

Important Notices

USD is legally required to provide the following notices to you.

Covered California Notice

I understand that if I do not elect USD's Health coverage and instead obtain health coverage through Covered California Health Care Exchange, I may not be eligible for tax credits or subsidies under Covered California.

Eligibility for Tax Credits*

To be eligible for tax credits, an individual must:

- Be a U.S. citizen, U.S. national, or lawfully present immigrant who has purchased coverage through Covered California.
- Have an annual household income between 138% and 600% of the Federal Poverty Level. (Note that effective January 1, 2020, the 400% threshold will increase to 600% in California.)
- Not be eligible for other public health coverage — including full-scope Medi-Cal, premium-free Medicare Part A, or military coverage — **and must not have access to health insurance through an employer.** (There is an exception in cases when the employer's plan is unaffordable because the employer's share of the premium exceeds 9.5% of the employee's income. There is also an exception in cases where the employer's plan does not provide minimum value, meaning that the plan does not pay for at least 60% of the costs of covered benefits provided to the employee.)

**The above information can be found at: www.coveredca.com/individuals-and-families/getting-covered/health-care-costs/.*

Physician Designation Notice

The Cigna and Kaiser HMO plans generally require the designation of a primary care provider. You have the right to designate any primary care provider who participates in their network and who is available to accept you or your family members. Until you make this designation, Cigna and Kaiser will designate one for you.

For children, you may designate a pediatrician as the primary care provider.

You do not need prior authorization from Cigna and Kaiser HMO or from any other person (including a primary care provider) in order to obtain access to obstetrical or gynecological care from a health care professional in our network who specializes in obstetrics or gynecology. The health care professional, however, may be required to comply with certain procedures, including obtaining prior authorization for certain services, following a pre-approved treatment plan, or procedures for making referrals. For a list of participating health care professionals who specialize in obstetrics or gynecology, contact the Cigna or Kaiser HMO plans.

Availability of Privacy Practices Notice

The privacy rules under the Health Insurance Portability and Accountability Act (HIPAA) require the USD Health Flexible Spending Account Program (the "Plan") 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 Janie Carolin at (619) 260-4594. You may also view the Privacy Notice online at MySanDiego portal under the Employee Resources tab. You may also contact the Plan's Privacy Official at (619) 260-4594 or usdbenefits@sandiego.edu for more information on the Plan's privacy policies or your rights under HIPAA.

Women's Health and Cancer Rights Act

This law requires group health plans that provide coverage for mastectomy to also provide coverage for certain reconstructive services. These services include the following:

- Reconstruction of the breast upon which the mastectomy has been performed
- Surgery/reconstruction of the other breast to produce a symmetrical appearance
- Prosthesis
- Physical complications during all stages of mastectomy, including lymphedemas

In addition, the plan may not:

- Interfere with a woman's rights under the plan to avoid these requirements
- Offer inducements to the health provider, or assess penalties against the health provider, in an attempt to interfere with the requirements of the law

However, the plan may apply deductibles and copays consistent with other coverage provided by the plan. If you have questions about the current plan coverage, please contact the Department of Human Resources.

Newborns' and Mothers' Health Protection Act

Federal law protects the benefit rights of mothers and newborns related to any hospital stay in connection with childbirth. In general, insurers may not:

- Restrict benefits for the length of hospital stay for the mother or newborn child to less than 48 hours following a vaginal delivery, or less than 96 hours following a cesarean section. However, federal law generally does not prohibit the mother's or newborn's attending provider, after consulting with the mother, from discharging the mother or her newborn earlier than 48 hours (or 96 hours as applicable)
- Require that a provider obtain authorization from the insurer for prescribing a length of stay of up to 48 hours (or 96 hours)

For details on any state maternity laws that may apply to your medical plan, please refer to the benefit material for the plan in which you are enrolled.

Your Rights Under HIPAA

HIPAA and Privacy

The University of San Diego recognizes the confidentiality of your and your enrolled dependents' protected health information, and we are committed to keeping that information private. In addition to our commitment, the federal Health Insurance Portability and Accountability Act (HIPAA) established privacy rules for individually identifiable health information, which the University of San Diego has complied with as of April 14, 2004.



HIPAA Special Enrollment Rights

Special enrollment events allow you and your eligible dependents to enroll for health coverage outside the Open Enrollment period under certain circumstances if you lose eligibility for other coverage, become eligible for state premium assistance under Medicaid or the state Children's Health Insurance Program (CHIP), or acquire newly eligible dependents. This is required under the Health Insurance Portability and Accountability Act (HIPAA). If you decline enrollment in a USD medical plan for you or your dependents (including your spouse/domestic partner) because of other health insurance coverage, you or your dependents may be able to enroll in a USD medical plan without waiting for the next Open Enrollment period if you:

- Lose other coverage. You must request enrollment within 31 days after the loss of other coverage.
- Gain a new dependent as a result of marriage, birth, adoption, or placement for adoption. You must request enrollment within 31 days after the marriage, birth, adoption, or placement for adoption.
- Lose Medicaid or CHIP coverage because you are no longer eligible. You must request enrollment within 60 days after the loss of such coverage.

