Make the Most of Your Membership



MEDICAL MUTUAL®



Much more

than a health insurance plan

Welcome to Medical Mutual. Our goal is to help you make the best health choices possible while minimizing healthcare costs. We offer a variety of programs, discounts, tools and resources designed to do exactly that.

Many Ways to Save

While Medical Mutual continuously looks for ways to make your health insurance plan more cost effective, there are several things you can do to help reduce your healthcare expenses.

Stay in Network

Save money by using doctors, hospitals, and other healthcare providers and facilities in your plan network. Going outside your plan's network may cost you more, and some services may not be covered at all. Use our Find a Provider tool on My Health Plan, our secure member website, to find providers in your plan's network before receiving any treatment or procedures.

Avoid the ER for Minor Illnesses and Injuries

For injuries or illnesses that are not life threatening, seeing your primary care provider or visiting an urgent care facility or convenience clinic for treatment can be a cost-effective alternative to the emergency room (ER). ER visits can mean long wait times and expensive out-of-pocket costs.

Know What's Covered

Review your plan's Summary of Benefits and Coverage (SBC) before you have a service or procedure to see what's covered. An SBC is a document that summarizes important information about coverage in easy-to-understand language. You can also call our Customer Care specialists at the number on your member ID card for help.

Take Care of Yourself

Preventing a disease is less of a burden than treating a disease. That's why annual checkups with your doctor are so important. Your plan includes preventive benefits that cover well visits, screenings and immunizations. The amount of coverage may vary depending on your particular plan, but out-of-pocket costs will most likely be lower than the cost of treating a condition that has progressed.



MedMutual Total Health™

Programs and Discounts

With Total Health, you receive access to personalized, top-tier clinical resources that help improve your overall well-being and save money by addressing health risks as early as possible.

Managing Chronic Conditions

Programs like digital and telephonic health coaching, advanced remote monitoring, and virtual physical therapy offer customized support to meet your needs and help you achieve your personal health goals. You are eligible to participate at no cost if you have been diagnosed with any of these chronic conditions:

- Asthma
- Heart Failure (HF)
- Coronary Artery Disease (CAD)
- Chronic Obstructive Pulmonary Disease (COPD)
- Diabetes
- Hypertension
- Musculoskeletal pain
- Pelvic health issues (for individuals with vaginal anatomy, regardless of gender identity)

Call our Population Health Support Specialists at 1-800-590-2583 to learn more or to enroll. Specialists are available Monday through Friday from 8 a.m. to 4 p.m. (confidential voicemail available 24/7).

Maternity Support

If a new baby is on the way, download the MedMutual Maternity app. It features a variety of resources and tools to help families prepare for baby's arrival. Visit MedMutual.com/MaternityApp to learn more.



For pregnancies that are considered high-risk, we offer access to a registered nurse who specializes in high-risk maternity care. Call our Case Management team at 1-800-258-3175 to learn more.

WeightWatchers®

Medical Mutual members save almost 50% off the regular cost of a WeightWatchers membership. For more information, call 1-800-251-2583 or visit WeightWatchers.com/us/MMOMembers.

Pivot (Tobacco Cessation)

Want to quit the tobacco habit? We've partnered with Pivot to help you quit for good. Pivot is a personalized app that offers content tailored to your goals, direct access to a health coach and nicotine replacement therapy at no charge. Visit Pivot.co/MedMutual to get started.

24-Hour Nurse Line

If you have a health question, minor injury or medical question, you can get answers 24/7 from a clinical expert. Staffed by fully qualified, registered nurses, our Nurse Line is available at no charge to members. Just call 1-888-912-0636 and have your member ID number ready.

Fitness Discounts

Save money on gym memberships, home exercise equipment, nutrition programs and more. Log in to My Health Plan and click Healthy Living, then Fitness.

Other Discounts

We've partnered with several vendors to offer discounts on a variety of unique health products and services. You can find more details on My Health Plan under the Healthy Living tab.

SmartShopper®

SmartShopper can help you avoid overpaying by comparing locations for the same procedure.

You may earn cash rewards by choosing a lower cost, in network provider for select procedures and screenings. To learn more, visit MedMutual.com/SmartShopper.

