

# MEDICA.

Personalize. Empower. Improve.



## YOUR MEDICA EXPERIENCE: TOOLS FOR SUCCESS

Small Group Administrator Training  
February 14, 2012



*Welcome*



Joy Shelby  
Director | Account Management



WELCOME

ACCOUNT MANAGEMENT

SERVICE CENTER

GROUP ADMINISTRATION

MEDICA<sup>®</sup> OPTUM<sup>®</sup>

HEALTH AND WELLNESS RESOURCES

BREAK-OUT SESSIONS



# Account Management

# Account Management

- Group Set Up
- Pre and post enrollment meetings
- Health and wellness events
- Broker assistance



## **MEDICA SERVICE CENTER**

### **One call does it all!**



# When Should You Call the Service Center?

- Clarify benefit information
- Address enrollment and eligibility concerns
- Check billing, claims and provider status
- Check on the status of an application you submitted
- Order materials for you on behalf of your customers
- Questions about myMedica.com<sup>®</sup>



# Why Should You Contact the Service Center?

- Dedicated team
- Extensive plan knowledge
  - All Service Center Representatives have worked as Customer Service Representatives
  - Core competency assessments are completed annually; refresher training provided weekly
  - Monthly quality audit's average score is 98%
- Committed to quality



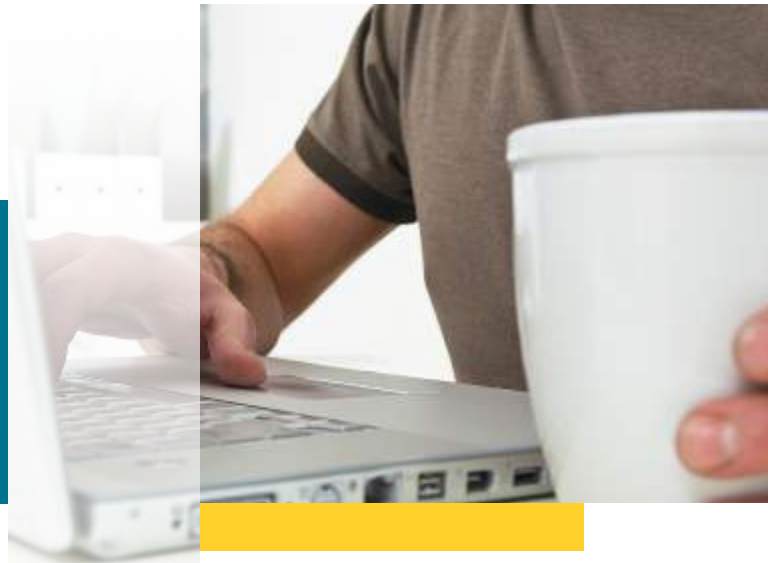
# GROUP ADMINISTRATION

Peggy Dokka-Thorson, Account Manager



# Topics

- Enrollment procedures
- Billing procedures for fully insured plans
- Online Employer eServices
- Communications support



# ENROLLMENT PROCEDURES

# Small Employer

## Predications

- 2 - 50 employees working 20 or more hours a week
- 75% participation
- 50% of employer contribution towards employee premium

## Guarantee Issue

- Everyone accepted
- No open enrollment

# When Can Employees Enroll?

Employees can enroll...

When newly hired

Following a change in family status:

- a) Loss of other coverage
- b) Birth
- c) Adoption
- d) Marriage
- e) Divorce

Late entrant

Form to use...

The Small Group Enrollment/  
Change/Cancellation form



# Pre-Existing Condition Clause

- Definition: Illness or injury recognized or treated 6 months prior to enrollment date
- When applied:
  - New hire with no previous coverage - or those with more than a 63 day lapse in coverage -up to 12 months pre-existing waiting period
  - Late entrant with no previous coverage - or those with more than a 63 day lapse in coverage- up to 18 months pre-existing waiting period
  - Does not apply to dependents under age 19 beginning October 1, 2010 as groups renew

# Enrollment/Change/Cancellation Form

- Submit within 31 days of event
- Used to:
  - Add employee
  - Add dependent (i.e. spouse, child)
  - Waive coverage
  - Change information (i.e., name and address)
  - Remove employee from plan (termination date will be the end of the month)

**Small Group Enrollment/Change/Cancellation Form**

Group Number: \_\_\_\_\_

Please type or print clearly. See back page for instructions.

**A. EMPLOYEE INFORMATION**

<input type="checkbox"/> Enroll <input type="checkbox"/> Cancel <input type="checkbox"/> Change	First name	M.I.	Last name	Social Security Number	Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married	
	Street address		Apt. #	City	County	State
Home telephone		Work/Cellular telephone		Occupation/job title: Owner/officer? <input type="checkbox"/> Yes <input type="checkbox"/> No		How many hours do you work per week?
Sex <input type="checkbox"/> M <input type="checkbox"/> F	Birth date	Do you or any of your dependents speak a language other than English as your primary language? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," please list name and language:				
Clinic name			Clinic number	Have you been a Medica member before? <input type="checkbox"/> Yes <input type="checkbox"/> No		

**B. DEPENDENT INFORMATION**

**1** List all members to be covered. Write name as it should appear on the I.D. card.

Check appropriate box	First name	M.I.	Last name	Sex	Birth date (mm/dd/yy)	Relationship*	Full-time student? **	Please provide clinic information if enrolling in Medica Elect <sup>®</sup> , Medica Essential <sup>SM</sup> or Medica Focus <sup>SM</sup>
	Dependent's Social Security Number							
1 <input type="checkbox"/> Enroll <input type="checkbox"/> Cancel <input type="checkbox"/> Change				<input type="checkbox"/> M <input type="checkbox"/> F			<input type="checkbox"/> Yes <input type="checkbox"/> No	Clinic name: _____ Clinic number: _____
2 <input type="checkbox"/> Enroll <input type="checkbox"/> Cancel <input type="checkbox"/> Change				<input type="checkbox"/> M <input type="checkbox"/> F			<input type="checkbox"/> Yes <input type="checkbox"/> No	Clinic name: _____ Clinic number: _____
3 <input type="checkbox"/> Enroll <input type="checkbox"/> Cancel <input type="checkbox"/> Change				<input type="checkbox"/> M <input type="checkbox"/> F			<input type="checkbox"/> Yes <input type="checkbox"/> No	Clinic name: _____ Clinic number: _____
4 <input type="checkbox"/> Enroll <input type="checkbox"/> Cancel <input type="checkbox"/> Change				<input type="checkbox"/> M <input type="checkbox"/> F			<input type="checkbox"/> Yes <input type="checkbox"/> No	Clinic name: _____ Clinic number: _____

**Important:** \* For court-ordered dependent(s), legal documentation must be attached.

\*\* This is not required by Medica. Medica does not administer student status verification, however, your employer may request this information for their records.

