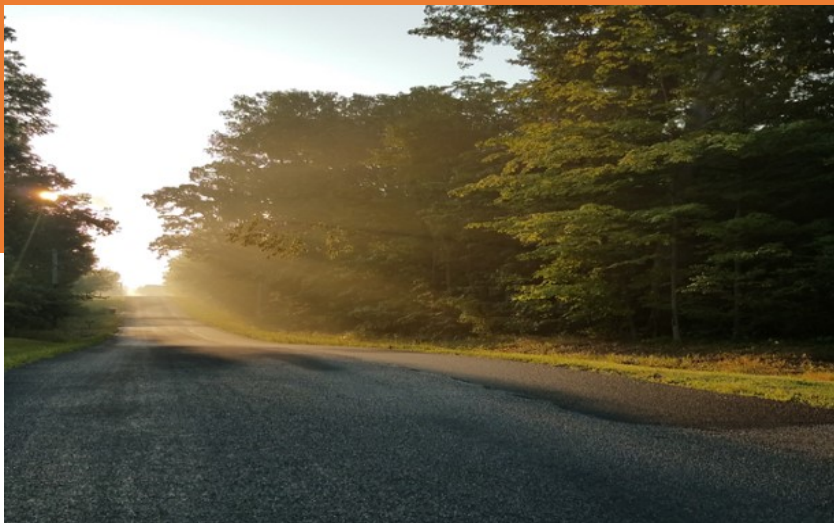




Mansfield City Schools



2020 Benefits Guide



Welcome to your 2020 Benefits Open Enrollment!

What Your Benefits Can Do for You!

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We are honored to present your 2020 Benefit Options!

The elections you make during your enrollment will begin January 1, 2020 (or the first day of employment) through December 31, 2020.

There are voluntary benefits (Voluntary Life and Accidental Death & Dismemberment, Short-Term Disability, Long-Term Disability, Accident, Critical Health Events, and Universal Life with Long Term Care) with reasonable group rates that you can purchase through payroll deductions.

Coverage begins the first of the month following 60 days of employment for classified employees. For all other classes coverage starts on the date of hire.

Should you have any questions or require more information, please contact your Treasurer's Office.

IMPORTANT

This document is an outline of the coverage proposed by the carrier(s), based on information provided by your company. It does not include all of the terms, coverage, exclusions, limitations, and conditions of the actual contract language. The policies and contracts themselves must be read for those details. Policy forms for your reference will be made available upon request.

The intent of this document is to provide you with general information regarding the status of, and/or potential concerns related to, your current employee benefits environment. It does not necessarily fully address all of your specific issues. It should not be construed as, nor is it intended to provide legal advice. Questions regarding specific issues should be addressed by your general counsel or an attorney who specializes in this practice area.

Open Enrollment Nov 6 - Nov 18

- * The benefits you elect during Open Enrollment will be effective January 1, 2020
- * Open Enrollment is the one time per year that you can make changes to your benefits without a qualifying life event
- * For more information about Open Enrollment, location schedules, Benefit Videos and important forms and documents go to www.explainmybenefits.com/mansfield

Enrollment Process

You must process a transaction, either enrolling or waiving coverages. We are again partnering with Explain My Benefits, our technology/benefit communication vendor to assist in our Open Enrollment. This year we will again have a self-service online enrollment using the EMB Enroll online system.

Options to Enroll

Decide which of these convenient enrollment options best fits your needs:



Self-Service - November 6th through November 18th

- Visit www.explainmybenefits.com/mansfield, click on the blue “Log into Your Benefit System” button and move through the enrollment system at your own pace
- Please see login instructions on page 5.
- If choosing this option, be sure to click “Checkout” at the end of the process and make note of your confirmation, you will be able to send yourself a copy. If you do not receive a confirmation you have not completed your enrollment and you will not be enrolled for the new plan year.
- Return to the system anytime to view your confirmation statement.



Mobile App** - You can now enroll through the EMB mobile app, review benefits and see important documents. Sign in using the company code: [gevs]. Select enroll from the menu on the right, go through the enrollment and finalize by clicking “CHECKOUT”. Please see login instructions on page 5.