Some of the many eligible procedures include:

- Cardiology Procedure
- Colonoscopy
- CT Scan
- Kidney Stones
- Knee Replacement
- Mammogram
- MRI
- Hernia Repair
- Hip Replacement
- Ultrasound
- Hysteroscopy
- X-Ray

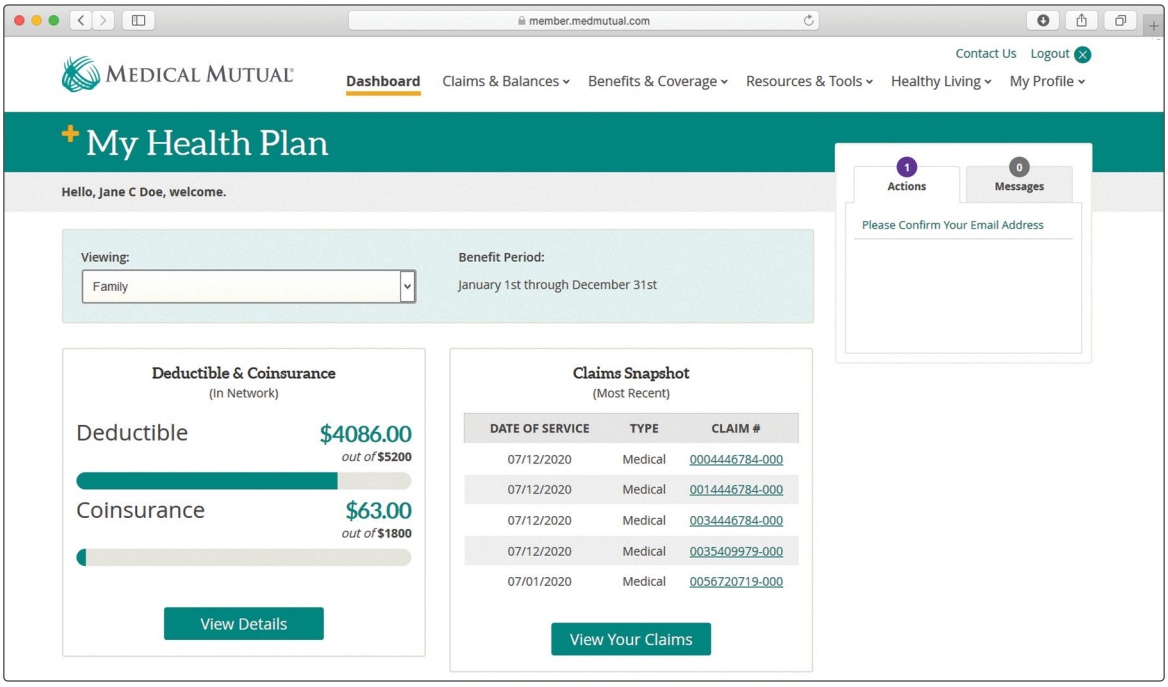
My Health Plan

Gain More Control of Your Health Benefits

My Health Plan, our secure member website, makes it easy and convenient to manage your plan and your health online. You can even compare your healthcare options so you can make better decisions and minimize costs.

You can check your deductible, review your Explanation of Benefits (EOB) statements, find a doctor, compare costs and access a wealth of valuable information to help keep you healthy. Plus, you will find information on a variety of programs, discounts, money-saving tools and educational resources.

Creating your account is simple. Just visit MedMutual.com/Member. Click on the Register for an Account button.





Get to Know My Health Plan

Claims & Balances

Under this tab, you can view claims, check the balances of your health savings account (HSA), flexible spending account (FSA) or health reimbursement arrangement (HRA) and see detailed information about deductibles and coinsurance. If you have an individual plan, you can also pay your premium.

Benefits & Coverage

Discover the benefits of your health insurance and see what your plan covers by clicking on this tab. View your plan details, including medical benefits, maximums and coinsurance, and print temporary ID cards.

