

Fresno Unified School District

Benefit Department 2309 Tulare Street Fresno, CA 93721-2287 Phone: (559) 457-3520

www.JHMBHealthConnect.com

September 2021

To: Eligible Part-Time Employees Working Less Than Four Hours Per Day

Re: Required Legal Notices

HIPAA SPECIAL ENROLLMENT RIGHTS

If you are declining enrollment for your dependents (including your spouse) because of other insurance or group coverage, you may be able to enroll your dependents in this Plan if your dependents lose eligibility for that other coverage (because of separation/divorce, termination of employment or reduction in hours, death or cessation of employer contribution), or if your dependents were receiving COBRA coverage and their eligibility for COBRA has expired. However, you must request enrollment within 30 days after your dependents' other coverage ends.

In addition, if you have a new dependent as a result of marriage, birth, adoption, or placement for adoption, you may enroll your new dependents. However, you must request enrollment within 30 days after the marriage, birth, adoption or placement of adoption. If you are enrolling a new dependent as a result of birth, adoption, or placement for adoption, you can also enroll your Spouse or State Registered Domestic Partner if he or she was not previously enrolled in the Plan, but only if he or she is otherwise eligible to participate in the Plan.

To request Special Enrollment or to obtain more information, contact the District's Benefit Department at (559) 457-3520.

AVAILABILITY OF NOTICE OF PRIVACY PRACTICES FOR PROTECTED HEALTH INFORMATION

The Joint Health Management Board ("JHMB"), as the sponsor of the Fresno Unified School District Employee Health Care Plan (the "Plan"), is required by law to inform you of how you can obtain a copy of the Plan's **NOTICE OF PRIVACY PRACTICES FOR PROTECTED HEALTH INFORMATION** ("Notice"). This Notice has previously been provided to all Plan participants.

The Notice informs you about your rights and the Plan's legal duties and privacy practices with respect to your protected health information, and to notify you if there is a breach of your unsecured protected health information.

A copy of the full Notice can be obtained at any time by writing or calling the Fresno Unified School District Benefit Office and requesting a copy. It can also be viewed or downloaded from the JHMB HealthConnect website at: http://www.jhmbhealthconnect.com.