



Important Notices

For more information about these notices or for questions about your 2024 DISH benefits, contact the DISH HR Operations Team by navigating to Ask for help under Ask HR in HR Link.

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 makes available an online Summary of Benefits and Coverage (SBC), which summarizes important information about your health coverage in a standard format, to help you compare across options (e.g., your DISH plan, a spouse's plan, etc.). The DISH Medical Plan SBC is available in the [Documents Library](#).

Important Notice from DISH Regarding Prescription Drug Coverage and Medicare

The purpose of this notice is to advise you that the prescription drug coverage listed below under the DISH Medical Plan is expected to pay out, on average, at least as much as the standard Medicare prescription drug coverage will pay in 2024. This is known as "creditable coverage."

Why this is important: If you or your covered dependent(s) are enrolled in the DISH Medical Plan during 2024 and are or become covered by Medicare, you may decide to enroll in a Medicare prescription drug plan later and not be subject to a late enrollment penalty — as long as you had creditable coverage within 63 days of your Medicare prescription drug plan enrollment. You should keep this notice with your important records.

If you or your family members aren't currently covered by Medicare and won't become covered by Medicare in the next 12 months, this notice doesn't apply to you.

Notice of Creditable Coverage

Please read this notice carefully. It has information about prescription drug coverage under the DISH Medical Plan and prescription drug coverage available for people with Medicare. It also tells you where to find more information to help you make decisions about your prescription drug coverage.

You may have heard about Medicare's prescription drug coverage (called Part D) and wondered how it would affect you. Prescription drug coverage is available to everyone with Medicare through Medicare prescription drug plans. All Medicare prescription drug plans provide at least a standard level of coverage set by Medicare. Some plans also offer more coverage for a higher monthly premium.

Individuals can enroll in a Medicare prescription drug plan when they first become eligible, and each year from October 15 through December 7. Individuals leaving employer/union coverage may be eligible for a Medicare Special Enrollment Period.

If you're covered by the DISH Medical Plan, you'll be interested to know that prescription drug coverage is, on average, at least as good as standard Medicare prescription drug coverage for 2024. This is called creditable coverage. Coverage under the plan will help you avoid a late Part D enrollment penalty if you are or become eligible for Medicare and later decide to enroll in a Medicare prescription

drug plan. If you decide to enroll in a Medicare prescription drug plan and you're an active employee or family member of an active employee, you may also continue your employer coverage. In this case, the employer plan will continue to pay primary or secondary as it had before you enrolled in a Medicare prescription drug plan. If you waive or drop the DISH Medical Plan coverage, Medicare will be your only payer. You can re-enroll in the employer plan at Annual Enrollment or if you have a special enrollment event for the DISH Medical Plan.

You should know that if you waive or leave coverage with the DISH Medical Plan and you go 63 days or longer without creditable prescription drug coverage (once your applicable Medicare enrollment period ends), your monthly Part D premium will go up at least 1% per month for every month that you did not have creditable coverage. For example, if you go 19 months without coverage, your Medicare prescription drug plan premium will always be at least 19% higher than what most other people pay. You'll have to pay this higher premium as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to enroll in Part D.

You may receive this notice at other times in the future — such as before the next period you can enroll in Medicare prescription drug coverage, if the DISH Medical Plan coverage changes, or upon your request.

For more information about your options under Medicare prescription drug coverage

More detailed information about Medicare plans that offer prescription drug coverage is in the Medicare & You handbook. Medicare participants will get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare prescription drug plans. Here's how to get more information about Medicare prescription drug plans:

- Visit www.medicare.gov for personalized help.
- Call your State Health Insurance Assistance Program (see a copy of the Medicare & You handbook for the telephone number).
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

For people with limited income and resources, extra help paying for a Medicare prescription drug plan is available. For information, contact the Social Security Administration (SSA) online at www.socialsecurity.gov or call 1-800-772-1213 (TTY 1-800-325-0778).

Remember: Keep this notice. If you enroll in a Medicare prescription drug plan after your applicable Medicare enrollment period ends, you may need to provide a copy of this notice when you join a Part D plan to show that you're not required to pay a higher Part D premium amount.

Date: January 2024

Name of Entity/Sender: DISH Health and Welfare Plan

Contact — Position/Office: HR Operations Team

Address: 9601 South Meridian Boulevard

Englewood, CO 80112

Phone Number: 866-395-8083

Notice of Availability of Notice of Privacy Practices

The Health Insurance Portability and Accountability Act (HIPAA) protects the use and disclosure of individual health information. DISH provided you with a notice describing your rights under HIPAA. At your request, they can provide you with a copy of this notice. To obtain a copy, contact the DISH HR Operations Team by navigating to Ask for help under Ask HR in HR Link.

HIPAA Special Enrollment Rules

If you have declined enrollment in the DISH Medical Plan for you or your dependents (including your spouse) because of other health insurance coverage, you or your dependents may be able to enroll in medical, dental, and vision coverage under this plan without waiting for the next Annual Enrollment period if you:

- Lose other health insurance or group health plan coverage. You must request enrollment within 30 days after the loss of other coverage.
- Gain a new dependent as a result of marriage, birth, adoption or placement for adoption. You must request enrollment within 30 days after the marriage, birth, adoption, or placement for adoption
- Lose Medicaid or Children’s Health Insurance Program (CHIP) coverage because you’re no longer eligible. You must request enrollment within 60 days after the loss of such coverage.

