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ENROLLMENT GUIDE & PREMIUMS

NON-MEDICARE RETIREES

IN STEP WITH YOUR HEALTH

Welcome to MCHCP

It's time to enroll.

MCHCP recognizes that each of our members has unique needs. That is why we offer different health plan options — so our members can choose what is best for themselves and their families.

During Open Enrollment, you can choose to make changes to your health plan selections; or if you do not want to make any health plan changes from what you have in 2023, you can let them remain the same.

There are steps you will be required to complete to earn any incentives (Partnership and Tobacco-Free) you want to receive in 2024. These incentives help lower your monthly medical premiums by ensuring you take steps to manage your health.

Additionally, if you are enrolled in the Health Savings Account (HSA) Plan or have a Flexible Spending Account (FSA), you will need to make contribution amount selections for 2024.

To complete these steps, or to make any enrollment changes, visit our website between Oct. 1–31. Log in to your myMCHCP account and complete the enrollment process.

Be sure to follow us on Facebook, Twitter and YouTube. We post MCHCP news and updates, recipes, health videos and other useful information throughout the year.

Questions?

This guide is an overview. For more information, visit MCHCP's website.

MCHCP Member Services: 573-751-0771
Toll-free: 800-487-0771
Relay Missouri: 711 or 800-735-2966 (TTY)
MCHCP Website: www.mchcp.org



SCAN





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Medical & Pharmacy

	Health Savings Account (HSA) Plan	
	Network	Non-Network
Deductible (must meet deductible before coinsurance)	\$1,650/individual \$3,300/family	\$3,300/individual \$6,600/family
Medical Out-of-Pocket Maximum	\$4,950/individual \$9,900/family	\$9,900/individual \$19,800/family
Prescription Out-of-Pocket Maximum	Combined with Medical	Combined with Medical
Preventive Services	MCHCP pays 100%	40% coinsurance
Office Visit	20% coinsurance	40% coinsurance
Virtual Care through Sydney Health	MCHCP pays 100%	N/A
Urgent Care	20% coinsurance	Paid as Network Benefit
Emergency Room	20% coinsurance	Paid as Network Benefit
Hospital (Inpatient)	20% coinsurance	40% coinsurance
Lab and X-ray	20% coinsurance	40% coinsurance
Surgery	20% coinsurance	40% coinsurance
Prescription Drugs Reduced costs for certain drugs and supplies.	Generic: 10% coinsurance up to \$50* Preferred: 20% coinsurance up to \$100* Non-Preferred: 40% coinsurance up to \$200* <i>*These amounts are for a 31-day supply.</i>	Generic and Preferred: 40% coinsurance Non-Preferred: 50% coinsurance

Plan Overview

PPO 1250 Plan		PPO 750 Plan	
Network	Non-Network	Network	Non-Network
\$1,250/individual \$2,500/family	\$2,500/individual \$5,000/family	\$750/individual \$1,500/family	\$1,500/individual \$3,000/family
\$3,750/individual \$7,500/family	\$7,500/individual \$15,000/family	\$2,250/individual \$4,500/family	\$4,500/individual \$9,000/family
\$4,150/individual \$8,300/family	No Maximum	\$4,150/individual \$8,300/family	No Maximum
MCHCP pays 100%	40% coinsurance	MCHCP pays 100%	40% coinsurance
Primary Care or Mental Health: \$25 copayment Specialist: \$40 copayment Chiropractor: \$20 copayment or 50% of total cost of service, whichever is less	40% coinsurance	20% coinsurance	40% coinsurance
MCHCP pays 100%	N/A	MCHCP pays 100%	N/A
\$50 copayment	Paid as Network Benefit	20% coinsurance	Paid as Network Benefit
\$250 copayment plus 20% coinsurance	Paid as Network Benefit	\$250 copayment plus 20% coinsurance	Paid as Network Benefit
\$200 copayment plus 20% coinsurance	\$200 copayment plus 40% coinsurance	\$200 copayment plus 20% coinsurance	\$200 copayment plus 40% coinsurance
20% coinsurance	40% coinsurance	20% coinsurance	40% coinsurance
20% coinsurance	40% coinsurance	20% coinsurance	40% coinsurance

Days' Supply	Generic	Preferred	Non-Preferred	Specialty
1-31 days	\$10	\$40	\$100	\$75 through Accredo
32-60 days	\$20	\$80	\$200	-
61-90 days (home delivery)	\$25	\$100	\$250	-
61-90 days (retail)	\$30	\$120	\$300	-



What's New in 2024

MCHCP will be offering several benefit updates, new digital programs, and diabetes support services in 2024:

Updated Benefits, Programs and Services:

Delta Dental

Delta Dental will provide the dental plan in 2024!

Fertility Support

MCHCP is adding coverage for fertility support services. Members who qualify will have access to WINFertility — a fertility support program through Anthem that includes a lifetime maximum of two cycles.

Diabetes Care Value Program

Express Scripts now offers the Diabetes Care Value Program, which helps support our members who have diabetes and pre-diabetes. Eligible members will have access to a digital weight loss program through Omada, which provides a cellular connected scale, coaching and more; as well as diabetes remote monitoring through LifeScan.

Expansion of Virtual Care through Anthem's Sydney Health

MCHCP is expanding virtual care offered through Sydney Health. Virtual visits through Sydney Health are available at no cost. Virtual care will include the following new services.

▶ ***Virtual Primary Care***

Can't make it to your primary care provider's office? Don't have a primary care provider? No problem! Make a virtual primary care visit through Sydney Health.

▶ ***Mercy Express Care***

Mercy Express Care is a way for members to seek and get care quickly for minor health issues. Patients answer a few questions digitally, get a care plan and (if needed) can get a prescription sent to their pharmacy.

▶ ***Hinge Health***

Hinge Health is a virtual joint and muscle clinic for physical therapy. It includes access to a personalized exercise program and care team to help members relieve pain from neck to foot.

▶ ***Lark Diabetes Prevention Program***

Lark is a digital diabetes prevention program offered at no cost, and helps eligible members lower their risk of developing type 2 diabetes via coaching and lesson plans that follow guidelines from the Centers for Disease Control and Prevention (CDC).



