APRIL 2019

Better Health



BENEFITS INSIDER

IMPORTANT DATES

MONDAY, APRIL 29

Open enrollment begins.

WEDNESDAY, MAY 1

2019 Annual Physical and Tobacco Attestation Form is due to Diocese.

FRIDAY, MAY 17

Open enrollment ends.

MONDAY, JULY 1

Your 2019/2020 benefits are effective.

GET EDUCATED AT THE UPCOMING BENEFIT FORUMS

There are 10 Benefit Forums scheduled starting April 10. See page 5 for all the details.



Visit
www.MyDOCBenefits.com
to find information about your
benefit plans.

NEW FOR 2019/2020 The MMO MEDFLEX EPO

Another lower cost medical plan option so you don't overpay.

See page 4 for details.



April 3, 2019

Finance Office

To Our Valued Employees,

Welcome back to our annual Benefits Insider Newsletter.

As we embark on our upcoming open enrollment season we have some very good news to share. Although Diocesan annual medical costs continue to grow at a rate of 7-10% per year, we are able to offer several plans that will help you save money.

Our theme is **GET EDUCATED – DON'T OVERPAY!** We've worked hard to offer many lower cost plan options and invite you to attend one of the Benefit Forums to learn how to select the plan that's the best value for you and your family.

Thankfully, over 50% of our healthplan members have few medical needs during the year. Even members with chronic conditions may not have expensive healthcare needs. Yet surprisingly, many members continue to stay enrolled in the highest cost plan – even though their healthcare costs may never exceed the deductible. If you're in this situation, you may be buying more insurance than you need. This year be sure to GET EDUCATED – DON'T OVERPAY!

The new rates for Medical Mutual PPO/Health Savings Account (MMO PPO/HSA) plan have been reduced by about 10%. When the incentives for not using nicotine (or completing a cessation program) and having your annual physical are included, the employee rate is only \$25 a month. That's less than a dollar a day for a high quality health plan. In addition, there is still the annual \$500/employee and \$1,000/family contribution being made into your health savings account.

There are two other options available, both of which will allow you to save money compared to our traditional Medical Mutual PPO plan.

Last year we introduced the MetroSelect EPO plan that now has a new name, **SkyCare EPO**. It also has expanded the network to include LakeHealth facilities which will be of interest to members in the Lake County area.

This year we are introducing a new plan, the Medical Mutual MedFlex EPO plan. Similar to the SkyCare EPO plan, you must receive your healthcare from one of the many in-network facilities and providers. The premiums are lower than the Medical Mutual PPO plan.

Please read this newsletter carefully, visit our website, www.MyDOCBenefits.com, for more information and **make an informed choice when you choose your health plan**. The most expensive plan is not necessarily the best one for you and your family.

In closing, I want to thank all of you for all you do, every day and in every way, to advance the mission of our Church in Northeast Ohio.

Sincerely,

James P. Gulick, Chief Financial Officer

YOUR 2019/2020 HEALTH CARE COVERAGE OPTIONS

Choose the Option That Best Fits Your Budget

You now have four plans to choose from:

- The Medical Mutual PPO (MMO PPO);
- The Medical Mutual PPO/Health Savings Account (MMO PPO/HSA);
- The SkyCare EPO plan (formerly named MetroSelect EPO) plan; and,
- The NEW Medical Mutual MedFlex EPO plan.



Here's a snapshot of each one. Remember, when selecting a plan, the most expensive one is not necessarily the best fit for your budget and lifestyle. Keep in mind that if you select an EPO plan, you will have coverage only when you use the exclusive network of providers except in cases of emergencies.

MMO PPO/HSA - NO CHANGE TO BENEFITS!

The big news here is that the rates have been reduced by about 10%. And, the plan design stays the same. In addition, this plan includes an annual \$500/employee and \$1,000/family contribution to your health savings account.

Critical Illness insurance is included with the MMO PPO/HSA plan. This coverage pays a lump sum when a covered serious illness is diagnosed. See page 3 for details.

MMO PPO:

The PPO plan rates have increased from last year and remain the highest premiums of the plan options. However, the deductibles have *not* increased and there is *no* increase in non-emergencies, specialists and urgent care this year. The emergency room copays remain at \$150 for emergencies and at **\$500 for non-emergencies**. Copays will be waived if the patient is admitted to the hospital as a result of the emergency. The copay for a specialist office visit remains at \$50 per visit and the copay for Urgent Care facility visits remains at \$30 per visit.