Call Center - Call the Explain My Benefit call center at 419.392.9895 9:00am - 5:00pm EST; Monday - Friday during the enrollment period if you have questions regarding the enrollment system or benefits covered.



Benefit Counselor Assisted - EMB onsite November 11th through November 18th. There will be multiple computers and an EMB benefit counselor onsite to assist with any questions you may have.

Reminders

When using any of the above options for enrollment:

- Be sure to review the 2020 Benefit Guide and plan summaries prior to going through the enrollment process.
- Be prepared by gathering dependent and beneficiary information (i.e. Social Security Numbers and Dates of Birth).

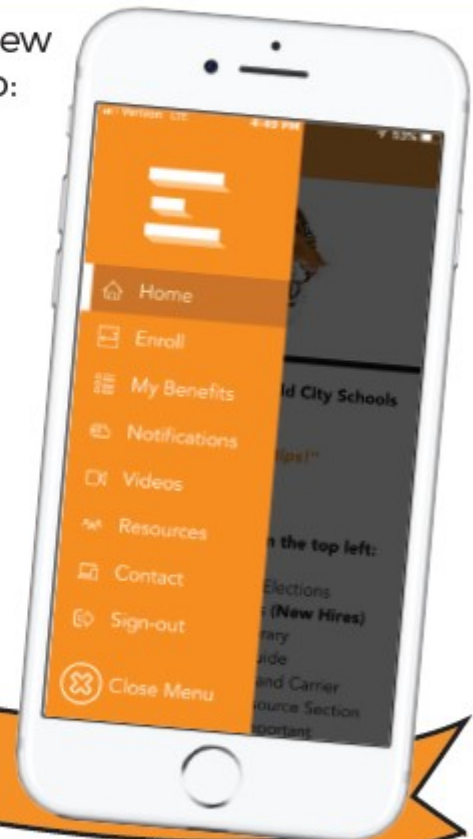
Mobile App



NEW! BENEFITS ENROLLMENT APP

Mansfield Schools has provided you a brand new app to manage your benefits that allows you to:

- ✓ Enroll in your benefits from your phone
- ✓ View your current benefits
- ✓ Watch benefit education videos, review benefit guides and plan summaries
- ✓ Receive important message notifications about your benefits



Benefits at your fingertips!

TO DOWNLOAD:

1. Visit the Apple or Android App Store
2. Search for: **Explain My Benefits**
3. Download the free app!
4. Enter company code: **mcs**



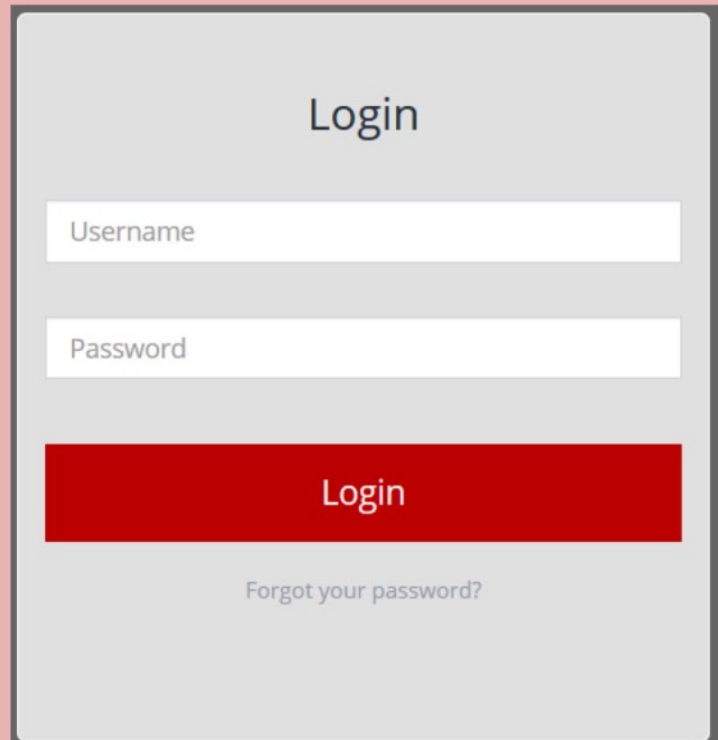
Login Instructions

ACCESSING EMB ENROLL

Access your company's *Benefit Resource Website* and select *"Log Into Your Benefit System"*

