and your eligible dependents, provided that you request enrollment within 30 days after the marriage, birth, adoption or placement for adoption.

Medicaid/CHIP – Special Enrollment

The Plan will also hold a special enrollment opportunity for employees and their eligible dependents that have either:

- Lost Medicaid or Children's Health Insurance Program (CHIP) coverage because they are no longer eligible, or
- Become eligible for a state's premium assistance program under Medicaid or CHIP.

For these enrollment opportunities, you will have 60 days – instead of 30 – from the date of the Medicaid/CHIP eligibility change to request enrollment in the Plan. Note that this new 60-day extension doesn't apply to enrollment opportunities other than due to the Medicaid/CHIP eligibility change. See the enclosed Notice for more details.

HIPAA Privacy Notice Reminder

The privacy rules under the Health Insurance Portability and Accountability Act (HIPAA) require The

Archdiocese of Boston Health Benefit Trust (the “Trust”) to periodically send a reminder to participants about the availability of the Plan’s Privacy Notice and how to obtain that notice. The Privacy Notice explains participants’ rights and the Plan’s legal duties with respect to protected health information (PHI) and how the Plan may use and disclose PHI.

To obtain a copy of the Privacy Notice, contact the RCAB Benefits Department at (617) 746-5640 for more information or visit catholicbenefits.org/privacy.htm.

You may also contact Carol Gustavson at cgustavson@rcab.org for more information on the Trust’s privacy policies or your rights under HIPAA.