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It's about
TIME!



health happenings

Seven Open Enrollment Questions Answered

Q: What is Open Enrollment?

A: Open Enrollment is your one chance each year to make changes to your benefits without a qualifying event. Changes may include things like changing plans, adding or dropping dependents, and more.

Q: When is Open Enrollment?

A: Open Enrollment is May 15 – June 15 each year, though your city or town representative may require you to get any changes to them some time before June 15. These changes will be effective July 1, 2018.

Q: What can I do to prepare for Open Enrollment?

A: Make sure your city or town representative has your current mailing address and watch your mail for more information from MMIA this Spring.

Qualifying Events – 31 Days

Remember, participants must report any plan changes for a qualifying event such as a birth or a marriage to their city or town representative within 31 days of the event. The city/town should report those changes to the MMIA as quickly as possible in order to process things smoothly for the participant.

Q: What information will be mailed to me about Open Enrollment?

A: Watch for a USB mailed to your home address from MMIA. This USB is safe and secure and contains important information like your updated summary plan document, legal notices, and a video of any important information you should know regarding your benefits.

Q: Where can I find even more information?

A: Visit the Employee Benefits page at www.mmia.net/employee-benefits starting in May for full Open Enrollment details. You will find summaries for each medical, dental, and vision plan, available resources, information on the wellness program, and required notices.

The Employee Benefits department is always here to answer any additional questions you may have, but we hope you find the website helpful as you navigate this process. If you have questions about your city's or town's benefit contributions, make sure to talk to your benefit representative.

Continued on PAGE 3...

What's up with Wellness? Improvement Round of Gift Cards

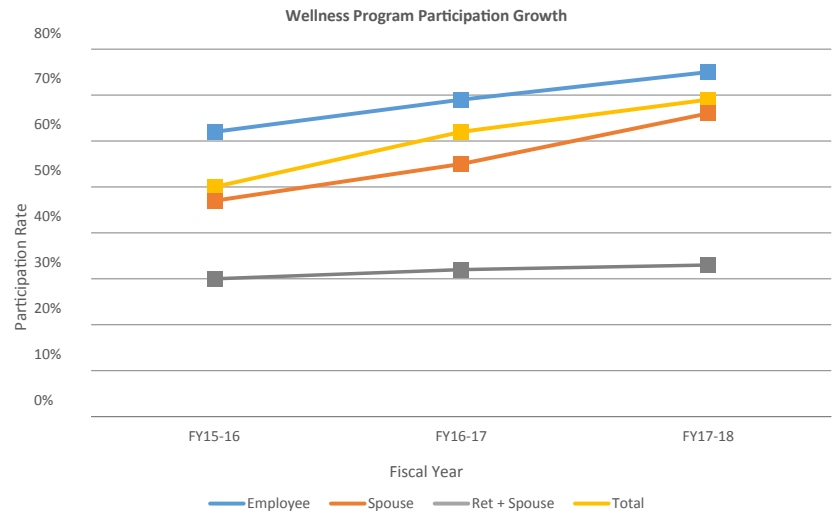
The improvement round of gift cards will be sent to cities and towns by the end of April.

You must have contacted It Starts With Me by December 14, 2017, if you wanted to enroll in a program to earn an improvement incentive.

Shout Out for Wellness

We want to say a big, "THANK YOU!" to everyone who participated in a wellness screening! Program-wide, we had 69% of eligible participants attend a screening, and a whopping 75% participation rate for eligible employees!

Your participation not only keeps you healthy, but it also helps to manage costs of our self-funded benefit plan, which saves everyone money in the long run! Make sure to check back at www.getwellthymt.com for wellness program updates and wellness-related articles. ■



The AskAllegiance Portal - Get a Temporary Benefit ID Card and More!

One of the most common questions we receive at MMIA Employee Benefits is how to get a copy of your benefit ID card. Did you know that if you're covered on the medical plan you can log onto www.askallegiance.com any time and print a temporary card? Just follow these simple instructions:

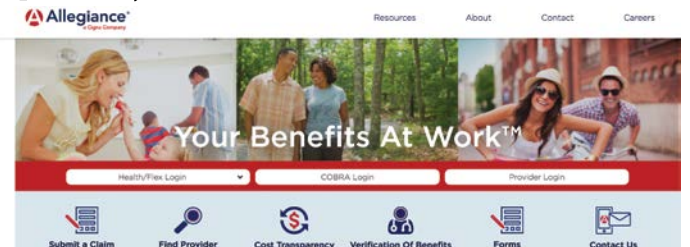
1. Go to www.askallegiance.com.
2. Click on Health/Flex Login.
3. Log in. If you have not registered on the site, click, "Register a New User."
 - a. If you have trouble logging in, call 1-800-339-4308
4. Select the correct Health Account
5. A new window will open. Select "ID Card Image" under the "Resources" tab, then click "Submit" on the far right.