**C. PRODUCT SELECTION**

**1** Please check all that apply. Benefit offerings are dependent upon employer selection.

- 1)  Medical Benefit Plan Name: \_\_\_\_\_  
**Medical Coverage Level:**  Employee Only  Employee + Spouse  Employee + Child(ren)  Employee + Family
- 2) Medica Direct<sup>®</sup> Selection:  Health Reimbursement Arrangement (HRA)  Flexible Spending Account (FSA)

**D. WAIVER OF MEDICAL COVERAGE**

**1** This entire section must be completed if you or your dependents DO NOT want coverage.

- 1) I understand that I am eligible for coverage through my employer. I DO NOT want coverage for:  
 Me and my dependents  My spouse  My dependents only
- 2) The reason I am declining coverage at this time is because I or my dependents have coverage provided through:  
 Spouse's group plan  Individual Policy  MCHA (dates of coverage): \_\_\_\_\_  
 Medicare  Group Coverage Continuation (COBRA)  South Dakota Risk Pool (dates of coverage): \_\_\_\_\_  
 MinnesotaCare  Medical Assistance  CHAND (dates of coverage): \_\_\_\_\_  
 Other: \_\_\_\_\_

3) I understand that if I decide to apply for coverage at a later date, I and/or my dependents may be required to submit additional health information (at my own expense) and that a pre-existing condition exclusion may apply.

Employee Signature: X Date Signed: \_\_\_\_\_

# Custom Options Form

- Used to:
- Submit within 31 days of event or plan change
  - Move already enrolled employee from one plan to another

## Custom Options by Medica® Selection Change Form

Employer Name (please print): \_\_\_\_\_

Employee Name

(First, MI, Last): \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Please identify your coverage level designation for the eligible product offerings with this renewal election:

<b>Medical Benefits</b> for: <input type="checkbox"/> Employee <input type="checkbox"/> Spouse <input type="checkbox"/> Child(ren) <input type="checkbox"/> All family members	<b>Flexible Spending Account (FSA)</b> <input type="checkbox"/> Add* <input type="checkbox"/> Continue* <input type="checkbox"/> Terminate * If you select either "Add" or "Continue" for your FSA election at renewal, you will need to complete a new FSA election form. FSA elections do not carry over year to year.
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Please check benefit selection and fill in Plan Design Number in the space provided below.

<input type="checkbox"/> Medica Choice® Plan Design No.:	<input type="checkbox"/> MIC Plan Design No.:
<input type="checkbox"/> Medica Elect™ Plan Design No.:	<input type="checkbox"/> Passport from Medica™ Plan Design No.:
<input type="checkbox"/> Medica Essential™ Plan Design No.:	<input type="checkbox"/> Patient Choice Insights™ by Medica Plan Design No.:
<input type="checkbox"/> Medica Focus™ Plan Design No.:	

\* Please provide clinic information if enrolling in Medica Elect, Medica Essential or Medica Focus.

Name	Relationship	Care Clinic Name	Clinic Number
_____	Employee	_____	_____
_____	Spouse	_____	_____
_____	Dependent	_____	_____
_____	Dependent	_____	_____
_____	Dependent	_____	_____

Care Clinic selections can be changed once per month. All changes received by the 20th of the month will take effect on the 1st of the following month. Please contact Medica Customer Service at 952-945-8000 or 1-800-952-3455 to make future Care Clinic changes.

- Note:
- All new enrollees must complete a Group Employee Enrollment Form.
  - All existing active members will be rolled into the new group plan designated.
  - I understand and agree that I will not be able to change my benefit plan selection noted above until next year's renewal unless a qualified special enrollment has occurred.

### EMPLOYEE AUTHORIZATION & REPRESENTATION – Read this section, date and sign the application.

On behalf of myself and anyone enrolled on or added to this form ("Us"), I authorize any hospital, clinic, institution, physician, insurer or company, employer or other person to give Medica or any of its designees any and all records or information pertaining to medical history or services rendered to Us. I understand that this information will be used for underwriting, risk rating, enrollment or eligibility for benefits. I understand that in certain circumstances Medica may disclose the information collected to third parties without authorization and that the individuals enrolled on or added to this form have the right to see and correct their personal information in accordance with applicable law. I understand that I have the right to review Medica's Privacy Notice before signing this form and to request a copy at any time. I authorize on behalf of Us the use of a Social Security Number for the purpose of identification. The information provided on this form is accurate and complete, to the best of my knowledge and/or belief. I understand and agree that any omissions or incorrect statements knowingly made by Us on this form may invalidate my or my dependent's coverage. I understand that I may revoke this authorization by notifying Medica in writing. If I revoke the authorization, it will not affect any actions already taken by Medica prior to Medica's receipt of the revocation. If I refuse to sign this authorization, it will affect my dependent's and my eligibility and enrollment for benefits. I understand that I may request a copy of this completed authorization form. Information used or disclosed pursuant to this authorization will remain subject to Medica's privacy standards. For North Dakota and South Dakota residents: For purposes of facilitating enrollment, unless revoked, this authorization permits Medica to obtain information about Us for 24 months from the date of signature.

For Minnesota residents: For purposes of facilitating enrollment, unless revoked, this authorization permits Medica to obtain information about Us from the date of signature until termination of our coverage.

This authorization does not extend to a release concerning the performance of, or results of, a test to determine the presence of the HIV antibody or other bloodborne pathogen\* performed on (1) a criminal offender or crime victim as a result of a crime that was reported to the police; (2) a patient who received the services of emergency medical services personnel\* at a hospital or medical care facility; or (3) emergency medical services personnel who were tested as a result of performing emergency medical services.

This coverage does not provide benefits for a condition for which medical advice, diagnosis, care, or treatment (including treatment with prescription drugs) was recommended or received during the 6-month immediate preceding the enrollment date, until the coverage has been active for at least 12 consecutive months, or for late entrants, 18 consecutive months. Credit will be given for prior creditable coverage to reduce the pre-existing condition limitation period.

For Wisconsin residents: For purposes of facilitating enrollment, unless revoked, this authorization permits Medica to obtain information about Us for 30 months from the date of signature.

Employee Signature: X \_\_\_\_\_ Date Signed: \_\_\_\_\_

	Group Number – Current Plan: _____	Effective Date of Change: _____
	Group Number – New Plan: _____	Signature: _____

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# Continuation Eligibility

To determine eligibility:

- COBRA/Continuation laws and requirements are the responsibility of the employer (contact your legal counsel)
- For more information on Minnesota State Continuation:
  - MN Department of Commerce  
(612) 296-4026 or (800) 657-3602
  - MN Department of Health  
(651) 282-5600 or (800) 657-3916
- Federal COBRA questions: US Department of Labor at 1/202/219-7222, Ext.. 3016

# Continuation Eligibility

To re-enroll members who have elected continuation

- Terminate coverage using a Small Group Enrollment/Change/Cancellation Form
- Notify members of continuation rights
- Re-enroll using a Small Group Enrollment/Change/Cancellation Form

# Medica's Total Solution: Health care solutions for every stage of life

Total Solution is Medica's name for its comprehensive offering of individual and medicare products tailored to meet the broad health coverage needs of its employer clients and their employee segments during times of transition.

	Situation	Goal	Medica's Total Solution
1	New Hires	Bridge gap until group coverage begins	Medica Short-term products
2	<ul style="list-style-type: none"> <li>Part-time Employees</li> <li>Dependents no longer eligible</li> <li>Dependent coverage too expensive</li> </ul>	Reduce the number of uninsured by providing access to affordable coverage	Medica Individual and Family products
3	Group coverage no longer available	Provide affordable alternatives to <i>Conversion</i> coverage	Medica Individual and Family products
4	Newly Unemployed	Provide affordable options to COBRA	Medica Short-term, Individual and Family Products
5	<ul style="list-style-type: none"> <li>Medicare-eligible Employees</li> <li>Early Retirees</li> <li>Medicare-eligible Retirees</li> </ul>	<ul style="list-style-type: none"> <li>Bridge gap to Medicare</li> <li>Provide COBRA alternatives</li> <li>Provide comprehensive, cost-effective Medicare options</li> </ul>	Medica Short-term, Individual and Family products; Individual and Group Medicare products

## Plans available in MN, ND, SD

### Individuals and Families

Medica Solo<sup>SM</sup>  
 Medica Direct HSA<sup>SM</sup>  
 Medica Encore<sup>SM</sup>  
 Medica Direct Value<sup>SM</sup>  
 Medica Direct Short-Term<sup>SM</sup>  
 Medica Direct Dental<sup>SM</sup>

### Medicare for Individuals and Groups

Medica Prime Solution<sup>SM</sup>  
 Medica Advantage Solution<sup>SM</sup>  
 Medica Group Prime Solution<sup>SM</sup>  
 Medica Group Advantage Solution<sup>SM</sup>



Contact a Medica Sales Executive toll free at 1-866-882-9973.