Enrollment Options

Frequently Asked Questions

Can I keep my 2023 plan choices in 2024 without changes?

If you do not want to make changes to your health plan or covered dependents, MCHCP will automatically reenroll you and your dependents in the same plan(s) for 2024 that you had in 2023.

I have Strive for Wellness® incentives in 2023. Do I need to do anything to keep them?

Members who received a Strive for Wellness® incentive premium reduction in 2023 will need to complete the requirements for that incentive again prior to Nov. 30, 2023, if they wish to receive it at the start of the 2024 plan year (Jan. 1, 2024). Incentive requirements can be completed at any time, though! Premium reductions begin the first day of the second month after the required incentive steps are completed.

My spouse and/or I will be turning 65 later this year, and will be eligible for Medicare. What will happen to our coverage?

When a member turns 65 and becomes eligible for Medicare, he or she will be automatically enrolled in the UnitedHealthcare® (UHC) Group Medicare Advantage (PPO) plan and the Express Scripts Medicare Prescription Drug Plan (PDP) for prescription drug coverage. Visit MCHCP's website for more information about services and costs as a Medicare-eligible member. Any non-Medicare members will continue with their current coverage. Your monthly premium will be adjusted based on Medicare status.

How do I change or cancel coverage?

To change or cancel coverage, simply log in to your myMCHCP account during Open Enrollment to make your choice for 2024.

Special Enrollment Periods

We know things happen during the year that may make a change necessary. When one of the following events happens, you can enroll your dependents. We will need supporting documentation to prove that the event happened. Make sure to enroll within the time frame given for the event below.

EVENT	TIME PERIOD
Life events (change in marital status, birth, adoption or placement of child)	Within 31 days of life event
Loss of employer-sponsored group coverage	Within 60 days of involuntary coverage loss
Qualified Medical Child Support Order (QMCSO)	Within 60 days of court order

Health Plan Options

MCHCP offers three health plan options that include medical coverage administered by Anthem and prescription drug coverage administered by Express Scripts, Inc. (ESI). Each option offers the same nationwide networks, and you can access non-network providers, too. Network preventive services are always paid at 100%. Turn to pages 3 and 4 to compare health plans for medical coverage and cost-sharing. To learn more, visit MCHCP's website.

HSA Plan

The HSA Plan is a qualified high deductible plan that can help you save money by giving you a health savings account (HSA).

In addition to preventive services and virtual visits through Sydney Health paid at 100%, there are some drugs (like covered insulin, statins, and more) that bypass your deductible – you will just owe coinsurance. Network nutrition counseling and four diabetes self-management education visits may be covered at 100% after your deductible is met. For other drugs and services, you must meet the deductible and pay coinsurance. Members with family coverage enrolled in the HSA Plan must meet the overall family deductible before the plan pays. Under the HSA plan, virtual care through Sydney Health is 100% covered in 2024.

PPO Plans

MCHCP offers two PPO Plans – the **PPO 1250 Plan** and **PPO 750 Plan**.

In addition to preventive services, network nutrition counseling and four diabetes self-management education visits may be covered 100%. Virtual care through Sydney Health is also 100% covered in 2024. Under PPO Plans, most services are subject to deductible and coinsurance.

The PPO 1250 Plan includes office visit copayments not subject to deductible and coinsurance. In addition, both PPO Plans have copayments for emergency room visits (waived if it is a true emergency or if admitted), plus you pay deductible and coinsurance. Hospital stays also have a copayment plus you pay deductible and coinsurance. Copayments do not count toward the deductible but do count toward the maximum out-of-pocket amount.