MMO MEDFLEX EPO (Exclusive Provider Organization):

This plan is a new option this year. It is an EPO plan meaning that you must receive your healthcare from one of the many innetwork facilities and providers. The providers include University Hospital system, LakeHealth and Summa. The Cleveland Clinic is not in the network. To find a provider, go to https://providersearch.medmutual.com and click 2019 Plans under Just Looking Around? Next, select group under What Type of Insurance are you Looking for?, then select Next. Finally Select MedFlex and Enter Provider Information and click, "Search Providers."

SKYCARE EPO (Exclusive Provider Organization) (Formerly METROSELECT EPO):

This plan requires that you receive your healthcare from one of the many SkyWay Network facilities and providers. There are many in Cuyahoga County and, new for this year, LakeHealth has been added to the network. So, if you live or work in Lake County, this will be of interest to you.

Medical Plan Rate and Benefit Overview

2019/2020 Plan Options	MMO PPO/HSA	MMO PPO	MMO MedFlex	SkyCare EPO		
•	ibution Single/Fa		Meditex	LFO		
0 incentives	\$55/\$209	\$167/\$611	\$157/\$576 \$148/\$5			
1 incentive	\$40/\$179	\$152/\$581	\$142/\$546	\$133/\$513		
2 incentives	\$25/\$149	\$137/\$551	\$127/\$516	\$118/\$483		
Out-of-Network Coverage						
	Yes	Yes	NO	NO		
Annual Deductible (In-network)						
Single	\$3,000	\$1,000	\$750	\$500		
Family	\$6,000	\$2,000	\$1,500	\$1,000		
Annual Out-of-p	Annual Out-of-pocket Maximum (In-network)					
Single	\$4,000	\$3,000	\$2,500	\$2,000		
Family	\$8,000	\$6,000	\$5,000	\$4,000		
Co-insurance Percentage						
In-network	80%	80%	80%	90%		
Annual Health Care Plan HSA Contribution						
Single	\$500	N/A	N/A	N/A		
Family	\$1,000	N/A	N/A	N/A		

MEDICARE AND DIOCESAN HEALTH CARE COVERAGE

If you are a lay person over 65 and still working, you may choose Medicare or one of the Diocesan healthcare plans.

If you choose a
Diocesan healthcare
plan and are also
enrolled in Medicare,
then Medicare will be
the secondary payer of
benefits.

THE PPO/HSA PLAN: A GREAT DEAL GETS BETTER!

What's different about the PPO/HSA plan? Plenty! But let's start with this: the rates are now lower.

If you're in good health, you probably don't need much medical care. In that case, you can **save a lot of money** when you select the MMO PPO/HSA Plan. It's also good to remember that the MMO PPO/HSA covers preventive care, such as your annual physical, 100%. Use the chart below to help calculate what you might be able to save if you select the MMO PPO/HSA option.

Select the sample savings that fit your family: single or family coverage. In these examples, covered individuals accumulated \$500 per person in medical expenses throughout the year.

Note: Total HSA tax-free contribution maximums (including the Diocesan contribution) for 2019 are \$3,500 for single and \$7,000 for family coverage.

How Much Can YOU Save with the	Calculate YOUR Savings	EXAMPLES (2 incentives)		
PPO/HSA Option?		Single	Three-Person Family	Two-Person Family
Monthly PPO Premium		\$137	\$551	\$551
Monthly PPO/HSA Premium		\$25	\$149	\$149
Monthly Premium Savings	=	\$112	\$402	\$402
Total Yearly Premium Savings x12	=	\$1,344	\$4,824	\$4,824
2019/2020 Diocesan HSA Contribution	+	\$500	\$1,000	\$1,000
Cash Savings	=	\$1,844	\$5,824	\$5,824
Less Estimated Medical Costs (\$500 per person)		(\$500)	(\$1,500)	(\$1,000)
Potential Savings	=	\$1,344	\$4,324	\$4,824

You May NOT Need the Lower Deductible and Lower Out-of-Pocket Maximums of the Expensive MMO PPO Plan

More than 40% of our health plan participants **spend less than \$500 annually** and more than 90% spend less than \$2,000 annually on out-of-pocket medical expenses.

The PPO/HSA Includes Critical Illness Insurance: A Valuable Benefit

In the new plan year, the Diocese will continue to package Critical Illness Insurance with the MMO PPO/HSA plan. There is no added charge to you for this additional coverage.

While the money can be used for ANY purpose, and does not have to be deposited into your HSA, this important benefit may reduce the need to withdraw money from your HSA if you are stricken by a covered medical condition, many of which can be very costly.

The critical illness insurance will pay a lump sum of *up to \$12,000* to individuals (employees or covered family members) in the event of a covered serious, costly medical event such as a heart attack, kidney failure or major organ transplant, among others.