# Employee Enrollment Information or Changes

Send enrollment information or changes to:



**MEDICA**

P.O. Box 30986

Salt Lake City, UT 84130-0986

Or, fax to: 248-733-6064



# Material Orders

- Forms may be found online at [www.medica.com](http://www.medica.com) or requested from the Medica Service Center at (952) 992-2200.
- Be sure to identify yourself as a small business employer

# Master Group Contract

Many questions can be answered by referring to your MGC. It is a Legal contract between your company and Medica that lists the following:

- Term of contract
- Grace period
- Acceptance of contract
- Eligibility
- Rates



# BILLING PROCEDURES



# Billing

- Pay as billed, wait for adjustments
- Payment due by the 1st of the month
- Bills run on or around the 10<sup>th</sup> of the month
- Do not terminate employees on billing statement
- Changes are due a full 30 days prior to reflect on billing statement

# Billing

- Automatic Clearing House (ACH), an automated payment option, is available upon request
- Questions: contact Service Center at (952) 992-2200



# Medica Invoices

## Invoice reflects:

- Account's summary
- Current invoice summary
- Invoice detail at subscriber level
- Applicable adjustments



# ONLINE EMPLOYER eSERVICES<sup>®</sup>

[www.employereservices.com](http://www.employereservices.com)



# Employer eServices®

- Employer eServices
  - Real-time, online administration
- Secure internet connection 24 hours a day, 7 days a week

[www.employereservices.com](http://www.employereservices.com)

# Home Page

- Manage Access
- Enrollment
- ID Cards
- Billing
- Pay Online

The screenshot shows the Employer eServices home page for Medica. The page has a blue header with navigation links: Home, Resources, Network Information, Programs & Services, Provider Directory - Medica, and My Profile. Below the header is the Employer eServices logo and the Medica logo. A secondary navigation bar contains links for Enrollment, ID Cards, Billing, ManageAccess, Help, Training, and Tutorials, along with a Log Out button. The main content area features a personalized welcome message for Mary Jo, followed by a description of the service as an online gateway for member eligibility, enrollment changes, and claim status. Below this is a 'Hot Topics!' section with a prompt to click on links for news and information. At the bottom, there are three columns of links: Resources (Contact Us, Health Reimbursement Account Tips, HIPAA Internet Site, Medica Employer Newsletters, Medica.com, MyMedica.com, Scheduled Direct Debit Form), Network Information (Pharmacy, Provider Directory - Medica), and Programs & Services (Click here to access:).

# Manage Access with Registered CMA

## Client Master Administrator (CMA)

- Manages access of users
- Activate or inactivate access
- Assign functional permissions, such as enrollment or billing

Enrollment ID Cards Billing **ManageAccess**

Test Group

Update Policy Level Permissions For

Search by Policy/DivGroup  Search Show All

*(To perform a wild card search, enter a minimum of 2 characters followed by an asterisk.)*

All Perms On/Off	Policy/DivGroup	Customer No. / Master Grp.	Eligibility Update / Request ID Card	Eligibility Inquire	Elig Electronic Files	Claim View	Billing	Reporting	Banking
<input type="checkbox"/> On <input type="checkbox"/> Off	MSP11111	133648	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> On <input type="checkbox"/> Off	MSP11112	137361	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> On <input type="checkbox"/> Off	MSP11113	137361	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> On <input type="checkbox"/> Off	MSP11114	137361	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Submit Cancel

# Enrollment

- Inquire on employee eligibility information
- Instantly enroll, change or terminate employees

The screenshot displays the Employer eServices interface. At the top, the logo 'Employer eServices®' is visible. Below it, a navigation bar contains links for 'Enrollment', 'ID Cards', 'Billing', and 'ManageAccess'. A secondary bar offers actions: 'Add', 'Terminate', 'Reinstate', 'Change', and 'Inquire'. The main content area is titled 'Select Group from list, enter Employee Search criteria and select Search.' It features a 'Select Group' dropdown menu set to 'TEST GROUP MSP11111'. Below this, the 'Employee Search' section has a radio button selected for 'By Employee ID' and a text input field. To the right, there is a 'First Initial' input field and a 'Search' button. At the bottom of this section, there is a 'Select Enrollee' dropdown menu, a 'Help' button, and a 'Continue' button. A second navigation bar below the main form area includes 'Enrollment', 'ID Cards', 'Billing', and 'ManageAccess', with 'Add', 'Terminate', 'Reinstate', 'Change', and 'Inquire' options. Below this, there are tabs for 'Employee' and 'Dependent'. The 'Employee' tab is active, showing 'Enrollee:' information, 'DIV: MSP', and 'Group: 11111'. At the bottom, a horizontal menu contains five tabs: 'Employee Information', 'Demographic Information', 'Product Information', 'Other Insurance (optional)', and 'COBRA (optional)'. The 'Employee Information' tab is currently selected.

...more

# Enrollment Data Needed:

- Effective date of employee's coverage
- Date of hire and language used for EOB
- Demographic information
- Product information
- Other insurance information
- COBRA/Continuation information

The screenshot displays the Employer eServices interface. At the top, there are navigation tabs: Enrollment (highlighted), ID Cards, Billing, and ManageAccess. Below these are action links: Add, Terminate, Reinstater, Change, and Inquire (highlighted). The main content area is titled "Select Group from list, enter Employee Search criteria and select Search." It includes a "Select Group" dropdown menu with "TEST GROUP MSP11111" selected. The "Employee Search" section has two radio buttons: "By Employee ID" (selected) and "By Last Name". There are input fields for Employee ID (with a note "(SSN or Alternate ID)"), Last Name, and First Initial, along with a "Search" button. A "Select Enrollee" dropdown is also present. At the bottom of this section are "Help" and "Continue" buttons.

Below the search area, there is another set of navigation tabs: Enrollment (highlighted), ID Cards, Billing, and ManageAccess. Action links include Add, Terminate, Reinstater, Change, and Inquire. A sub-tab "Employee" is highlighted, with "Dependent" as an option.

The summary section shows: Enrollee: DIV: MSP Group: 11111

<b>Employee Information</b>	Demographic Information	Product Information	Other Insurance (optional)	COBRA (optional)
-----------------------------	-------------------------	---------------------	----------------------------	------------------

# Re-order ID Cards

Requesting a replacement is quick and easy

- Identify the group
- Identify the employee
- Identify the enrollee
- Continue to next screen to request card

The screenshot displays a web application interface for managing ID cards. At the top, there is a navigation bar with tabs for 'Enrollment', 'ID Cards', 'Billing', and 'ManageAccess'. Below this, a grey panel contains the following elements:

- Select Group from list, enter Employee Search criteria and select Search.**
- A 'Select Group' dropdown menu with 'TEST GROUP MSP11111' selected.
- 'Employee Search' options: 'By Employee ID' (selected) with an empty input field and '(SSN or Alternate ID)' label; 'By Last Name' with an empty input field and 'First Initial' with an empty input field.
- A 'Search' button.
- 'Select Enrollee' dropdown menu with 'MOUSE, MICKEY (Employee) 400004390' selected.
- 'Help' and 'Continue' buttons.