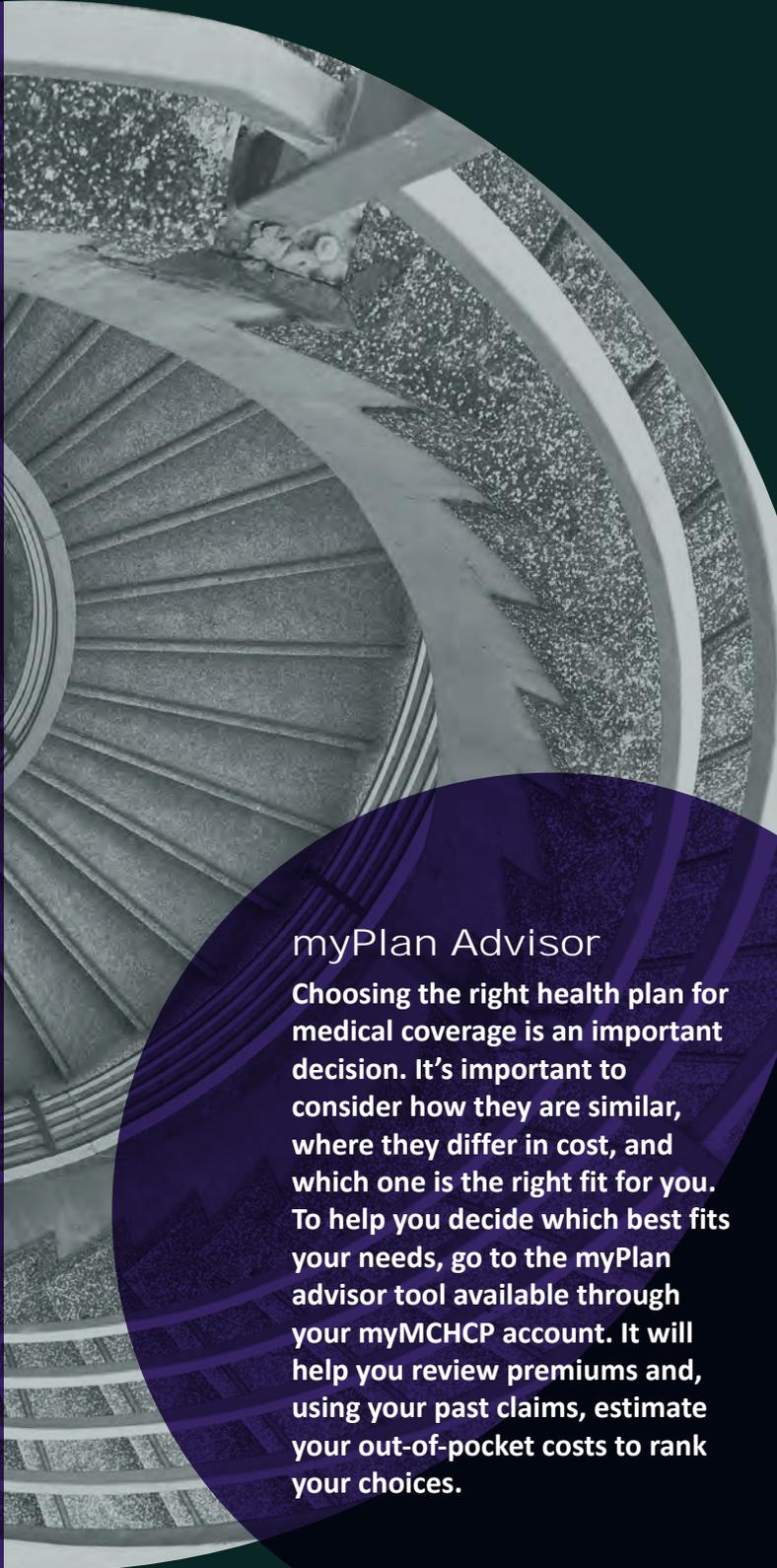
Prescription Drugs

All medical coverage includes MCHCP's prescription drug benefits, administered by Express Scripts, Inc. (ESI). ESI provides a nationwide retail pharmacy network, as well as its specialty pharmacy, Accredo. ESI offers home delivery for maintenance medications that can help save you time and money. You may have to pay more if you get a brand name drug when a generic is available. ESI's preferred formulary list is available on MCHCP's website or by calling ESI.

TRICARE Supplement Plan

Military members (and their eligible dependents) can choose Selman and Company's TRICARE Supplement Plan instead of MCHCP medical and pharmacy benefits. The TRICARE Supplement Plan works with the U.S. Department of Defense's TRICARE health benefit plan. Only non-Medicare retirees enrolled in TRICARE are eligible to participate. Premiums are not set by MCHCP, and MCHCP does not contribute to them.

Subscribers have the option to declare a religious or moral objection and decline contraception coverage. Contact MCHCP for more information.



Reduce your Premium

You can reduce your MCHCP medical premium with our two **Strive for Wellness®** Incentives and save up to **\$1,260** per year! Here's how:

Partnership Incentive: Complete the **Partnership Promise and Health Assessment/Quiz** online to earn a **\$25** monthly premium reduction. That's a total savings of **\$300** for all 12 months.

Tobacco-Free Incentive: You and your covered non-Medicare spouse can complete the **Tobacco-Free Promise** or **Quit Tobacco Promise** form to earn up to an **\$80** monthly premium reduction (**\$40** per person). That's a total savings of **\$960** for all 12 months if both you and your covered non-Medicare spouse participate. If only one person participates, your total savings will be **\$480** for all 12 months.

Take Action: *Strive for Wellness®* Incentives do not automatically annually renew. You must complete the incentive requirements by **Nov. 30, 2023**, to begin saving **Jan. 1, 2024**. If you miss the **Nov. 30, 2023** date, you can still earn them, but savings will start after **January 2024**. The longer you delay, the less you save!

Those enrolled in the **TRICARE Supplement Plan** or who have **Medicare** are not eligible to participate.

myPlan Advisor

Choosing the right health plan for medical coverage is an important decision. It's important to consider how they are similar, where they differ in cost, and which one is the right fit for you. To help you decide which best fits your needs, go to the myPlan advisor tool available through your myMCHCP account. It will help you review premiums and, using your past claims, estimate your out-of-pocket costs to rank your choices.



Dental

Delta Dental of Missouri offers dental benefits through their nationwide networks. These benefits include preventive services, basic restorative services, and major restorative services.

You may select the dentist of your choice. Using a network Delta Dental PPO™ or Delta Dental Premier® dentist provides you the best benefit and savings. You may go to a non-network provider; however, your out-of-pocket costs will likely be higher. While network dentists are paid directly by Delta Dental for their services, a non-network dentist may require that you make full payment at the time of service and file the claim for reimbursement. They may also bill you the difference between the allowed amount and the full retail cost of their service.



SCAN



SERVICE TYPE	BRIEF DESCRIPTION	YOU WILL OWE
Preventive (Type A) Services do not count towards your annual maximum	Oral exam – one every six months Cleaning – one every six months Bitewing x-rays – one set every calendar year Topical fluoride – once every calendar year Sealants – once every 5 calendar years Emergency palliative treatment Problem focused exams – 2 every calendar year	No deductible applies Network – You owe nothing more Non-Network – You may be balance billed any difference between allowed amount and retail cost
Basic Restorative (Type B)	Fillings Simple extractions Full mouth x-rays – once every 5 calendar years Periapical x-rays – as required Space maintainers – once every 5 calendar years	Deductible applies, plus you owe: Network – 20% coinsurance Non-Network – 20% coinsurance and any difference between allowed amount and retail cost
Major Restorative (Type C) 12-month waiting period. Waiting period will be waived for all 1/1/24 enrollees and for future enrollees with proof of 12 months of continuous dental coverage for major services immediately prior to the effective date of coverage in MCHCP’s Dental Plan.	Oral surgery & surgical extractions Implants – once every 7 calendar years Endodontics / root canal therapy Crowns – once every 7 calendar years Dentures & bridges – once every 7 calendar years Periodontics – surgical & non-surgical	Deductible applies, plus you owe: Network – 50% coinsurance Non-Network – 50% coinsurance and any difference between allowed amount and retail cost

The annual maximum benefit per individual is \$2,000. The annual deductible per individual is \$50.



National Vision Administrators, L.L.C.

