



Better Health BENEFITS INSIDER

2021-2022 Newsletter

IMPORTANT DATES

Open Enrollment
Webinar #1: April 20 at noon

Open Enrollment
Webinar #2: April 27 at noon

Open Enrollment Begins:
MONDAY, APRIL 26

Open Enrollment Ends:
FRIDAY, MAY 14

GET EDUCATED AT AN UPCOMING WEBINAR

See back cover for details.



PALADINA HEALTH IS NOW

everside
HEALTH

With the same great personalized care from a doctor who will take the time to get to know you and your health. See page 3 for more details.



April 9, 2021
Finance Office

To Our Valued Employees,

As I'm sure you've heard many times before – Wow! What a year it's been!

We don't plan to dwell on the COVID-19 pandemic, other than to say this: we sincerely hope you are staying safe and wish you all the best of health during these difficult times. So, here we are again and the annual enrollment window in the Diocesan Health Plan is upon us,

Last year we introduced the theme **GET EDUCATED – DON'T OVERPAY!** This still applies and why not? We don't want anyone to pay more than they must for their health insurance and healthcare. This edition of our newsletter has many ways to minimize your costs starting right on the next page.

There will be **no changes** to the plan designs, including copays, deductibles, and out of pocket maximums in any of the health plans. Also, we are pleased to announce that **there is no increase to the rates for the Medical Mutual PPO/HSA Plan**. However, we have had to increase the cost of the other plans as we continue to see increases in the cost of healthcare.

The annual open enrollment is a good time to examine the plan that you have selected and be sure it's still the best choice for you. Please read this newsletter carefully and visit our website, www.MyDOCBenefits.com. Be sure you **make an informed decision when you choose your health plan**. There are many options and the best choice for you and your family is not necessarily the one that costs the most.

This year we are still offering the Paladina Health program with only one minor change: *They have a new name – Everside Health*. This program is a great way to get personalized care from a doctor who will take the time to get to know you and your health. See page 3 for more details.

I'll close by telling you that we appreciate the work *each and every one of you* do to support the mission of our Church in Northeast Ohio. And most importantly, know that those you serve appreciate you, too!

Sincerely,

James P. Gulick,
Chief Financial Officer

HEALTH INCENTIVE MONEY – UP TO \$720

MODIFIED RULES STILL IN EFFECT

Incentives for annual physicals and non-smokers as well as the contributions to health savings accounts will continue at their current levels. See page 4 for details.

ANNUAL PHYSICALS

Due to the ongoing COVID-19 pandemic the requirement for repeating an annual physical will be waived again for the 2021/2022 plan year. Persons currently receiving the incentive will continue to do so. Persons who are **NOT** currently receiving the incentive, but would like to, can complete a physical at any time. The incentive will then be applied *beginning in the month following the submission of the incentive form to the Health Benefits Office.*

TOBACCO FREE INCENTIVE

Similar to the process for the annual physical incentive, the requirement for submitting an attestation form will be waived for the 2021/2022 plan year. Persons who are on record for having achieved the incentive for the current plan year will receive the premium incentive for plan year 2021/2022. Persons who are **NOT** currently receiving the incentive, but would like to, can do so by completing a Tobacco Attestation form at any time. The incentive will then be applied *beginning in the month following the submission of the incentive form to the Health Benefits Office.*

Note that 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, vaping, pipe smoking, snuff, chewing tobacco, nicotine patch, nicotine gum or other nicotine supplements.



The 2021 Annual Physical and Tobacco Attestation Form can be found in the Forms and Documents section of 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, 2021 to be eligible for the incentive. The QuitLine program is free to eligible participants. You can enroll by calling (866) 845-7702.

TAKE A CLOSE LOOK AT THESE OPTIONS THAT CAN **SAVE YOU MONEY!**



PALADINA HEALTH IS NOW EVERSIDE HEALTH A GREAT OPTION IF ENROLLED IN THE MMO/PPO PLAN

Recently introduced, the Paladina Health program has changed names to Everside Health. You will still have the same personalized care from a doctor who will take the time to get to know you and your health.