If you need a new or extra permanent copy mailed to you, contact MMIA Employee Benefits by calling 1-800-635-3089 option 4.

Other Things To Do At www.askallegiance.com

View your claims history and Explanations of Benefits (EOBs):

1. Click "Claims History" under the "Status" tab
2. Choose a start date and click, "Submit" on the far right.



3. You can then see the EOB for any claim by clicking on the blue Claim Description and clicking "Display Claimant EOB" in the pop-up box.

Sign up to get paperless EOBs:

1. Click, "Change Email" and verify your email address.
2. Click "Yes" next to "Receive Electronic Explanation of Benefits?"

File a claim, find a provider, or go to Healthcare BlueBook:

- Do these from the Allegiance Homepage.
- To get back to the home screen once you have logged in, just click the Allegiance logo in the top left corner of your screen.

All of these great tools are available on your computer or mobile device 24/7. Create your login today! ■

Retiree Corner: Medicare-Eligible Employees and HSAs

Having a High Deductible Health Plan (HDHP) and contributing to a Health Savings Account (HSA) can be a great way to save for future medical expenses. More than half of the cities and towns with MMIA Employee Benefits offer an HSA-qualified HDHP.

Many think high deductible plans are only for the young, single, healthy employee, but an HDHP with an HSA has many advantages for those approaching retirement as well. HSAs have triple tax advantage like a 401(k) or IRA. That means the contributions that go into them are not taxed, investment earnings are not taxed, and the money withdrawn from the account is not taxed when you take it out if you use it for qualified medical expenses. Furthermore, when you terminate your employment, the money you and your employer contribute to an HSA is still available for you to use for qualified medical expenses. Investment experts say an HSA is a better way to save for medical costs in retirement than using money from other retirement accounts, because money from a 401(k) or IRA is taxed as income when it is withdrawn.

If you are considering starting an HSA, here are a few things you should know:

- You must have a qualified High Deductible Health Plan in order to contribute money to an HSA. If your city or town does not offer an HDHP, consider expressing your interest with your HR or benefit representative.

Open Enrollment (cont'd)

Q: Who do I notify if I want to make a change during Open Enrollment?

A: Please talk to your city or town's benefit representative if you wish to make any changes. They will relay those changes to MMIA before June 15.

Q: What if I don't plan to make any changes to my benefits?

A: Be sure to check with your city or town representative. Some cities or towns will roll over all your choices, but some require you to renew your elections each year. This is especially true if you make contributions to a Flexible Savings Account. ■



- Money in an HSA rolls over from year to year, unlike a Flexible Spending Account that you must use or lose.
- Once you reach age 65 and Medicare-eligibility, you can no longer contribute to an HSA, even if you are actively employed. This is a federal rule. The money in the account is still yours to spend, but neither you nor your city or town may continue to contribute to it.



You may only change plans during Open Enrollment, which begins May 15, or at a qualifying life event. If you would like more information about our High Deductible Health Plan option and health savings accounts, visit www.mmia.net/employee-benefits or call 1-800-635-3089 option 4. ■

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for free!



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www.mmia.net

Questions to Ask Your Doctor

When you buy a new car or shop for a TV, you probably ask a lot of questions. You want to make sure you are getting a product that will meet your needs and budget. For some reason, though, there is one place we do not ask many questions – the doctor’s office.

When it comes to our health, many of us see our providers as all-knowing. We trust them to ask all the right questions and know all the answers.

While doctors are highly trained, they are also human. They learn from experience and have bias just like anyone else. That is why it is critically important to your health to ask your doctors the right questions when it comes to tests and treatments. These questions could also help you save some money by avoiding expensive procedures that might not be necessary.

The Agency for Research and Quality suggests asking your doctor these top 10 questions when it comes to treatment and tests. Consider cutting out this card and keeping it in your wallet so you can remember what to ask the next time you are in the exam room.

For more great resources when it comes to communicating with your health providers, visit the Agency for Research and Quality at www.ahrq.gov/patients-consumers. ■

10 Questions to Ask Your Healthcare Provider

1. What is the test for?
2. How many times have you done this procedure?
3. When will I get the results?
4. Why do I need this treatment?
5. Are there any alternatives?
6. What are the possible complications?
7. Which hospital is best for my needs?
8. Is that drug generic, or is there a generic available, and how do you spell the name of it?
9. Are there any side effects?
10. Will this medicine interact with medicines that I’m already taking?

Fold Over

Cut Here

