

Important Notices



Federal regulations require Avon Community School Corporation to provide benefit eligible employees with the following notices:

Private Health Information

A portion of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) addresses the protection of confidential health information. It applies to all health benefit plans. In short, the idea is to make sure that confidential health information that identifies (or could be used to identify) you is kept completely confidential. This PHI, and it will not be used or disclosed without your written authorization, except as described in the Plan's HIPAA Privacy Notice or as otherwise permitted by federal and state health information privacy laws. A copy of the Plan's Notice of Privacy Practices that describes the Plan's policies, practices and your rights with respect to your PHI under HIPAA is available from your medical plan provider. For more information regarding this Notice, please contact Human Resources or the medical plan directly.

Women's Health And Cancer Rights Act

Avon Community School Corporation's medical plan, as required by the Women's Health and Cancer Rights Act of 1998, provides benefits for mastectomy-related services. These services include:

This coverage will be provided in consultation with the attending physician and the patient, and will be subject to the same annual deductibles and coinsurance provisions that apply to the mastectomy. For more information, contact your medical plan provider. However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, for example, the elimination of lifetime limits on benefits.

You can contact the Employee Benefits Security Administration, U.S. Department of Labor at 1-866-444-3272 or www.dol.gov/ebsa/healthreform. All questions about the pre-existing condition limitation and creditable coverage should be directed to the HR Department.

Individual Coverage Mandate

Federal law requires that you have Health Care coverage or you may be subject to an income tax penalty. You can enroll in Avon Community School Corporation health plan, or you may want to consider visiting www.healthcare.gov for more information on health plans available through the Healthcare Marketplace in your area.

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

If you or your children are eligible for Medicaid or CHIP and you are eligible for health coverage from your employer, your State may have a premium assistance program that can help pay for coverage. These States use funds from their Medicaid or CHIP programs to help people who are eligible for these programs, but also have access to health insurance through their employer. If you or your children are not eligible for Medicaid or CHIP, you will not be eligible for these premium assistance programs. If

you or any of your dependents might be eligible for either of these programs, you can contact your State Medicaid or CHIP office to find out how to apply. If you qualify, you can ask the State if it has a program that might help you pay the premiums for an employer-sponsored plan.

Once it is determined that you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must permit you to enroll in your employer plan if you are not 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, you can contact your local state Medicaid or CHIP office for more information.

Indiana - Medicaid

Healthy Indiana Plan for low-income adults 19-64 Website: <https://www.in.gov/fssa/hip/> Phone: 1-877-438-4479

All other Medicaid:

Website: <https://www.in.gov/medicaid/>

Phone: 1-800-457-4584

Disclaimer

The information provided by Brown & Brown, Inc. and/or its affiliates ("Company") in this Guidebook is advisory. Separate plan documents explain each benefit in more detail, and the various benefits are controlled by the language of the plan documents. Benefits may be modified, added, or terminated at any time, at the Company's discretion, or by the insurance company. This information is provided for general information purposes only and should not be considered legal, tax, accounting or other professional advice or opinion on any specific facts or circumstances. Readers are urged to consult their legal counsel, tax or other professional advisor concerning any legal, tax or related questions that may arise. Any tax information contained in this communication (including any attachments) is not intended to be used, and cannot be used, for purposes of (i) avoiding penalties imposed under the U. S. Internal Revenue Code or (ii) promoting, marketing or recommending to another person any tax-related matter. The Company assumes no liability whatsoever in connection with the use of such information or documents.



Avon Community School Corporation recognizes the importance of providing a comprehensive benefit program to all of our benefit eligible employees and their dependents. Full time employees working 30 hours a week are eligible for benefit the first full month after hire. In addition, the3ir dependents are eligible for coverage.

Eligible dependents:

- Legal Spouse
- Children under age 26 for medical, dental, vision
- Children who are disabled, live iwth you, and dependent on you for support

Please choose your benefits carefully as you will not be able to make any other revisions to your 2026 benefit elections until the following Open Enrollment period for 2027 (unless you have a qualifying life event).

Eligible changes in status include:

- Changes in your legal marital status, death of your spouse, divorce, legal separation or annulment
- Changes in the number of your dependents, including birth, adoption, and placement for adoption
- Employment status changes including the start or end of employment or a change in work hours for you, your spouse, or your dependent
- Your dependent satisfying or no longer satisfying the eligibility requirements due to age or other circumstances

If you experience a qualifying life event, you must notify Human Resources and provide documentation within 30 days of the event to make changes to y our coverage. Failure to complete within 30 days means you would not be able to change benefits until Open Enrollment 2027.