Vision

National Vision Administrators, L.L.C. (NVA) offers vision benefits through a nationwide network. Basic and premium plans are offered with specific copayments for services from network providers. Both plans offer allowances for services from non-network providers. The vision plan does not replace medical coverage for eye disease or injury.

You select a provider of your choice. It is recommended you choose an NVA network provider for best use of the vision plan. However, if you decide to go to a non-network provider, you can, but your out-of-pocket costs will likely be much higher. When receiving services from a network provider, NVA pays the provider directly. When receiving services from a non-network provider, members pay the provider and file the claim. Reimbursement checks for non-network claims may take up to 30 days to process.

SERVICE TYPE	BRIEF DESCRIPTION	BASIC PLAN - NETWORK	PREMIUM PLAN - NETWORK	NON-NETWORK
Exams	One every calendar year; two every calendar year up to age 18	\$10 copayment	\$10 copayment	NVA pays up to \$45
Lenses	Once every calendar year Single-vision, bifocal, trifocal, lenticular (see website for other types of lenses and cost sharing)	\$25 copayment	\$25 copayment	Maximum amount NVA pays varies based on type of lenses
Frames	Once every two calendar years; once every calendar year up to age 18	Up to \$125 retail allowance and 20% discount off remaining balance	Up to \$175 retail allowance and 20% discount off remaining balance	NVA pays up to \$70
Contact Lenses – Elective (you prefer contacts to glasses.)	Once every calendar year in place of eyeglass lenses	Up to \$125 retail allowance and 15% discount off conventional or 10% discount off disposable remaining balance	Up to \$175 retail allowance and 15% discount off conventional or 10% discount off disposable remaining balance	NVA pays up to \$105
Contact Fitting and Evaluations	For daily contact lenses, extended contact lenses and specialty contact lenses	\$20 to \$50 copayment depending on type of lenses	\$20 to \$50 copayment depending on type of lenses	NVA pays up to \$20 to \$30 depending on type of lenses



Anthem Programs

Sydney Health



Access personalized health and wellness information when you need it.

With Anthem's Sydney Health mobile app, you can access your benefit details in one place. (Sydney Health is also available in an online format when you select the "Medical" button in your myMCHCP account.) The simple experience makes it easy to find what you need — with one-tap access to benefit information, Member Services, virtual care, and wellness resources. Sydney Health helps you manage your benefits, so you can focus on your health.

Download Sydney Health today

- ▶ Find care and compare costs
- ▶ See what's covered and check claims
- ▶ View and use digital ID cards



SCAN



Find Care

Search for doctors, hospitals and other health care professionals in your plan's network and compare costs. You can filter providers by what is most important to you, such as gender, languages spoken or location.



My Health Dashboard

Use My Health Dashboard to find information on health topics that interest you, useful health and wellness tips, and personalized action plans that can help you reach your goals.



Live Chat

Find answers quickly with the Live Chat tool in Sydney Health. You can use the interactive chat feature or talk to an Anthem representative when you have questions about your benefits or need information.

Virtual Care Through Sydney Health

Virtual options can help you take control of your health, work on lifestyle changes and connect with specialized health professionals, no matter where you are.

Sydney gives you access to:

- ▶ Virtual primary care, coordinated by a care team for routine care, including virtual annual preventive care and personalized care plans for chronic conditions.
- ▶ LiveHealth Online for urgent care, allergies, lactation support, healthy sleep, psychiatry, counseling, and more.
- ▶ Hinge health, a digital joint and muscle clinic for prevention, physical therapy for injury recovery, chronic pain, pelvic health, and pre/post-surgery rehabilitation.
- ▶ Building Healthy Families for maternity support with resources from preconception through early parenthood.
- ▶ Lark's diabetes prevention program focused on helping you improve your health with digital diabetes prevention coaching.
- ▶ Mercy Express Care. Just answer a few simple questions, get a care plan and, if needed, have a prescription sent to a pharmacy of your choice. Low acuity conditions commonly treated include bladder infection, rashes, eye irritation, sunburn, acne, yeast infection, and more.

Download Sydney Health today!

Access to care and support has never been easier with virtual options through Sydney Health and all at no cost to you!





SmartShopper[®]

Save money and earn a cash reward!

SmartShopper FYI!

The SmartShopper program is provided by Sapphire Digital, an independent company. Rewards are for select procedures only, and reward payments may be taxable. Rewards are delivered by check. Members with coverage under Medicaid or Medicare are not eligible to receive incentive rewards under the SmartShopper program.

SmartShopper helps you find the best value for high-quality care.

We understand that medical procedures can be costly and can sometimes seem unpredictable. In fact, the same test or procedure can vary by hundreds or even thousands of dollars, depending on where you go. SmartShopper makes it easy to compare cost information about some health procedures like mammograms, colonoscopies and more. You can even earn cash rewards when you choose the SmartShopper suggested providers!

Shop on your own or with a Personal Assistant. It's easy to use SmartShopper. Shop online at smartshopper.com, or call the SmartShopper Personal Assistant Team. Your Personal Assistant will help you understand your options, schedule your appointment and earn a reward.

- ▶ **Recommendation**
When your health care provider recommends a test or procedure, visit smartshopper.com or call the SmartShopper Personal Assistant Team at 1-844-328-1582, or link through your Sydney Health app.
- ▶ **Compare**
Compare providers, prices and rewards.
- ▶ **Choose**
Choose where you would like to have your test or procedure.
- ▶ **If Eligible**
After Anthem pays your claim, SmartShopper will mail you a reward check, if eligible. Your check should arrive in about six weeks.

It's easy to register today and begin shopping and saving on health care.

The Personal Assistant Team is happy to help Monday through Thursday, from 7 a.m. to 7 p.m., and Friday from 7 a.m. to 5 p.m. CT (or at smartshopper.com).

Anthem Health Guide

Peace of mind is important. If you are struggling with your medical coverage, you expect someone to answer your questions, right? You want someone to help you understand your benefits, or figure out next steps in dealing with a health issue. What do you do when a claim is denied and you disagree? What if you get an unexpected bill from your health care provider? Anthem hears you. And they're here for you, too.

Anthem Health Guide: Supporting you with more than just answers.