Provider Search and Cost Comparison Tools

Our enhanced Find a Provider tool makes it easy to find in-network providers. Search by specialty, location, condition and more. You can also view quality ratings of network doctors and compare costs so you can make the best decision for your health and wallet.

Go Paperless

Choose to receive your EOB statements, SBC, and other communications from Medical Mutual electronically instead of through the U.S. Mail.

MedMutual Mobile App

Get access to the health plan information you need wherever you are. You can track claims and spending information, use the Find a Provider tool and access your ID card. You can even email or fax your ID card to your provider.

You can find the MedMutual app in the App Store® or Google Play.™ Or, scan the QR code to download it now.

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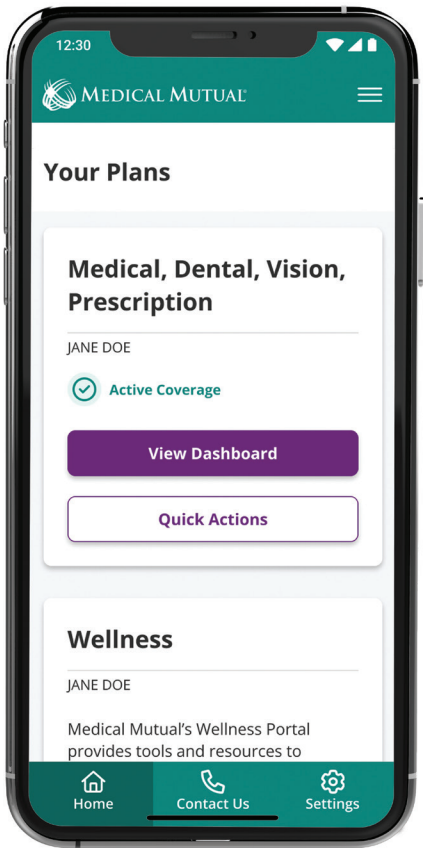
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Upgraded Access to Your Health Benefits

The re-designed MedMutual Mobile App

We've made managing your Medical Mutual health plan simpler and more convenient with our re-designed and re-imagined MedMutual mobile app.



Review your claims and EOBs

You can even see a breakdown of each claim to help you clearly understand your benefits and responsibilities.

View your ID cards

Email or fax your ID card to a provider right from your mobile device.

Keep track of costs

View your deductible, coinsurance, copays, and maximum out-of-pocket costs.

Find care and estimate costs

Locate providers in your network, view their ratings and compare costs for tests and procedures.

My Meds

View your virtual medicine cabinet to see current and historic prescriptions; quickly reference fill dates and available refill information.

Pay your premium

If your monthly premium isn't automatically deducted from your paycheck, experience secure and hassle-free payments through the mobile app.

My Spending Accounts

Check the balance of your health savings account, flexible spending account, or health reimbursement arrangement.

Engage with your wellness

Our wellness portal includes an array of articles, videos, and online courses to help you maintain or achieve better health.

Download & sign up today!

Search MedMutual in the Apple App Store® or Google Play® and easily create an account with our step-by-step instructions.

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MEDICAL MUTUAL®

Telehealth Services

Connect Anywhere with a Healthcare Provider

Telehealth appointments allow you to connect with a healthcare provider and obtain needed care through live video chats using a computer or mobile device.

Telehealth Services Available to You

To see what services are available and covered under your plan, check your benefits in My Health Plan or call Customer Care using the number on your ID card.

MinuteClinic® Virtual Care

MinuteClinic offers virtual healthcare visits (both scheduled and on demand) for adults and children 18 months and older. You can get convenient care, 24 hours a day, seven days a week, including holidays. MinuteClinic Virtual Care offers care for minor illnesses and injuries, (e.g., flu, allergies, infections, sprains and strains), skin conditions (e.g., eczema and rashes), women's services (e.g., urinary tract infections and birth control consultations) medication refills, and more. Go to MinuteClinic.com/VirtualCare to learn more.

SonderMind®

SonderMind offers fast and convenient access to high-quality mental healthcare.* With their easy-to-use portal, you can schedule either virtual or in-person sessions, message your therapist, submit payments and view your progress over time. Therapy is available for individuals, couples and families of all ages, with over 40 specialties and 60 treatment approaches to meet your unique needs. Go to Sondermind.com to learn more and get started.