Below the grey panel is an orange bar, followed by another grey panel with the following elements:

- Request Medical ID Card**
- Text: 'To request a medical ID card for the selected enrollee please click the'
- 'Help' and 'Request ID Card' buttons.

# Billing

- View current or prior-period activity
- Download invoice detail into a spreadsheet
- Request an adjustment invoice
- Make payments online

Coverage Pd: 05/01-05/31/2010  
Due Date: May 01, 2010

### Account Summary

Previous Balance	\$1,467.97
Payments (-)	\$0.00
Bill Group Adjustments (+/-)	\$-1,467.97
Late Payment Charge (+)	\$0.00
Current Charges (+)	\$30.00
Current Adjustments (+/-)	\$0.00
<b>Total Balance Due</b>	<b>\$30.00</b>

### Invoice Summary

Description	Employee Count	Total Volume (000's)	Rate	Net Amount
<b>1111 TEST GROUP</b>				
<b>MEDICAL</b>				
ClassCd 1	2		\$5.00	\$10.00
ClassCd 4	2		\$10.00	\$20.00
Subtotal - MEDICAL	4		\$0.00	\$30.00
Subtotal - 1111 TEST GROUP	4		\$0.00	\$30.00
<b>Total</b>	<b>4</b>			<b>\$30.00</b>

[Download Invoice Detail](#)   
 [View All Detail](#)   
 [Print Preview](#)   
 [Request Adjustment Invoice](#)

[Learn About Requesting an Adjustment Invoice](#)

**Please Detach and Return the Portion Below with Remittance**

**Note:** Paper invoices will no longer be received if registered for eServices Billing.

# Pay Online

1. Select the invoices to be paid, then click on "Pay"
2. Verify payment amount is correct
3. Adjust amount if necessary, then click "Recalculate Total Payment"
4. Click "Submit Payment"

**Invoice Payment**  
DOCUMENT VISION TECHNOLOGIES

If you do not want to pay a particular invoice, please deselect the box next to the invoice.

Invoice Number	Due Date	Invoice Amount	Payment Amount
0000009596	Dec 01, 2010	\$1,465.00	\$1,605.00
<b>TOTAL:</b>		<b>\$1,605.00</b>	<b>\$1,605.00</b>

Recalculate Total Payment Submit Payment

**CURRENT ACTIVITY**  
OUR FAVORITE CUSTOMER

If you want to pay a particular invoice or statement, please select the box next to the invoice or statement.

Invoices

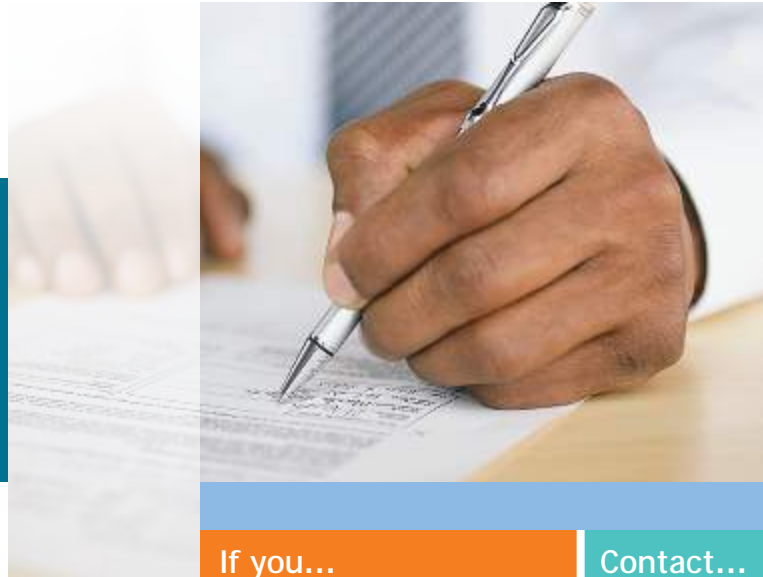
Customer Number	Bill Group Number	Invoice Number	Invoice Due Date	Invoiced Amount Due	
<input checked="" type="checkbox"/>	0123456	1	00009596	Nov 01, 2010	\$1,465.00 View
<input type="checkbox"/>	0123456	1	00009595	Nov 01, 2010	\$1,286.50 View
<input type="checkbox"/>	0123456	5	00009520	Nov 01, 2010	\$-1,119.20 View
<input type="checkbox"/>	0123456	1	00009594	Feb 12, 2011	\$942.50 View
<input type="checkbox"/>	0123456	1	00009593	Feb 12, 2011	\$942.50 View
<input type="checkbox"/>	0123456	3	00009506	Jan 01, 2011	\$30,419.40 View
<input type="checkbox"/>	0123456	3	00009592	Oct 01, 2010	\$-4,036.10 View
<input type="checkbox"/>	0123456	1	00009597	Jul 01, 2010	\$3,786.50 View
<input type="checkbox"/>	0123456	2	00009519	Dec 11, 2010	\$9,615.75 View
<input type="checkbox"/>	0123456	1	00009518	Dec 11, 2010	\$14,250.00 View

Pay Selected Invoices

**Note:** Online bill payment is not automatic when registered for billing. A separate form with bank information is needed.



# Questions



## If you...

Want to register for  
Employer eServices

Have a general  
question about  
Employer eServices or  
experience a technical  
issue while using  
eServices

## Contact...

Medica Service Center at  
952-992-2200 or 1-800-936-6880  
Email the Service Center at  
[medicaservicecenter@medica.com](mailto:medicaservicecenter@medica.com)

Employer eServices customer  
support at 1-800-651-5465



# COMMUNICATIONS SUPPORT



# We Keep You Informed

## Employer Update Monthly e-Newsletter

- Employer events
- Policy changes
- Product, network and service changes
- Ideas for helping you manage your health care costs and engage your employees in healthy lifestyles
- If you aren't receiving it, visit [www.medicaplayer.com](http://www.medicaplayer.com) and provide your e-mail address



## [www.medicare.com](http://www.medicare.com) Employers

- Plan information
- Employer and member information resources
- Valuable health and wellness programs and resources for employers and members
- Find A Doctor
- Online versions of our publications
- Recent Medicare news



# *Healthy Attitudes*

- Quarterly member newsletter
- Mailed to all enrolled employees
- Helps members better manage health care



# Questions





# EMPLOYEE ASSISTANCE PROGRAM

LeAnn Botzet



# Employee Assistance Program (EAP) Overview

- Access to master level associates 24 hours a day, 7 days a week by calling 1-800-626-7944
- Available to Medica members, dependents and any individual associated with the Medica member
- 3 in-person EAP sessions covered at 100%
- Members have access to in-person EAP sessions multiple times for different issues throughout year

...more



# Employee Assistance Program (EAP) Overview

- If members need to be seen beyond the EAP visits, network is overlapping to continue with provider through Behavioral Health benefits
- Variety of Work Life services available
- Critical Incident Response and Worksite trainings: 150 onsite hours
- Promotional postcard mailing to employees homes