You can reach an Anthem Health Guide by phone, email or even chat with them online via your computer or mobile device. Whatever you choose, you'll get a health guide who is ready to answer your questions and help you make the most of your health plan benefits.

An Anthem Health Guide can:

- ▶ answer medical benefit questions, including what is covered or not, and if a service needs a preauthorization
- ▶ help you understand letters, explanation of benefits (EOBs) or bills you receive
- ▶ walk you through what you need to do to appeal a claim denial
- ▶ connect you with additional programs and needed support
- ▶ compare costs, find in-network providers, set up an appointment and more

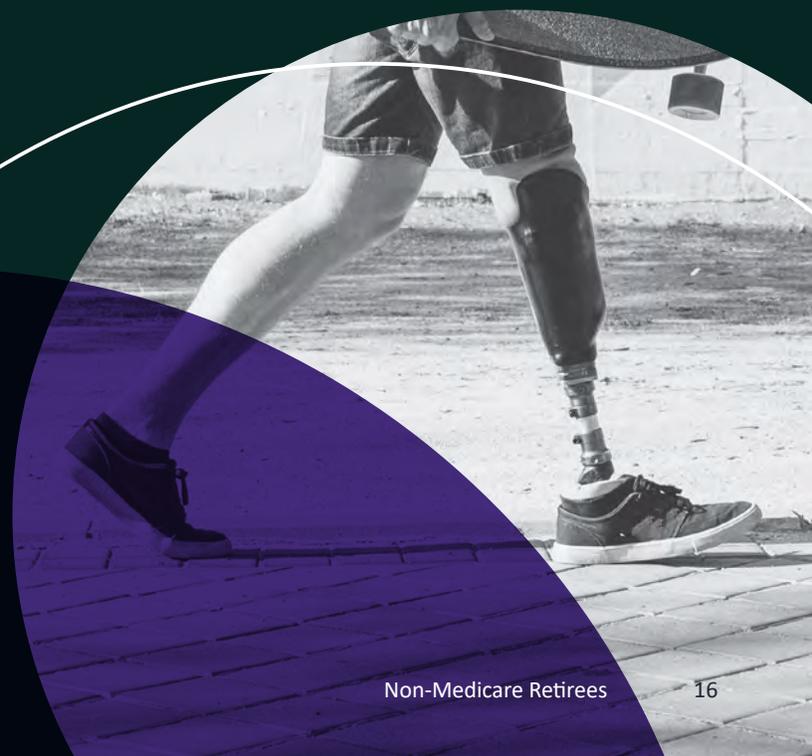
Reach out to an Anthem Health Guide.

Connect from your Anthem Sydney Health mobile app, call 844-516-0248 or log in at anthem.com and select "Contact Us".



24/7 NurseLine

Anthem members have access to 24-hour nurse call lines for health-related questions. If you're unsure whether to go to the doctor for an illness or just want more information about a treatment or condition, registered nurses are available all day, every day to help. To use this service, call 800-337-4770.





win

*The next generation
of family building*

**Missouri Consolidated Health
Care Plan members enrolled in
Anthem receive:**

**2 cycle lifetime maximum benefit
toward certain expenses related to
fertility treatment.**

**Contact WIN to learn more about your benefits
and connect with a nurse care advocate**

Visit managed.winfertility.com/mchcp
Call WIN's Service Team at 877-767-0303
8 am - 6:30 pm CST | Monday - Friday

Non-Medicare Retirees

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Including:

- ▶ **24/7 nurse care advocate support**
Including education, guidance, and emotional support to help you each step of the way
- ▶ **Assistance selecting an in-network provider**
Based on your individual treatment needs, goals, and preferences
- ▶ **Expertise in understanding complex information**
Such as common causes, testing and treatment options, as well as medication guidance

ESI Pharmacy Programs



ESI provides options for members taking maintenance medications that could save them time and money.

Home Delivery

Skip the trip with home delivery

Members taking maintenance medications can choose to receive their prescriptions by home delivery from Express Scripts Pharmacy. The home delivery benefit covers a 90-day supply for 2½ copayments for those enrolled in a PPO Plan. Members enrolled in the HSA Plan will pay their applicable coinsurance.

Other benefits of home delivery include:

- ▶ no-cost standard shipping with online tracking
- ▶ medications sent in secure, weather-resistant packages
- ▶ talk with a pharmacist by phone 24/7
- ▶ get texts and emails about orders and refills and more

Smart90SM Program

Save time with the convenience of the Smart90 Program

Members enrolled in a PPO or HSA plan can choose the convenience of receiving a 90-day supply of maintenance medications at a participating retail pharmacy. Members enrolled in a PPO plan will pay the applicable 90-day retail supply copayment and members enrolled in the HSA Plan will pay the applicable coinsurance.

Other benefits of Smart90 include the easy transfer of prescriptions in-store, by phone or online, and the convenience of auto-refills and refill reminders upon request.

Contact ESI to find a pharmacy participating in the Smart90 program.



Express Scripts Diabetes Care Value Program



Express Scripts is introducing new no cost programs in 2024 to help qualifying members with diabetes and those at risk for diabetes or heart disease.

Here are highlights of what you will receive once you accept an invitation to participate:

- ▶ Digital care for Type 1 and Type 2 diabetes that securely sends results to diabetes specialists to help patients better control glucose levels, through LifeScan.
- ▶ Use of a Continuous Glucose Monitor (CGM), when clinically appropriate, to give patients and providers better insight of glucose levels.
- ▶ Medication education and counseling for patients diagnosed with diabetes and those hoping to avoid diagnoses.
- ▶ Digital diabetes prevention program, through Omada. Omada is a personalized program designed to help you make gradual changes to the way you eat, move, sleep and manage stress. If you are at risk for diabetes or heart disease, this may be for you!

Look for more information to come your way



MCHCP Programs



Tired of paying more than you should at the pharmacy? Lower your prescription drug costs with Rx Savings Solutions (RxSS)!

How does it work?

Doctors know a lot, but they may not know what your prescriptions will cost you. That's where RxSS comes in.