Create a New Account

1. Enter User Name
**1st Initial of First Name AND
Up to the 1st Six Characters of your Last
Name AND
Last 4 of SSN**
**Example: Tim Johnson SSN 1234 =
tjohnso1234**
2. Enter Password
Date of Birth (YYYYMMDD) and click Login
3. Select **"Get Started"** from the middle
section of the screen
4. Confirm your information along with
dependents
5. Shop for your insurance benefits



The screenshot shows a login interface with the following elements:

- A title "Login" centered at the top.
- A white input field labeled "Username".
- A white input field labeled "Password".
- A prominent red button labeled "Login".
- A link labeled "Forgot your password?" below the button.



High Deductible Health Plan

- In-Network Preventive Care will be covered in full by Medical Mutual
- No change to the Provider Network or Drug Formulary from 2019
- District contributes to your Health Savings Account when you participate in Wellness
- Certain preventive generic medications may be covered prior to the deductible being satisfied with a \$20 copay

Medical Mutual of Ohio	In-Network	Out of Network
Annual Deductible		
Family Plan deductible is embedded: No one person under the family contract will have a greater deductible than \$2,800		
Individual	\$2,800	\$5,600
Family	\$5,000	\$10,000
Coinsurance	0%	30%
Annual Out of Pocket Maximum includes deductible and coinsurance		
Individual	\$2,800	\$6,550
Family	\$5,000	\$13,100
Physician Visit		
Primary Care	Covered in full after deductible	Deductible + 30%
Specialist	Covered in full after deductible	Deductible + 30%
True Emergency Room Visit	Covered in full after deductible	Covered in full after deductible
Non True Emergency Room Visit	Covered in full after deductible	Deductible + 30%
Urgent Care	Covered in full after deductible	Deductible + 30%
Prescription Drugs	Retail (Up to 30 Day Supply) Requires Mandatory Mail Order after 3rd fill	
Generic	Covered in full after deductible	Member pays cost at pharmacy and is reimbursed based on the allowed amount
Preferred Brand Name	Covered in full after deductible	
Non-Preferred Brand Name	Covered in full after deductible	
	Mail Order (90 Day Supply)	
Generic	Covered in full after deductible	Not Covered
Preferred Brand Name	Covered in full after deductible	Not Covered
Non-Preferred Brand Name	Covered in full after deductible	Not Covered

Specialty Medications - \$150 Copay. Limited to a 30 day supply & must be obtained through the Specialty Pharmacy Vendor, Accredo (800.803.2523) or Gentry (844.443.6879).

PPO Medical Plan

Effective January 1, 2020, you may enroll in this plan if you are ineligible for a Health Savings Account and are covered by a government plan such as Medicare or Tricare.

- In-Network Preventive Care will be covered in full by Medical Mutual
- No changes to the Provider Network or Drug formulary from 2019

Medical Mutual of Ohio	In-Network	Out of Network
Annual Deductible		
Individual	\$500	\$1,000
Family	\$1,000	\$2,000
Coinsurance	20%	40%
Annual Out of Pocket Maximum includes deductible, coinsurance and copays		
Individual	\$1,500	\$3,000
Family	\$3,000	\$6,000
Physician Visit		
Primary Care	\$20 Copay	Deductible + 40%
Specialist	\$40 Copay	Deductible + 40%
True Emergency Room Visit	\$250 Copay	\$250 Copay
Non True Emergency Room Visit	Deductible + 20%	Deductible + 40%
Urgent Care	\$75 Copay	Deductible + 40%
Prescription Drugs	Retail (30 Day Supply) Requires Mandatory Mail Order after 3rd fill	
Generic	\$15 Copay	Member pays cost at pharmacy and is reimbursed based on the allowed amount
Preferred Brand Name	\$40 Copay	
Non-Preferred Brand Name	\$65 Copay	
	Mail Order (90 Day Supply)	
Generic	\$30 Copay	Not Covered
Preferred Brand Name	\$80 Copay	Not Covered
Non-Preferred Brand Name	\$130 Copay	Not Covered

Specialty Medications - \$150 Copay. Limited to a 30 day supply & must be obtained through the Specialty Pharmacy Vendor, Accredo (800.803.2523) or Gentry (844.443.6879).

