



Benefits

State of Ohio Benefits Guide

MEMBERS MAIN

MY HEALTH PLAN

SUPPORT

OhioMed PPO Plan
July 2012 – June 2013



GO



MEDICAL MUTUAL®

Welcome

Welcome to Medical Mutual®. This guide will help you take advantage of all of the features, information and online tools available to you.

Staying Connected 24/7

To check specific State of Ohio benefit information any time, day or night, visit:

MedMutualStateOhioEmployee.com

Contacting Us

Call us directly at 800.822.1152 with any questions you may have. We can help you locate a doctor or hospital, answer questions about a claim or bill and explain your coverage.

Please send written correspondence to:

Medical Mutual
PO Box 6018
Cleveland, Ohio 44101



Identification Cards

Your identification (ID) card includes your name, group number and identification number. This information allows doctors and hospitals to identify you as our member. Your card also lists the names of the provider networks available to you when you are outside of our SuperMed network. Most importantly, the card includes our Customer Service number, so you'll always be able to contact us when needed.

Benefit Highlights*

Effective July 1, 2012

Plan Features	Network PPO	Non-Network PPO ¹
Deductible (individual/family)	\$200/\$400	\$400/\$800
Out-of-pocket maximum (individual/family) <i>including deductible</i>	\$1,500/\$3,000	\$3,000/\$6,000
Plan Benefits		
Office visits and consultations (for office visit only; all other services are subject to deductible and coinsurance)	\$20 copay, then 100%	\$30 copay, then 60%
Emergency room visit	\$75 copay, 80% after deductible <i>(copay is waived if admitted)</i>	\$75 copay, 80% after deductible <i>(copay is waived if admitted)</i>
Hospital Benefits		
Semi-private room	80% after deductible	60% after deductible
Maternity care	80% after deductible	60% after deductible
Diagnostic X-ray and laboratory tests	80% after deductible	60% after deductible
Medically necessary treatments and procedures	80% after deductible	60% after deductible
Urgent Care		
Urgent-care visit	\$25 copay, 80% after deductible	\$30 copay, 60% after deductible
Preventive Care		
Well Child Care Services – <i>To age 21</i>	100%	\$30 copay, 60% after deductible
Annual Physical Examinations (including routine lab profiles ²)	100%	\$30 copay, 100%
Prenatal Office Visits	100%	\$30 copay, 60% after deductible
Routine Outpatient Endoscopic Procedures: Colonoscopy, Sigmoidoscopy, Anoscopy and Proctosigmoidoscopy only – <i>Ages 50 and over</i>	100%	\$30 copay, 60% after deductible
Routine PAP Test and Associated Office Visit (one each per benefit period)	100%	\$30 copay, 60% after deductible
Routine Mammogram – <i>Ages 35 and over</i>	100%	\$30 copay, 60% after deductible
Routine Prostate Specific Antigen (PSA) Test – <i>Ages 40 and over</i>	100%	\$30 copay, 60% after deductible
Routine Immunizations ² (covered for all ages, except as specified) – <i>Hemophilis Influenza B (HEPB-HIB)</i> – <i>Hepatitis A, B, A & B and hepatitis b</i> – <i>Human Papillomavirus vaccine (HPV)</i> – <i>Influenza</i> – <i>MMR (mumps, measles and rubella)</i> – <i>Meningococcal Conjugate vaccine</i> – <i>Pneumococcal</i> – <i>Polio</i> – <i>Rotavirus (Rota)</i> – <i>Tetanus, Diphtheria, Pertussis (Td/Tdap)</i> – <i>Diphtheria, Tetanus, Pertussis (DTaP)</i> – <i>Varicella (VSV)</i> – <i>Zoster (Ages 19 and over)</i>	100%	\$30 copay, 60% after deductible