Grow Therapy

With Grow Therapy you have access to a network of nearly 8,700 qualified therapists with a variety of license types, specialties and modalities. Narrow down your options to only those who fit your preferences and find a time that fits your schedule. Most providers are available to meet within two days. Go to GrowTherapy.com to learn more.

Headway

Headway helps you find the right therapist or psychiatrist at a price that works for you. They offer a diverse network of specialists supporting a wide range of mental health providers, practice types and care mediums. Go to Headway.co to learn more.

You can also easily access these services through your My Health Plan account at MedMutual.com/member.

* Not available in all states. For details, visit SonderMind.com/insurance/Medical-Mutual.

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MEDICAL MUTUAL®

Frequently Asked Questions on Telehealth

Are telehealth visits covered under my plan?

As with any health benefit, how telehealth visits are covered depends on the Medical Mutual plan in which you are enrolled. You can use telehealth on-demand for acute conditions such as a sore throat or sinus infection. You can also schedule a telehealth visit to help manage chronic health conditions such as diabetes or high blood pressure. Generally speaking, scheduled telehealth visits are covered the same as standard office visits. Behavioral health visits are not covered in on-demand settings.

Note: To see what is covered under your plan, log into My Health Plan and check your benefits under Benefits & Coverage, or call Customer Care using the number on your ID card.

Do I need to make an appointment for a telehealth visit?

You can make an appointment for a telehealth visit with a provider just like you would a regular office visit. If you need to speak to a healthcare provider right away, you can use an on-demand telehealth service like MinuteClinic Virtual Care,™ which is covered by your plan. An on-demand telehealth visit is similar to walking into an urgent care center. You do not need to schedule an appointment.

What is the cost for a telehealth visit?

If you have any questions related to your benefits and estimated costs, please contact Medical Mutual Customer Care at the number on your ID card or visit your My Health Plan account.

Do I need any special equipment to participate in a telehealth visit?

Telehealth visits can be done through a smartphone, tablet or computer. Most devices have cameras built in, or you can use a standalone webcam. The healthcare provider you are seeing will let you know what you'll need to connect for your telehealth visit.

How should I prepare for a telehealth visit?

Check your internet connection and test your camera before logging in for your telehealth visit. Here are a few additional tips:

- Try to find a quiet space where you can have a private conversation with the provider.
- Be prepared to explain your symptoms and any health concerns.
- Make a list of medications or supplements you're taking and ask for refills, if needed.
- Note any allergies and discuss them with the provider.

Medical Mutual 24/7 Nurse Line

Consult with a nurse by calling 1-888-912-0636

Speak with a trained nurse to help you determine the care you need



Your coverage with Medical Mutual provides 24/7 access to highly trained and experienced nurses to help:

- Advise you personally, no matter the size of the concern
- 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 visit your doctor, an urgent care clinic or the emergency room
- Assess symptoms using nationally accredited guidelines
- Stay on the line until you feel you understand next steps

Highly trained and experienced nurses take your call

Call toll-free to speak with a medically trained, compassionate nurse anytime, day or night, whenever you have a health concern. They will help you understand your situation and determine next steps. You will always speak with a live nurse first without being triaged or put on hold.

Health counseling, education and help with symptom identification

A nurse will evaluate your symptoms, provide an assessment and help you take the most appropriate action. Medical Mutual's Nurse Line staff will help you make the most informed decisions about how to handle a variety of health and wellness concerns and connect you with the appropriate resources. If it's an emergency, the nurse will tell you what steps to take immediately and will follow up later to see how you're doing.

Nurse Line is a valuable health benefit

Nurse Line is available 24/7 to Medical Mutual members at no additional charge. It's a convenient and easy way to get answers to your health care questions—even when your doctor's office is closed.

This service should not be used for emergency or urgent care needs. In an emergency, call 911 or go to the nearest emergency room. The information provided through this service is for informational purposes only. The nurses cannot diagnose problems or recommend treatment and are not a substitute for your doctor's care. Your health information is kept confidential in accordance with the law. The service is not an insurance program and may be discontinued at any time.