Dental

Regular oral health care is important to your overall health, and we encourage you to get 2 exams & cleanings every year. Dental exams can also detect early signs of disease, such as diabetes, ulcers, heart disease, and even prevent premature birth.

Medical Mutual of Ohio	
Deductible (Calendar Year, per person)	\$25 Single/ \$50 Family
Annual Maximum (per person)	\$2,000
Preventive Services Cleaning & Exam (2 per benefit period) X-Rays Topical Fluoride Space Maintainers (children under 19)	100% (Deductible does NOT apply)
Deductible Applies then You Pay	
Essential Services Fillings Endodontics (root canal) Periodontics (gum disease) Extractions Prosthetic Repairs	20%
Major Services Dentures Crowns Bridges	50%
Orthodontics (Children to age 19)	50% - deductible does not apply
Orthodontia Lifetime Maximum	\$850



Vision

Vision Benefits administered by VSP, using the VSP Signature Network

An annual eye exam is recommended every year.

As we age, our vision needs change and you should not go longer than 2 years without an exam. Vision Exams are an early detector of high blood pressure, cholesterol, glaucoma and diabetes.

	In-Network	Out of Network Reimbursement
Exam Copay	\$10	Up to \$50
Materials Copay	Combined with Exam	N/A
Lenses & Frames (Standard per pair)		
Single Vision	100%	Up to \$50
Bifocal	100%	Up to \$75
Trifocal	100%	Up to \$100
Lenticular	100%	Up to \$125
Frames	\$120 retail allowance, then 80% over the balance	Up to \$70
Contact Lenses		
Medically Necessary	Covered in Full	Up to \$210
Elective	\$105 allowance	Up to \$105
Service Frequency		
Comprehensive Exam		12 Months
Lenses		24 Months
Frames		24 Months
Contact Lenses		24 Months

Did You Know?

You can find a vision provider by visiting www.vsp.com and be sure to search under the VSP Signature Network.

When you have questions about your VSP Vision benefits, please call 1-800-877-7195 to reach a VSP customer service rep.



Voluntary Benefits

What are Voluntary Benefits?

Voluntary Benefits are offered to strengthen your overall benefits package. You customize the benefit based on need and affordability.

- Ownership - Policies are fully portable and belong to you if you leave your employer, same price and same plan
- Benefits are payroll deducted
- *Cash benefits are paid directly to you, not to a hospital or a doctor*
- *Benefits are paid regardless of any other coverage you may have*
- Level premiums - Rates do not increase with age
- Guaranteed Renewable
- Designed to provide additional cash flow to assist with out-of-pocket medical costs and other bills



Accident, Critical Health Events and Universal Life with Long Term Care rider are offered through Trustmark Insurance.

Accident Plan



A plan, through Trustmark Insurance, that helps pay for the unexpected expenses that result from an accident.

24 Hour Coverage

Family coverage available
Sports related injuries covered as well

Just a few examples of benefits included in the plan:

- Emergency Room Visits - \$200
- Hospitalization - \$2,000 admission benefit, \$400 per day benefit
- Fractures - up to \$10,000
- Dislocations - up to \$8,000
- Accident Follow-up Treatment - \$100

See brochure for a complete list of benefits.

	Employee	Employee & Spouse	Employee & Child(ren)	Family
Per Month	18.41	28.25	34.36	44.15
Per Pay Period	4.25	6.52	7.93	10.19

Voluntary Benefits

Critical Health Events

Critical Illness coverage focuses on cancer, stroke and heart attack, to help cover medical and non-medical expenses. Pays partial benefit for early identification and full benefits for late-stage diagnosis. Early diagnosis benefit can provide funds to help prevent conditions from worsening. **Replenishing benefit amount fully restores each calendar year with no lifetime maximum.**



Guaranteed Issue at Initial Offering
\$25,000 Employee / \$12,500 Spouse / \$2,500 Children

How the Product Works:

The product offers benefit for the entire scope of an illness—not one and done.