# EAP Work Life Services

<p><b>LEGAL &amp; MEDIATIONS SERVICES</b></p>	<p><b>FINANCIAL SERVICES</b></p>	<p><b>CHILD/PARENTING</b></p>
<ul style="list-style-type: none"> <li>▪ ½ hour consultation free</li> <li>▪ 25% discount for services</li> </ul>	<p>Telephone sessions with Financial Professional</p>	<p>Assistance locating child care options</p>
<p><b>Topic Examples</b></p> <ul style="list-style-type: none"> <li>Divorce</li> <li>Child custody</li> <li>Child support</li> <li>Adoption</li> <li>Immigration</li> <li>Wills and trusts</li> <li>Guardianship</li> <li>Property division</li> <li>Tenant's rights</li> <li>Civil disputes</li> <li>Criminal issues</li> <li>Power of attorney</li> <li>Debt division</li> <li>Consumer rights</li> <li>Order for protection</li> </ul>	<p><b>Free Session Examples</b></p> <ul style="list-style-type: none"> <li>Budgeting</li> <li>Reducing debt</li> <li>Controlling spending habits</li> <li>Bankruptcy</li> <li>Restoring your credit rating</li> <li>Saving for college</li> <li>Retirement planning</li> <li>Hiring a financial planner</li> <li>Learning about investing</li> <li>Making the most of a 401(k), IRA or pension plan</li> <li>Mortgages</li> <li>Car loans</li> <li>Taxes</li> </ul>	<p><b>Examples</b></p> <ul style="list-style-type: none"> <li>Child care centers</li> <li>Nanny or au pair services</li> <li>Family day care</li> <li>Teen programs</li> <li>Preschools</li> <li>Children with special needs</li> <li>Day and residential camps</li> <li>Emergency or sick child care</li> </ul>
		<p><b>Parenting Resources</b></p>
		<p><b>Examples</b></p> <ul style="list-style-type: none"> <li>Prenatal &amp; childbirth classes</li> <li>Postpartum groups</li> <li>Newborn issues</li> <li>Fathers' programs</li> <li>Resources for single parents</li> <li>Parent support groups</li> <li>"Mom's Day Out" programs</li> <li>Relocation assistance</li> </ul>



# EAP Work Life Services

ADULT/ELDER INFORMATION AND REFERRAL	LIFE LEARNING	CHRONIC CONDITION SUPPORT	COMMUNITY RESOURCES
<p><b>Various housing concerns:</b></p> <ul style="list-style-type: none"> <li>In-home nursing care</li> <li>Transportation</li> <li>Community</li> <li>Food/nutrition</li> <li>Travel opportunities</li> <li>Homemaker services</li> </ul>	<p><b>Examples</b></p> <ul style="list-style-type: none"> <li>School selection</li> <li>College searches</li> <li>Assistance with academic problems</li> <li>Finding adult education classes or community education programs</li> <li>Career consulting</li> </ul>	<p><b>Learns about:</b></p> <ul style="list-style-type: none"> <li>Food service</li> <li>Support groups</li> <li>Advocacy</li> <li>Affordable housing</li> <li>Work related concerns</li> <li>Remodeling for accessibility</li> <li>Transportation issues</li> </ul>	<p><b>Examples</b></p> <ul style="list-style-type: none"> <li>Self-help groups</li> <li>County/State Services</li> </ul>
<p><b>Resources for caregivers</b></p> <ul style="list-style-type: none"> <li>Respite care</li> <li>Legal assistance</li> <li>Caregiving support</li> <li>Disease-specific information</li> <li>Financial planning</li> <li>Coping with grief and loss</li> </ul>			



# EAP Management Services

MANAGEMENT CONSULTATIONS	CRITICAL INCIDENT RESPONSE (CIR)	TRAININGS
<p><b>Workplace</b></p> <ul style="list-style-type: none"><li>Employee Performance Issues</li><li>Formal or Mandatory Referral</li><li>Sensitive Employee Issue</li><li>Traumatic Event</li><li>Issues with group of employees</li><li>Reorganization or layoffs</li><li>Policy and Procedure Consultation</li></ul>	<p><b>Examples</b></p> <ul style="list-style-type: none"><li>Layoffs</li><li>Reorganization</li><li>Workplace or Community Tragedy</li></ul>	<p><b>Examples</b></p> <ul style="list-style-type: none"><li>Building successful teams</li><li>Anger Management</li><li>Communication Skills</li><li>Balancing Work and Home</li><li>Stress Management</li></ul>
<p><b>150 onsite hours available (CIR &amp; Trainings combined)</b></p>		



# My Health Rewards by Medica<sup>sm</sup>

Rewards for Better Health  
Mary Alice Noel, Health Strategy  
Consultant

# My Health Rewards by Medica<sup>SM</sup>

Focus on member engagement and personalization:

- Helping members understand and improve their health status
- Engaging members in the management of their health
- Motivating through incentives and rewards



# Earning Rewards

Members rewarded gift cards for completing programs, choosing from nearly 200 merchants

Activity	Annual Maximum
Health Assessment ( <i>per adult member</i> )	\$20
Eight Online Health Topics ( <i>per adult member</i> )	\$40
Medica Health and Wellness Coaching	\$75
Annual Total	\$135





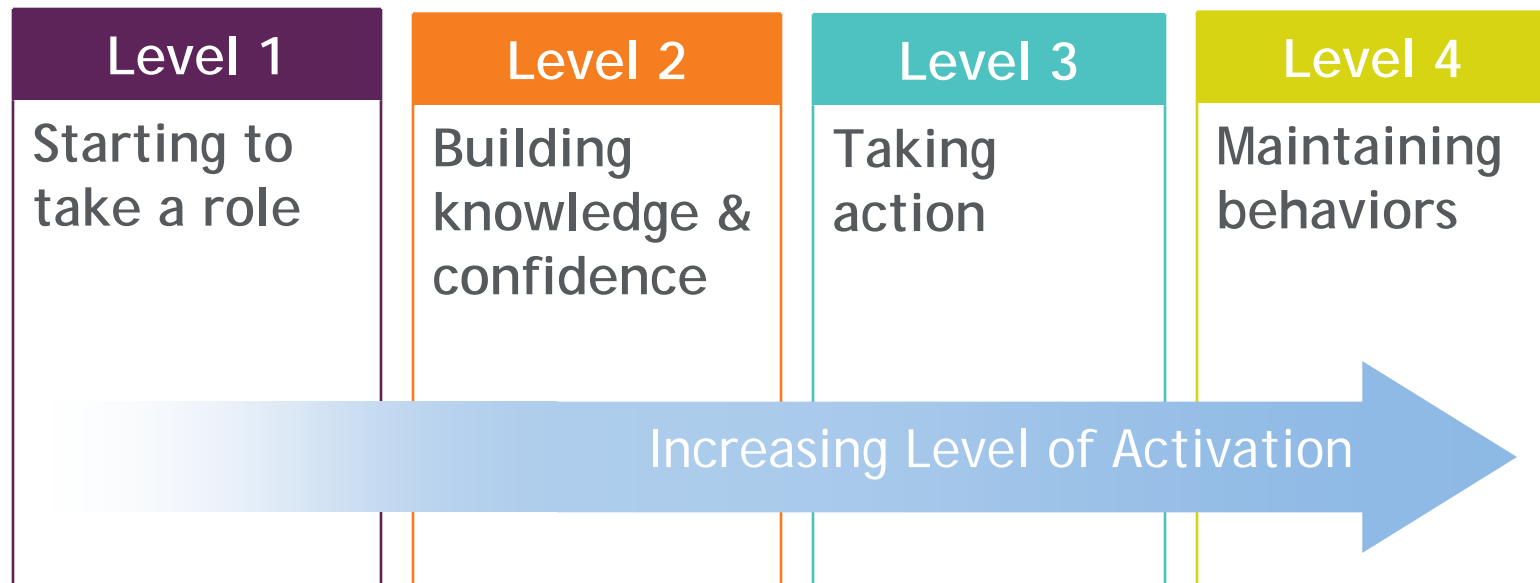
# Personal Activation Measure (PAM)