If you request a change due to a special enrollment event within the 31-day time frame, coverage will be effective on the date of birth, adoption, or placement for adoption. For all other events, coverage will be effective the first of the month following your request for enrollment. In addition, you may enroll in a USD medical plan if you become eligible for a state premium assistance program under Medicaid or CHIP. You must request enrollment within 60 days after you gain such coverage. If you request this change, coverage will be effective on the first of the month following your request for enrollment. Specific restrictions may apply, depending on federal and state laws.

Note: If your dependent becomes eligible for special enrollment rights, you may add the dependent to your current coverage or change to another medical plan. Any other currently covered dependents may also switch to the new plan in which you enroll.

Premium Assistance Under Medicaid and the Children's Health Insurance Program (CHIP)

If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit www.healthcare.gov.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a state listed below, contact your state Medicaid or CHIP office to find out if premium assistance is available.

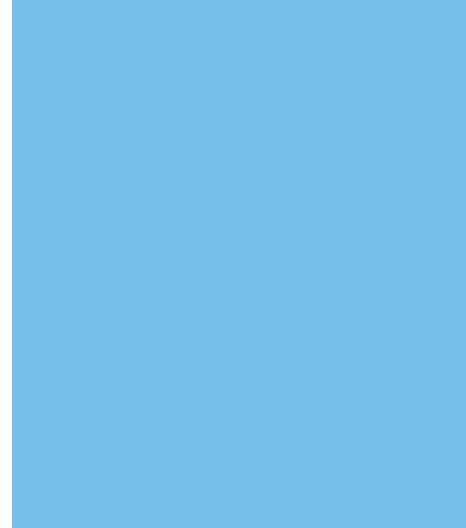
If you or your dependents are **not** currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your state Medicaid or CHIP office or dial 1 (877) KIDS NOW or www.insurekidsnow.gov to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, and are eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren't already enrolled. This is called a "special enrollment" opportunity, and **you must request coverage within 60 days of being determined eligible for premium assistance**. If you have questions about enrolling in your employer plan, contact the Department of Labor at www.askebsa.dol.gov or call 1 (866) 444-EBSA (3272).

If you live in one of the following states, you may be eligible for assistance with paying your employer health plan premiums. The following list of states is current as of July 31, 2019. Contact your state for more information on eligibility.

Alabama – Medicaid	Website: http://myalhipp.com Phone: 1 (855) 692-5447
Alaska – Medicaid	The AK Health Insurance Premium Payment Program Website: http://myakhipp.com Phone: 1 (866) 251-4861 Email: CustomerService@MyAKHIPP.com Medicaid Eligibility: http://dhss.alaska.gov/dpa/Pages/medicaid/default.aspx
Arizona – CHIP	Website: www.azahcccs.gov Phone: 1 (855) 432-7587
Arkansas – CHIP	Website: http://myarhipp.com Phone: 1 (855) MyARHIPP (1 (855) 692-7447)
California – Medi-Cal	Website: www.dhcs.ca.gov Phone: 1 (800) 541-5555 Email: HIPP@dhcs.ca.gov (Health Insurance Premium Payment email)
Colorado – Health First Colorado (Colorado’s Medicaid Program) & Child Health Plan Plus (CHP+)	Health First Colorado Website: www.healthfirstcolorado.com Health First Colorado Member Contact Center: 1 (800) 221-3943/State Relay 711 CHP+ Website: www.colorado.gov/pacific/hcpf/child-health-plan-plus CHP+ Customer Service: 1 (800) 359-1991/State Relay 711
Florida – Medicaid	Website: http://flmedicaidtprecovery.com/hipp Phone: 1 (877) 357-3268
Georgia – Medicaid	Website: https://medicaid.georgia.gov/health-insurance-premium-payment-program-hipp Phone: 1 (678) 564-1162 ext. 2131
Idaho – Medicaid & CHIP	Website: http://healthandwelfare.idaho.gov Phone: 1 (877) 456-1233
Indiana – Medicaid	Website: www.in.gov/fssa/hip (Healthy Indiana Plan for low-income adults 19-64) Phone: 1 (877) 438-4479 Website: www.indianamedicaid.com (All other Medicaid) Phone: 1 (800) 403-0864
Iowa – Medicaid	Website: http://dhs.iowa.gov/Hawki Phone: 1 (800) 257-8563
Kansas – Medicaid	Website: www.kdheks.gov/hcf Phone: 1 (785) 296-3512
Kentucky – Medicaid	Website: https://chfs.ky.gov or https://kidshealth.ky.gov/Pages/index.aspx Phone: 1 (800) 635-2570 or 1 (877) 524-4718 TDD/TTY: 1 (877) 807-4719
Louisiana – Medicaid	Website: http://dhh.louisiana.gov/index.cfm/subhome/1/n/331 Phone: 1 (888) 695-2447 or 1 (877) 2LaCHIP (1 (877)-252-2447) TTY: 1 (800) 220-5404
Maine – Medicaid	Website: www.maine.gov/dhhs/ofi/public-assistance/index.html Phone: 1 (800) 442-6003 TTY: Maine relay 711
Massachusetts – Medicaid & CHIP	Website: www.mass.gov/eohhs/gov/departments/masshealth Phone: 1 (800) 862-4840
Minnesota – Medicaid	Website: http://mn.gov/dhs/people-we-serve/seniors/health-care/health-care-programs/programs-and-services/medical-assistance.jsp Phone: 1 (800) 657-3739
Missouri – Medicaid	Website: www.dss.mo.gov/mhd/participants/pages/hipp.htm Phone: 1 (573) 751-2005
Montana – Medicaid	Website: http://dphhs.mt.gov/MontanaHealthcarePrograms/HIPP Phone: 1 (800) 694-3084
Nebraska – Medicaid	Website: www.ACCESSNebraska.ne.gov Phone: 1 (855) 632-7633 Lincoln: 1 (402) 473-7000 Omaha: 1 (402) 595-1178