10% Benefit	50% Benefit	100% Benefit
 Cancer <ul style="list-style-type: none"> Invasive basal/squamous cell skin cancer In situ cancer Benign brain, spinal cord and cranial nerve tumors Myelodysplastic syndrome 	 Cancer <ul style="list-style-type: none"> Stage 1 melanoma Stage 1 or 2 cancers, no lymph node involvement 	 Cancer <ul style="list-style-type: none"> Stage 3 or higher Stage 2 involving lymph nodes Melanoma stage 2 or higher Stage 1 or higher: pancreas, esophagus, leukemia, lung, liver, biliary tract, head and neck, lymphoma, multiple myeloma
 Coronary Artery disease <ul style="list-style-type: none"> Initial diagnosis after a non-invasive assessment and recommended treatment 	 Coronary Artery Disease <ul style="list-style-type: none"> Coronary artery obstruction Heart attack when clinically diagnosed 	 Coronary Artery Disease <ul style="list-style-type: none"> Heart Attack
 Cerebral Vascular Disease “mini-stroke” <ul style="list-style-type: none"> Transient Ischemic Attack (TIA) including Reversible Ischemic Neurologic Deficit (RIND) 	 Cerebral Vascular Disease <ul style="list-style-type: none"> Stroke with less than 30 days impairment Stroke when clinically diagnosed 	 Cerebral Vascular Disease <ul style="list-style-type: none"> Stroke with at least 30 days impairment

Most plans **DON'T** cover these conditions.

Rates: This benefit is customized by each employee so rates vary, but can start as little as a few dollars a week. See brochure for more details. Your specific rate will be calculated for you in the electronic enrollment system.

Basic Life and AD&D Insurance

Life Insurance provides an important benefit for your family if you or a covered family member pass away. Benefits help supplement your income when that income is lost, and can help pay medical bills, home mortgage, the cost of college tuition, and more. Basic Life and Accidental Death & Dismemberment coverage is offered through **OneAmerica**.



Life Insurance at no cost to you!

You will automatically be enrolled in the Basic Life & AD&D Insurance Plan and Mansfield Schools will pay the full cost of this coverage for you!

Your benefit is based on your job classification. If you think you need additional life insurance protection, you have the opportunity to purchase more for yourself, your spouse, and your child(ren).

Accidental Death & Dismemberment (AD&D)

Accidental Death and Dismemberment (AD&D) insurance provides a specified benefit for a covered accidental bodily injury that directly causes dismemberment (the loss of a hand, foot, or eye).

In the event that death occurs from a covered accident, both the life and the AD&D benefit would be payable.

Your Beneficiary

It is **IMPORTANT** that you check to be sure your **beneficiaries are up to date**.

You can update your beneficiary information anytime at www.explainmybenefits.com/mansfield.

Voluntary Life and AD&D Insurance

Employer sponsored Term Life is the most affordable protection you can buy. If you recently had a baby or adopted, got married or divorced, or purchased a home, chances are your life insurance coverage needs adjusted. You can purchase additional Life Insurance and Accidental Death & Dismemberment through Pre-Tax payroll deduction. Voluntary Life and Accidental Death & Dismemberment offered through **OneAmerica**.



Life/AD&D insurance give you peace of mind that the people you love will be financially secure if something happens to you. It lets your survivors focus on what they need to do, without the added stress of making ends meet.

How much can I get?

Employee:

You may purchase in \$10,000 increments up to 5x your basic annual earnings to a maximum of \$300,000.

Spouse:

You may purchase for your spouse no more than 50% of your elected amount in \$5,000 increments up to \$150,000.

Child(ren):

This benefit is \$10,000 for children age 6 months to 19 years (25 years if a full time student) and \$250 for children 14 days to 6 months. The cost is \$2.00 per month.

Guarantee Issue (applies to new hires only):

Employee - \$150,000 (under age 70)

Spouse - \$30,000 if employee is under age 60

An Evidence of Insurability (EOI) form will be required for additional amounts of coverage.

NOTE: Age reductions apply; please see the benefit Certificate of Coverage for details.

Importance of Selecting a Beneficiary

Selecting a beneficiary is a very personal decision. Some people want to use a death benefit to provide for their family, and other people look at it as more of a financial transaction. When you designate beneficiaries, you have the final say over who receives the proceeds. If you do not chose one, your state's laws determine who receives the benefit.