Plan Features	Network PPO	Non-Network PPO ¹
Additional Benefits		
Initial newborn exam	100%	100%
Allergy tests	\$20 copay, 80% after deductible	\$30 copay, 60% after deductible
Allergy injections	80% after deductible	60% after deductible
Occupational, physical and speech therapy ³	80% after deductible	60% after deductible
All other medically necessary treatments and procedures (rendered in and billed by the physician office)	80% after deductible	60% after deductible
Home healthcare (180 day limit)	80% after deductible	60% after deductible
Skilled nursing facility	80% after deductible; up to 180 days per admission, then payable at 60%, no deductible	
Durable medical equipment (initial and medically necessary replacements)	80% after deductible	60% after deductible
Organ transplants	80% after deductible	60% after deductible
Hospice	100%	100%

¹ When you use a non-network doctor, hospital or healthcare professional, your costs will be significantly higher than when you use an in-network provider. This is due to higher non-network copayments. The non-network provider may also bill you the difference between his/her charge and the allowance for OhioMed. Be sure to check with non-network providers to see if they accept OhioMed's allowance as payment in full.

² For more information on covered routine services, visit healthcare.gov/law/about/provisions/services/lists.html.

³ Speech therapy is subject to medical necessity and requires a prior authorization.

* This document is only a partial listing of benefits.

MedMutual.com



MedMutual.com, Medical Mutual's website, offers a wide range of resources that can make navigating your health coverage easy and gives you access to many of the special features we offer our members.

***My Health Plan* is a secure, confidential area on MedMutual.com containing your personalized medical coverage information.**

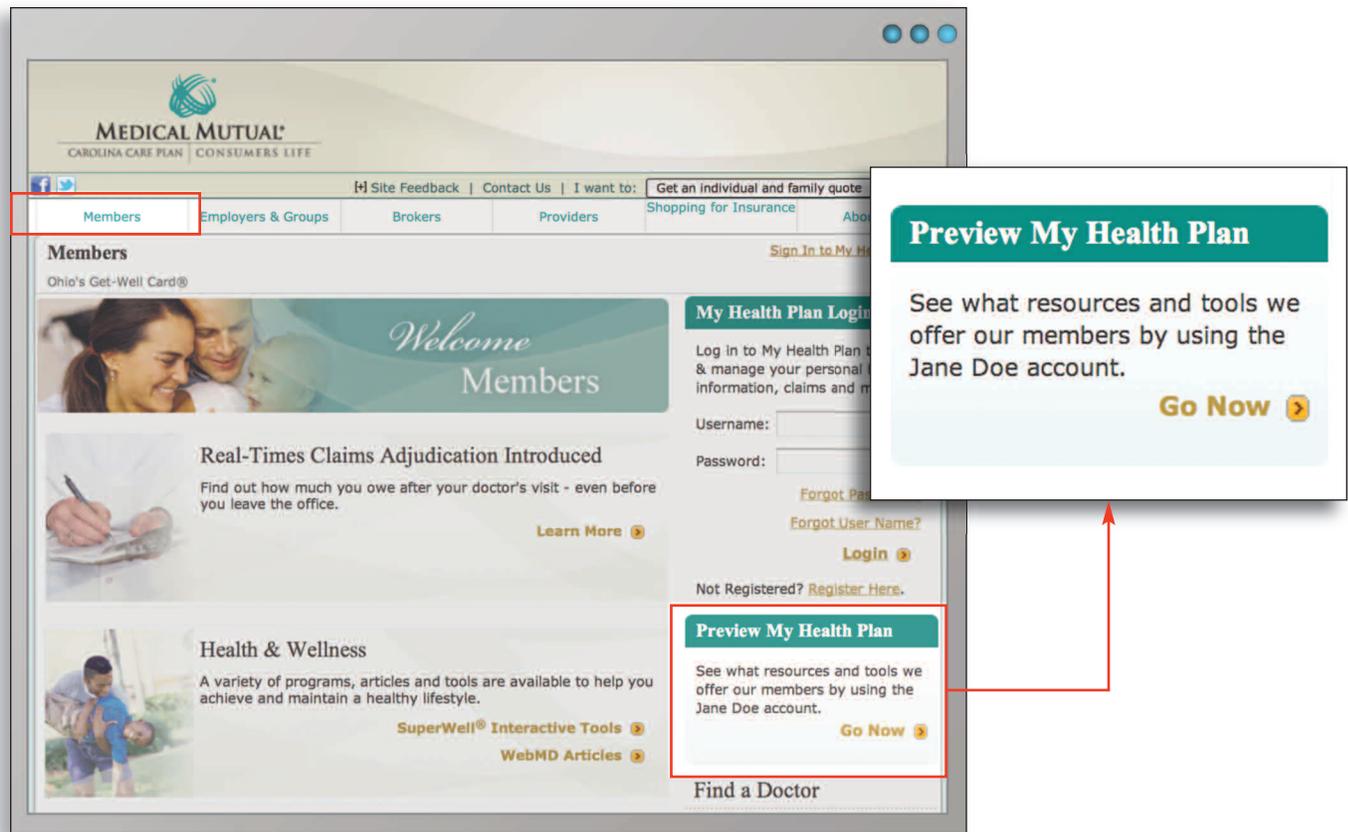
Why Should I Use MedMutual.com and *My Health Plan*?

