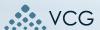
BENEFITS AND ME





Using the Emergency Room Wisely

More than 10% of all emergency room (ER) visits could have been better dealt with in either an urgent care facility or a doctor's office. An emergency is life-threatening and requires immediate care. Examples of an emergency include the following:

- · Not breathing or having difficulty breathing
- Choking—and being unable to dislodge the item
- Experiencing a heart attack or stroke
- Bleeding severely or suspecting broken bones

Urgent care centers are usually more cost-effective than ERs for conditions such as ear infections, sprains, vomiting and high fever. Choosing the appropriate place of care can not only ensure prompt medical attention but will also help reduce any unnecessary expenses. Be prepared for an emergency by consulting with your insurance policy now, since certain situations may not be covered.

Understanding Patient Privacy and HIPAA

The trust that you place in your health care provider is critical to receiving high-quality care. However, with the emergence of electronic databases, you may be concerned that your information could be accessed by those other than your health care provider. Fortunately, the federal government developed standards for patient privacy as part of the Health Insurance Portability and Accountability Act of 1996 (HIPAA). It's important to be familiar with the following five basic principles that govern the HIPAA privacy rules:

- 1. Patients control the release of their medical information.
- 2. Health information can be used for health purposes only.
- 3. There are federal penalties for people and organizations that violate privacy regulations, ranging from a \$100 fine to 10 years in prison.
- 4. HIPAA provides standards for how medical information should be released for public health, research, fraud and abuse investigations, and quality assessment purposes.
- 5. Health care organizations establish procedures to protect privacy.

If you have privacy questions, contact your health plan's member services department, your physician or your clinic administrator.

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THE BASICS OF HDHPS

Enrolling in your employer's company-sponsored, high deductible health plan (HDHP) means lower premiums and the ability to use pre-tax dollars to pay for out-of-pocket costs.

But these perks come at a cost—enrolling in an HDHP also brings a higher deductible and added out-of-pocket costs.

If you're thinking of enrolling in an HDHP, consider the following:

- Once your deductible is met, medical costs are covered at 100%.
- You can save for future medical expenses when paired with an HSA.
- You control and manage your health care expenses.

An HDHP is not the ideal health coverage plan for everyone, but it can be a great way for some people to avoid paying for unnecessary coverage. Talk with your HR representative to learn more about your available health insurance plans.