Trustmark Universal Life with Long Term Care

Universal Life with Long Term Care includes both a death benefit and a living benefit.



- Trustmark Universal Life with Long Term Care is a permanent life insurance that is designed to match your needs throughout your lifetime. It pays a higher death benefit during your working years when expenses are high and you need maximum protection.
- The Universal Life with Long Term Care is priced to remain the same cost to you until age 100.
- The death benefit reduces at age 70 when the need for life insurance typically decreases.
- The Living Benefit, Long Term Care never reduces and is 4% of the original death benefit per month for up to 25 months.
- If you use the Long Term Care benefit, your death benefit amount does not reduce due to the Benefit Restoration feature included.
- Coverage available for spouse and children as well.

Special Underwriting for Initial Offering

Guaranteed Issue (Employee Only)

The lesser of the face amount purchased up to \$100,000

Universal Life with Long Term Care example: \$100,000 Death Benefit

	Before Age 70	After Age 70
Long Term Care Benefit (LTC): Pays a monthly benefit equal to 4% of your death benefit for up to 25 months.	\$100,000	\$100,000
Benefit Restoration: Restores the death benefit that is reduced to pay for LTC.	\$100,000	\$33,333
Total Maximum Benefit: Long Term Care Benefits may double the value of your insurance.	\$200,000	\$133,333

Rates

This benefit is customized by each employee so rates vary, but can start as little as a few dollars a week. Your specific rate will be calculated for you in the electronic enrollment system.

Voluntary Supplemental Life Insurance

Mansfield City Schools offers another option for you to purchase Life Insurance for you and your dependents through **The Standard**.



Voluntary Supplemental Term Life

You also have the opportunity to purchase supplemental term life coverage for yourself, spouse and dependent children. Please note that dependent children include unmarried adopted, natural or stepchildren age 14 days to age 20 (24 if a full- time student).

Coverage is Guarantee Issue for new hires enrolling during their initial eligibility enrollment period.

Guaranteed Issue

Employee / Spouse / Child

\$100,000 / \$100,000 / \$10,000

Employee:

You may purchase coverage in \$10,000 increments up to a maximum of \$100,000.

Spouse:

You may purchase coverage for your spouse up to 100% of your elected amount in \$10,000 increments up to a maximum of \$100,000.

Child(ren):

You may purchase coverage for your child(ren) in amounts of \$5,000 or \$10,000,

An Evidence of Insurability (EOI) form will be required for amounts over the Guaranteed Issue or if enrolling or making changes after the initial enrollment period. Coverage is subject to approval by The Standard.

Short Term Disability

Disability Insurance is Paycheck Insurance! If you become sick or hurt and don't have banked sick leave, how will you provide for your family and pay bills while you are unable to work? Short Term Disability (STD) replaces a portion of your weekly income. The benefit lasts up to 22 or 26 weeks, after you satisfy an elimination period from the date you become disabled.

There are 4 plans to choose from. Please consider the benefit percentage, the benefit duration, and the elimination period.

This plan has a pre-existing conditions clause; please review the Disability Brochure located at: www.explainmybenefits.com/mansfield under Summaries.



Group Worksite Disability Insurance Options – Short Term

Class Description:	All Eligible Full-Time Employees ¹			
Required Minimum Number of Hours Worked:	17 hours weekly			
Employer Contribution Percentage:	0%			
Participation Requirement:	Greater of 10 insured employees or 25% of all eligible employees			
Features	STD Option 1	STD Option 2	STD Option 3	STD Option 4
Injury Elimination Period:	30 Days	7 Days	30 Days	7 Days
Sickness Elimination Period:	30 Days	7 Days	30 Days	7 Days
Maximum Benefit Duration:	22 Weeks	26 Weeks	22 Weeks	26 Weeks
Benefit Percentage:	60%	60%	40%	40%
Maximum Weekly Benefit:	\$2,500			
Pre-Existing Condition Exclusion:	3/6			
Total Disability Definition:	Regular Job			
Partial Disability Benefit:	Proportionate Loss			
Residual Benefit:	Yes			



