

JOHNS HOPKINS UNIVERSITY
2008 SUMMARY OF MATERIAL MODIFICATIONS
TO THE
EHP CLASSIC PLAN
SUMMARY PLAN DESCRIPTION

The EHP Classic Summary Plan Description (January 2007) (“SPD”) describes the medical benefits provided by Johns Hopkins University under the EHP Classic Plan. The University has amended the medical benefits under the Classic Plan which requires the following changes to the language of the SPD.

These changes take effect for claims incurred on and after January 1, 2008.

Please keep this 2008 Summary together with your 2007 SPD so that you will have a complete explanation of your benefits.

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1. Rules for coverage of dependent children are described starting on page 1 of your SPD. Previously, dependent children were covered until the end of the calendar year in which they turn age 19, or until the end of the calendar year in which they turn age 25 if they are a full-time student. Starting in 2008, dependent children are covered up until their 25th birthday ***regardless of whether or not they are a full-time student***. The second bullet under “Dependent Coverage” on page 1 is changed to read as follows:

- ◆ You or your spouse/same-sex domestic partner’s unmarried dependent child, up until their 25th birthday, if the child depends primarily on you for financial support and lives in your household;

The third bullet under Dependent Coverage, and the discussion under “***Proof of Student Status***” are deleted because there is no longer any requirement that a child be a student in order to have coverage.

2. The Medical Benefits At-A-Glance chart beginning on page 11 sets forth the benefit levels for Preventive Services and Immunizations and Inoculations. Previously, these benefits were only covered at 80% under Option 1 (self-referral In-Network). General physical exams, diagnostic services and GYN exams were not covered at all under Option 2 (Out-of-Network).

Starting in 2008, the benefit levels for these services are increased to 100% under Option 1. General physical exams, diagnostic services and GYN exams are now covered under Option 2 at

the regular 70% Out-of-Network coverage level. This changes the Benefits At-A-Glance chart on page 11 to read as follows:

PREVENTIVE SERVICES	OPTION 1 (In-Network)	OPTION 2 (Out-of-Network)
Adult routine annual physical exam	100%	70% of R&C, after deductible
Diagnostic services	100%	70% of R&C, after deductible
Well-child care	100%	70% of R&C (deductible waived)
Routine Mammogram	100%	70% of R&C, after deductible
GYN exam	100%	70% of R&C, after deductible
ADULT IMMUNIZATIONS AND INOCULATIONS		
For common communicable diseases (as approved by Care Management Program)	100%	70% of R&C, after deductible

Any other statements in the SPD to the effect that general physical exams, diagnostic services or GYN exams are only covered under Option 1 no longer apply, since there is now coverage for these services under Option 2.

3. A \$75 co-pay now applies to facility charges for emergency room visits. This changes the Benefits At-A-Glance chart on page 13 to read as follows:

EMERGENCY SERVICES	OPTION 1 (In-Network)	OPTION 2 (Out-of-Network)
Emergency care (medical emergencies only, i.e. the onset of a sudden and serious condition requiring immediate care)	Facility - covered in full after \$75 co-pay Physician - 80%	Facility - covered in full after \$75 co-pay Physician - 70% of R&C, after deductible

The co-pay does not apply to an emergency room visit if you are then admitted to the hospital as an inpatient. Instead, the standard \$250 co-pay that applies to all hospital admissions must be paid. The information about emergency care on page 24 of your SPD is changed to provide for the \$75 co-pay.

4. Biofeedback treatment is now covered for medically necessary, non-experimental treatment of appropriate conditions, including the following:

- Urinary and fecal incontinence
- Migraine and tension headaches (muscle, thermal or skin biofeedback only; EEG biofeedback is not covered for this condition)
- Temporomandibular joint (TMJ) syndrome
- Neuromuscular rehabilitation of stroke and traumatic brain injury (TBI)
- Reynaud's disease
- Chronic constipation
- Irritable bowel syndrome
- Refractory severe subjective tinnitus
- Levator ani syndrome.

The exclusion for biofeedback training on page 38 of your SPD no longer applies to biofeedback treatment describe above.

5. The Plan provides a Nutritional Counseling benefit, which was not previously described in the SPD. The following is added to the Benefits At-A-Glance chart:

NUTRITIONAL COUNSELING		
Limited to one initial consultation and one follow up visit; additional visits covered if precertified by Care Management	80%	70% of R&C, after deductible

The description of the Care Management Program starting on page 8 is modified to add the following services which require precertification:

- ◆ Nutritional counseling after the initial and one follow up visit;

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If you have any questions about the changes described in this Summary, please contact an EHP Customer Service Representative by calling 800-261-2393 or 410-424-4450. Or, contact the JHU Benefits Service Center.