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MEDICAL MUTUAL®

Prescription Drug Coverage

How to manage your benefits

Medical Mutual partners with Express Scripts to help you manage your prescription drug benefits. To access the Express Scripts website, log in to My Health Plan at MedMutual.com/Member and click "Prescription Drug Benefits" under the Benefits and Coverage tab.

The Express Scripts site shows medications prescribed to you and your dependents and offers options for filling and refilling them. You can also compare costs and see the status of any medications that require a prior authorization from your doctor.

Price a Medication

Under the Prescriptions dropdown menu, select Price a Medication to see how much a prescribed drug will cost. Just enter the name of the drug, select whom the drug is for, enter your ZIP Code and click on the Get Prices button. You'll see a list of the drug's cost at local pharmacies and the cost if you order directly from Express Scripts. You can also see generic or preferred drug options.

Prior Authorizations

Some medications may require a prior authorization, or approval, from your doctor before they are filled. This ensures the drug is both appropriate for your condition and cost effective for you. To see if your medication requires prior authorization, click the Price a Medication tab or call the Rx Information number on your Medical Mutual member ID card. Prior authorization follows the four-step process below. To check the status of a medication, select Prior Authorizations from the Prescriptions dropdown.

Step 1 - Inquiry Received: The prior authorization case request for your medication has been received and is currently being processed.

Step 2 - Outreach to Prescriber: There are additional questions regarding this prior authorization and your prescriber has been contacted to discuss further.

Step 3 - In Review: Everything needed to make the best decision for your condition and your benefit plan has been collected. Review is pending for a final decision (This typically takes 24-48 hours.)

Step 4 - Approved, Denied, Withdrawn or Other: Determination on the outcome of your prior authorization request is reached.

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Prescription Home Delivery

If you take long-term medications, such as those used to treat high blood pressure, high cholesterol or diabetes, you could save time and money by having them delivered conveniently to your home through home delivery from Express Scripts. To learn more about home delivery and see how to get started, view our brochure at www.MedMutual.com/PrescriptionHomeDelivery. You can also watch our video on home delivery here: www.MedMutual.com/MailOrder.

Questions?

If you have questions about your prescription drug coverage, please call the Rx Information number on your Medical Mutual ID card.

HOME DELIVERY ORDER FORM

EXPRESS SCRIPTS®

Home Delivery Order Options

Ask your doctor to write your prescription for up to a 90-day supply or the maximum days allowed by your plan with refills up to one year, if appropriate.

ePrescribe: For fastest service ask your doctor to submit prescriptions electronically to the Express Scripts Pharmacy℠.

Online/Mobile App: Log in to **express-scripts.com** or the Express Scripts Mobile App, choose the medicine you want delivered, add it to your cart, then check out.

Fax: Have your doctor call 888.327.9791 for faxing instructions. (Faxes can only be accepted from a doctor's office.)

Phone: Call Express Scripts at the toll-free number on the back of your ID card for assistance in switching to home delivery.

Mail: Complete the order form and send to Express Scripts along with prescriptions and payment.

Please use ALL CAPITAL LETTERS with black or blue ink. Fill in the ovals as shown. (●)

1 Member Information

Member ID Number	Group #
Member Last Name	Member First Name
☐ Please send email notices regarding this order's status	Email address

To GO GREEN go to express-scripts.com to update your Communication Preferences under Account

2 Shipping Address

○ Permanent ○ Temporary — If temporary address, please provide effective dates From____/____/____ To ____/___/_____

Shipping Address Line 1 (Street address is preferred over PO Box)		Apt#
Shipping Address Line 2		
City	State	Zip

Primary Phone Number	Choose One M● H○ W○	Secondary Phone Number	Choose One M○ H○ W○

Shipping Method (Expedited shipping will **not** rush prescription processing)

◉ Standard	Free	Arrives within 5-10 days after order is shipped
○ Two Day	$12.00	Arrives 2 business days after order is shipped
○ One Day	$21.00	Arrives 1 business day after order is shipped