With MedMutual.com and *My Health Plan*, you'll enjoy:

- **Information**
Find information about your plan, look for doctors or hospitals, use special online cost-saving tools, access claims information and Explanations of Benefits (EOBs) and much more.
- **Accessibility**
For your convenience, these online tools are available 24 hours a day, seven days a week.
- **Security**
My Health Plan uses secure technology to protect your personal information from being accessed or read by a third party during transmission or while you view your information.

When you arrive at MedMutual.com, you will find helpful information right on our homepage, which will help you:

- Visit the *Members* section
- Preview *My Health Plan* from the *Members* page
- Use the *Find a Provider* tool
- Register and log in to *My Health Plan*



Visit the *Members* Section of MedMutual.com

At first glance, you will notice that the homepage of MedMutual.com is organized for the audiences who visit it — *Members*, *Employers*, *Brokers*, *Providers* and *Visitors*. Click on the *Members* tab located near the top left corner of the page to find information on new features, health and wellness programs and tools available to you. You'll also see a *Support* section that gives you access to forms you may need, along with options for contacting Customer Service.

Preview *My Health Plan* from the *Members* Page

If you are not already registered on *My Health Plan*, you can view a demonstration of how it works on the *Members* page. Click on *Go Now* under *Preview My Health Plan*, located on the right side of the page, to take a look. After the demonstration loads, you will be able to browse through an account created for a fictional member, Jane Doe. Keep in mind, once you register for *My Health Plan*, you will have your own personal account similar to the demonstration.



Please Note:

You will need to have the identification number and group number listed on your ID card available to register on *My Health Plan*. You will also need to enter your name and personal identification information exactly as it appears on your ID card.



Register or Log in to *My Health Plan*

If you are already registered on *My Health Plan* or took the time to preview the *My Health Plan* demonstration, you've seen some of the personalized features the website offers. To create a *My Health Plan* account, click on the words *Register Here* under *My Health Plan* near the top right corner of the MedMutual.com homepage.

Once you create a user name and password you may want to write them down and keep them in a secure location so you can easily re-access your account at a later date. If you forget your user name or password, follow the simple steps provided on the website, or call the Medical Mutual technical services help desk at 800.294.7583.

MedMutual.com Is Your Resource

Remember to use MedMutual.com as a resource when you have questions about your medical coverage. Can't remember the difference between coinsurance and a deductible? View our *Definitions* section for the answer. Need to know how to order a new ID card? Check out the Frequently Asked Questions (FAQs). Are you looking for health-related information? Find the content you want by selecting *Health & Wellness*. A wealth of information is waiting for you!

My Health Plan

Now that you're familiar with MedMutual.com, we'd like to point out some of the features of *My Health Plan* you won't want to miss. To navigate through *My Health Plan* quickly, use the five tabs listed across the top of the page—*Members Main*, *My Health Plan*, *Support*, *Forms* and *Health and Wellness*. You can click on these tabs directly to browse through all of the options located in each section or use the drop-down menus if you know exactly what you are looking for.



