









## Revised Health

continued from page 1

was signed into law two years ago and third-party administrators (TPAs) are now completing processes for the required filing of more detailed Medicare information.

This process has been designed to provide better data to Medicare and as of Oct. 1, 2009, employer health plans should begin submitting this information. The deadline has been extended one year for health reimbursement arrangements (HRA). There is, however, a penalty for not submitting the required data of \$1,000 per day, per person.

### What to do:

- Make sure that any self-insured sponsored plan, or insurer, or HMO for your insured plans are verified by the third-party administrators (TPAs) and the reporting being handled.
- Have the TPA confirm that SSNs and other needed data elements are available.
- Review options to obtain this data if it is not in the system. Also, review the TPA's services agreement to verify any compliance errors and penalties are responsibility of the TPA.

### HIPAA Privacy & Security

The bailout legislation passed earlier this year, with potentially extensive changes in the HIPAA privacy and security rules that affect employer-sponsored health plans, was barely noticed. Upon enactment (Feb. 17, 2009), the American Recovery and Reinvestment Act (ARRA) substantially increased the civil monetary penalties for HIPAA violations and enabled state attorneys general to bring actions to enforce HIPAA rights on behalf of state residents. However, neither of those changes required employer's sponsoring group health plans to act quickly.

By contrast, plan sponsors must react to another significant HIPAA change, which requires notice of any "breach" of "unsecured" Protected Health Information (PHI) -For this purpose, "unsecured" essentially means Protected Health Information (PHI) that is not encrypted- Upon discovery of

such a breach, an employer-sponsored health plan must notify each individual whose PHI was or is believed to have been disclosed, generally within 60 days. If the breach involves 500 or more people in the same state or other jurisdiction, media notice is required.

Ultimately, plan sponsors must report these breaches to the U.S. Department of Health and Human Services (HHS). If 500 or more individuals are involved, immediate notification is required. For fewer than 500 individuals, the plan may note the breach in a log and notify HHS annually. At its discretion, HHS may list these breaches on its web site.

Among other key HIPAA privacy and security changes in the legislation (becoming effective Feb. 17, 2010), there are:

- HIPAA's privacy and security rules will now apply directly to business associates, such as TPAs and pharmacy benefit managers. Previously, these entities were only subject to the HIPAA rules through contracts with covered entities such as health plans and medical providers. This change will greatly increase compliance obligations for business associates.
- If a participant's PHI is kept in an electronic format, the participant can request a copy of that information in an electronic format.
- Other HIPAA privacy and security changes in ARRA are not effective until after 2010.

### What to do:

- Modify business associate agreements as needed to ensure that your vendors are responsible for providing any notices needed in the event of a breach of unsecured PHI.
- Be prepared to renegotiate business associate agreements with service providers by February 2010.

### Mental Health Benefits

Time is running out quickly on most (if not all) treatment and financial distinctions that employer-sponsored health plans make between mental health and substance abuse benefits and regular medical and surgical benefits.

Under the Pete Domenici and Paul Wellstone Mental Health Parity and Addiction Equity Act, which takes effect Jan. 1, 2010 (for calendar year plans) there will be:

- Financial requirements—such as deductibles, co-pays, coinsurance and out-of-pocket caps—for mental health and substance abuse benefits may not be more restrictive than the most common requirements that apply to substantially all medical and surgical benefits.
- Treatment requirements—such as limitations on frequency of treatment, number of visits, days of coverage, or similar limits on scope or duration—for mental health and substance abuse benefits may not be more restrictive than the most common requirements that apply to substantially all medical and surgical benefits.
- Other specific restrictions will apply too, such as a bar on treatment limitations and financial requirements that apply only to mental health or substance abuse benefits.
- Group Health Plans with more than 50 employees. Small Employers exempted. According to the current 1996 Federal parity law, small employers of 50 or fewer employees are exempt from the requirements of the Act. State parity laws will continue to apply to these employers, as well as to individual plans.

### What to do:

- Review your current group health plan, mental health and substance abuse benefit coverage.
- Plan for needed changes—and potential cost increases—in 2010.
- Also, begin preparing communications for open enrollment this fall to describe any mental health benefit coverage changes.

