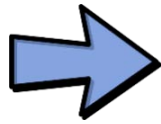


GOOD NEWS!

We are moving our Medical and Prescription Drug Plan from Anthem/Express Scripts to Medical Mutual/Express Scripts Effective January 1, 2018



**Same Hospitals
Same Physicians
Same Pharmacies**

There are minor changes to the medical provider network, and no changes to the pharmacy network!
Please read important information below regarding MMO's Provider Network

In order to manage our health plan costs and continue to provide a generous benefit plan, each year we work with our benefit consultants to negotiate our plan renewal with the insurance carrier. During this process, we also obtain proposals from other carriers. This year, Medical Mutual (MMO) made us an extremely competitive offer, which Anthem was unable to match. MMO's offer includes a number of financially favorable terms for the District, including:

- **Highly competitive fixed costs (administration fees and stop loss insurance)**
- **Substantial increase in our Wellness Fund, which will be \$30,000 for 2018**
- **Improved pharmacy contract terms and performance guarantees**

Keep in mind, fixed costs represent a small portion of Shaker's total health and prescription drug plan costs. The majority of our health plan costs are attributed to medical and prescription drug claims. Our claims costs have increased substantially over the last few years, and are projected to increase next year as well.

- **Shaker's Insurance Committee unanimously agreed to move our medical and prescription drug plans from Anthem to Medical Mutual (MMO).**
- **Our dental plan will remain with Anthem (MMO unable to closely match benefits)**

Renewal Rates: by moving our health plan to MMO, the District is able to minimize the renewal rate increase for 2018. The new rates will be approved at the December, 2017 Board meeting and are anticipated to be as follows:

- **Medical Plan: Rates will increase 5%.**
Reminder: FTE's pay 12% of premium, so the increase is 5% of the 12% contribution
- **Prescription Drug Plan: No change**
- **Dental Plan: No change**

Details regarding 2018 rates and premium contributions will be coming from the Treasurer's office.

FOLLOWING IS IMPORTANT INFORMATION TO HELP YOU WITH THIS TRANSITION

EMPLOYEE MEETINGS

Gallagher Benefit Services and Medical Mutual will be holding employees meetings to provide you with information on the transition to MMO, an overview of Shaker's benefits, and to answer questions your questions.

- **Tuesday, October 10th**
 - 10:00 a.m. at the Bus Garage (Lee Road)
 - 4:00 p.m. at the High School (Upper Cafeteria)

- **Tuesday, October 24th**
 - 10:00 a.m. at the Bus Garage (Lee Road) – **CANCELLED**
 - 4:30 p.m. at the High School (Upper Cafeteria)

OPEN ENROLLMENT FOR 2018 BENEFIT ELECTIONS

Open Enrollment for all benefit-eligible employees will **begin Monday, October 30th and end Friday, November 17th, 2017.**

- ❖ During this time, you will be able to enroll in or make changes to your medical, prescription drug, and dental coverage. This is also the time to make your 2018 FSA elections.
- ❖ **MEDICAL/PRESCRIPTION DRUG, DENTAL:** If you are NOT making any changes to medical, prescription drug or dental plan enrollment, no action is required.
- ❖ **Flexible Spending Accounts (FSA):** You **MUST TAKE ACTION** to enroll in the Health Care and/or Dependent Care FSA. If no action is taken, your current FSA elections will **NOT** rollover to 2018.
- ❖ **HOW TO ENROLL:** There are two simple methods to enroll in or make changes to your benefits:
 - Self-enroll Online via the Shaker Benefits Website; or,
 - Contact the SMBO Call Center.→ *You will receive a flyer with detailed instructions for both methods.*
- ❖ **IMPORTANT:** if you do not enroll or make changes to benefits during open enrollment, you cannot make changes for the remainder of the plan year unless you have a qualified life event.

TIMELINE: WHAT TO EXPECT & WHEN?

Item	Details	Approximate Date of Delivery
MMO ID Cards	New ID Cards for the Medical & Prescription Drug Plans	MMO will mail to each employee's home mid-to-late December
MMO SBC	Summary of Benefits & Coverage document providing an overview of medical & Rx drug benefits	Will be distributed by Shaker during Open Enrollment
ESI Welcome Letter	One-page letter from Express Scripts (ESI) with introductory information and a mail order form	ESI will mail to each employee's home mid-to-late December
MMO Benefit Book	Booklet providing details of the medical/prescription drug plans	MMO will mail to each employee's home mid-to-late January

INFORMATION REGARDING YOUR NEW MMO MEDICAL/RX DRUG ID CARDS

You will receive your new MMO/ESI ID cards on or about January 1, 2018.