Key Features on the *Members Main* Page

Claims Information

Once you log in, you'll arrive at the *Members Main* page. One of the first items you'll notice is the personalized claims information. If you're interested in finding out more about your claims, select *View Full Claims History* near the bottom of the page, or select *My Health Plan* from the row of tabs across the top of the page, then select *Claims*. As the subscriber, you can review the claims for all family members on your policy or sort using the drop-down menu to see claims for a specific family member. You can also give your dependents access to view claims through *Manage My Profile* under *Dependent Access*.



Paperless EOBs

To view a paperless, or electronic, copy of your Explanation of Benefits statement (EOB) for a specific claim, click on the link next to the listed claim. You'll see a duplicate of the EOB that we mailed to you after the claim was filed. Be sure to click on *Deductible/Coinsurance Status* at the top of the EOB to see the amount that the selected claim contributed to your coinsurance and deductible, as well as the remaining amounts you are responsible for paying.

If you like the paperless EOB, you can sign up to only receive these, eliminating the paper copy and avoiding the clutter of unnecessary paperwork around the house. Select *Make the switch to Paperless EOBs* in the claims section of the *Members Main* page. You'll be directed to your profile where you can update your preference for paperless EOBs in the *Member Communication* section. To make this process seamless, we'll send an e-mail to the e-mail address you used to sign up for *My Health Plan* when a new EOB has been posted to your *My Health Plan* account.

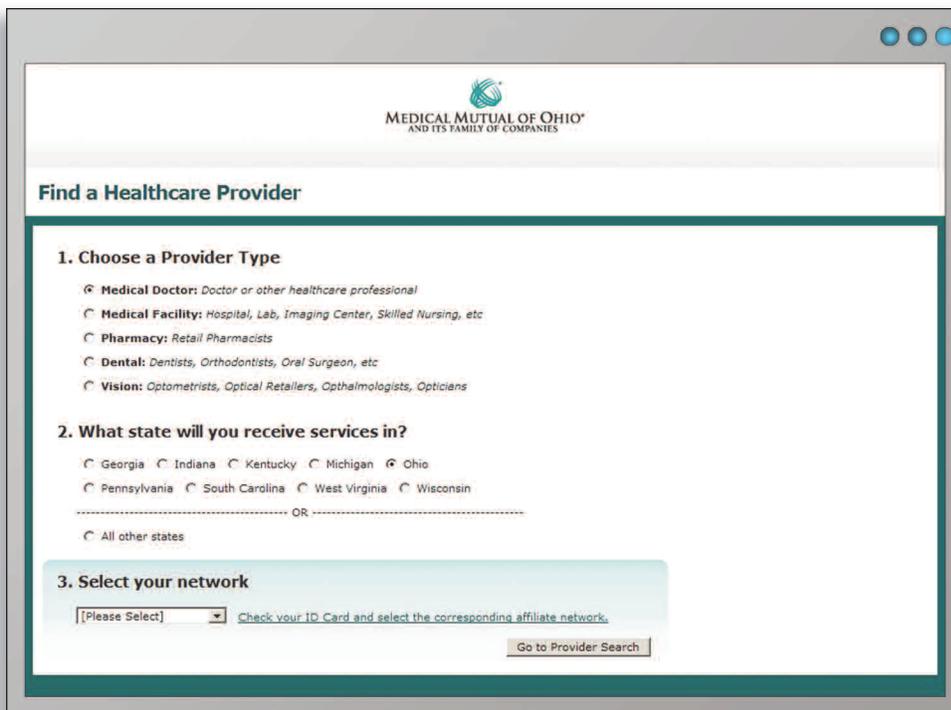
Treatment Cost Estimator

Another tool to help you make cost effective decisions on your health is the Treatment Cost Estimator. This innovative tool allows you to view the costs associated with the treatment you need. Choose up to four providers and evaluate their costs using a side-by-side comparison. Select *Treatment Cost Estimator* after signing in to *My Health Plan* to get started.

