

# THE BIG PICTURE

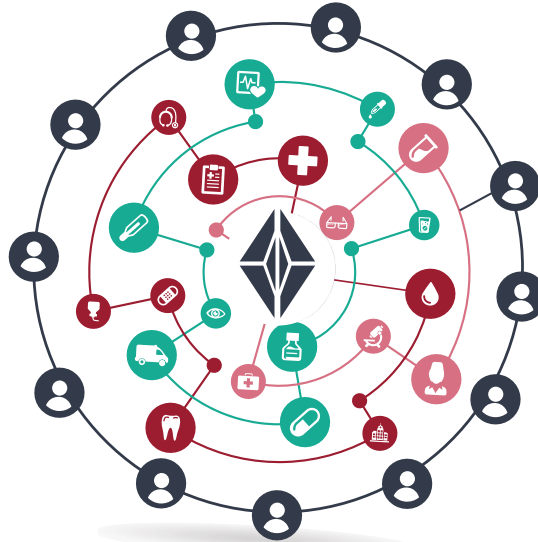
*Understanding the unique structure of MMIA and the Employee Benefits (EB) Program compared to the commercial insurance market.*

*'MMIA is a member-owned risk retention pool.'*

*'EB provides self-funded medical, dental and vision coverage.'*

*Do you find yourself asking...*

**What the heck does that mean, exactly?**



It is often met with either confusion or the notion: as-long-as-I'm-getting-the-coverage-I-need-I-don't-care-exactly-how-it-works.

## It's not as complex as you might think.

Cities and towns join the Employee Benefits (EB) program to literally pool their finances and cover each other's employees' claims while reaping the rate stability of being a member of the group instead of trying to provide these services on their own.

MMIA doesn't generate any profit – if premiums paid exceed the claims, all excess funds remain in reserves and are used for future rate stabilization or to fund other cost saving efforts.

The cost for your premium is calculated entirely from collective claims experience and the basic administrative costs to run the programs with our vendors and third-party administrators.

**That's it. No hidden fees, just ultimate transparency.**

## MMIA EB Staff is here to assist! What do we do?

- We plan, design and implement structures and solutions; we do enrollment, billing, and ensure we meet state and federal requirements; we answer any participant questions and assist in resolving any issues or challenges. *We won't always have the answer, but we can either research the issue or direct to the appropriate people.*
- We continually explore new ways to adapt to the constantly changing healthcare marketplace to keep rates as stable as possible without large fluctuations, staying nimble to quickly pivot and make changes as appropriate.

## How Is MMIA different than the commercial insurance market?

- We don't have corporate heads or owners making millions or staff taking bonuses or commissions.
- No built-in profit margins.
- No bait-and-switch tactics—we would never entice members to join at a low rate just to raise them significantly in subsequent years. Just honesty, transparency, and stability over time.
- The relationship between MMIA and our members is symbiotic and, like any relationship, there will inevitably be shared challenges and successes.
- MMIA constantly reflects, analyzes, and questions current practices and explores the marketplace for innovative ideas and potential efficiencies while always encouraging suggestions for improvement from our member partners.

*There's more - The following articles address some other common questions and challenges to provide knowledge and context for some of the MMIA EB services.*



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MMIA EMPLOYEE BENEFITS WELLNESS PROGRAM  
**FACT OR FICTION**  
 TEST YOUR KNOWLEDGE



**1. MMIA pays for these services and provides an incentive payout to all participants?**

**FACT** First of all, your health and well-being are sincerely important to us. We want you to be the healthiest and happiest version of yourself. Second, healthier participants generally lead to lower claim costs and the best rates for all who receive coverage through MMIA. That's right—your monthly rate is directly tied to the claim experience of our participants. Lower claims = lower rates. The Wellness Program is an investment by MMIA for your health and your rates.

**2. You're selling my info or using it against me with rate adjustments!**

**FICTION** Your info is never shared with your employer and all data is maintained with strict HIPAA-standard confidentiality. The data is only shared with clinical staff which may include an Allegiance Nurse Case Manager, health coaches to perform Health Screening Review calls, or to offer assistance for anyone at high risk for chronic diseases.

**3. So if you can afford to give incentives, is it better to just keep the money and lower my rate?**

**FICTION** The Wellness Program pays for itself by reducing medical claims and the severity of high-risk claims, resulting in significant cost savings that outweigh the program's expenses. The program is considered an investment and cost-saving measure, and its costs have never been included in the rates. The Board uses reserves to budget for the program, and everyone benefits from the lower claims experience that helps keep rates down. The program also offers incentives that have been proven to increase wellness participation.

**4. I don't want to know! I know I'm not super healthy and don't want to hear about what I need to do. You're just going to tell me to eat less/differently and exercise, right?**

**FICTION** Screening results provide personal insight to areas in which you're doing well and where you can improve. The fantastic health coaches at Take Control listen and tailor suggestions to what works for you with a focus on practical, flexible goals.

**5. I'm all good. I'm fit and healthy and I don't need to have my blood tested.**

**FICTION** You don't always feel sick when health issues start to develop! The screenings have identified issues at early stages in otherwise healthy people. They were able to nip concerns in the bud way easier than being unaware until it became a serious issue later on. And if the results come back showing you're fit as a fiddle, worst case scenario is you just earned the \$50 incentive to confirm you're in tip-top shape. You get to say 'I told you so' and are \$50 richer (and potentially \$100 richer if you follow up with your Health Screening Review call!). Ego and wallet full.