- ❖ Medical & Pharmacy information will now be combined on one card.
- ❖ Remember to present your new ID card to health care providers and pharmacies on or after January 1, 2018.
- ❖ If you do not receive your MMO ID card by January 1st, please do not panic! MMO will provide a letter that you can give to your doctors and pharmacies containing essential information needed to ensure you receive health care services and prescription drugs.
- ❖ Whether enrolled for single or family medical and prescription drug cards, each employee will receive a set of two MMO ID cards. Additionally, employees with children ages 18 and older will receive extra ID cards for such children.
- ❖ If you need additional ID cards, on/after January 1st, you can:
 1. **Order online** by registering on *My Health Plan* at www.medmutual.com, or
 2. **Access your ID card on your phone or mobile device** by downloading the MedMutual Mobile app.

IMPORTANT:

- ❑ **Continue to use your current Anthem and ESI ID cards through December 31, 2017.** If you use your Anthem ID or ESI card after January 1st, your claims will be denied.
- ❑ **Do NOT discard your Anthem dental ID card** as the dental plan is remaining with Anthem.

MEDICAL PLAN

Effective January 1, 2018, Medical Mutual (MMO) will be our third party administrator for our self-funded medical plan.

- ❖ Benefits are not changing.
- ❖ Deductibles, coinsurance, copays and out-of-pocket will remain the same.
- ❖ There are always a few differences in how benefits are administered when transitioning from one carrier to another, but overall the plan is still the same.
- ❖ On or after January 1st, if you have questions regarding medical benefits, you may contact Medical Mutual's customer service department at (800) 315-3137.
- ❖ You can also obtain benefit information and resources available to you as an MMO member online by logging onto My Health Plan at MedMutual.com/member.

PROVIDER NETWORK


IMPORTANT: Whenever there is a change from one carrier to another, there are typically differences in provider network. However, the difference between the Anthem and MMO provider network is **minimal**.

- ❖ **MMO has a large network of providers (hospitals, doctors, facilities, labs, etc.)**
 - **In Ohio:** use the **SuperMed PPO Network**
 - **Outside of Ohio:** use the **First Health Network** (when traveling/ for students)
- ❖ **All University Hospitals and affiliated physicians are now in the MMO Network!**
Includes: UH Cleveland Medical Center, UH Seidman Cancer Center, UH Rainbow Babies & Children's Hospital, and UH Bedford Medical Center.
- ❖ To find out if your doctor is in the MMO SuperMed PPO network click on this link and follow the prompts:
<https://providersearch.medmutual.com/?explicitNetworkCode=SM%2b>
 - Click on Provider Type / Enter desired location and mile radius
 - SuperMed PPO is the Network (it should already be selected for you)
 - Select Specialty from the list provided, enter your doctor's name and click Search

IMPORTANT: Except in an emergency, always use network providers to ensure you receive the highest level of benefits and avoid balance billing.

PRESCRIPTION DRUG PLAN

Effective January 1, 2018, our prescription drug plan will continue to be managed by Express Scripts (ESI) which is MMO's Pharmacy Benefit Manager (PBM).

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- ❖ Even though our PBM will remain ESI, the **prescription plan information on your new MMO ID card will be different than your current ESI card**. Therefore, it's important to use the new MMO card beginning January 1, 2018 in order for your prescriptions to be covered.
 - ❖ Benefits are not changing. Prescription drug copays and out-of-pocket will remain the same.
 - ❖ **Any open prescription refills will be automatically transferred to Express Scripts under the new MMO plan.** However, please consider refilling current prescriptions before January 1, 2018 to allow you time to acclimate to MMO/ESI's procedures.
 - ❖ As a reminder, **ESI has a very large network of retail pharmacies** including CVS, Costco, Discount Drug Mart, Giant Eagle, Rite Aid, Target, Walgreen's, Wal-Mart, and this will not change from ESI-direct to MMO/ESI.

MAIL ORDER

Since the Pharmacy Benefit Manager is not changing, **your open mail order prescriptions will be transferred to the new plan.**

If you would like to use mail order for the first time, you will be required to:

- ❖ Request a new written 90 day prescription from your physician.
- ❖ Obtain a mail order form from your human resource department, employee open enrollment packet or MMO's website.
- ❖ Mail the new prescription, mail order form, and payment to ESI's mail order pharmacy.