RxSS layers on top of your existing Express Scripts prescription drug coverage to uncover every clinically sound way you can spend less on your prescriptions! RxSS proactively alerts members when lower-cost prescription drug options become available, saving them not only money, but time and energy, too!

If this all still sounds a bit overwhelming, remember: this resource is as simple as 1, 2, 3!



Review possible options for lower-cost medications – (including generics, brands and equally effective prescription drugs that treat the same condition).



Compare prices between different pharmacies.



Switch to a lower-cost prescription with one click.

And that's it! Pharmacy technicians from RxSS will work with your doctor to get the change approved, so you can begin saving money (And in some instances, you may even earn a cash reward for your savings efforts)!



SSDC Services Corp. helps eligible MCHCP members apply for Social Security Disability Benefits (SSDI).

SSDC identifies whether you or your dependent(s) are potentially eligible for SSDI and early Medicare and assists with applying for these benefits at no cost to you.

Have Questions?

If you have questions, please call SSDC at 800 374 9950 x 222, Monday through Friday 8:00 a.m. – 5:00 p.m. CST or visit www.ssdcservices.com.



Why is Early Medicare Important?

Your medical expenses typically drop when you enroll in Medicare. Medicare enrollees can have lower out-of-pocket costs when you see doctors or other providers.



What if I Never Paid into Social Security?

If you paid the Medicare tax, then you are still eligible to go through the SSDI process to determine if you are eligible for early Medicare benefits.



What's Next?

If you receive a survey from SSDC, complete and return it. SSDC will reach out to you if they think you qualify for SSDI and early Medicare.



HEALTH CENTER

The Strive for Wellness® Health Center (located in room 478 of Jefferson City's Harry S Truman State Office Building) offers routine care at hours designed to fit into a hectic workday. Non-Medicare primary MCHCP members aged 18 and older enrolled in MCHCP medical coverage can receive treatment for common illnesses and behavioral health services at a low cost.

Examples of services offered include:

- ⊕ treatment of sinus and ear infections, flu, back pain and allergies
- ⊕ certain vaccinations (flu, hepatitis B, COVID-19, shingles, etc.)
- ⊕ health screenings and lab work
- ⊕ behavioral health counseling

An office visit fee (PPO plans — \$15; HSA Plan — \$45) covers these services for the entire visit. Preventive services are covered at 100%. Health Center services are outside of MCHCP's health plan benefits, so fees do not apply toward deductibles or out-of-pocket maximums. Payment is due at the time of the service. Cash, check and major credit cards are accepted.

The Health Center is open at the following times:

Mondays: 8 a.m.–1 p.m. and 2–5 p.m.
Tuesdays: 7–11 a.m. and 12–4 p.m.
Wednesdays: 8 a.m.–1 p.m. and 2–5 p.m.
Thursdays: 8 a.m.–1 p.m. and 2–5 p.m.
Fridays: 7–11 a.m. and 12–4 p.m.

To schedule an appointment, call 573-526-3175 (TTY 573-526-3180), or log in to your myMCHCP account. Parking passes are available for reserved spaces upon request.



Premiums

Non-Medicare Retiree Subscriber (Survivor) With Tobacco-Free Incentive And With Non-Medicare Dependent(s)

The premiums on this page are the total monthly premium, and are not what you will pay. To determine what you will pay, go to your myMCHCP account to calculate your monthly premium. The amount will vary by years of service.

Non-Medicare Plan Options:	HSA Plan		PPO 1250 Plan		PPO 750 Plan	
	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium
Non-Medicare retiree only	\$945	\$970	\$1,079	\$1,104	\$1,145	\$1,170
Non-Medicare retiree and non-Medicare spouse	1,889	1,914	2,159	2,184	2,289	2,314
Non-Medicare retiree, non-Medicare spouse and non-Medicare child	2,154	2,179	2,455	2,480	2,604	2,629
Non-Medicare retiree, non-Medicare spouse and non-Medicare children	2,371	2,396	2,728	2,753	2,892	2,917
Non-Medicare retiree and non-Medicare child	1,209	1,234	1,376	1,401	1,460	1,485
Non-Medicare retiree and non-Medicare children	1,426	1,451	1,649	1,674	1,747	1,772
Non-Medicare surviving child	264	264	297	297	315	315

The premium listed assumes that both the retiree and spouse are in the Tobacco-Free Incentive. If only one is in the Tobacco-Free Incentive, \$40 will be added to the listed premium.

Non-Medicare Retiree Subscriber (Survivor) Without Tobacco-Free Incentive And With Non-Medicare Dependent(s)

The premiums on this page are the total monthly premium, and are not what you will pay. To determine what you will pay, go to your myMCHCP account to calculate your monthly premium. The amount will vary by years of service.

Non-Medicare Plan Options:	HSA Plan		PPO 1250 Plan		PPO 750 Plan	
	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium
Non-Medicare retiree only	\$985	\$1,010	\$1,119	\$1,144	\$1,185	\$1,210
Non-Medicare retiree and non-Medicare spouse	1,969	1,994	2,239	2,264	2,369	2,394
Non-Medicare retiree, non-Medicare spouse and non-Medicare child	2,234	2,259	2,535	2,560	2,684	2,709
Non-Medicare retiree, non-Medicare spouse and non-Medicare children	2,451	2,476	2,808	2,833	2,972	2,997
Non-Medicare retiree and non-Medicare child	1,249	1,274	1,416	1,441	1,500	1,525
Non-Medicare retiree and non-Medicare children	1,466	1,491	1,689	1,714	1,787	1,812
Non-Medicare surviving child	264	264	297	297	315	315

The premium listed assumes that both the retiree and spouse are not in the Tobacco-Free Incentive. If one is in the Tobacco-Free Incentive, \$40 will be subtracted from the listed premium.

Premiums without contraception coverage are available upon request.

Premiums

Non-Medicare Retiree Subscriber (Survivor) With Tobacco-Free Incentive And With Medicare Dependent(s)

The premiums on this page are the total monthly premium, and are not what you will pay. To determine what you will pay, go to your myMCHCP account to calculate your monthly premium. The amount will vary by years of service.