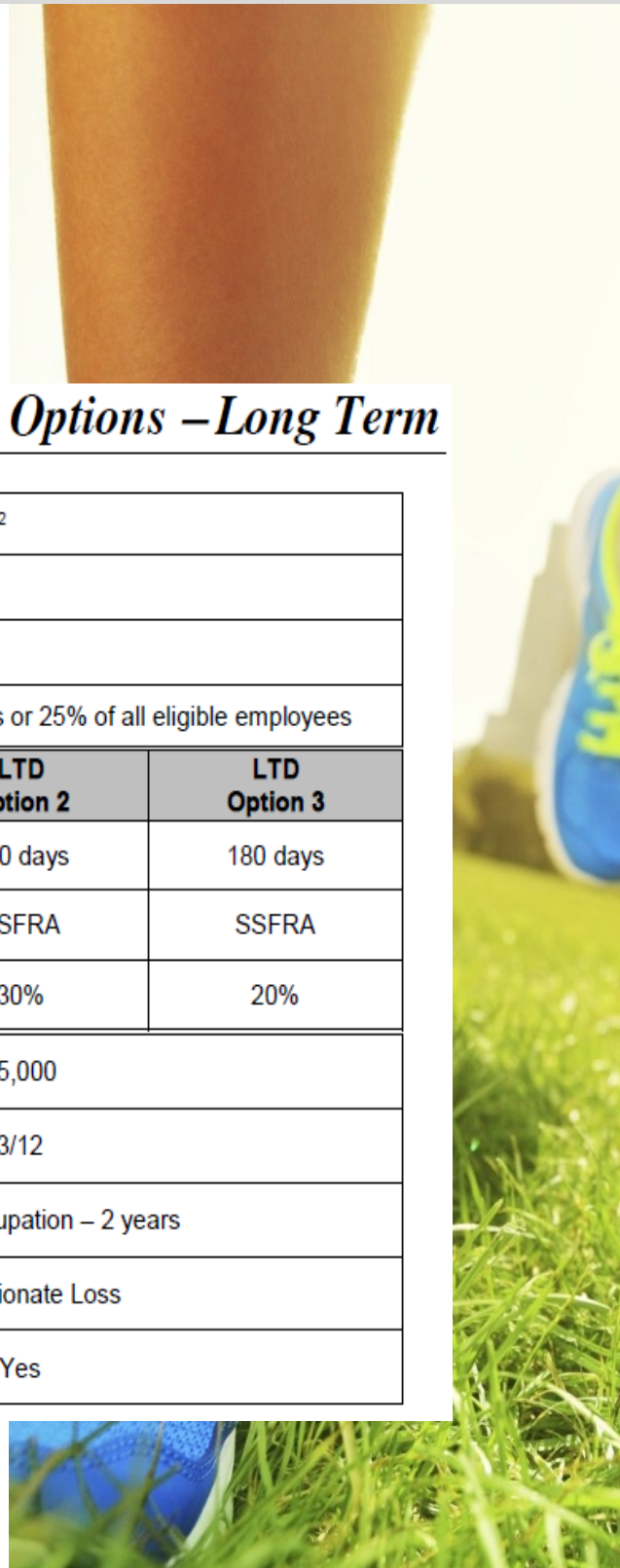
Long Term Disability

Long Term Disability (LTD) Insurance helps safeguard your financial security by replacing a portion of your income while you are unable to work. LTD benefits are intended to protect your income for many years after you have depleted short-term disability or available paid time off. LTD will take effect if your accident or illness prevents you from returning to work beyond your Short Term Disability period or 90 days.

There are 3 plans to choose from. Please consider the benefit percentage, the benefit duration, and the elimination period.

This plan has a pre-existing conditions clause; please review the Disability Brochure located at:

www.explainmybenefits.com/mansfield under Summaries.