Use the *Provider Search Tool*

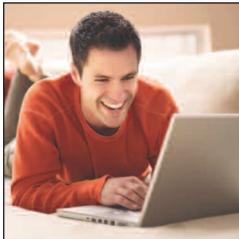
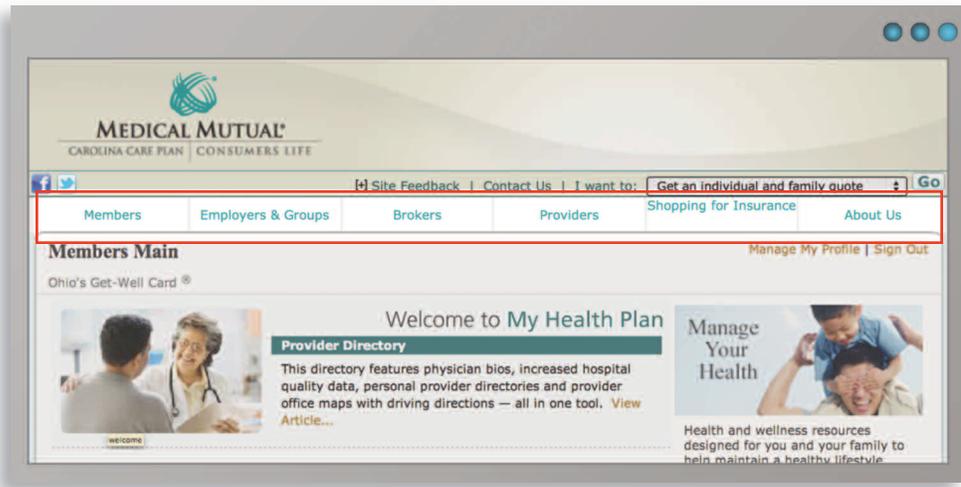
Are you looking for a doctor or hospital and want to make sure they are in our network? Try using the *Find a Provider* tool, which is located on the lower right corner of the MedMutual.com homepage. This tool allows you to search for in-network doctors and hospitals in Ohio or out of state.

Please Note: If you are logged in to My Health Plan, your home address and Ohio network will be pre-filled for you.



The screenshot shows a web browser window with the Medical Mutual of Ohio logo at the top. The main heading is "Find a Healthcare Provider". Below this, there are three numbered steps:

- 1. Choose a Provider Type**
 - Medical Doctor:** Doctor or other healthcare professional
 - Medical Facility:** Hospital, Lab, Imaging Center, Skilled Nursing, etc
 - Pharmacy:** Retail Pharmacists
 - Dental:** Dentists, Orthodontists, Oral Surgeon, etc
 - Vision:** Optometrists, Optical Retailers, Ophthalmologists, Opticians
- 2. What state will you receive services in?**
 - Georgia Indiana Kentucky Michigan Ohio
 - Pennsylvania South Carolina West Virginia Wisconsin
 - OR -----
 - All other states
- 3. Select your network**
 - [Please Select]
 -



Discover the Many Other Features Available to You

There are many tools and features on *My Health Plan*—take the time to browse through them on your own and make the most of the many features available to you.

***My Health Plan* tab**

You'll find your personalized account details here. You can also:

- Order ID cards
- View coverage information
- View claims information for you or your dependents, and much more

***Support* tab**

Access a collection of tools developed to help you become a smarter healthcare consumer, including:

- Provider Search—find doctors, hospitals and other providers in your network
- Health Compare—evaluate providers located in your network
- Treatment Cost Estimator—obtain approximate costs for treatments
- Member FAQ—view information about choosing a physician, referrals, emergency and urgent care, and care when you travel

Forms tab

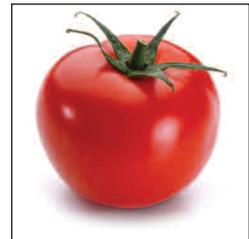
Submit important information to Medical Mutual using the forms available here. Most forms can be filled out and submitted online or they can be downloaded, printed and mailed using the mailing instructions on the form. Commonly used forms include:

- Claims Forms
- Verification Forms
- Appeal a Claim Form

Health and Wellness tab

Find a wealth of information and resources about how to become healthier, view past issues of our *Healthy Outlooks* member newsletter and find health-related articles on many different topics. In addition, many wellness programs can be accessed directly through *My Health Plan*, including the following:

