Notice to Enrollees in the  
ECTOR COUNTY ISD Self-Funded Non-Federal Governmental Group Health Plan

Prior to enactment of the Patient Protection and Affordable Care Act (Affordable Care Act) on March 23, 2010, state and local government employers who sponsor self-funded plans were permitted to elect to exempt those plans from "opting out" of certain provisions of title XXVII of the Public Health Service (PHS) Act. This election was authorized under section 2721(b) (2) of the PHS Act. The Affordable Care Act made a number of changes that resulted in such employers not being able to opt out of as many requirements of Title XXVII. Prior to the enactment of the Affordable Care Act, sponsors of self-funded nonfederal governmental plans could elect to "opt out" of all seven of the following categories:

1. Limitation on pre-existing condition exclusion periods
2. Requirements of special enrollment periods
3. Prohibits discriminating against individual participants based on health status
4. Standards relating to benefits for newborns and mothers
5. Parity in the application of certain limits to mental health and substance use disorder (including requirements of the Mental Health Parity and Addiction Equity Act of 2008)
6. Required coverage for reconstructive surgery following mastectomies
7. Coverage of dependent students on a medically necessary leave of absence

The sponsor of a self-funded non-federal governmental plan can no longer choose to exempt the plan from the first three categories and category #7, but may continue to exempt the plan from requirement categories 4 through 6. The Ector County ISD has elected to exempt the Ector County ISD Medical Plan from all of the following:

1. Standards relating to benefits for mothers and newborns - Group health plans offering health coverage for hospital stays in connection with the birth of a child generally may not restrict benefits for the stay to less than 48 hours for vaginal delivery, and 96 hours for cesarean section.

2. Parity in the application of certain limits to mental health benefits - Group health plans offering mental health benefits may not set annual or lifetime dollar limits on mental health benefits that are lower than limits for medical and surgical benefits.

3. Required coverage for reconstructive surgery following mastectomies - Group health plans that provide medical and surgical benefits for a mastectomy must provide certain benefits in connection with breast reconstruction as well as certain other related benefits.

The exemption from these Federal requirements will be in effect for the 1-1-20 to 1-1-21 plan year. The election may be renewed for subsequent plan years.

HIPAA allows plans to voluntarily comply with any one or all of the above requirements; and, the Ector County ISD Medical Plan has elected to voluntarily comply with two of the three requirements. Ector County ISD does not voluntarily comply with the Mental Health Parity and Addiction Equity Acts.

HIPAA also requires the Plan to provide covered employees and dependents with a "certificate of creditable coverage" when they cease to be covered under the Plan. There is no exemption from this requirement. The certificate provides evidence that you were covered under this Plan. You may be entitled to certain rights to reduce or eliminate a pre-existing condition exclusion if you join another employer's health plan or purchase an individual health insurance policy.