FIND AN EXPERIENCED PRIMARY CARE PROVIDER who delivers a broad scope of care, including primary and preventive care, chronic condition management, urgent care (same or next day visits), and coordination with specialists and hospitals.

ACCESS YOUR PROVIDER 24/7 by phone for urgent needs, through email, or during easy-to-schedule appointments at convenient locations near work or home.

SAVE MONEY. Most services are provided at no out-of-pocket cost, with no co-pays for office visits or telecommunication (although certain prescriptions, procedures, and tests sent to outside labs will be charged to your insurance).

Visit www.paladinahealth.com/enroll or call 1-866-808-6005 to sign up today!

Consistent with Catholic teaching, medical services and prescriptions provided by Paladina Health or any other provider will not be covered if they are contrary to Catholic teaching regarding the dignity of the human person.

The healthcare you want. The convenience you need. The savings you deserve.

Get  Don't
EDUCATED OVERPAY 

ARE YOU OR A PARENT ELIGIBLE FOR MEDICARE?

We get it – Medicare can be confusing. So many choices.
Everyone wants to know: **What's best for me?**

The specialists at InsureOne Benefits can provide customized health insurance recommendations suited to your needs and your budget. They provide personalized attention and advice you can trust.

Call the specialists at InsureOne Benefits for personalized advice at 1-833-864-0578 or go to www.MyDOCBenefits.com and click on Medicare.

The health insurance plan at work could be **more expensive** than enrolling in a Medicare plan. Call today.

You can change anytime during the year, there's no reason to wait!



YOUR 2021/2022 HEALTH CARE COVERAGE OPTIONS

You 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 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. All four plans also include an option for telemedicine visits.

MMO PPO/HSA – NO CHANGE TO BENEFITS OR RATES! The rates and benefits are unchanged. In addition, this plan includes an annual \$500/employee and \$1,000/family contribution to your health savings account.

This plan also includes Critical Illness Insurance. You only get this valuable benefit when you enroll in this plan. The coverage provides a payment 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. There is a \$36,000 lifetime maximum benefit per person. See MyDOCBenefits.com for more details.

MMO PPO – The employee contributions will increase 5.5% from last year and this remains the plan with the highest employee contributions. If enrolling in this plan you're eligible to select a Paladina doctor. See page 3 for details.

MMO MEDFLEX EPO – This plan is an EPO plan meaning that 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. To find a provider, visit <https://providersearch.medmutual.com> follow these steps **1)** Click on *Group*, click *Next* **2)** Click on *Medical* **3)** Click on *Don't See Your Network? View More*, Select *MedFlex* and input your location, click *Next* **4)** Enter the name of the doctor or place you're looking for or browse doctors or places by type of service you desire.

SKYWARE EPO – This plan requires that you receive your healthcare from one of the many SkyWay (formerly MetroHealth) Network facilities and providers. There are many in Cuyahoga County and, new for this year, LakeHealth (except for the Beachwood location) 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

2021/2022 Plan Options	MMO PPO/HSA	MMO PPO	MMO MedFlex	SkyCare EPO
Monthly Employee Contribution Single/Family				
0 incentives	\$55/\$209	\$185/\$677	\$162/\$593	\$152/\$559
1 incentive	\$40/\$179	\$170/\$647	\$147/\$563	\$137/\$529
2 incentives	\$25/\$149	\$155/\$617	\$132/\$533	\$122/\$499
Out-of-Network Coverage				
	Yes	Yes	NO	NO
Annual Deductible (In-network)				
Single	\$3,000	\$1,250	\$750	\$500
Family	\$6,000	\$2,500	\$1,500	\$1,000
Annual Out-of-pocket Maximum (In-network)				
Single	\$4,000	\$3,250	\$2,500	\$2,000
Family	\$8,000	\$6,500	\$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.