- Weight Watchers® reimbursement is offered for completing a Weight Watchers meeting series. If you are 18 years or older and can participate in a Local (community) Meetings series, you may be reimbursed for up to \$150 of your registration fees per calendar year.
- SuperWell® QuitLine is available to help you give up your tobacco habit for good by providing one-on-one coaching, a personalized quit plan and educational materials. In addition, a four- to eight-week supply of nicotine replacement therapy is available to maximize your chances of quitting.
- SuperWell Health Resource Center is an online resource to help increase members' health knowledge through interactive tools and quizzes, Virtual Health Guides, a searchable encyclopedia, a symptom checker and health decision tools.
- Join a fitness club and save on membership fees and rates through our SuperWell Fitness Discounts Program. Fitness club options include: Anytime Fitness, Curves, FitWorks Fitness Centers and Snap Fitness. Log on to *My Health Plan* for details, which are located under *Fitness Discounts* in the *Health & Wellness* section.
- Personal Health History is your own confidential, interactive, electronic medical history report.
- The Chef's Garden® family-run farm offers a wide variety of lettuces, greens, vegetables, herbs and micro greens grown with environmentally friendly practices that you can order online for home delivery through *My Health Plan*.



Please Note: These are additional programs offered by Medical Mutual and are not part of your health benefit plan.

As you can see, MedMutual.com and *My Health Plan* have much to offer. We hope you'll take advantage of these special features you receive simply for being a valued member of Medical Mutual. Keep this book as a resource to help you log on in the future to find the information you need. Remember, if you need help at any time, you can always contact Customer Service at 800.822.1152.

Explanation of Benefits

Date statement was produced → November 26, 2010 Page 1 of 3

Customer Service Information
Website, address and phone numbers where you can send inquiries and have specific questions answered.

Your ID Number
Your member identification number located on your identification card. Same as contract/certificate number. Important for all claim inquiries.

Policyholder name and address

Your Benefits Provider

Summary of Your Claims
The amount paid by your health plan and the amount you owe.

The network status of your healthcare professional

Name of Patient
The person who received service(s).

List of service(s) billed and any notes

Explanation of your final responsibility for covered services



2060 East Ninth Street
Cleveland, Ohio 44115-1355

Medical Mutual of Ohio • Medical Mutual Services, LLC
Medical Mutual Services is a wholly owned subsidiary of Medical Mutual of Ohio®

JOHN DOE
123 MAIN STREET
ANYTOWN OH 44000

YOUR EXPLANATION OF BENEFITS

This is not a bill - it's a statement listing the details of your recent health benefit claims. You'll receive a bill from your service provider for any amount you owe. Please check the details below carefully and let us know if you have any questions.

SUMMARY OF YOUR CLAIMS

Total benefits paid by Medical Mutual \$1,006.00

▶ Total you are responsible for **\$244.48**

Keep Your Costs Down!

You can minimize your out-of-pocket expenses by going to doctors and hospitals that are part of your health plan network. You can verify whether the doctors you used are in-network by checking the Details section below.

To find a list of doctors in your network, please visit MedMutual.com or call a Customer Service representative at 800.111.1111.

Remember, you can view your plan information and claims statements anytime, day or night, by signing on to My Health Plan at MedMutual.com.

DETAILS OF YOUR CLAIM

John Doe
Claim Number: 0322612345-000
Services provided by: John M. Jones MD (In network)

Type of service	Amount billed(\$)	Allowed amount(\$)	Benefits paid(\$)	Amount you are responsible for(\$)
Date of Service: October 27, 2010				
X-Ray Exam of Neck/Spine - see note E23	151.01	56.74	0.00	56.74
Office Visit, Mod Complx, 25 Min - see note E23	107.00	75.96	0.00	75.96
Total for this claim	\$258.01	\$132.70	\$0.00	\$132.70

A benefit year deductible of \$132.70 was applied to this claim.

Note: E23 - Your in network healthcare professional has agreed to accept the allowed amount (our payment plus any deductible and coinsurance) as payment in full.

