

STATE EMPLOYEES' INSURANCE BOARD NOTICE REGARDING THE WELLNESS PROGRAM

The State Employees' Insurance Board (SEIB) Wellness Program is a voluntary wellness program available to all state employees covered under the State Employees' Health Insurance Plan (SEHIP Group 13000). The program is administered according to federal rules permitting employer-sponsored wellness programs that seek to improve employee health or prevent disease, including the Americans with Disabilities Act of 1990, the Genetic Information Nondiscrimination Act of 2008, and the Health Insurance Portability and Accountability Act, as applicable, among others.

If you choose to participate in the wellness program, you will be asked to complete a biometric screening, which will include taking your blood pressure, and measuring your height and weight. It will also include taking a blood sample to check your cholesterol (total, HDL (good), LDL (bad), and triglycerides), and glucose. You will also be asked whether you have or have had high cholesterol, high blood pressure, or diabetes and whether you take medicine for those conditions. The screening is intended to let you know whether you are at risk for certain medical conditions resulting from high blood pressure, obesity, high cholesterol, or diabetes. You are not required to participate in the wellness program and/or participate in the blood test or any other components of the biometric screening.

All active employees, covered spouses of active employees, non-Medicare retirees, and non-Medicare covered spouses of retirees, who are covered under SEHIP Group 13000 and who choose to participate in the wellness program, will receive an incentive in the form of a \$50 per month wellness premium discount. Although you are not required to participate in the wellness program, only those in SEHIP Group 13000 who qualify will receive the premium discount.

If you are unable to participate in the biometric screening, you may be entitled to a reasonable accommodation or an alternative standard. You may request a reasonable accommodation or an alternative standard by contacting the SEIB Wellness Division at 1-866-838-3059.

If you choose to participate in the wellness screening, you can have this performed by your primary care physician; however, all applicable copayments will apply. Participating pharmacies will provide screenings at no charge. For a list of those pharmacies, go to www.alseib.org.

The results from your biometric screening will be used to provide you with information to help you understand your current health and potential risks and may also be used by the SEIB and our business associates to offer you services, such as wellness coaching and/or disease management coaching. You are also encouraged to share your results or concerns with your own doctor.

Protections from Disclosure of Medical Information

The SEIB and its business associates are required by law to maintain the privacy and security of your personally identifiable health information. Although the wellness program and the State of Alabama may use aggregate information the SEIB collects to design a program based on identified health risks in the workplace, the SEIB Wellness Program will not disclose your screening results either publicly or to your employer, except as necessary to respond to a request from you for a reasonable accommodation needed to participate in the wellness program, or as expressly permitted by law. Medical information that personally identifies you that is provided in connection with the wellness program will not be provided to your supervisors or managers and may never be used to make decisions regarding your employment.

Your health information will not be sold, exchanged, transferred, or otherwise disclosed except to the extent permitted by law to carry out specific activities related to the wellness program, and you will not be asked or required to waive the confidentiality of your health information as a condition of participating in the wellness program or receiving a premium discount. Anyone who receives your information for purposes of providing you services as part of the wellness program will abide by the same confidentiality requirements. The only individuals who will receive your personally identifiable health information are nurses, doctors, health coaches and staff from the SEIB and our business associates in order to provide you with services under the wellness program.

In addition, all medical information obtained through the wellness program will be maintained separate from your personnel records, and no information you provide as part of the wellness program will be used in making any employment decision. Appropriate precautions will be taken to avoid any data breach, and in the event a data breach occurs involving information you provide in connection with the wellness program, we will notify you immediately.

You may not be discriminated against in employment because of the medical information you provide as part of participating in the wellness program, nor may you be subjected to retaliation if you choose not to participate.

If you have questions or concerns regarding this notice, or about protections against discrimination and retaliation, please contact the SEIB Wellness Division at 1-866-838--3059.

STATE EMPLOYEES' INSURANCE BOARD
Spousal Notice and Authorization for Wellness Program

You are receiving this Notice and Authorization because the State Employees' Insurance Board (SEIB) is making a voluntary wellness program available to you as the spouse of an employee or non-Medicare retiree. The program is administered according to federal rules permitting employer-sponsored wellness programs that seek to improve health or prevent disease, including the Americans with Disabilities Act of 1990 (ADA), the Genetic Information Nondiscrimination Act of 2008 (GINA), and the Health Insurance Portability and Accountability Act of 1996 (HIPAA), as applicable, among others. Your spouse, who is an employee or retiree of the State of Alabama, will receive a separate Notice regarding the wellness program.

