Health Care Reform & Rogers Townsend

1. Non-Grandfathered Status

This group health plan believes this coverage is a "non-grandfathered health plan" under the Patient Protection and Affordable Care Act (the Affordable Care Act). As permitted by the Affordable Care Act, a non-grandfathered health plan might not preserve certain basic health coverage that was already in effect when that law was enacted. Being a non-grandfathered health plan means that your plan will include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for the provision of preventive health services without any cost sharing. However, non-grandfathered health plans will 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 nongrandfathered health plan and what might cause a plan to change from grandfathered health plan status can be directed to Human Resources.

2. Dependent Coverage to Age 26

Individuals whose coverage ended, or who were denied coverage (or were not eligible for coverage), because the availability of dependent coverage of children ended before attainment of age 26 are eligible to enroll in health insurance coverage. Individuals may request enrollment for such children for 30 days from the date of notice. Enrollment will be effective July 1, 2012. For more information contact Human Resources.

3. Lifetime Limits

The lifetime limit on the dollar value of benefits under the Rogers Townsend group health plan no longer applies. Individuals whose coverage ended by reason of reaching a lifetime limit under the plan are eligible to enroll in the plan. Individuals have 30 days from the date of this notice to request enrollment. For more information contact Human Resources.

4. Patient Protection

BlueChoice Health Plan of SC generally allows the designation of a primary care provider. You have the right to designate any primary care provider who participates in our network and who is available to accept you or your family members. For information on how to select a primary care provider, and for a list of the participating primary care providers, contact Human Resources. For children, you may designate a pediatrician as the primary care provider.

You do not need prior authorization from BlueChoice Health Plan of SC 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 Human Resources.

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