<i>Non-Medicare Plan Options:</i>	HSA Plan		PPO 1250 Plan		PPO 750 Plan	
<i>Medicare Plan Option:</i>	Medicare Advantage Plan					
	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium
Non-Medicare retiree and Medicare spouse	\$1,180	\$1,205	\$1,314	\$1,339	\$1,380	\$1,405
Non-Medicare retiree, Medicare spouse and non-Medicare child	1,444	1,469	1,611	1,636	1,695	1,720
Non-Medicare retiree, Medicare spouse and non-Medicare children	1,661	1,686	1,908	1,933	2,010	2,035

If you have a child(ren) with Medicare, contact MCHCP for the premium amount for coverage.

Non-Medicare Retiree Subscriber (Survivor) Without Tobacco-Free Incentive And With Medicare Dependent(s)

The premiums on this page are the total monthly premium, and are not what you will pay. To determine what you will pay, go to your myMCHCP account to calculate your monthly premium. The amount will vary by years of service.

<i>Non-Medicare Plan Options:</i>	HSA Plan		PPO 1250 Plan		PPO 750 Plan	
<i>Medicare Plan Option:</i>	Medicare Advantage Plan					
	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium
Non-Medicare retiree and Medicare spouse	\$1,220	\$1,245	\$1,354	\$1,379	\$1,420	\$1,445
Non-Medicare retiree, Medicare spouse and non-Medicare child	1,484	1,509	1,651	1,676	1,735	1,760
Non-Medicare retiree, Medicare spouse and non-Medicare children	1,701	1,726	1,948	1,973	2,050	2,075

If you have a child(ren) with Medicare, contact MCHCP for the premium amount for coverage.

Premiums without contraception coverage are available upon request.

Premiums

Non-Medicare Long-Term Disability Subscriber With Tobacco-Free Incentive And With Non-Medicare Dependent(s)

The premiums on this page are what you will pay each month for coverage.

Non-Medicare Plan Options:	HSA Plan		PPO 1250 Plan		PPO 750 Plan	
	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium
Non-Medicare subscriber only	\$718	\$743	\$852	\$877	\$918	\$943
Non-Medicare subscriber and non-Medicare spouse	1,476	1,501	1,746	1,771	1,876	1,901
Non-Medicare subscriber, non-Medicare spouse and non-Medicare child	1,629	1,654	1,930	1,955	2,079	2,104
Non-Medicare subscriber, non-Medicare spouse and non-Medicare children	1,846	1,871	2,203	2,228	2,367	2,392
Non-Medicare subscriber and non-Medicare child	873	898	1,040	1,065	1,124	1,149
Non-Medicare subscriber and non-Medicare children	1,090	1,115	1,313	1,338	1,411	1,436

The premium listed assumes both the employee and spouse are in the Tobacco-Free Incentive. If one is not in the Tobacco-Free Incentive, \$40 will be added to the listed premium.

Non-Medicare Long-Term Disability Subscriber Without Tobacco-Free Incentive And With Non-Medicare Dependent(s)

The premiums on this page are what you will pay each month for coverage.

Non-Medicare Plan Options:	HSA Plan		PPO 1250 Plan		PPO 750 Plan	
	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium
Non-Medicare subscriber only	\$758	\$783	\$892	\$917	\$958	\$983
Non-Medicare subscriber and non-Medicare spouse	1,556	1,581	1,826	1,851	1,956	1,981
Non-Medicare subscriber, non-Medicare spouse and non-Medicare child	1,709	1,734	2,010	2,035	2,159	2,184
Non-Medicare subscriber, non-Medicare spouse and non-Medicare children	1,926	1,951	2,283	2,308	2,447	2,472
Non-Medicare subscriber and non-Medicare child	913	938	1,080	1,105	1,164	1,189
Non-Medicare subscriber and non-Medicare children	1,130	1,155	1,353	1,378	1,451	1,476

The premium listed assumes both the employee and spouse are not in the Tobacco-Free Incentive. If one is in the Tobacco-Free Incentive, \$40 will be subtracted from the listed premium.

Premiums without contraception coverage are available upon request.

Premiums

Non-Medicare Long-Term Disability Subscriber With Tobacco-Free Incentive And With Medicare Dependent(s)

The premiums on this page are what you will pay each month for coverage.

<i>Non-Medicare Plan Options:</i>	HSA Plan		PPO 1250 Plan		PPO 750 Plan	
<i>Medicare Plan Option:</i>	Medicare Advantage Plan					
	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium
Non-Medicare subscriber and Medicare spouse	\$871	\$896	\$1,005	\$1,030	\$1,071	\$1,096
Non-Medicare subscriber, Medicare spouse and non-Medicare child	1,024	1,049	1,191	1,216	1,275	1,300
Non-Medicare subscriber, Medicare spouse and non-Medicare children	1,241	1,266	1,488	1,513	1,590	1,615

If you have a child(ren) with Medicare, contact MCHCP for the premium amount for coverage.

Non-Medicare Long-Term Disability Subscriber Without Tobacco-Free Incentive And With Medicare Dependent(s)

The premiums on this page are what you will pay each month for coverage.

<i>Non-Medicare Plan Options:</i>	HSA Plan		PPO 1250 Plan		PPO 750 Plan	
<i>Medicare Plan Option:</i>	Medicare Advantage Plan					
	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium
Non-Medicare subscriber and Medicare spouse	\$911	\$936	\$1,045	\$1,070	\$1,111	\$1,136
Non-Medicare subscriber, Medicare spouse and non-Medicare child	1,064	1,089	1,231	1,256	1,315	1,340
Non-Medicare subscriber, Medicare spouse and non-Medicare children	1,281	1,306	1,528	1,553	1,630	1,655

If you have a child(ren) with Medicare, contact MCHCP for the premium amount for coverage.

Premiums without contraception coverage are available upon request.

Premiums

Non-Medicare Terminated Vested Subscriber With Tobacco-Free Incentive And With Non-Medicare Dependent(s)

The premiums on this page are what you will pay each month for coverage.

