

2013 Legally Required Notices

Grandfathered Status of Health Plans

The Patient Protection and Affordable Care Act requires plan sponsors such as The McClatchy Company to inform plan participants about the grandfathered status of its medical plans. The statement below is being provided to satisfy that legal requirement.

The McClatchy Company believes the Aetna Select, Aetna Choice and Aetna Routine Care medical plans are “grandfathered health plans” under the Patient Protection and Affordable Care Act (the Affordable Care Act). As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan means that your medical plan may not include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for coverage for participation in certain clinical trials. However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, for example, the elimination of annual limits on essential health benefits.

Questions regarding which protections apply and which protections do not apply to a grandfathered health plan and what might cause a plan to change from grandfathered health plan status can be directed to the plan administrator at 1-866-334-2337 or via e-mail to healthandwelfare@mcclatchy.com. You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at 1-866-444-3272 or www.dol.gov/ebsa/healthreform. This website has a table summarizing which protections do and do not apply to grandfathered health plans.

Notice of Rescission of Coverage Restrictions

Health care plans cannot retroactively cancel or terminate an individual’s coverage, except in cases of deliberate fraud, intentional misrepresentation of a material fact, or failure to pay premiums. Plans that rescind coverage must give affected individuals at least 30 days advance notice. Cancellation of coverage is not considered a rescission if 1) it is prospective or 2) it is effective retroactively only to the extent attributable to a failure to timely pay required premiums or contributions toward the cost of coverage.

Women’s Health and Cancer Rights Act (WHCRA)

The Women’s Health and Cancer Rights Act of 1998 requires group health plans to make certain benefits available to participants who have undergone a mastectomy. In particular, a plan must offer mastectomy patients benefits for:

- All stages of reconstruction of the breast on which the mastectomy was performed;
- Surgery and reconstruction of the other breast to produce a symmetrical appearance;
- Prostheses; and
- Treatment of physical complications of the mastectomy, including lymphedema.

Our plans comply with these requirements. Benefits for these items generally are comparable to those provided under our plans for similar types of medical services and supplies. Of course, the extent to

which any of these items is appropriate following mastectomy is a matter to be determined by the patient and her physician.

Our plans neither impose penalties (for example, reducing or limiting reimbursement) nor provide incentives to induce attending providers to provide care inconsistent with these requirements. If you would like more information about WHCRA required coverage, you can contact the plan administrator, at 1-866-334-2337.

Availability of Summary Health Information

As an employee, the health benefits available to you represent a significant component of your compensation package. They also provide important protection for you and your family in the case of illness or injury.

Your plan offers a series of health coverage options. Choosing a health coverage option is an important decision. To help you make an informed choice, your plan makes available a Summary of Benefits and Coverage (SBC), which summarizes important information about any health coverage option in a standard format, to help you compare across options.

The SBC is available on the McClatchy HealthWorks website at www.mcclatchy.com/healthworks. A paper copy is also available, free of charge, by calling 1-866-334-2337 (a toll-free number) or sending an e-mail to healthandwelfare@mcclatchy.com.

Premium Assistance Under Medicaid and the 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 your dependents are already enrolled in Medicaid or CHIP and you live in a State listed below, you can contact your State Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, you can contact your State Medicaid or CHIP office or dial 1-877-KIDS NOW or www.insurekidsnow.gov 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 the Department of Labor electronically at www.askebsa.dol.gov or by calling toll-free 1-866-444-EBSA (3272).

If you live in one of the following States, you may be eligible for assistance paying your employer health plan premiums. The following list of States is current as of July 31, 2012. You should contact your State for further information on eligibility –

