

Healthcare Coverage Options



As a small business owner, you want to provide high-quality health benefits for your employees. It helps your workforce stay healthy and productive, plus it's an important factor in attracting new talent. Businesses have unique needs, which is why Medical Mutual offers multiple plans that are compliant with the Affordable Care Act (ACA). We're ready to help you decide which option is right for your employees—and for your business.



Why Choose Medical Mutual?

Based in Cleveland, we have sales, service and information technology offices in eight locations across the state. We serve more than 1.4 million members with 2,400 Ohio-based employees, who pride themselves on their service to our customers and communities.

Access to high-quality doctors and hospitals

Your employees may have specific doctors they want to see. With our network of providers, your employees have access to nearly every healthcare professional in Ohio and 99 percent of the hospitals. We partner with national network providers to make sure our members are covered — even when they travel. Your employees can access our entire network, whether you buy through our private marketplace or through a broker.

Local customer service, just a phone call away

Most of our employees work and live in Ohio—just like yours. So we're equipped to service the specific needs of your business. Our Customer Care Center handles thousands of calls each day, providing prompt responses to customer needs and questions. Nearly 95 percent of our calls are resolved during the initial contact. We also process thousands of claims each day, with 99 percent accuracy.

Our employees are your customers

As our customer, you are automatically enrolled in our employee incentive program called Mutual Appreciation. The program encourages our employees to shop with our customers. Employees have supported the program with more than \$120 million in purchases from our customers in just five years. We have many examples of employees taking the extra time to patronize one of our customers.

Giving back to the communities we serve

We invest in your communities, because they are our communities, too. We are dedicated to improving the quality of life in the communities we serve by supporting non-profit and charitable organizations. Every year, our employees contribute thousands of hours as volunteers for community events and initiatives focusing on health, wellness, education and many other worthwhile causes.

We're a mutual company — and we work for you

As a mutual health insurance company, we are owned and operated for the benefit of our members, with products and services designed and priced in your best interest. Unlike publicly traded insurance companies that must operate to maximize their financial return, we don't answer to stockholders and Wall Street analysts.

Small Group Employer Criteria

ACA provisions apply differently to small and large group employers. To be considered a small group, you must have 50 or fewer employees, which includes full-time and full-time equivalent (FTE) employees. The number of FTE employees is calculated using anyone you employ who works fewer than 30 hours per week on average.

Calculating Your Full-Time Employees' Hours



Add total hours of service for all employees who worked less than 30 hours per week for the month. (Total per employee should not exceed 120 hours worked that month.)

Hourly Employees

Calculate actual hours of service from records of hours worked and hours for which payment is made or due for vacation, holiday, illness, incapacity (including disability), layoff, jury duty, military duty or leave of absence.

Non-Hourly Employees

Use one of the following methods:

- 1. Count actual hours of service (as in the case of employees paid on an hourly basis) from records of hours worked and hours for which payment is made or due for vacation, holiday, illness, incapacity (including disability), layoff, jury duty, military duty or leave of absence.
- 2. Use a "days-worked equivalency" method whereby an employee is credited with eight hours of service for each day the employee is required to work or is credited/paid.
- 3. Determine number of full weeks (40 hours per week) an employee has worked. Include paid time off in terms of weeks worked. Exclude any unpaid leaves. Multiply number of weeks by 40 to calculate the hours credited to that employee.
- Divide total hours of service for the month by 120.
- Add total number of full-time equivalent employees to number of full-time employees. If this equals fewer than 50 employees, you qualify as a small group employer under federal law. (Note: There may be an exception if your total employee count includes seasonal employees).



Health insurers can only vary premiums for non-grandfathered small groups based on family size (individual or family), geography (rating area), age (within a ratio of 3:1 for adults) and tobacco use (within a ratio of 1.5:1).

Maximum Out-of-Pocket Expenses

All non-grandfathered plans must limit annual out-of-pocket expenses for covered members. This limit only applies to costs associated with in-network services that qualify as Essential Health Benefits. The out-of-pocket limits will change each year.