11/28/2010 0000000029

<p>Amount billed The dollar amount billed by your healthcare professional for the service(s) rendered.</p>	<p>Allowed amount The maximum benefit allowable under your health plan.</p>	<p>Benefits paid Amounts paid under your health plan to your healthcare professional.</p>	<p>Amount you are responsible for The amount you owe for the indicated service(s) rendered.</p>
---	--	--	--

Use your EOB to help you understand your coverage. The EOB details recent claims and explains how they were paid or provides clarification as to why claims were denied. Please note that the EOB is not a bill.



MEDICAL MUTUAL
Medical Mutual of Ohio • Medical Mutual Services, LLC
 Medical Mutual Services is a wholly owned subsidiary of Medical Mutual of Ohio

YOUR EXPLANATION OF BENEFITS
 November 26, 2010 ID number 987654321987 John Doe

Page 2 of 3

Claim Number: 0324598765-000
Services provided by: Community Hospital (In network)

Type of service	Covered charges(\$)	Allowed amount (\$)	Benefits paid (\$)	Amount you are responsible for (\$)
Date of service: October 29, 2010				
Outpatient services - see note E69	2,452.50	1,117.78	1,006.00	111.78
Total for this claim	\$2,452.50	\$1,117.78	\$1,006.00	\$111.78

Details of amounts billed for hospital outpatient services:
 Magnetic Resonance Imaging 2,452.50
Total amount billed \$2,452.50

An in-network coinsurance of \$111.78 was applied to this claim.

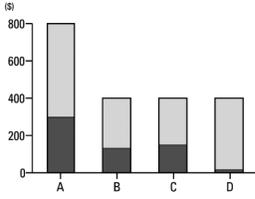
Check number 6999997 dated November 21, 2010 was sent to Community Hospital.

Note: E69 - For covered charges, your healthcare professional has agreed to accept the allowed amount as payment in full.

Total for John Doe	Covered charges(\$)	Allowed amount (\$)	Benefits paid (\$)	Amount you are responsible for (\$)
	\$2,710.51	\$1,250.48	\$1,006.00	\$244.48
	<small>(Amount billed)</small>			

UPDATE ON YOUR DEDUCTIBLE AND COINSURANCE BALANCES
 Your plan benefit year: January 1, 2010 – December 31, 2010

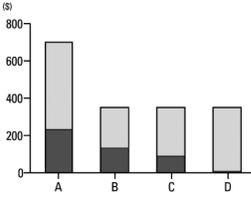
Deductible for services provided



Maximum amount
 Family \$800
 Individual \$400

Amount remaining
 A. \$500 Family
 B. \$267 John
 C. \$250 David
 D. \$383 Jordan

Coinsurance for services provided



Maximum amount
 Family \$700
 Individual \$350

Amount remaining
 A. \$466 Family
 B. \$215 John
 C. \$259 David
 D. \$341 Jordan

In the chart(s) above:

- The top of each bar shows your maximum contribution for the plan year.
- The dark shaded areas show how much you've contributed to November 26, 2010.
- The light shaded areas show the amounts remaining to be met. The letters below the bars refer to the family and individuals. See the tables to the right of the charts.

Covered charges
 Based on the *Total amount billed* (by the hospital), this section shows the service(s) and amount(s) that are covered under your health plan.

Total amount billed
 This section itemizes the service(s) billed by the hospital and provides the dollar amount billed by the hospital for the service(s).

Check Number
 This line verifies payment was made under your benefits for this service.

Note
 Additional information about the benefit administration.

Total for all EOB Claims
 If there are multiple patients on an EOB, individual patient totals will be included in the statement.

Amount remaining
 The deductible and coinsurance amounts left before you meet your family and/or individual annual maximum.

Information on how to read your graphs.

Important Numbers

Medical Mutual

Customer Service **800.822.1152**

P.O. Box 6018

Cleveland, OH 44101-1018

Office Hours:

Monday–Thursday, 7:30 a.m.–7:30 p.m., ET

Friday, 7:30 a.m.–6 p.m., ET

Saturday, 9 a.m.–1 p.m., ET

TTY **800.982.8109**

Website **MedMutualStateOhioEmployee.com**



MEDICAL MUTUAL®

2060 East Ninth Street
Cleveland, OH 44115-1355

MedMutual.com