Need help deciding? Call the specialists at InsureOne Benefits for personalized advice at 1-833-864-0578.

See page 3 for details.

When covering a spouse, a completed Working Spouse Employment Verification Form must also be submitted or the \$650 per month surcharge will apply.

THESE PLANS PROVIDE GREAT VALUE AND QUALITY CARE

THE MEDICAL MUTUAL PPO/HSA PLAN

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.

Total HSA tax-free contribution maximums (including the Diocesan contributions) for 2021 are \$3,600/single and \$7,200/family.

How Much Can YOU Save with the PPO/HSA Option?	Calculate YOUR Savings	EXAMPLES (2 incentives)		
		Single	Three-Person Family	Two-Person Family
Monthly PPO Premium		\$155	\$617	\$617
Monthly PPO/HSA Premium	-	\$25	\$149	\$149
Monthly Premium Savings	=	\$130	\$468	\$468
Total Yearly Premium Savings x12	=	\$1,560	\$5,616	\$5,616
2021/2022 Diocesan HSA Contribution	+	\$500	\$1,000	\$1,000
Cash Savings	=	\$2,060	\$6,616	\$6,616
Less Estimated Medical Costs (\$500 per person)	-	(\$500)	(\$1,500)	(\$1,000)
Potential Savings	=	\$1,560	\$5,116	\$5,616

EPO PLANS: MEDFLEX AND SKYCARE

There have been no changes to benefits for the SkyCare EPO and the Medical Mutual EPO plan, MedFlex. Compared to the MMO PPO plan both these plans have: **LOWER DEDUCTIBLES, LOWER OUT OF POCKET MAXIMUMS, LOWER COPAYS, AND LOWER PREMIUMS**. The employee contributions for both these plans are increasing 3% from last year.

The providers include University Hospital system, LakeHealth and Summa. **The Cleveland Clinic is not in the 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. Additionally, for members enrolled in the SkyCare plan, prescriptions can be filled at lower costs when filled at MetroHealth pharmacies.

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
Independent 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	\$150 Copay	\$150 Copay	\$150 Copay
Non-emergency Services at ER	\$500 Copay, Ded/Coins	\$500 Copay, Ded/Coins	\$500 Copay, Ded/Coins	\$500 Copay, Ded/Coins
FACILITY BASED SERVICES				
Inpatient Facility Services	80%	Not Covered	90%	Not Covered
Outpatient & X-ray/Lab Facility	80%	Not Covered	90%	Not Covered
PRESCRIPTION DRUG BENEFITS				
	CVS/Caremark		Metro Pharmacy	
Retail Generic / Tier 1	\$10 Copay		\$10 Copay	
Retail Brand Formulary / Tier 2	20%, \$25 Min / \$75 Max		\$20 Copay 20%, \$25 Min / \$75 Max	
Retail Brand Non-formulary / Tier 3	40%, \$40 Min / \$150 Max		\$40 Copay 40%, \$40 Min / \$150 Max	
Mail Generic / Tier 1	\$25 Copay		\$10 Copay \$25 Copay	
Mail Brand Formulary / Tier 2	20%, \$60 Min / \$150 Max		\$50 Copay 20%, \$60 Min / \$150 Max	
Mail Brand Non-formulary / Tier 3	40%, \$90 Min / \$300 Max		\$80 Copay 40%, \$90 Min / \$300 Max	

RESOURCES FOR ALL

Get Medical Help Without Leaving Home

Telemedicine services are available on all our Healthplans. However, the process to access this convenient virtual care option varies depending on which plan you have selected. Specific details are available at our website, www.MyDOCBenefits.com.

Please note that telehealth providers vary by plan and only three medical institutions, Cleveland Clinic, University Hospitals and Metrohealth, are available for the current plans. If other providers institute telehealth offerings we will evaluate them when they are available.

Need Help Coping With Life? We All Do!