Non-Medicare Plan Options:	HSA Plan		PPO 1250 Plan		PPO 750 Plan	
	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium
Non-Medicare subscriber only	\$762	\$787	\$869	\$894	\$922	\$947
Non-Medicare subscriber and non-Medicare spouse	1,523	1,548	1,739	1,764	1,843	1,868
Non-Medicare subscriber, non-Medicare spouse and non-Medicare child	1,737	1,762	1,978	2,003	2,097	2,122
Non-Medicare subscriber, non-Medicare spouse and non-Medicare children	1,912	1,937	2,198	2,223	2,329	2,354
Non-Medicare subscriber and non-Medicare child	975	1,000	1,109	1,134	1,176	1,201
Non-Medicare subscriber and non-Medicare children	1,150	1,175	1,328	1,353	1,407	1,432

The premium listed assumes both the employee and spouse are in the Tobacco-Free Incentive. If one is not in the Tobacco-Free Incentive, \$40 will be added to the listed premium.

Non-Medicare Terminated Vested Subscriber Without Tobacco-Free Incentive And With Non-Medicare Dependent(s)

The premiums on this page are what you will pay each month for coverage.

Non-Medicare Plan Options:	HSA Plan		PPO 1250 Plan		PPO 750 Plan	
	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium
Non-Medicare subscriber only	\$802	\$827	\$909	\$934	\$962	\$987
Non-Medicare subscriber and non-Medicare spouse	1,603	1,628	1,819	1,844	1,923	1,948
Non-Medicare subscriber, non-Medicare spouse and non-Medicare child	1,817	1,842	2,058	2,083	2,177	2,202
Non-Medicare subscriber, non-Medicare spouse and non-Medicare children	1,992	2,017	2,278	2,303	2,409	2,434
Non-Medicare subscriber and non-Medicare child	1,015	1,040	1,149	1,174	1,216	1,241
Non-Medicare subscriber and non-Medicare children	1,190	1,215	1,368	1,393	1,447	1,472

The premium listed assumes both the employee and spouse are not in the Tobacco-Free Incentive. If one is in the Tobacco-Free Incentive, \$40 will be subtracted from the listed premium.

Premiums without contraception coverage are available upon request.

Premiums

Non-Medicare Terminated Vested Subscriber With Tobacco-Free Incentive And With Medicare Dependent(s)

The premiums on this page are what you will pay each month for coverage.

<i>Non-Medicare Plan Options:</i>	HSA Plan		PPO 1250 Plan		PPO 750 Plan	
<i>Medicare Plan Option:</i>	Medicare Advantage Plan					
	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium
Non-Medicare subscriber and Medicare spouse	\$997	\$1,022	\$1,104	\$1,129	\$ 1,157	\$1,182
Non-Medicare subscriber, Medicare spouse and non-Medicare child	1,210	1,235	1,343	1,368	1,410	1,435
Non-Medicare subscriber, Medicare spouse and non-Medicare children	1,385	1,410	1,563	1,588	1,642	1,667

If you have a child(ren) with Medicare, contact MCHCP for the premium amount for coverage.

Non-Medicare Terminated Vested Subscriber Without Tobacco-Free Incentive And With Medicare Dependent(s)

The premiums on this page are what you will pay each month for coverage.

<i>Non-Medicare Plan Options:</i>	HSA Plan		PPO 1250 Plan		PPO 750 Plan	
<i>Medicare Plan Option:</i>	Medicare Advantage Plan					
	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium
Non-Medicare subscriber and Medicare spouse	\$ 1,037	\$1,062	\$1,144	\$1,169	\$ 1,197	\$1,222
Non-Medicare subscriber, Medicare spouse and non-Medicare child	1,250	1,275	1,383	1,408	1,450	1,475
Non-Medicare subscriber, Medicare spouse and non-Medicare children	1,425	1,450	1,603	1,628	1,682	1,707

If you have a child(ren) with Medicare, contact MCHCP for the premium amount for coverage.

Premiums without contraception coverage are available upon request.

Premiums

Dental Premiums

Subscriber Only		Subscriber and Spouse		Subscriber and Child(ren)		Subscriber and Family	
\$26.90		\$53.58		\$55.60		\$93.20	

Vision Premiums

Subscriber Only		Subscriber and Spouse		Subscriber and Child(ren)		Subscriber and Family	
Basic Plan	Premium Plan	Basic Plan	Premium Plan	Basic Plan	Premium Plan	Basic Plan	Premium Plan
\$3.43	\$4.33	\$6.86	\$8.64	\$9.89	\$12.48	\$14.12	\$17.80

TRICARE Supplement Premiums

Subscriber Only	\$60.50
Subscriber and Spouse	\$119.50
Subscriber and Child(ren)	\$119.50
Subscriber and Family	\$160.50

Residents of New York, contact MCHCP for premiums applicable to you.





Health Plan Contacts

Medical

Anthem

HSA Plan, PPO 1250 Plan and PPO 750 Plan
www.anthem.com
844-516-0248
7 a.m. to 7 p.m. M-F

Express Scripts, Inc. (ESI)

www.express-scripts.com
800-797-5754
TTY: 866-707-1862
24 hours a day

Accredo Specialty Pharmacy

800-803-2523
TTY: 877-804-9222

TRICARE Supplement Plan

Selman & Company
info.selmanco.com/mchcp
800-638-2610

Dental

Delta Dental of Missouri

microsite.deltadentalmo.com/MCHCP
(866) 429-1095
7 a.m. to 5 p.m. M-F

Vision

National Vision Administrators, L.L.C. (NVA)

www.e-nva.com
User Name: mchcp
Password: vision1
877-300-6641
TTY: 711
24 hours a day

Resource Disclaimers

Websites

You can access all the health plans through your myMCHCP account on MCHCP's website. Health plan websites are provided as a convenience to our members. Access to other websites does not mean MCHCP endorses or is responsible for those websites.

Microsites

A microsite is a webpage or small group of webpages that provide information specific to your MCHCP plan.

832 Weathered Rock Court

Jefferson City, MO 65101

800-487-0771

573-751-0771

www.mchcp.org

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