See the Benefits website for more details.

Covered Conditions	Initial Benefit (1st Occurrence After Effective Date)	Recurrence Benefit
Full Benefit Cancer	100% of \$12,000 Benefit	100%
Partial Benefit Cancer	25% of \$12,000 Benefit	25%
Heart Attack	100% of \$12,000 Benefit	100%
Stroke	100% of \$12,000 Benefit	100%
Coronary Artery Bypass Graft	100% of \$12,000 Benefit	100%
Kidney Failure	100% of \$12,000 Benefit	NONE
Alzheimer's Disease	100% of \$12,000 Benefit	NONE
Major Organ Transplant	100% of \$12,000 Benefit	NONE
22 Additional Listed Conditions	25% of \$12,000 Benefit	NONE

NOTE: There is a \$36,000 lifetime maximum benefit per person.

INTRODUCING...THE NEW EPO PLAN: MEDFLEX

Now there are two EPO (Exclusive Provider Organization) plans from which to choose.

Last year we introduced the MetroSelect EPO, now named SkyCare EPO. This year we are introducing the Medical Mutual EPO plan, MedFlex. You must receive your healthcare from one of the many in-network facilities and providers. The providers include University Hospital system, LakeHealth and Summa. **The Cleveland Clinic is not in the network.** Here's some quick tips on these plans. Please refer to the chart below for details and also visit the benefits website.

Compared to the MMO PPO plan both these plans have: **LOWER DEDUCTIBLES**, **LOWER OUT OF POCKET MAXIMUMS**, **LOWER COPAYS**, **AND LOWER PREMIUMS**.

The design of these plans is best suited for folks who need regular healthcare and perhaps already get most of their health care from a provider who is already in the MedFlex or SkyCare EPO network. **But remember, and this is VERY IMPORTANT, you must get health care from one of the network providers.** There are no benefits, other than for emergency care, if you do not use a network doctor, lab, outpatient facility or hospital. Both plans allow prescriptions to be filled at a CVS/Caremark pharmacy. Note that with the SkyCare EPO plan, the cost for prescriptions is less at a SkyCare pharmacy.

So, if you are interested in a lower cost health plan and do not want to enroll in the MMO PPO/HSA plan then these plans could be a good alternative to the traditional, and more expensive, MMO PPO plan.

What's an EPO Plan? An Exclusive Provider Organization plan (EPO plan), is a health plan that offers a local network of providers. However, if you choose to get care outside of the plan's network, the cost will not be covered except in an emergency. The Diocese offers two EPO choices, both of which have lower costs and lower out-of-pocket expenses than the MMO PPO plan.

PLAN NAME	MEDFLEX EPO		SKYCARE EPO	
	Network	Non-Network	Network	Non-Network
Deductible (Embedded)	\$750/\$1,500	Not Covered	\$500/\$1,000	Not Covered
Coinsurance	80%	Not Covered	90%	Not Covered
Out-of-pocket Maximum	\$2,500/\$5,000	Not Covered	\$2,000/\$4,000	Not Covered
GENERAL SERVICES				
Preventive Care Office Visit	100%	Not Covered	100%	Not Covered
PCP Office Visit	\$20 Copay	Not Covered	\$20 Copay	Not Covered
Specialist Office Visit	\$40 Copay	Not Covered	\$40 Copay	Not Covered
X-ray/Lab Services	80%	Not Covered	90%	Not Covered
Urgent Care	\$25 Copay	Not Covered	\$25 Copay	Not Covered
Emergency Services at ER	\$150 Copay, then 100% Paid		\$150 Copay, then 100% Paid	
Non-emergency Services at ER	\$500 Copay, Ded./Coins.	Not Covered	\$500 Copay, Ded./Coins.	Not Covered
FACILITY BASED SERVICES				
Inpatient Facility Services	80%	Not Covered	90%	Not Covered
Outpatient & X-ray/Lab Facility Services	80%	Not Covered	90%	Not Covered
PRESCRIPTION DRUG BENEFITS	CVS/Caremark		SkyWay Pharmacy	CVS/Caremark
Retail Generic / Tier 1	\$10 Copay		\$10 Copay	\$10 Copay
Retail Brand Formulary / Tier 2	20%, \$25 Minimum / \$75 Maximum		\$20 Copay	20%, \$25 Minimum \$75 Maximum
Retail Brand Non-formulary / Tier 3	40%, \$40 Minimum / \$150 Maximum		\$40 Copay	40%, \$40 Minimum \$150 Maximum
Mail Generic / Tier 1	\$25 Copay		\$10 Copay	\$25 Copay
Mail Brand Formulary / Tier 2	20%, \$60 Minimum / \$150 Maximum		\$50 Copay	20%, \$60 Minimum \$150 Maximum
Mail Brand Non-formulary / Tier 3	40%, \$90 Minimum / \$300 Maximum		\$80 Copay	40%, \$90 Minimum \$300 Maximum
Monthly Premiums (No Incentives) Single / Family	\$157 / \$576		\$148 / \$543	