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To see whether any more states have added a premium assistance program since July 31, 2019, or for more information on special enrollment rights, you can contact either:

U.S. Department of Labor
Employee Benefits Security Administration
www.dol.gov/ebsa
(866) 444-EBSA (3272)

U.S. Department of Health and Human Services
Centers for Medicare & Medicaid Services
www.cms.hhs.gov
(877) 267-2323
Menu Option 4, ext. 61565

Nevada – Medicaid	Website: http://dhcfp.nv.gov Phone: 1 (800) 992-0900
New Hampshire – Medicaid	Website: www.dhhs.nh.gov/oii/hipp.htm Phone: 1 (603) 271-5218 HIPP Program: 1 (800) 852-3345, ext. 5218 (in NH only)
New Jersey – Medicaid & CHIP	Medicaid Website: www.state.nj.us/humanservices/dmahs/clients/medicaid Medicaid Phone: 1 (609) 631-2392 CHIP Website: www.njfamilycare.org/index.html CHIP Phone: 1 (800) 701-0710
New Mexico – Medicaid & CHIP	Medicaid & CHIP Website: www.hsd.state.nm.us/mad/index.html Medicaid & CHIP Phone: 1 (888) 997-2583
New York – Medicaid	Website: www.health.ny.gov/health_care/medicaid Phone: 1 (800) 541-2831
North Carolina – Medicaid	Website: https://dma.ncdhhs.gov Phone: 1 (919) 855-4100
North Dakota – Medicaid	Website: www.nd.gov/dhs/services/medicalserv/medicaid Phone: 1 (844) 854-4825
Oklahoma – Medicaid & CHIP	Website: www.insureoklahoma.org Phone: 1 (888) 365-3742
Oregon – Medicaid	Website: http://healthcare.oregon.gov/Pages/index.aspx www.oregonhealthcare.gov/index-es.html Phone: 1 (800) 699-9075
Pennsylvania – Medicaid	Website: www.dhs.pa.gov/provider/medicalassistance/healthinsurancepremiumpaymenthipprogram/index.htm Phone: 1 (800) 692-7462
Rhode Island – Medicaid	Website: www.eohhs.ri.gov Phone: 1 (855) 697-4347 or 1 (401) 462-0311 (Direct Rlite Share Line)
South Carolina – Medicaid	Website: www.scdhhs.gov Phone: 1 (888) 549-0820
South Dakota – Medicaid	Website: http://dss.sd.gov Phone: 1 (888) 828-0059
Texas – Medicaid	Website: http://gethipptexas.com Phone: 1 (800) 440-0493
Utah – Medicaid & CHIP	Medicaid Website: https://medicaid.utah.gov CHIP Website: http://health.utah.gov/chip CHIP Phone: 1 (877) 543-7669
Vermont – Medicaid	Website: www.greenmountaincare.org Phone: 1 (800) 250-8427
Virginia – Medicaid & CHIP	Medicaid Website: www.coverva.org Medicaid Phone: 1 (800) 432-5924 or 1 (855) 242-8282 CHIP Website: www.coverva.org (select the Programs tab and then select Premium Assistance) CHIP Phone: 1 (855) 242-8282
Washington – Medicaid	Website: www.hca.wa.gov Phone: 1 (800) 562-3022, ext. 15473
West Virginia – Medicaid	Website: http://mywvhipp.com Phone: 1 (855) MyWVHIPP (1 (855) 699-8447)
Wisconsin – Medicaid & CHIP	Website: www.dhs.wisconsin.gov/publications/p1/p10095.pdf Phone: 1 (800) 362-3002
Wyoming – Medicaid	Website: https://wyequalitycare.acs-inc.com Phone: 1 (307) 777-7531