3 Patient Information

Please only include prescriptions for patients covered under the above Member ID

Patient #1	
Patient Last Name	Patient First Name
Patient DOB	Gender ○ Male ○ Female
Physician Name	Physician Phone

Patient #2	
Patient Last Name	Patient First Name
Patient DOB	Gender ○ Male ○ Female
Physician Name	Physician Phone

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4 Payment Method — Do not send cash

You authorize us to retain on file your payment card details that you used to make this purchase and to charge your payment card account to pay for any prescription orders requested by you. Should you also choose to enroll in the auto-pay program, you further consent that we may charge your enrolled payment method for prescription orders made by covered household members, including previously ordered prescriptions which are unpaid.

- We will notify you of any changes to this authorization by email or mail as applicable. This Card on File Authorization, and if applicable auto-pay enrollment, will remain in effect until you cancel the authorization by logging into your account or calling the 1-800 number on the back of your prescription card. The transaction amount is determined by your plan's benefit structure at the time the prescription is shipped.
- State law prohibits the return of prescription medications for resale or reuse. We cannot accept the return of properly dispensed prescription medications for credit or refund.
- See our privacy policy for information regarding our use and disclosure of personally identifiable information.

Signature X _____

Credit Card: We accept VISA, MC, Discover, AMEX, Diners	**Check or Checking Account**
◯ **Automatic, ongoing payment through credit card** Authorize to pay for this order and all future orders with the credit card below.	◯ **Automatic, ongoing payment through checking account** I authorize to pay for this order and all future orders with the checking account information below or include a voided check.
◯ **For this order only.** Simply fill in your credit card information below.	◯ **For this order only.** Enclose a check payable to Express Scripts. Write invoice number on the check.
Credit Card Number _____ Exp Date _____	Name of checking account holder _____ Checking Account Number _____ Routing Number (first 9 digits lower-left corner of personal check) _____

Review your account balance and pay outstanding balances anytime at express-scripts.com. To change the limit of the amount we can charge your card without a call to you:

- Go to express-scripts.com
- Select Payment Methods under Account then Edit Information.
- Change the payment authorization limit

You can manage all account preferences at **express-scripts.com** or call Member Services at the toll-free number on your ID card.

5 Health History

To update your allergies or health conditions: Visit us at **express-scripts.com/healthform** or call **877.438.4417**. This information helps us protect you against potentially harmful drug interactions and allergies.

6 Important reminders and other information

If you are a Medicare Part B beneficiary AND have private health insurance, check your prescription drug benefit materials to determine the best way to get Medicare Part B drugs and supplies. Or, call Member Services at the toll-free number found on your ID card. To verify Medicare Part B prescription coverage, call Medicare at 1.800.633.4227.

For additional information or help, visit us at **express-scripts.com** or call Member Services at the toll-free number found on your ID card. TTY/TDD users should call 1.800.759.1089.

Your order may be filled at any one of our Express Scripts Pharmacies located nationwide.

7 Generic Substitution

State law permits a pharmacist to substitute a less expensive generic equivalent drug for a brand-name drug unless you or your physician directs otherwise. Please note that this applies to new prescriptions and to any future refills of that prescription. Also be aware that you may pay more for a brand-name drug.

☐ I do not wish to receive a less expensive brand or generic medication.

If the prescription is being submitted electronically, discuss with your doctor.

Place your prescription(s), order form(s)
and your payment in an envelope.
Do not use staples or paper clips.
Do not affix post it notes to form.

EXPRESS SCRIPTS
PO BOX 66577
ST LOUIS, MO 63166-6577



Coverage Management Programs

Get the right drug for the right condition at the right cost

Medical Mutual uses coverage management programs—also called coverage reviews—to help make sure you get the right medication for your condition at the best value. Coverage reviews allow us to request information from your doctor or health provider to determine if your prescription drug plan will cover certain medications.

MEDICAL MUTUAL®



How Coverage Reviews Work

WATCH VIDEO

Watch our informational video at MedMutual.com/RxPA

Medical Mutual works with Express Scripts, our pharmacy benefit manager, to determine if your use of certain medications meets the plan's criteria for coverage. For example:

- Is the medication appropriate for your condition and medical history?
- Is the medication cost effective compared to similar drugs?
- Is the dose (amount) prescribed appropriate and safe?
- Does the medication meet approved prescribing and safety guidelines set by the U.S. Food and Drug Administration (FDA) and other national treatment guidelines?