Federal law requires that you provide knowing, written, and voluntary authorization prior to the SEIB's wellness program collecting your genetic information, which includes information about your current or past health status. By signing the Spousal Authorization on either the SEIB Provider Screening Form or Pharmacy Biometric Screening Form, you are agreeing that you have read and understood this notice and authorization and that you are knowingly and voluntarily providing information about the manifestation of your diseases and certain other conditions— considered genetic information – as part of the wellness program. This may include a medical questionnaire that asks whether you have or had certain medical conditions (e.g., high cholesterol, diabetes, or high blood pressure). You may also be asked to complete a medical examination (e.g., a biometric screening). If you are unable to participate in any of the health-related activities, you may be entitled to a reasonable accommodation or an alternative standard. You may request a reasonable accommodation or an alternative standard by contacting the SEIB Wellness Division at 1-866-838-3059 or 1-334-263-8431.

You are not required to complete the questionnaire or the medical examination. You are not required to provide genetic information; however, if you choose not to provide information regarding your own health status, you may not qualify for the full amount of wellness incentives (which may include reduced State Employees' Health Insurance Plan premiums). The wellness program cannot offer you a wellness incentive in return for you providing your own genetic information, including your family medical history, results of your genetic tests, or information about your children's health status or genetic information. Regardless, you and/or your spouse will not be denied access to the State Employees' Health Insurance Plan (or any package of health plan benefits), or subjected to discrimination or retaliation from the State of Alabama if you choose not to participate in the wellness program.

Your health information will not be sold, exchanged, transferred, or otherwise disclosed except to the extent permitted by law to carry out specific activities related to the wellness program, and you will not be asked or required to waive the confidentiality of your health information as a condition of participating in the wellness program or receiving an incentive. Anyone who receives your information for purposes of providing you services as part of the wellness program will abide by the same confidentiality requirements. The genetic information that you provide will be used to: help you understand your current health and potential risks, determine whether you met requirements for wellness incentives (or for a reasonable alternative standard), to design a program to address conditions identified with the genetic information, or may be used to offer you services through the wellness program, such as health coaching, physical activity and nutrition counseling. You also are encouraged to share your results or concerns with your own doctor.

We are required by law to maintain the privacy and security of your individually identifiable genetic or medical information. Although the wellness program and the SEIB may use aggregate information it collects to design a program based on identified health risks, the SEIB will never disclose any of your individually identifiable genetic or medical information either publicly or to your employer or your spouse's employer, except as necessary to respond to a request from you for a reasonable accommodation needed to participate in the wellness program, or as permitted by law. Genetic or medical information that personally identifies you that is provided in connection with the wellness program will not be provided to your employer or your spouse's employer, including your spouse's supervisors or managers and may never be used to make decisions regarding your spouse's employment.

Here is a summary of how we will protect your confidentiality and restrict disclosure of your information:

- The SEIB will retain all enrollment and incentive eligibility materials. Information stored electronically will be protected, and no information you provide as part of the wellness program will be used in making any employment decision.
- Appropriate precautions will be taken to avoid any data breach. If a data breach occurs involving your information, you will be notified.
- Your individually identifiable genetic or medical information will be provided only to you (or a family member whom you authorize) and licensed healthcare professionals and staff involved in providing services under the wellness program. Your individually identifiable genetic or medical information will not be accessible to managers, supervisors, or others who make employment decisions for your spouse, or to anyone else in their workplace except

as permitted by law. Your individually identifiable genetic or medical information will not be disclosed to your employer or your spouse's employer, except in aggregate terms that do not disclose the identity of specific individuals. That aggregate information will be treated as a confidential medical record.

- Your information will not be sold, exchanged, transferred, or otherwise disclosed except to the extent permitted or required by law to carry out specific activities related to the wellness program, and you will not be asked or required to waive the confidentiality of your information as a condition of participating in the wellness program or receiving an incentive. Anyone who receives your information for purposes of providing you services as part of the wellness program will abide by the same confidentiality requirements.

This Notice and Authorization does not restrict any rights you may have under the Americans with Disabilities Act or the Health Insurance Portability and Accountability Act (HIPAA). If the wellness program provides (directly, through reimbursement, or otherwise) medical care (including genetic counseling) the program may constitute a group health plan subject to HIPAA's privacy rules and you will receive a separate HIPAA privacy notice. If you have questions or concerns regarding this Notice and Authorization, or about protections against discrimination and retaliation, please contact the SEIB Wellness Division at 1-866-838-3059 or 1-334-263-8431 employment.