# Summary of Material Modifications (SMM) Franklin County Board of Commissioners Group Health Benefit Plan Group Number: 909362

Effective Date of this SMM: January 1, 2023

A Summary Plan Description (SPD) for the following Plans was published effective January 1, 2023, and July 1, 2023. This SMM to the Plan SPD is issued by the Plan Sponsor as described below.

- Incentive UHPD Plan
- Non-Incentive UHPD Plan
- EO Post January 2023 UHPD Plan

Because this SMM is part of a legal document, the Plan Sponsor wants to give you information about the document that will help you understand it. Certain capitalized words have special meanings. The definitions for these words are in the SPD in Section 14, Glossary.

## What are the Modifications to the Plan?

These modifications and clarifications are intended as a summary to supplement the SPD. It is important that you keep this SMM with your SPD since this material plus the SPD is your complete SPD. In the event of any discrepancy between this SMM and the SPD, the provisions of this SMM shall govern.

# **Section 6: Additional Coverage Details**

Add donor coverage under Fertility Services in Section 6, Additional Coverage Details as follows:

■ Donor Coverage: The plan will cover associated donor medical expenses, from an altruistic donor, including collection and preparation of oocyte and/or sperm, and the medications, as described under *Injections Received in a Physician's Office* in this SPD, associated with the collection and preparation of oocyte and/or sperm. The plan will not pay for donor charges associated with compensation or administrative services.

# **Section 6: Additional Coverage Details**

Add Doula Services under Maternity Services in Section 6, Additional Coverage Details as follows:

### Doula Services

The Plan provides an allowance for doula services for each stage of pregnancy provided at home, the hospital or birthing centers. Services must be performed by a certified or licensed professional, under the direction of a Physician (when required by state law). Please remember to save receipts and submit them with the doula claim form for reimbursement.

**Antepartum Visits** - Antepartum services may include the following:

- Review of the member's home environment, equipment, child-care needs, transportation needs (i.e., getting to doctor visits and the hospital) and requirement for interpreter services.
- Review the member's support system (family, friends, and/or significant other).
- Discuss the member's preferred infant feeding method. If breastfeeding is preferred, assist in scheduling lactation consult post-delivery.

- Provide information regarding prenatal classes.
- Identify place of delivery and mode of transportation, if applicable.
- Discuss the member's expectation of the birth experience, labor and delivery process and anesthesia, including discussion of a birth plan to be shared with delivering provider (OBGYN or midwife).
- Support and reinforce information provided in prenatal classes concerning labor, delivery, and postpartum care of both the member and the newborn, including:
  - Confirm that there is a car seat available for transporting infant.
  - Review infant safe sleeping practices.
  - Offer suggestions for coping strategies in the postpartum period.
  - Discuss notification of active labor and expectations regarding attendance during the labor and delivery process.

**Labor and Delivery Attendance** - Services provided during labor and delivery may include the following:

- At the member's request, be present at the birth and remain through the immediate postpartum period (including labor and delivery resulting in a stillbirth).
- Provide help and guidance on measures for comfort and pain relief such as breathing, relaxation, movement, positioning and comforting touch.
- Provide emotional support and act as a facilitator to assist in communication with hospital staff.
- Provide immediate postpartum support and initiation of breastfeeding, as needed (if applicable and trained to provide such breastfeeding support).

Postpartum Visits - Postpartum services may include the following:

- Discuss the birth experience.
- Discuss importance of postpartum physician/midwife follow up.
- Follow-up on the infant's first wellness checkup scheduling.
- Encourage member to discuss the immunization schedule with the child's healthcare provider.
- If breastfeeding, provide support.
- Review recommendations for postpartum health, including rest/sleep.
- Assist the member in understanding baby cues and suggest techniques for soothing the baby.
- Demonstrate and have the member provide a return demonstration of infant care.
- Educate the member on infant carrying devices available.

An allowance of up to \$3,000 per Covered Person per pregnancy will be provided for doula services.

### Section 8: Exclusions

**Remove** the following exclusions for known egg donor and known donor sperm under Reproduction in Section 8, Exclusions: What the Plan Will Not Cover as follows:

- Known egg donor (altruistic donation i.e. friend, relative or acquaintance) - The cost of donor eggs. Medical costs related to donor stimulation and egg retrieval. This refers to purchasing or receiving a donated egg that is fresh, or one that has already been retrieved and is frozen.

- Known donor sperm (altruistic donation i.e. friend, relative or acquaintance) – The cost of sperm collection, cryopreservation and storage. This refers to purchasing or receiving donated sperm that is fresh, or that has already been obtained and is frozen.

**Add** the exclusions for doula services under Reproduction in Section 8, Exclusions: What the Plan Will Not Cover as follows:

- 1. The following services performed by a doula. This exclusion does not apply to doula services for which Benefits are provided as described under *Maternity Services* in Section 6, *Additional Coverage Details*.
- Childcare expenses
- Meal prep or housekeeping assistance
- Medical diagnosis or treatment
- Administration of medications
- Transportation and Lodging
- Services provided by healthcare providers and covered by your health plan
- Birthing ceremonies
- Still or video photography
- Placenta encapsulation
- Shopping
- Vaginal steams
- Yoga
- Group classes
- Belly binding