**6. I heard that during the Health Screening, the needles also implant a tracking computer chip that shocks your body every time you go to a fast-food drive through.**

**FACT - haha. Just kidding, this is totally FICTION.** No, there are not tracking devices implanted in your arm. Even if that technology existed, it's not our business!

➤ *Look for Wellness Program information at [www.mmiaeb.net/wellness](http://www.mmiaeb.net/wellness) and in upcoming newsletters.*

**SPREAD THE TRUTH WITH YOUR CO-WORKERS AND MAKE SURE TO GET YOUR HEALTH SCREENINGS THIS SUMMER/FALL.**

Don't forget – when **80%** of your eligible city/town employees complete the Health Screening, you all automatically receive an additional **\$50!**

If you complete the educational video/quiz and screening review calls, as well, that could be a cool **\$200 total** in your pocket at the end of the year.

**TIPS TO HELP NAVIGATE VISION AND DENTAL**



VSP and Delta Dental offer the most extensive coverage for vision and dental care. However, locating a participating provider and scheduling a timely appointment can still be challenging, particularly in certain areas.

**Q: I'm having a hard time finding an in-network vision provider. Can you help?**

Visit [vsp.com/eye-doctor](http://vsp.com/eye-doctor) and enter your location for a list of in-network providers. Call around to ask about availability. If you cannot find one with an appointment within 30 days, see the next answer.

**Q: What can I do if I can't find an in-network VSP provider in my area? Or all in-network providers are scheduled extremely far into the future?**

VSP can help! Call VSP Member Services at 800-877-7195 and tell the representative your issue. They may be able to provide additional options.

**Q: What about box stores—are any of those in the VSP network?**

Glad you asked! Yes, they are! We've got Costco, Walmart, Shopko to name a few locations where optical hardware is available in-network. However, not all vision care providers are networked at these locations, so make sure to check before you schedule an appointment.

**Q: Are there other dental networks that provide better coverage in Montana?**

Delta actually has the largest network of coverage in the state with approximately 70% of all dental providers contracted! MMIA utilizes both the Delta PPO and Premier networks to provide the most substantial coverage in the state.

**Q: My provider won't contract to be in-network. Why do we even contract with Delta/VSP?**

Delta and VSP are known for paying their providers at fair and reasonable rates, and for having very robust networks. However, due to the rural nature of some

**FIND A VISION PROVIDER:**  
[VSP.COM/EYE-DOCTOR](http://VSP.COM/EYE-DOCTOR)  
 OR CALL MEMBER SERVICES TO HELP AT **800.877.7195**

**FIND A DENTAL PROVIDER:**  
[DELTAEDENTALINS.COM](http://DELTAEDENTALINS.COM)  
 OR CALL SERVICES TO HELP AT **1.800.521.2651**

➤ *As always, if you're experiencing challenges or have questions, please reach out to the MMIA EB staff at 800-635-3089 option 4 or at [ebgroup@mmia.net](mailto:ebgroup@mmia.net).*

**Q: There don't seem to be in-network dental providers in my area. How can I get a list of in-network providers near me?**

If you're having trouble finding in-network dental providers in your area, you can visit [www.deltadentalins.com](http://www.deltadentalins.com), enter your address, and search for nearby dentists. You may be surprised by the number of providers you find. Alternatively, if you don't have internet access, you can call Delta at 1-800-521-2651.

It's important to note that high demand for dental work is a common issue across Montana, and not specific to Delta's network. If you have a preferred dental provider who is not currently in-network, you can fill out a referral form on the Delta website. Delta will then reach out to the provider and invite them to participate in the network.

**Q: Why do we have to use a network? Why can't we just pay the claims?**

The purpose of MMIA's EB program is to provide cities/towns with stable rates. We've been able to do this consistently with our dental and vision plans because they set uniform costs for services. When a provider is not contracted, the providers are able to charge whatever fees they want for services. Without a network, there is no way to manage costs. If we covered any costs at any provider for any price, you can guarantee our dental and vision rates would increase significantly!

regions in our state, there is often a lower supply of dentists and vision care providers, resulting in a much higher demand. In these areas, the lack of competition can make it more difficult to persuade providers to join the network.

It's important to keep in mind that even if a provider is not part of the network, you can still receive benefits. You can ask the provider to consider joining the network, and if they refuse, you should inquire about the cost of any balance bill they plan to charge.



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## COMING APRIL 12, 2023

# EASY-TO-USE TOOLS TO HELP YOU MANAGE & NAVIGATE YOUR BENEFITS.

If at any time, you'd like to sign-up or change the email they use for this, simply login to [AskAllegiance.com](https://www.askallegiance.com) and go to the **EOB Options page**. *They will only use this email address for this purpose and never to send you marketing materials.*



Allegiance processes medical claims for MMIA's EB Program. They strive to provide efficient and easy-to-use tools to help you manage your benefits.

Starting April 12, 2023, this will include enrollment in their Go Green Electronic Explanations of Benefits (EOBs) program. Just like many of your other important documents for banking, healthcare, etc. receiving EOBs electronically makes them quicker to get, easier to manage, and reduces waste.

Once this program is active, you will start to receive emails notifying you when a new electronic EOB is available. Online EOBs are easy to download, save, and/or print as needed.

Allegiance is excited about this change to ensure you get the Health Plan information you depend on quicker and direct to your inbox.