Health Coverage

When you partner with Medical Mutual, we help your employees stay healthier so they can be more productive. Our plans cover all routine preventive care, which helps identify and address risk factors before they lead to illness. Prescription drug benefits and wellness programs are also included.

Preventive Care

When your employees receive preventive care services from a provider in our network, they are covered with no cost sharing. That means employees will not be charged a copay, coinsurance or deductible. However, out-of-network charges may apply if the services are performed by a non-network provider.

A preventive care visit may include a complete physical exam, vaccines to prevent disease, cancer screening tests and certain lab tests. Primary care providers will also discuss actions your employees can take to improve their health.

The list of covered preventive services is subject to change based on federal and state regulations. However, most fall into one of these broad categories:

- Preventive physical exams and screening tests (e.g., diabetes, cholesterol, high blood pressure, sexually transmitted diseases)
- Women's services (e.g., contraception, prenatal services, breast cancer screenings, well-woman visits)
- Immunizations (e.g., hepatitis, shingles, influenza, chicken pox)
- Counseling and education interventions (e.g., diet and nutrition, disease prevention, alcohol or drug abuse)

Prescription Drug Benefits

We partner with Express Scripts, our pharmacy benefit manager, to offer integrated solutions that help our clients and their covered employees better manage their healthcare and costs. We make sure our members receive the care and attention they deserve by:

- Coordinating and integrating care with other clinical areas, especially for members with complex conditions or those who need specialty medications
- Encouraging the use of formulary drugs (a formulary is a list of preferred brand-name and generic medications for which members pay a lower out-of-pocket charge)
- Providing access to a nationwide network of independent, chain and mail-order pharmacies
- Offering 24-hour access to speak with a pharmacist about questions or concerns
- Providing online tools to access pharmacy claim information, price alternative medications and information about diseases and treatments

Essential Wellness Program

Our Essential wellness program is available to Medical Mutual groups at no additional charge. It focuses on education and provides employees with tools to help them learn about their overall health and their risk for developing chronic conditions.

The Essential program seeks to help employees improve lifestyle behaviors through the following elements:

Wellness Portal

Your employees can learn about a wide variety of health and wellness topics and receive reminders about needed care through our online Wellness Portal. Interactive tools and trackers are available to help you set and achieve wellness goals in one or more of the following areas: maintaining a healthy weight, quitting tobacco, being active, managing stress and eating healthier.

Health Assessment

Completing the Health Assessment can help your employees understand their overall health and identify risk for certain chronic diseases. Based on the results, employees can receive a personalized set of recommended behavior changes to improve their overall health. Aggregate reporting is also available to help you determine appropriate wellness programs to address risk within your employee population.

Healthy Outlooks Newsletter

This publication offers articles on a variety of important health issues and provides consumer health plan education and tips for accessing different services available through Medical Mutual.

Weight Watchers® Reimbursement

Employees can save almost 50 percent off the regular cost of a Weight Watchers membership. They can choose to attend Community Meetings in their area or participate in Weight Watchers Online from the comfort of their home. We also offer a Weight Watchers for Diabetes program for any employees who have been diagnosed with Type 2 diabetes.

QuitLine Program

Our QuitLine is available to help tobacco users give up the habit for good by providing one-on-one coaching, a personalized quit plan and educational materials. In addition, nicotine replacement therapy is available to maximize their chances of quitting.

Fitness Discounts

Your employees can save money on memberships to local and national fitness clubs through our Fitness Discounts program.

Health Promotion Mailings

Based on your employees' records of healthcare activity (e.g., Health Assessment results, claims, prescriptions), they will receive personalized educational materials about medical conditions, lifestyle issues, missed services and recommended preventive screenings.



Additional Benefits

Employees can supplement their medical benefits with our dental, vision, life or indemnity coverage options. From teeth cleanings and fillings to eye exams and contact lenses, your employees will have the comprehensive coverage they need to maintain their oral and eye health. In addition, our life and indemnity insurance help give your employees and their loved ones peace of mind.

Dental

Keep your employees smiling with dental coverage from Medical Mutual. We partner with DenteMax, a national dental network, to offer your employees access to an extensive network of general practitioners, periodontists, prosthodontists, orthodontists and oral surgeons. Pediatric dental coverage is required for all covered dependents and employees up to age 19.