Our unique and proprietary health assessment

- Consists of 33 questions
- Available to members 18 and older
- Identifies and measures the member's:
  - Current health status
  - Ability to understand and engage in healthy behaviors
  - Knowledge, skills and confidence

# Measurement-based to Personalize Member Engagement & Support

PAM provides insight into what drives behaviors



# A New Health Assessment

The screenshot shows the mymedica.com website interface. At the top right is the MEDICA logo with the tagline "Everyone Benefits". Below the logo is a navigation bar with tabs: Home, Claims & Accounts, Physicians & Facilities, Pharmacies & Prescriptions, Benefits & Coverage, and Health & Wellness. The "Health & Wellness" tab is circled in orange. Below the navigation bar, there is a user greeting "Hello, Jane" and account details including "My Coverage: Active 01/01/10", "Clinic Name: Not Selected", and "Group or Policy#: 12345". A "Plan Details" section includes buttons for "Account Balances" and "Benefit Details". An "Out-of-Pocket Max" section shows "\$1200 Individual" and "\$5000 Family". A central banner asks "What would you like to do today?" with buttons for "View My Claims", "Look Up My Benefits", "Find a Doctor", and "Pharmacy Resources". An "Information Center" section at the bottom left provides links to "Stay healthy, fight the germs!" and "Welcome to the new mymedica.com!". A "Live Nurse Chat" section offers real-time assistance.

The screenshot shows a health assessment questionnaire. The title is "Health" and the question is "I understand my health problems and what causes them". The question is followed by a Likert scale with five options: "Disagree Strongly", "Disagree", "Agree Strongly", "Agree", and "NA". The scale is represented by five radio buttons. Below the scale, there are three rows of radio buttons for different responses: "I do to the problem myself", "I have even", and "I use medical treatments". At the bottom, there are "PREVIOUS" and "NEXT" buttons.


Question	Disagree Strongly	Disagree	Agree Strongly	Agree	NA
I do to the problem myself	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have even	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I use medical treatments	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

# Health Assessment Report

## Health Reports

PRINT

### myHealthStyle



**Congratulations!**  
You're in control of your health.

Your health is a top priority, and you're always looking for new ways to increase your knowledge and sharpen your skills. Your challenge is to stay in the driver's seat—even when you encounter bumps in the road.





You're in charge of your health, and you know it. By building upon past successes, you've learned how to develop and keep good health strategies alive. But life isn't always kind, be on the lookout for bumps in the road. Unexpected stresses can make it hard to maintain a good routine. It's a good thing that you know how to learn and grow!

We'll help you maintain your excellent health habits, avoid potential setbacks, and discover new ways to stay healthy and strong so you can live well, each and every day.

**Set your next goal now!**  
Take on a new challenge with confidence:

- ✓ Shop around the perimeter of the grocery store—where all the fresh foods are
- ✓ Plan physical activities into your vacation

**Based on your HealthStyle, we've selected the following tips and topics just for you:**

-  [Your Healthcare Team](#)
-  [Be Active for Life](#)
-  [Emotions Can Affect Your Eating](#)
-  [Watch Out When You Dine Out](#)


Not interested in these topics?

[VIEW OTHER HEALTH TOPICS](#)

[» access your Home page now](#)

### myPicture of Health

This report provides a snapshot of your health statistics and preventive care and how they correlate to recommended guidelines.



[View myPicture of Health Results](#)

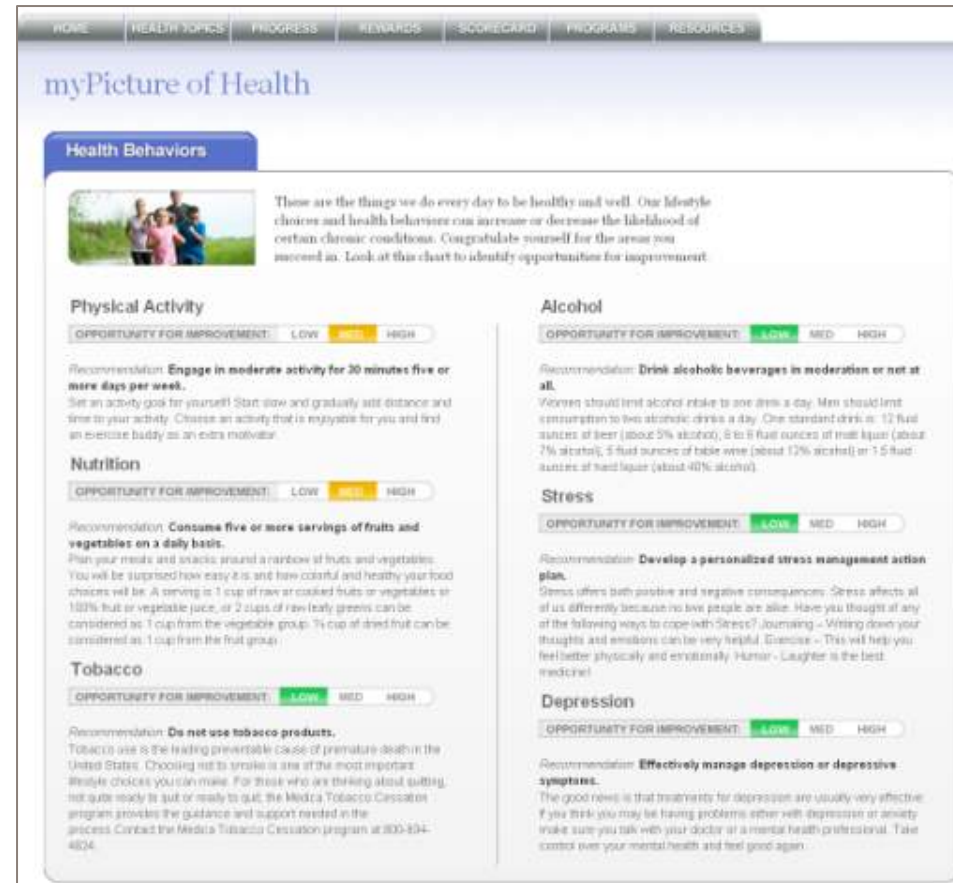
Interested in working with a Health Coach or would like assistance in reviewing your results?

Learn more about [Medica's Health Coaching Program](#) or Call (866) 905-7430

# Health Assessment Report

Provides information about an individuals'

- Health behaviors
- Health statistics
- Preventive care and how they correlate to recommended guidelines



# Easy to navigate home page provides quick access to areas of the site

mymedica.com

MESSAGE CENTER ⓘ ⓘ ACCOUNT PROFILE FAQ CONTACT US SIGN OUT

The screenshot displays the mymedica.com home page with a navigation bar at the top containing tabs for HOME, HEALTH TOPICS, PROGRESS, REWARDS, SCORECARD, PROGRAMS, and RESOURCES. The main content area features a large banner with the text "Identify your biggest challenges." and a sub-header "Health Topics and Goals" with a link "Need help completing Health Topics & Goals?". Below this are several widgets: "Topics" with the heading "Find new ways to stay fit!" and a list of tips; "Progress" with a table of goals and completion status; "Resources" with a link to a "Symptom Checker"; and "Healthy Lifestyle" with a link to "Create a healthy recipe!".