SPECIALTY MEDICATIONS

Specialty medications are typically high cost medications that require special storage and handling, need clinical monitoring, and are often used to treat rare, complex or chronic conditions. These drugs are usually injected, but may be taken by mouth. Specialty medications are delivered to your home or doctor's office.

- ❖ Just like with the current ESI plan, MMO/ESI will **REQUIRE you fill prescriptions for specialty drugs through their specialty pharmacies**. If you do not use ESI's specialty pharmacies, your specialty medication will not be covered by the plan and you will be required to pay the full cost.
- ❖ **Your open specialty drug prescriptions will be transferred to the new plan.**

MMO/ESI's specialty pharmacies are: (1) Accredo Specialty Pharmacy, owned by Express Scripts; and, (2) Gentry Health Services, owned by Discount Drug Mart (for HIV* and hepatitis C drugs only).

While HIV drugs (and drugs for transplant) are available through Accredo and Gentry, members are **NOT required to use these pharmacies to fill prescriptions for these drugs. All other specialty drugs must be filled through Accredo or Gentry.*

Accredo and Gentry have dedicated staff with specialized training for certain diseases and drugs. Pharmacists and nurses are available 24 hours a day to explain side effects, answer your questions, follow your care and coordinate with your health provider.

To order a specialty drug through Accredo or Gentry:

1. Call the specialty pharmacy and let them know you need a specialty drug:
 - Accredo: (800) 417-1961
 - Gentry: (844) 443-6879
2. The pharmacy will fax your doctor or health provider to request a new long-term prescription.
3. Once the pharmacy has the correct information, a pharmacy representative will call you to arrange a time to deliver your medication.

NETWORK, FORMULARY, PRIOR AUTHORIZATION

- **Network:** no change – we will have the same ESI National Pharmacy Network.
- **Formulary:** no change – we will have the same ESI National Preferred Formulary
Reminder: drug formularies are updated at least annually, which means some drugs may move to a different tier, and some drugs may move from covered to excluded. However, there are always covered alternatives available.
- **Prior Authorization:** no change - there will continue to be some medications requiring prior authorization. **Active prior authorizations currently on file will be transferred over to the new plan under MMO/ESI.**
- You may obtain a formulary drug list and information regarding prior authorization and quantity limits by contacting ESI's Customer Service phone number listed on your ID card.

On or after January 1st, you may contact **Express Scripts at (800) 417-1961** with questions regarding the prescription drug plan. You can also obtain information online by logging onto *My Health Plan* at MedMutual.com/member. Click Benefits & Coverage, then Prescription Drug Benefits. From there, you will be securely redirected to the Express Scripts website. Then, select View Benefit Highlights from the menu under Health & Benefits Information.

DENTAL INSURANCE

- ❖ Because MMO was not able to sufficiently match our dental benefits:
 - **Our Dental Plan will remain with Anthem.**
 - **Please retain and continue to use your Anthem Dental ID Card**
(your Anthem dental card contains the Group #171475)
- ❖ Benefits are not changing.

HEALTH ADVOCATE

- ❖ Shaker health plan members will continue to have access to Health Advocate, your personal health care concierge coordinator.
- ❖ Health Advocate is available to you, your spouse, children, parents and in-laws.
- ❖ Services include, but are not limited to:
 - Helping you find the right doctors
 - Making doctor appointments
 - Resolving claims and billing issues
 - Answering benefit questions
 - Comparing provider cost and quality
- ❖ How to Contact Health Advocate?
 - By Phone at 866-695-8622
 - Email: answers@HealthAdvocate.com
 - Web: HealthAdvocate.com/members

ADDITIONAL INFORMATION:

- ❖ There are a number of brochures available to help educate you about MMO and resources offered to as an MMO member. We encourage you to take the time to read through the materials. Brochures will be available:
 - Via email from Human Resources
 - Online at the Shaker benefits website: www.shakerbenefits.com
- ❖ Details regarding 2018 rates and premium contributions will be distributed from the Treasurer's office.



This document is an outline of the coverage proposed by the carrier, based on information provided by your company. It does not include all the terms, coverages, exclusions, limitations, and conditions of the actual contract language. The policies or benefit books themselves must be read for those details. The intent of this document is to provide you with general information about your employee benefit plans. It does not necessarily address all the specific issues which may be applicable to you. It should not be construed as, nor is it intended to provide, legal advice. Questions regarding specific issues should be addressed by legal counsel who specialize in this practice area