Vision

Glasses or contact lenses can be costly expenses, as are annual examinations. Our plans provide coverage that includes eye exams, eyeglass lenses, frames and contact lens benefits through an expansive network of participating EyeMed provider locations. Pediatric vision coverage is required for all covered dependents and employees up to age 19.

Life Insurance

Make sure your employees and their loved ones are financially prepared in the event of an untimely or unexpected death. With our group term life insurance plans, you can provide coverage based on salary or a flat benefit amount through our subsidiary, Consumers Life.

Indemnity Insurance

An unexpected illness or accident can be financially devastating. With our new indemnity plans, you can offer employees an extra layer of protection—hospital, accident and critical illness insurance that pays a cash benefit to help cover out-of-pocket expenses such as deductibles and personal bills.

Flexible Tax-Advantaged Options

We know that getting employees involved in managing their healthcare dollars can lead to better consumer healthcare spending and savings habits. That is why we offer qualified high-deductible health plans (QHDHPs) that include health savings accounts (HSAs) for your employees. In addition, we offer flexible spending account (FSA) options and a Medical Mutual debit card—all designed to encourage better consumer healthcare spending and savings habits.

For all accounts, we give your employees direct access to their benefits and an Ohio-based customer care team ready to answer any questions. We provide full administrative support, with employer tools designed to help you manage your employees—from onboarding to daily operations.

Medical Mutual's HSA

Used in conjunction with a HDHP-compatible plan, the Medical Mutual HSA gives your employees three tax advantages:

- Contributions can be made tax free
- The HSA balance earns interest tax free
- Qualified medical expense payments from the account are tax free

Medical Mutual's FSA

By offering a Medical Mutual FSA, you'll receive a tax benefit for your company. Employers are not required to pay the employer portion of the Social Security tax, known as Federal Insurance Contributions Act (FICA), on employee contributions to FSAs. This amounts to 7.65 percent (2017 percentage) of each employee's taxable income. In effect, payroll taxes are reduced by 7.65 percent of the total employee contributions to the FSA.

Benefits and Plan Integration

Medical Mutual's tax-advantaged accounts let your employees manage their Medical Mutual benefits and HSA and FSA together through My Health Plan, our secure member website. By using one username and password to connect health benefits and tax-advantaged account information, we provide full access quickly and easily.

Medical Mutual Debit Card

The debit card allows your employees to use the funds in their account(s) to pay for eligible expenses without having to submit claims or wait for reimbursement depending on the plan type. One card can manage multiple account types, such as an HSA and an FSA.



Tools & Resources

As your healthcare partner, Medical Mutual offers online tools to make managing health insurance easy for you and your employees.

EmployerLink

With EmployerLink, you can quickly take care of your day-to-day health management duties:

- Add/cancel employees
- Change personal and dependent information
- Order ID cards
- Pay your monthly bill
- View certificate books

My Health Plan

With our secure, members-only website, covered employees can manage their health benefits from the convenience of their computer. In addition to using our Find a Provider tool and My Care Compare, members can use My Health Plan to:

- View plan benefits and claims information
- Reference certificate books, Explanation of Benefits statements and other documents
- Compare provider and treatment costs

Mobile App for iPhone and Android Devices

With the MedMutual mobile app, your employees can use their health plan more effectively wherever they go. The MedMutual app allows members to:

- Access their ID card from their phone and email or fax it to their healthcare providers
- Find in-network doctors, hospitals and urgent care facilities and get directions to the nearest location
- View claims, deductible and out-of-pocket spending information

Paperless Options

Employees can store their health information online in a safe, convenient location and sign up to receive alerts when new Explanation of Benefits statements or Summary of Benefits and Coverage documents are available. Other benefits of going paperless include:

- Fast and safe access to online claims information (for up to two years)
- Protection against identity theft and fraud
- Less paper clutter

Learn More

Contact your broker to learn more about Medical Mutual's small group benefit plan options. If you don't have a broker, contact your Medical Mutual sales representative to help you find a reputable one.