Completely confidential, Moore Counseling & Mediation Services offer a variety of support services for employees – everything from helping navigate behavioral health challenges to discovering solutions for childcare or elder care. The Diocese of Cleveland has contracted with them so there is no cost to you.

Visit Moore Counseling & Mediation Services at <https://www.moorecounseling.com>, call (216) 404-1900 24/7, or go to the [MyDOCBenefits.com](http://www.MyDOCBenefits.com) website for more details.

SPECIAL PROGRAMS AND RESOURCES

For Members Enrolled in one of the plans from Medical Mutual of Ohio

Live Healthier with Medical Mutual's Disease Management Programs

If you are diagnosed with one or more of the following conditions, you may qualify for the MMO Disease Management programs. Joining a program may help you maintain your health or improve one of these conditions:

- Asthma
- Chronic obstructive pulmonary disease (COPD)
- Congestive heart failure
- Coronary artery disease
- Diabetes

When you enroll in a program, you'll receive personal one-on-one support from a health coach who is dedicated to helping you learn more about your condition and how to manage it. He or she will work with you over the phone to create a plan designed for your individual needs. Your doctor will continue to treat you; your health coach will offer guidance to complement your doctor's treatment plan.

To check eligibility and enroll call 1-800-861-4826 and select option 2.

Receive Support During Your Pregnancy

A trained health coach can help you learn more about prenatal care, labor and delivery with self care strategies that supplement the treatment you receive from your doctor. Program highlights include

- No out-of-pocket cost for program participation
- Access to a nurse throughout your pregnancy and for six weeks after delivery
- Your Journey Through Pregnancy, a helpful reference book
- Smoking cessation assistance through our QuitLine program, if needed

To check eligibility and enroll call 1-800-861-4826 and select option 1.

NurseLine

When you or a family member get sick, you want help fast. Best of all, Nurse Line is provided to you at no additional cost! Now there's a place to turn, 24 hours a day, where you have access to a nurse who will:

- Advise you personally, no matter how big or small the concern
- Use nationally accredited guidelines to assess your symptoms
- Provide easy-to-understand explanations about medical tests and results
- Talk you through self-care for treating minor medical conditions at home
- Help determine if you need to go to the emergency room
- Stay on the line until everything's under control

Call the Nurse Line at 1-888-912-0636 or visit MedMutual.com/member to chat with a nurse.



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 Diocesan benefits website has all the available information you’ll need to learn about the plans and costs.
- Over 85% of our participants are enrolled in the Medical Mutual My Health Plan, where you can access the My Care Compare Tool. This is another way to save money by comparing costs for medical services. Go to <https://member.medmutual.com/user/login.aspx> and log into or register for your secure My Health Plan account and 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 14, 2021.

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 **not** 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



We periodically send out important updates via email. Please notify the Health Benefits Office (HBO@DioceseOfCleveland.org) of your current email address so you don't miss out.

There's more information at our website;
www.MyDOCBenefits.com



Better Health BENEFITS INSIDER

Open Enrollment begins April 26 and ends on May 14

- If you are not enrolled in a medical plan, you **MUST** have a completed waiver form on file
- You must elect your benefits or make your changes by the end of Open Enrollment
- Be sure to review ALL available plan options – then decide!
- **Attend one of the online Benefit Webinars below to GET EDUCATED – DON'T OVERPAY!**
- To register for any of our webinars just go to www.MyDOCBenefits.com.



Date	Time	Location
4/20	Noon	Open Enrollment Webinar #1
4/27	Noon	Open Enrollment Webinar #2
5/25	Noon	Understanding Medicare (Tips to decide whether a Medicare plan or your healthplan at work is a better choice).
6/15	Noon	Medical Mutual of Ohio will present information about their Wellness Portal and show how the MyCare Compare tool can help save you money. (For MMO enrollees.)
6/29	Noon	Everside Health (Learn how a personal relationship with a doctor can help improve your health).