**Identify your biggest challenges.**

You continue to keep wellness at the top of your list- and you reap the rewards of a healthy lifestyle. Remember that even the strongest people face setbacks. The trick is to identify your stumbling blocks before you stumble, and plan ahead for how you'll overcome them.

[Visit your Health Topics page for help.](#)

**Health Topics and Goals**

[Need help completing Health Topics & Goals?](#)

**Healthy Lifestyle**

[Create a healthy recipe! Start here >](#)

**Topics** [View all topics >](#)

**Find new ways to stay fit!**

**Set a new health goal:**

- Plan for an alternative exercise option when your routine gets interrupted by an event
- Make reservations at a hotel with a gym when work forces you to travel
- Talk to your doctor about getting all the recommended health screenings for your age and health level

**Recommended Health Topics** Completed: 12

- [Carbohydrates for Life!](#)
- [The Gym Is Your Friend - Really!](#)
- [What Does It Mean to Be Active?](#)
- [Live Well & Get Connected](#)

**Progress** [View all progress >](#)

Goals	Completed
xxxxvart4rtaweret Target Completion Date: 8/26/2011	<input type="checkbox"/>
Prepare a weekly shopping... Target Completion Date: 3/31/2011	<input type="checkbox"/>
Read food labels for high... Target Completion Date: 3/31/2011	<input type="checkbox"/>

[View all goals >](#) [Add new goal >](#) [SAVE](#)

**Resources** [View all resources >](#)

[Concerned about symptoms you have?](#)

[Use the \*\*Symptom Checker\*\* to help with diagnosis](#)

# Health Topics

Recommended for you based on your areas of interest and your identified health needs.

HOME HEALTH TOPICS PROGRESS REWARDS SCORECARD PROGRAMS RESOURCES

## Health Topics

To change your topics selections please go to your [account profile](#).





About Medications 0 complete

Preventive Care 0 complete

**Food & Nutrition 5 complete**

Being Active 2 complete

Oral Health 0 complete

TOPIC	STATUS	COMPLETED ON	CONDITION
 <b>Watch Out When You Dine Out</b> Learn how to eat healthier when dining out.	Completed ✓	3/23/2011	Healthy Living
 <b>Kitchen Organization and Your Waistline</b> Improve kitchen organization for healthier eating	Begin ○		Healthy Living
 <b>How Much is Enough?</b> Learn how portion sizes have increased over time, and how you can start eating appropriate portions	Completed ✓	1/17/2011	Healthy Living
 <b>Calories Count!</b>	In Progress		Healthy Living

# Set goals and make journal entries

**Progress** PRINT

### Goal

Total goals in progress: **3**  
Total completed goals: **6**

Current Goals	Status
Maintain weight below 170... Target completion date: 09.01.11	<input type="button" value="Open"/>
5 minutes with dumbbells ... Target completion date: 09.01.11	<input type="button" value="Open"/>
Walk more Target completion date: 09.09.11	<input type="button" value="Open"/>

[View all goals »](#) [Add new goal »](#)

Completed Goals	Date Completed
1 morning, 1 afternoon 5-...	08.12.11
50 slow, deep knee bends ...	08.12.11
Lose 1 BMI point	08.12.11

[View all completed goals »](#)

### Plan Year Information

Plan Year: January 1, 2011

Topics Complete: 9  
[View topics »](#)

Goals Stared: 9  
[View goals »](#)

### Health Statistics

**01.25.11**

Height: 5'10"  
Weight: 165 lbs  
Blood Pressure: 0/0 mmHg  
Cholesterol: 0 mg/dL

[Add new statistic »](#)

### Today's Journal Entry: 8.24.2011

[View all entries »](#)

### Health Reports

[My HealthStyle Report: 08.12.11](#)  
[My HealthStyle Report: 01.25.11](#)

# Set Goals & Make Journal Entries

The screenshot displays a web application interface for health management. At the top, there is a navigation menu with tabs: HOME, HEALTH TOPICS, PROGRESS (highlighted), REWARDS, SCORECARD, PROGRAMS, and RESOURCES. Below this is a secondary menu with tabs: Goal Tracker, Journal, Health Statistics, and Health Reports. The main content area is titled "Progress" and includes a "PRINT" button in the top right corner.

The interface is divided into three main sections:

- Goal Tracker:** Shows "Total goals in progress: 1" and "Total completed goals: 0". It lists a current goal: "I will have a biometric s..." with a target completion date of "10.10.11" and a status of "Open". There are links for "View all goals »", "Add new goal »", and a "SAVE" button.
- Journal Entry:** Titled "Today's Journal Entry: 1.7.2011", it features a large text area for writing and a "SAVE" button at the bottom.
- Health Statistics:** Displays a blood pressure gauge icon and the date "01.02.11". It lists statistics: Height: 5'6", Weight: 110 lbs, Blood Pressure: 0/0 mmHg, and Cholesterol: 0 mg/dL. There is a link for "Add new statistic »".

At the bottom right, there is a "Health Reports" section with a clipboard icon and a link for "My HealthStyle Report: 01.02.11".

# Support for Setting Health & Well-Being Goals

- Personalized, member-centered, goal oriented
- Comprehensive approach vs. disease or condition focus
- Integrates medical, lifestyle and behavior change
- Builds motivation, confidence and ability to self manage
- Coaching expertise



Used with permission from the Center for Spirituality and Healing at the University of Minnesota and the Life Science Foundation.



# Health & Wellness Coaching

## Measuring outcomes

66%	Report quality of life increase
40%	Report productivity increase
59%	Report weight decrease
51%	Report increase in exercise
51%	Report increase in fruit/vegetable intake

\$139 per enrolled member per month savings in health care costs due to decreased IP admissions, ER and OP visits



# Health & Wellness Coaching

## Measuring satisfaction

95%	Satisfied with coaching program
99%	Felt supported by coach
88%	More confident in ability to get what I need in life for my health and well-being
87%	Personalized health improvement plan helped change behaviors or move toward reaching goals

# My Health Rewards Employee Campaign

**Re**  
define

**REINVENT EMPLOYEE HEALTH.  
REVIVE EMPLOYEE PRODUCTIVITY.  
REWARD YOUR EMPLOYEES.**

**MEDICA®**

# The Materials

EVERYTHING  
YOU NEED  
IS RIGHT AT  
HAND.

My Health Rewards gives you a turn-key, multi-media “Redefine” marketing campaign to promote the program and better health. It’s ready to use. You can choose to kick off the program with the all-employee welcome letter, customizing it first to fit your company. Then, place the marketing materials in prominent areas throughout your workplace to ensure maximum impact and encourage employee engagement.

## The program consists of the following marketing elements:

- filler
- poster (8.5x11)
- poster (11x17)
- email
- newsletter story

You’ll find printable PDFs for all marketing materials on the [Employer Portal at medica.com](http://medica.com). Also included in the last section of this booklet are printing specifications and suggestions.