Find out more by contacting us. Call us toll free at 1-866-508-7361 or visit us at the link below:

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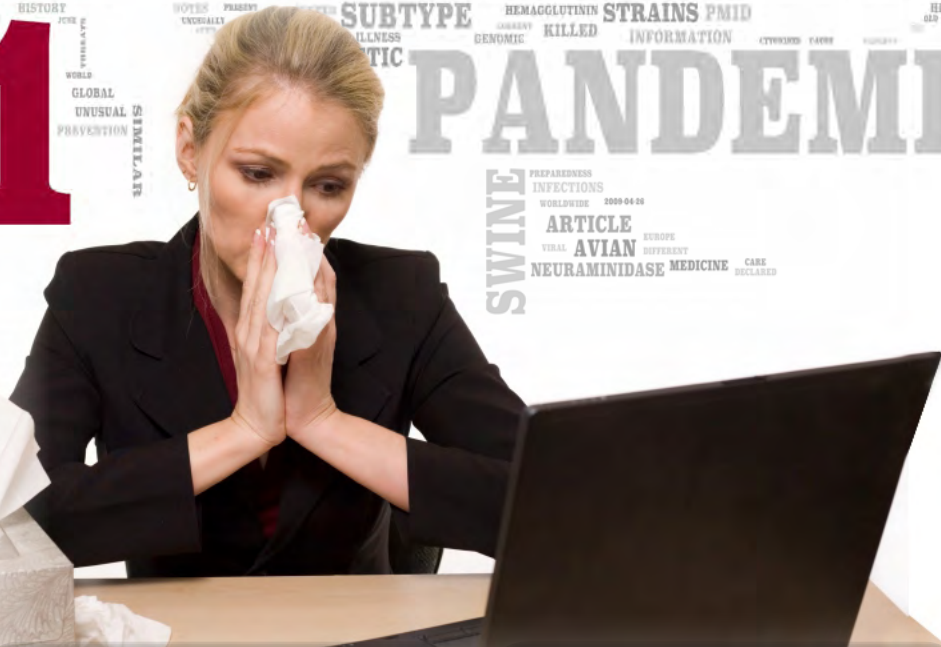


Take the following steps to ensure a healthy workplace.

By Lydia Martinez


With the Flu season upon us and the H1N1 (Swine Flu) virus looming, we would like to encourage employees to follow the guidelines below in order to protect themselves and others from any contagious illness.

- Avoid close contact with sick people. When you are sick, keep your distance from others to protect them from getting sick.
- Avoid touching your eyes, nose or mouth. Germs are often spread when a person touches something that is contaminated and then touches his or her eyes, nose, or mouth.
- Wash your hands frequently throughout the day. Using an anti-bacterial soap is not enough, because the H1N1 virus is not considered bacteria; use an alcohol-based hand sanitizer to help you keep the virus from spreading.
- If you feel sick, contact your supervisor or take the normal procedures to take a sick day to help prevent others from catching your illness.
- Cover your mouth and nose with a tissue when coughing or sneezing. It may prevent those around you from getting sick.
- Practice other good health habits. Get plenty of sleep, be physically active, manage your stress, drink plenty of fluids and eat nutritious food.



### Flu Symptoms

- Fever (100° Fahrenheit or higher), chills, cough or sore throat.
- Runny nose
- Body aches
- Headache
- Tiredness
- Diarrhea
- Vomiting



Experts at the Centers for Disease Control and Prevention (CDC) request employers to let sick employees to stay home and reassure them that they will not lose their jobs if they have to call in sick. According to the CDC, employees who present symptoms are likely to be out for three to five days.

### What to do if an employee comes to work with flu symptoms

- Separate the employee from other workers
- Request the sick employee to wear a surgical mask to prevent spreading the virus until he or she goes home.
- Inform co-workers about the exposure to the virus, but maintaining confidentiality as required by the Americans with Disabilities Act.
- Encourage pregnant women, adults with compromised immune system and young children to receive the H1N1 vaccine as they become available.