Coverage management programs include prior approval, step therapy and quantity limits. The following information explains the features of these programs:

- **Prior authorization (PA)** rules check if a drug is prescribed appropriately and proven effective and safe for your condition. If you do not get prior authorization before filling your prescription, your plan may not cover the medication and you will have to pay full price.
- **Step therapy (ST)** rules promote the use of lower-cost generic drugs and preferred brand-name alternatives in place of more costly medications. For example, if Medication A, a generic drug, and Medication B, a brand-name drug, both treat your condition, the plan may not cover Medication B unless you try Medication A first. If Medication A does not work for you, the plan will cover Medication B. Please note: Some medications may be covered if your demographic or medical history meets certain qualifications.
- **Quantity limit (QL)** rules define the amount of the medication your plan will cover. Your plan may only cover a certain quantity per fill (such as six tablets at a time), or a certain quantity over a specific time (for example, 30 tablets within a 90-day period). These limits are determined by FDA-approved dosing. Additional quantities may be allowed if proven medically necessary and safe.

Which Medications Require Coverage Reviews

To see if your drug requires a coverage review, you can use our formulary search tool available online for your group's specific formulary.

- Basic Plus Formulary: express-scripts.com/mmobasicplus
- National Preferred Formulary: express-scripts.com/mmonpf
- ACA Advantage Formulary: express-scripts.com/MMOACA

Transition Window (For New Groups or Existing Groups Adding Coverage Management)

To give you time to work with your doctor, your plan may allow you to receive a 30-day transition supply of medication before a coverage review will be required at your next fill if your medication requires prior authorization or step therapy. The transition supply window will be open for 90-days after your plan first turns on coverage management rules, and you will be able to receive one 30-day transition supply within that time period. For example, if your plan turns on coverage management rules effective January 1st, then you will have until March 31st to receive your transition supply. After you fill your transition supply, you will receive a letter in the mail from Express Scripts advising you that your medication is subject to coverage management rules and the steps to take before it's time for your next fill. Use this time to reach out to your doctor to discuss alternative medication options or to ask your doctor to initiate a coverage review.

Requesting a Coverage Review

For fastest service, your doctor's office can submit request for a review to Express Scripts through its electronic prior authorization (ePA) software. Your doctor or your pharmacist may also call Express Scripts at 1-800-753-2851 to initiate the review process. Express Scripts may request additional medical information from your doctor. Reviews are typically completed within 72 hours, then you and your doctor will receive a letter from Express Scripts indicating if coverage is approved or denied. You should receive this letter within one or two business days after the decision is made. If coverage is denied, the letter will explain the specific reason for the denial. It will also outline your rights to an appeal, how to request one and whom to contact if you have questions or need additional information.

Questions?

If you have questions about your prescription drugs, please call the Rx Information number on your Medical Mutual ID card

Filling Your Prescription

Once coverage is approved, follow these steps to fill your prescription:

- Through mail order: Call Express Scripts at the Rx Information number on your ID card to provide payment information and verify delivery is scheduled. You will need to pay your normal mail-order cost share (copay, deductible or coinsurance).
- At a retail pharmacy: Contact your pharmacy to let them know coverage is approved and verify when you can return to the pharmacy to pick it up. You will need to pay your normal retail cost share (copay, deductible or coinsurance).
- For specialty drugs: Call one of our specialty pharmacies, Accredo, at 1-800-417-1961, Gentry Health Services, at 1-844-443-6879 or University Hospitals at 1-833-466-0012. (You can continue to fill prescriptions for transplant drugs and those used to treat deep vein thrombosis and HIV at a network retail pharmacy.)

If coverage is not approved, your claim will be denied and you will be responsible for paying the full cost of the medication if you choose to fill it. In addition, any amount you pay will not accumulate toward your deductible and/or maximum out-of-pocket amounts, if applicable.