# Redefine Field Work

**A.**

**B.**

**C.**

**D.**

**E.**

**THE MATERIALS**

- A. Flier
- B. Poster (8.5x11)
- C. Poster (11x17)
- D. Email
- E. Newsletter Story (not pictured)

**Text from Panel A:**

Re  
define  
Field Work

**EARN REWARDS FOR BETTER HEALTH, RIGHT FROM THE KICKOFF.**

Everyone manages his or her health differently. Everyone has different needs. Do now you have an easy-to-use, personalized way to help you redefine your own health and earn all the rewards. It's called **My Health Rewards by Medica**.<sup>SM</sup> And this exclusive program is yours at no extra charge as a Medica member.

My Health Rewards by Medica is a step-by-step opportunity to improve your health for that one precious, it can help you medical costs, too. With My Health really pays to get healthy.

**HERE'S HOW IT WORKS.**

1. Sign up for My Health Rewards by Medica.

2. Complete your health assessment.

3. Receive your personalized health plan.

4. Earn rewards for completing your health plan.

5. Redeem your rewards for cash back on your medical bills.

6. Repeat the process every 90 days.

**FOR CUSTOMERS THAT OFFER HEALTH COACHING PROGRAMS, PLEASE USE THE FIER AND EMAIL WITH COACHING IN THE TITLE.**

**MEDICA**

# Redefine Happy Meal

**Re define**

# HAPPY MEAL

These materials tell employees how they can earn a reward by exploring and completing eight online health topics and setting eight personal health goals.

**TASTE THE REWARDS OF BETTER HEALTH.**

**HERE'S HOW IT WORKS.**

Get a taste of the health benefits the Health Rewards by Medica™. Complete eight online topics of importance to you. Then set a goal based on each topic. It's that simple to redefine the happy meal, and earn a \$100 gift card.

It's easy to get into redefined.com and avoid the health and wellness jargon. Your choice from dozens of health topics. Our interactive tools. Learn how to manage a health condition. Develop healthy eating habits. or get exercise tips.

Then set a goal based on each topic. Eight topics. And eight goals earn you a \$100 gift card. It's that easy to re-define the happy meal.

**THE MATERIALS**

A. Flyer	D. Email
B. Poster (8.5x11)	E. Newsletter Story
C. Poster (11x17)	(not pictured)

# Redefine Happy Hour

**Re define**

# HAPPY HOUR

For companies that offer Medica health coaching, these materials generate awareness for and promote the health coaching program. This program applies to employees who have been identified as needing a health coach, or those who self-select the program. When employees work with a Medica Health Coach to achieve their goals, they'll earn a gift card reward from Medica.

## EARN REWARDS WITH EVERY STEP.

**HERE'S HOW IT WORKS.**

Step up to better health when you walk, bike, swim, or play. With a Medica Health Coach, that guidance and motivation to help you set health goals, manage stress and work with your doctor. Plus, you earn a \$25 gift card from My Health Rewards by Medica™. Now, that's rewarding. So step up and take action.

Call 1-866-955-7420 to find out if health and wellness coaching is right for you. It's another great way to redefine your health.

**MEDICA.**

**B.**

## EARN REWARDS WITH EVERY STEP.

**MEDICA.**

**C.**

## EARN REWARDS WITH EVERY STEP.

**MEDICA.**

**D.**

## EARN REWARDS WITH EVERY STEP.

**MEDICA.**

**THE MATERIALS**

- A. Flyer
- B. Poster (8.5x11)
- C. Poster (11x17)
- D. Email
- E. Newsletter Story (not pictured)

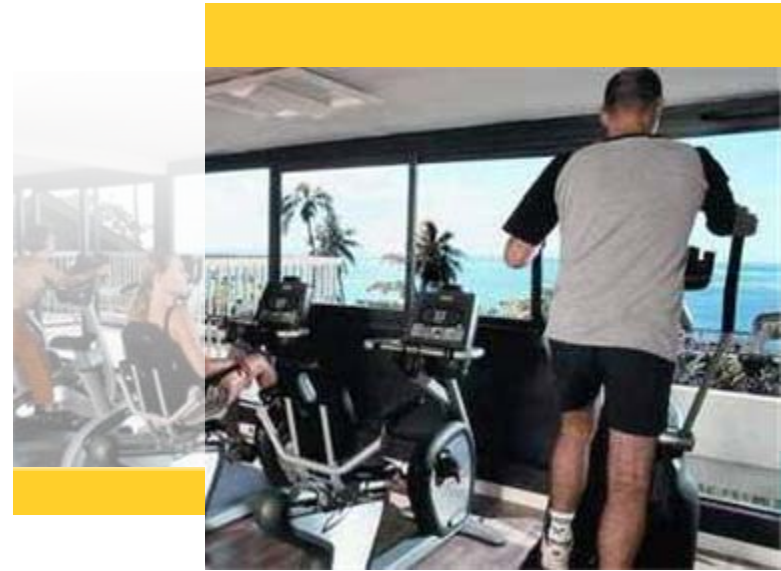


# Fit Choices<sup>SM</sup> by Medica

## Health Club Reimbursement Program

# Receive \$20 Credit Toward Monthly Dues

Exercise at participating facility 12+ days per month



Health Club Reimbursement Program

# 8,000+ Health Clubs to Choose From!

Nationwide facilities



Medica Service Area (MN, WI, ND & SD)



# Medica CallLink

- Source of information and support concerns
- Available 24/7/356
- Speak with an RN
  - Health questions
  - Self-care tips
  - Help choosing care





## MEDICA TOBACCO CESSATION PROGRAM

# When You Enroll You'll Receive:

- Confidential coaching with specialized coaches for ages 12 to 80
- A Personalized quit plan, workbook and materials
- Help with psychological and physical aspects of nicotine dependence
- Over-the-counter NRT, if medically appropriate

**MEDICA.**  
Empower. Beautiful!

## Medica Tobacco Cessation Program

Ready to quit tobacco? Good for you! Medica has health coaches specializing in tobacco cessation. We are ready to support you on your journey to be tobacco-free. You will be able to quit with the support that you want, at a level that makes you feel comfortable.

**What can I expect from this program?**


When you enroll in the Medica Tobacco Cessation Program, you'll receive:

- Coaching services that are included in your benefit plan
- Confidential coaching sessions with coaches who specialize in tobacco cessation
- Over-the-counter nicotine replacement therapy (patch, gum, lozenge), if medically appropriate, at no additional cost
- Coaches who will work with you on the psychological and physical aspects of nicotine dependence
- A personalized quit plan and self-help materials

**What can I expect from a coach?**

Medica health coaches understand that you know yourself best and that you already have ideas about what you need to do to quit using tobacco. You can count on your coach to:

- Help you tap into your motivation
- Participate in your quit process in whatever ways you think will be helpful
- Assist you in setting goals that you design yourself
- Encourage you to carry out your goals
- Provide support, accountability, and help with problem-solving
- Cheer you on your individual journey toward becoming tobacco-free



**Call today!**

Medica Tobacco Cessation Program  
Call Medica at 1-800-934-4124.  
Translation services are available in more than 150 languages.

**When can I call?**  
Tobacco cessation coaches are available Monday through Friday from 7 a.m. to 8 p.m. (CST) and Saturday from 9 a.m. to 5 p.m. If you call when we are closed, please leave a voicemail message and we will call you back during normal business hours.

*For additional information about your nicotine replacement therapy (NRT) pharmacy benefit, please call the telephone number on the back of your ID card.*

**MEDICA.**  
PO Box 9210, Minneapolis, MN 55440-9210

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OMAR10-10110

# Questions



*Thank you*



**THANK YOU FOR  
ATTENDING**

Thank you for choosing Medica