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Organ and Tissue Donation FAQs

Organ donation and transplantation is a procedure in which organs or tissues from one individual (the donor) are placed into another person's body (the recipient).

Why Become An Organ Donor?

The science of organ transplantation has made great strides in recent years. However, finding organs is still a challenge - there is a critical shortage of organs while the number of people waiting to receive them is rising. There are over 100,000 people on the national organ transplantation waiting list. One organ donor can save as many as 8 people.

How Do I Become A Donor?

There are several ways:

- State your intent to be an organ donor on your driver's license.
- · Register to be a donor at www.organdonor.gov.
- Tell your loved ones you want to be a donor so they know your wishes.

What Organs And Tissues Can Be Donated?

- Organs: heart, kidneys, pancreas, lungs, liver and intestines
- Tissues: corneas, skin, veins, bone, bone marrow, heart valves, middle ear, tendons and ligaments
- Blood and platelets

How Much Does It Cost To Donate Organs?

Nothing. All costs related to donation are paid by the organ recipients and their insurance.

Does Organ Donation Cause Disfigurement?

No. Organ donation does not dramatically change the appearance of the body, and the donation will not interfere with having an open casket funeral.

Who Manages The Distribution Of Organs?

The United Network for Organ Sharing (UNOS) maintains the national Organ Procurement and Transplantation Network. Through the UNOS, organ donors are matched to waiting recipients 24 hours a day, 365 days a year. Patients are matched to organs based on a number of factors, including blood and tissue type, medical urgency, the recipient's time on the waiting list and geographical location.

How Much Does A Transplant Cost?

The transplant process has many costs, including pre-transplant testing, procuring the donated organ, the transplant surgery, follow-up care and lifetime prescription drugs. These costs can total hundreds of thousands of dollars. Without a payment guarantee, someone in need of an organ cannot be placed on a waiting list.



Encourage Nutritious Eating

We all know that kids eat what is available. Because adults usually decide what food kids will eat, it's important to help them form healthy habits now to maintain a healthy weight and avoid future health problems. Small changes in the following key areas can make a huge difference.



Fruits and Vegetables

Kids should eat five fruits and vegetables each day. Frozen and canned fruits and vegetables count too, so serve those if fresh ones aren't available. Offer kids 100 percent juice with no added sugar. For picky eaters, you can mix or hide them in other dishes, like putting peas in rice or cucumbers on sandwiches.

Reduce Fat and Sugar

- Buy low- or non-fat dairy products like milk and yogurt
- Choose lean cuts of meat like skinless chicken
- Bake instead of fry
- Substitute olive or vegetable oil for butter
- Provide less soda and sugar-sweetened drinks
- Serve fruit-based desserts instead of ice cream or cake

Healthy Snacks

Start by reducing the number of snacks served each day. Differentiate between snacks that require permission, such as cookies, and snacks that kids can take freely, like fruit or carrot sticks.

Watch Portion Size

Kids are smaller than adults, so they should eat smaller portions. Portions should be about the size of a child's fist. Use a smaller plate for kids if you're not sure about portion sizes. They can have seconds if they are still hungry, but don't force them to clean their plates if they are full.

Eat Together

Eating together is important for teaching kids to eat well. Family meals focus on eating and enjoying food and each other, and eating together is an opportunity to model good behavior. Regularly scheduled meal and snack times help kids learn a structure for eating that they will carry with them as they grow up.



ACA Litigation May Affect Employers

A New York district court will hear the first case on whether employers may reduce their employees' work hours in order to avoid providing health benefits required under the Affordable Care Act (ACA).

The case is *Marin v. Dave & Busters*—a class action lawsuit claiming that the restaurant chain, Dave & Busters, violated federal law by intentionally interfering with its employees' eligibility for health benefits.

The ACA requires applicable large employers (ALEs) to offer affordable, minimum value health insurance coverage to their full-time employees, or to pay a penalty. For this purpose, a "full-time employee" is defined as an employee that works, on average, at least 30 hours of service per week. In addition, Section 510 of the Employee Retirement Income Security Act (ERISA) prohibits employers and plan sponsors from interfering with an employee's rights to health benefits under the plan.

According to the group of about 10,000 employees who filed suit, their hours were significantly reduced for the purpose of keeping them below the ACA's "full-time employee" threshold.

On Feb. 9, 2016, the court rejected Dave & Busters' motion to dismiss the case. This is the first case of its kind, and will set a precedent for other employers who are considering or have implemented similar strategies regarding their employees' work hours as a result of the ACA.

ACA Rule Changes for 2017

On Feb. 29, 2016, the Department of Health and Human Services (HHS) released its <u>final</u> Notice of Benefit and Payment Parameters for 2017.

For 2017, the rule increases the ACA's out-of-pocket maximum to \$7,150 for self-only coverage and \$14,300 for family coverage.

The rule sets individual coverage open enrollment periods for these benefit years:

- 2017: Nov. 1, 2016 to Jan. 31, 2017
- 2018: Nov. 1, 2017 to Jan. 31, 2018
- 2019 and beyond: Nov. 1 to Dec. 15 of the prior year

The rule also creates a new Exchange model for state-based Exchanges using the federal platform and establishes six standard plan options in the individual federal Exchanges.

DID YOU KNOW?

The growing utilization of private exchanges could prove to be a game changer for health care. According to a recent Kaiser Family Foundation report, about 2.5 million people were enrolled through private exchanges in 2014, including about 1.7 million group plan enrollees, 700,000 individual Medicare enrollees and 100,000 individual enrollees.

The employers that are shifting employees to private exchanges tend to be in lower-wage industries. Still, many of the exchange platforms surveyed anticipated significant growth in the future across industry lines. This trend could be related to continued employer cost control.

Political Discussions in the Workplace

The 2016 presidential race is underway, and opinions and emotions can be strong on both sides. You may want to think about addressing political discussions in the workplace. Do you know what to do if conversations get out of hand?

At private companies, employees do not have unrestricted rights to "free speech" under the First Amendment; an employer can control political speech in the workplace. Therefore, if political speech becomes disruptive to the workplace and interferes with productivity, the employer can discipline the employees involved. However, it is extremely important that you enforce standards consistently and remain neutral.

Employers must remember that certain speech and affiliation is considered protected. The National Labor Relations Board (NLRB) has <u>stated</u> that non-disruptive political advocacy related to employment issues during non-work time and in non-work areas is protected. Employers may, however, enforce neutrally applied restrictions on political advocacy during work time or in work areas.

The above are just a few things employers should be aware of when thinking about addressing political speech in the workplace. You should also check for state laws that govern political activity.