NEW: AN EXPANDED SET OF ONSITE BENEFIT FORUMS

Your opportunity to learn all about the new benefit plans for 2019/2020

This year we have an expanded schedule of onsite Benefit Forums. Check the table below for a date and location that works for you. This is your chance to hear about the details of these plans.

Get educated on the differences between the medical plans. Then, you'll be prepared to enroll in the plan that best fits your needs.

Date	Time	Location
April 10	4:00 pm	Holy Martyrs (Medina)
April 11	4:00 pm	St. Mark (Cleveland)
April 12	4:00 pm	St. Basil (Brecksville)
April 29	6:00 pm	Holy Name High School (Parma)
April 30	4:00 pm	St. Hilary (Akron)
May 1	5:00 pm	St. Clarence (North Olmsted)
May 3	5:00 pm	Center for Pastoral Leadership (Wickliffe)
May 6	5:00 pm	Elyria Catholic High School (Lorain County)
May 7	4:00 pm	Ss. Robert and William (Euclid)
May 8	4:00 pm	Catholic Charities (Cleveland)



DON'T OVERPAY – Tips for Members in the MMO PPO Plan

LAB SERVICES - Last year, a new cost-reduction program was implemented to reduce the expenses of many standard types of lab services and tests. A Maximum Allowable Cost is set for non-emergency lab services involving about 40 basic tests and blood work. These maximums are needed to avoid being charged high rates for lab services when there is no difference in the quality of the service. Any amounts in excess of this maximum amount will be the full responsibility of the patient.

The list of lab services and the Maximum Allowable Cost for each service, as well as a handy list of labs that provide services at or below the Maximum Allowable Cost can be found at the benefits website, www.MyDOCBenefits.com. This cost reduction program also applies to the MMO PPO/HSA plan.

EMERGENCY ROOM - If you are experiencing a medical emergency, the emergency room at a local hospital is where you want to go. However, it's a very expensive place to get treatment for minor sicknesses or injuries. There is a copay of \$500 for non-emergencies that are treated at an emergency room. The copay is waived if the patient is admitted to the hospital.

For non-emergencies, seek care at an urgent care facility or a CVS Minute Clinic. These are much more affordable alternatives to the emergency room.

Of course, if you or a family member are experiencing a medical emergency, head to the emergency room.

SHOP AROUND WITH THE MY CARE COMPARE TOOL

If you have elected any of the three plans from Medical Mutual, you have access to the My Care Compare Tool to save money! Healthcare costs can vary widely depending on where you go and whom you see. Hospitals, clinics and doctors' offices charge different amounts for the same services. That's why Medical Mutual created My Care Compare, an online tool that allows members to compare costs before they get care.

Log into your Medical Mutual My Health Plan account at https://member.medmutual.com/user/login.aspx and click My Care Compare to start saving today.

HEALTH INCENTIVE MONEY – UP TO \$720

Earn Your Incentives – It Makes Dollars and Sense

Don't miss out. Be sure to earn 100% of the incentives for which you qualify. The Diocese Healthcare Plan provides two ways to reduce your costs:

- Be tobacco-free* (or have enrolled in the MMO QuitLine program by May 1, 2019); and,
- Obtain a preventive care physical.

Not only will this help you better manage your health, but you will also receive a reduced cost for your health plan coverage as follows:

- Single coverage \$15 per month for each of the tobacco-free and preventive care physical incentives.
- Family coverage \$30 per month for each of the tobacco-free and preventive care physical incentives.
- These discounts total \$360 for single coverage or \$720 for family coverage in a year!

Remember, if you and your spouse are enrolled in family coverage, then both of you must be tobacco-free (or have enrolled in the MMO QuitLine program by May 1, 2019) and obtained a preventive care physical to receive incentives.

Physicals must be completed between May 1, 2018 and April 30, 2019 to reduce monthly premiums for the 2019/2020 benefit year.

2019 Annual Physical and Tobacco Attestation Forms MUST be returned by May 1, 2019.

* Tobacco-free is defined as not having used nicotine or nicotine products within 90 days. Tobacco or nicotine usage includes, but is not limited to: cigarettes, E-cigarettes, cigars, pipe smoking, snuff, chewing tobacco, nicotine patch, nicotine gum or other nicotine supplements.