ALABAMA – Medicaid	COLORADO – Medicaid
Website: http://www.medicaid.alabama.gov Phone: 1-855-692-5447	Medicaid Website: http://www.colorado.gov/ Medicaid Phone (In state): 1-800-866-3513 Medicaid Phone (Out of state): 1-800-221-3943
ALASKA – Medicaid	FLORIDA – Medicaid
Website: http://health.hss.state.ak.us/dpa/programs/medicaid/ Phone (Outside of Anchorage): 1-888-318-8890 Phone (Anchorage): 907-269-6529	Website: https://www.flmedicaidtprecovery.com/ Phone: 1-877-357-3268
ARIZONA – CHIP	GEORGIA – Medicaid
Website: http://www.azahcccs.gov/applicants Phone (Outside of Maricopa County): 1-877-764-5437 Phone (Maricopa County): 602-417-5437	Website: http://dch.georgia.gov/ Click on Programs, then Medicaid, then HIPP Phone: 1-800-869-1150
IDAHO – Medicaid and CHIP	NEBRASKA – Medicaid
Medicaid Website: www.accesstohealthinsurance.idaho.gov Medicaid Phone: 1-800-926-2588 CHIP Website: www.medicaid.idaho.gov CHIP Phone: 1-800-926-2588	Website: www.ACCESSNebraska.ne.gov Phone: 1-800-383-4278
INDIANA – Medicaid	NEVADA – Medicaid
Website: http://www.in.gov/fssa Phone: 1-800-889-9948	Website: http://dwss.nv.gov/ Phone: 1-800-992-0900
IOWA – Medicaid	NEW HAMPSHIRE – Medicaid
Website: www.dhs.state.ia.us/hipp/ Phone: 1-888-346-9562	Website: www.dhhs.nh.gov/oii/documents/hippapp.pdf Phone: 603-271-5218
KANSAS – Medicaid	NEW JERSEY – Medicaid and CHIP
Website: https://www.kdheks.gov/hcf/ Phone: 1-800-792-4884	Medicaid Website: http://www.state.nj.us/humanservices/dmahs/clients/medicaid/ Medicaid Phone: 1-800-356-1561 CHIP Website: http://www.njfamilycare.org/index.html CHIP Phone: 1-800-701-0710
KENTUCKY – Medicaid	NEW YORK – Medicaid
Website: http://chfs.ky.gov/dms/default.htm Phone: 1-800-635-2570	Website: http://www.nyhealth.gov/health_care/medicaid/ Phone: 1-800-541-2831
LOUISIANA – Medicaid	NORTH CAROLINA – Medicaid
Website: http://www.lahipp.dhh.louisiana.gov Phone: 1-888-695-2447	Website: http://www.ncdhhs.gov/dma Phone: 919-855-4100
MAINE – Medicaid	NORTH DAKOTA – Medicaid
Website: http://www.maine.gov/dhhs/ofc/public-assistance/index.html Phone: 1-800-977-6740 TTY: 1-800-977-6741	Website: http://www.nd.gov/dhs/services/medicalserv/medicaid/ Phone: 1-800-755-2604
MASSACHUSETTS – Medicaid and CHIP	OKLAHOMA – Medicaid
Website: http://www.mass.gov/MassHealth Phone: 1-800-462-1120	Website: http://www.insureoklahoma.org Phone: 1-888-365-3742

MINNESOTA – Medicaid	OREGON – Medicaid and CHIP
Website: http://www.dhs.state.mn.us/ Click on Health Care, then Medical Assistance Phone: 1-800-657-3629	Websites: http://www.oregonhealthykids.gov or http://www.hijossaludablesoregon.gov Phone: 1-877-314-5678
MISSOURI – Medicaid	PENNSYLVANIA – Medicaid
Website: http://www.dss.mo.gov/mhd/participants/pages/hipp.htm Phone: 573-751-2005	Website: http://www.dpw.state.pa.us/hipp Phone: 1-800-692-7462
MONTANA – Medicaid	RHODE ISLAND – Medicaid
Website: http://medicaidprovider.hhs.mt.gov/clientpages/clientindex.shtml Phone: 1-800-694-3084	Website: www.ohhs.ri.gov Phone: 401-462-5300
SOUTH CAROLINA – Medicaid	VIRGINIA – Medicaid and CHIP
Website: http://www.scdhhs.gov Phone: 1-888-549-0820	Medicaid Website: http://www.dmas.virginia.gov/rcp-HIPP.htm Medicaid Phone: 1-800-432-5924 CHIP Website: http://www.famis.org/ CHIP Phone: 1-866-873-2647
SOUTH DAKOTA – Medicaid	WASHINGTON – Medicaid
Website: http://dss.sd.gov Phone: 1-800-828-0059	Website: http://hrsa.dshs.wa.gov/premiumpymt/Apply.shtm Phone: 1-800-562-3022 ext. 15473
TEXAS - Medicaid	WEST VIRGINIA – Medicaid
Website: https://www.gethipptexas.com/ Phone: 1-800-440-0493	Website: http://www.dhhr.wv.gov/bms/ Phone: 1-877-598-5820, HMS Third Party Liability
UTAH – Medicaid	WISCONSIN – Medicaid
Website: http://health.utah.gov/upp Phone: 1-866-435-7414	Website: http://www.badgercareplus.org/pubs/p-10095.htm Phone: 1-800-362-3002
VERMONT– Medicaid	WYOMING – Medicaid
Website: http://www.greenmountaincare.org/ Phone: 1-800-250-8427	Website: http://www.health.wyo.gov/healthcarefin/equalitycare Phone: 307-777-7531

To see if any more States have added a premium assistance program since July 31, 2012, or for more information on special enrollment rights, you can contact either:

U.S. Department of Labor
Employee Benefits Security Administration
www.dol.gov/ebsa
1-866-444-EBSA (3272)

U.S. Department of Health and Human Services
Centers for Medicare & Medicaid Services
www.cms.hhs.gov
1-877-267-2323, Ext. 61565