

To: All Benefits Eligible HCA Mission Health Employees and COBRA Participants

Re: Annual Notices, Marketplace Notice, and Summaries of Benefits and Coverage

Notices

Group health and welfare plans are required by law to provide certain notices to their plan participants on an annual basis. The notices included in this mailing are summarized below and are being sent to you on behalf of the HCA Mission Health System Health and Welfare Benefits Plan (Plan) sponsored by MH Hospital Manager, LLC (Company).

If you (and/or your dependents) have Medicare or will become eligible for Medicare in the next 12 months, a federal law gives you more choices about your prescription drug coverage. Please see the Notice of Creditable Prescription Drug Coverage for more details.

- ***Women's Health and Cancer Rights Act.*** Group health plans that provide coverage for medical and surgical benefits with respect to a mastectomy are required to provide a written notice annually to each plan participant regarding their rights under this federal mandate.
- ***Children's Health Insurance Program Reauthorization Act.*** This act requires that a notice be provided to all benefit eligible employees on an annual basis advising them that their state *may* have a premium assistance program to help pay for health coverage for Medicaid or CHIP eligible individuals.
- ***Notice of Creditable Prescription Drug Coverage.*** The Centers for Medicare and Medicaid Services (CMS) require that a Notice of Creditable Prescription Drug Coverage be issued annually to all Medicare eligible Plan participants prior to the Medicare annual open enrollment period.
- ***Notice of Health Insurance Marketplace Coverage Options.*** Employers must provide a notice of coverage options that may be available through the Health Insurance Marketplace. This notice is being provided to you for information only; you are not required to take action. However, if you are interested in purchasing health insurance through the Marketplace, read the information carefully and then visit the Marketplace website at Healthcare.gov.
- ***Special Enrollment Periods.*** If you decline enrollment in the Plan's medical coverage options for yourself or your eligible dependents, you may be able to enroll yourself and your dependents in the Plan's medical coverage if you experience a mid-year change.
- ***Notice of Privacy Practices.*** The Health Insurance Portability and Accountability Act (HIPAA) requires that each Plan participant receive a Notice of Privacy Practices that explains their legal rights regarding their protected health information held by the Plan and how such protected health information may be used or disclosed by the Plan.

Summaries of Benefits and Coverage

The new Plan year is fast approaching and we wanted to make sure that you have information about the health plan options.

The Patient Protection and Affordable Care Act (PPACA), commonly referred to as Health Care Reform, requires certain documents be provided to all Plan participants. Attached please find the *Summary of Benefits and Coverage* ("Summary") for each offered health plan option (the *HCA Mission Health Savings Plan* and the *HCA MissionCare Plan*) along with a *Glossary of Terms* commonly used in health plan documents. These are standardized forms jointly created by several federal agencies; benefit payment information specific to the options offered under your employer sponsored plan has been inserted in the appropriate spaces.

These documents are intended to provide a snapshot of the health coverage offered under the Plan in order to help participants better understand their benefits and compare Plan options. Near the end of each *Summary*, there are three coverage examples that provide an idea of how the health plan option will pay benefits in certain situations: having a baby, managing type 2 diabetes, and an emergency room visit for a broken bone. Please note that the 'amount owed to providers' in these examples may not be the same amount that would be required in all geographical areas.

The *Summary* is only a brief look at benefits. You will be receiving more information about your 2021 benefits in early October. Watch your mail for a summary letter and visit MissionAndMe.com for more information. You may call the Customer Service Department at MedCost Benefit Services at 1-877-275-2718 for assistance. A Summary Plan Description, containing detailed information about your plan options, will be available to you after January 1, 2021, the effective date of your new plan year.

If you have questions about any of the notices or the Summaries of Benefits and Coverage, please contact HR Direct Connect (HRDC) at 1-828-213-5600 or MedCost Benefit Services Customer Service at 1-877-275-2718.