The 2019 Annual Physical and Attestation Form can be found at the Benefits website: www.MyDOCBenefits.com.

If you are not tobacco-free, an alternative standard is available to you. Contact the Medical Mutual QuitLine program to enroll by May 1, 2019 to be eligible for the incentive.

The QuitLine program is free to eligible participants. You can enroll by calling (866) 845-7702.



OPEN ENROLLMENT TIPS

Open Enrollment is the **one time** each year you are able to change benefit plans without a "Change Event."

Even if you think you will keep your current coverage, take the time to review the Plan changes and understand how those changes will impact your health care and your wallet.

There is more information here:

- The Diocese benefits website has all the available information you'll need to learn about the plans and costs.
- Medical Mutual offers My Care Compare, an online tool that you can use to shop and compare costs between doctors and medical services. Go to https://member.medmutual.com/user/login.aspx to log into your secure My Health Plan account and click My Care Compare to start saving today.

NO CHANGES?

If you are already enrolled in a health plan and do not need to make any changes, you do not need to submit an enrollment form. You will automatically be enrolled in the same coverage.

MAKING A CHANGE?

If you are currently enrolled and want to make a change to your plan or add a spouse or dependent, you will need to submit an enrollment form **by Friday, May 17, 2019**.

In addition to completing an Enrollment/Change Form when adding a new family member to your healthcare plan, you will also be required to provide documents that verify the spouse or child is eligible to be covered. Employees covering a dependent child will need to provide the child's birth certificate or applicable court/legal documents. Employees covering a spouse will have to submit a marriage certificate and, as evidence of current status, recent tax returns. When covering a spouse, a completed Working Spouse Employment Verification Form must also be submitted or the \$650 per month surcharge will apply.

WAIVING HEALTH INSURANCE?

Are you a newly hired employee or a current employee eligible for health insurance coverage?

If you are waiving health coverage, you must complete a waiver form. Please send completed forms to the Benefits Office. Note that **employees who have already completed** a waiver form do <u>not</u> need to complete a new one during each open enrollment period.

ADDITIONAL INFORMATION

PROGRAMS FOR CHILDREN, PREGNANT WOMEN AND FAMILIES OHIO

Medicaid offers three programs for children, pregnant women and families with limited income to get health care. Once eligible for Medicaid, each child (birth through age 20) will have access to an important group of services known as Healthcheck. To learn more about these programs, please call a State of Ohio Enrollment Counselor at: 800.605.3040.

FEDERAL NOTICES

CHIP PROGRAM NOTICE

Please refer to the Diocesan Benefits website at www.MyDOCBenefits.com for details concerning the Federal Regulations regarding Children's Health Insurance Program Renewal Act of 2009 (requiring notice of certain state CHIP programs).

SPECIAL RIGHTS FOLLOWING MASTECTOMY

A group health plan generally must, under federal law, make certain benefits available to participants who have undergone a mastectomy. In particular, a plan must offer mastectomy patients benefits for:

- Reconstruction of the breast on which the mastectomy has been performed
- Surgery and reconstruction of the other breast to produce a symmetrical appearance
- Prosthesis
- Treatment of physical complications of mastectomy

The Diocesan health plans comply with these requirements. Benefits for these procedures generally are comparable to those provided under our plans for similar types of medical services and supplies. Of course, the extent to which any of these items is appropriate following mastectomy is a matter to be determined by consultation between the attending physician and the patient. Our plans neither impose penalties (ex. reducing or limiting reimbursements) nor provide incentive to induce attending providers to provide care inconsistent with these requirements.

NOTICE TO PLAN PARTICIPANTS

The Department of Health and Human Services continues to be challenged in the courts regarding the legality of mandating services that are not aligned with the teachings of the Catholic Church. Diocesan health insurance offerings remain unchanged, aligned with the Catholic Church and do not cover contraception, abortion, sterilization and related counseling services.

Catholic Diocese of Cleveland
Employee Benefits Office
1404 East Ninth Street
Cleveland, OH 44114

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Open Enrollment begins April 29, 2019 and ends on May 17, 2019

- If you are not enrolled in a medical plan, you MUST have a completed waiver form on file
- You must elect your benefits before Open Enrollment ends
- Physical and Tobacco Attestation form due by May 1, 2019
- Be sure to review the **new lower cost** of the MMO PPO/HSA plan
- Attend one of the Benefit Forums below to GET EDUCATED DON'T OVERPAY!

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