If you request a change due to a special enrollment event within the 30-day time frame, coverage will be effective on the date of birth, adoption, or placement for adoption. For all other events, coverage will be effective the first of the month following your request for enrollment. In addition, you may enroll in the DISH Medical Plan if you become eligible for a state premium assistance program under Medicaid or CHIP. You must request enrollment within 60 days after you gain such coverage. If you request this change, coverage will be effective the first of the month following your request for enrollment. Specific restrictions may apply, depending on federal and state law.

Note: If your dependent becomes eligible for special enrollment rights, you may add the dependent to your current coverage or change to another medical plan. Any other currently covered dependents may also switch to the new plan in which you enroll.

Medicaid and the Children’s Health Insurance Program (CHIP) Offer Free or Low-Cost Health Coverage to Children and Families

If you or your children are eligible for Medicaid or CHIP and you’re eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren’t eligible for Medicaid or CHIP, you won’t be eligible for these premium assistance programs, but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit www.healthcare.gov.

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, ask your state Medicaid or CHIP office, or dial 877-KIDS NOW or go to 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.

If it’s determined that you and/or your dependents are eligible for premium assistance under Medicaid or CHIP, DISH medical plan is required to permit you and/or your dependents to enroll in the plan, as long as you and/or your dependents are eligible but not already enrolled in it. 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 866-444-EBSA (3272).

Review the latest [list of states](#). If you live in one of these states, you may be eligible for assistance paying your employer health plan premiums. You should contact your state for further information on eligibility.

Women’s Health and Cancer Rights Act

If you or one of your covered dependents has had or is going to have a mastectomy, you may be entitled to certain benefits under the Women’s Health and Cancer Rights Act (WHCRA). For individuals receiving mastectomy-related benefits, coverage will be provided for the following services in a manner determined in consultation with the attending physician and the patient:

- 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.
- Treatment of physical complications of all stages of the mastectomy, including lymphedemas.

These benefits will be provided subject to the same deductibles and coinsurance applicable to other medical and surgical benefits available under the DISH Medical Plan.

If you would like more information on WHCRA benefits, visit The HOP or contact the DISH HR Operations Team by navigating to Ask for help under Ask HR in HR Link.

Newborns’ and Mothers’ Health Protection Act of 1998

Group health plans and health insurance issuers generally may not, under federal law, restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child to less than 48 hours following a vaginal delivery, or less than 96 hours following a cesarean section. However, federal law generally doesn’t prohibit the mother’s or newborn’s attending provider, after consulting with the mother, from discharging the mother or her newborn earlier than 48 hours (or 96 hours as applicable). In any case, plans and issuers may not, under federal law, require that a provider obtain authorization from the plan or the insurance issuer for prescribing a length of stay not in excess of 48 hours (or 96 hours). If you would like more information on maternity benefits, visit The HOP or contact the DISH HR Operations Team by navigating to Ask for help under Ask HR in HR Link.

Consolidated Omnibus Budget Reconciliation Act (COBRA)

If you’re an employee with medical, dental, or vision coverage through DISH, you have the right to choose continuation coverage if you lose your group health coverage due to reduction in your hours of employment or the termination of your employment for reasons other than gross misconduct. Your eligible dependents may also have the right to elect and pay for continuation of coverage for a temporary period in certain circumstances where coverage under the plan would otherwise end, such as divorce, or dependent children who no longer meet eligibility requirements.

Important Notice: This brief summary of the right you and your dependents have to continue insurance is not intended as the official notice of your rights required by federal and state law. We’ve included this brief summary to inform you that you have these rights. You’ll receive a separate, detailed explanation of your right to continue health insurance coverage when applicable.

Insider Trading Notice

No employee may purchase or sell DISH Network Securities at any time when they have knowledge of material non-public information relating to DISH Network or any of its subsidiaries, including Blockbuster. Nor may employees disclose material non-public information relating to DISH Network or its subsidiaries to others, except in filing with the SEC or through the general dissemination of a press release previously approved by the Chief Executive Officer and the General Counsel of DISH Network.

This policy also applies to material information relating to any other company, including DISH Network’s customers or suppliers (including EchoStar Corporation), obtained in the course of employment.

Undisclosed material information is defined as any information that would be considered important to a reasonable investor in making an investment decision.

It is not possible to list all the types of information that might be considered material. However, examples may include information about production, earnings and other financial information, proposed acquisitions or mergers, proposed public or private offerings. In short, material information may be a development that might influence the reasonable investor in deciding whether to trade in DISH Network Securities.

Consequences of insider trading can include termination of your employment and civil and/or criminal penalties for violations of, among other things, applicable securities laws. DISH Network's insider trading policy is available on the legal department's webpage. If after reading this policy, or at any other time, you have questions about insider trading, you should contact the legal department.