Group Worksite Disability Insurance Options – Long Term

Class Description:	All Eligible Full-Time Employees ²		
Required Minimum Number of Hours Worked:	17 hours weekly		
Employer Contribution Percentage:	0%		
Participation Requirement:	Greater of 10 insured employees or 25% of all eligible employees		
Features	LTD Option 1	LTD Option 2	LTD Option 3
Elimination Period:	180 days	180 days	180 days
Maximum Benefit Duration:	SSFRA	SSFRA	SSFRA
Benefit Percentage:	40%	30%	20%
Maximum Monthly Benefit:	\$5,000		
Pre-Existing Condition Exclusion:	3/12		
Total Disability Definition:	Regular Occupation – 2 years		
Partial Disability Benefit:	Proportionate Loss		
Residual Benefit:	Yes		

Qualifying Life Events

The choices you make during Open Enrollment remain in effect until January 1, 2020. You cannot change coverage for yourself, or add or drop dependents during the year, unless you have a Qualifying Life Event. If you need to make changes to you or any of your dependents' benefits throughout the year, you must do so within 30 days of the event. You can make changes by contacting your Payroll & Benefits department.

Examples of Qualifying Life Events that allow you to change some of your benefits during the year include:

- Marriage, divorce, death of your dependent child or spouse
- Change in your or your dependent's employment status that results in loss or gain of coverage
- Birth, adoption, or change in the custody of your child
- Other involuntary loss of coverage

Important Contacts

Vendor	Phone	Website
Medical Mutual of Ohio (Medical and Dental)	800.521.6492	www.medmutual.com
Express Scripts	800.417.1961	www.express-scripts.com
Vision Service Plan	800.877.7195	www.vsp.com
For help with changing coverage or claims on Accident, Critical Health Events, Disability or Universal Life plans, please contact Explain My Benefits Service at 888.734.6937, Option 3		
One America (Disability)	855.517.6365	www.oneamerica.com or email oneamerica.claims@customdisability.com
One America (Life & ADD)	888.81.GRADY	www.oneamerica.com
Trustmark Claims Help Explain My Benefits	888-734-6937, Option 3	service@explainmybenefits.com
The Standard (Optional Life & ADD)	800.628.8600	www.standard.com
COBRA Administration	877.765.8810	www.discoverybenefits.com

Benefit Guide Description

This summary of benefits is not intended to be a complete description of Mansfield City Schools' insurance benefit plans. Please refer to the plan document(s) for a complete description. Each plan is governed in all respects by the terms of its legal plan document, rather than by this or any other summary of the insurance benefits provided by the plan.

In the event of any conflict between a summary of the plan and the official document, the official document will prevail. Although Mansfield City Schools maintains its benefit plans on an ongoing basis, Mansfield Schools reserves the right to terminate or amend each plan in its entirety or in any part at any time.



Benefit Guide Description

Please Note: This guide provides information regarding the Mansfield Schools benefit program. More detailed information is available from the plan documents and administrative contacts. The plans and policies stated in this information are not a contract or a promise of benefits of any kind, and therefore, should not be interpreted as such.



MedMutual.com/member Instructions

- Visit www.medmutual.com/member
- Click on Register for Account
- Type in your unique ID number from your ID Card
- Enter your Date of Birth
- Create a secure username and password
- Check the Terms and Agreement box
- Click Continue

At the top of the My Health Plan Page, you will see the following links:

- ⇒ Dashboard
 - ⇒ Most recent claims activity (view claims)
 - ⇒ Quick Links to benefit overviews, My Care Compare, ID Cards, Find a Provider, etc.
- ⇒ Claims & Balances
 - ⇒ View current deductible and out of pocket amounts satisfied year to date
- ⇒ Benefits & Coverage
 - ⇒ View your Summary of Benefits & Coverage
 - ⇒ View or print your ID Card
 - ⇒ See who is covered under your plan
 - ⇒ List of procedures that require Prior Approval
- ⇒ Resources & Tools
 - ⇒ Under Tools you can Find a Provider, or look up how much a procedure will cost you at various facilities under My Care Compare
 - ⇒ Click on the Prescription Drug/Pharmacy link to check on prescription drug pricing at various pharmacies (you will be linked to the Express Scripts site)
- ⇒ Healthy Living
- ⇒ My Profile
- ⇒ Resources & Tools
 - ⇒ Check out the Health Resource Center to search health topical issues
- ⇒ Healthy Living
 - ⇒ This section provides Fitness Tips, information on Nutrition & Dieting, Wellness & Lifestyle. Medical Mutual programs such as Disease Management, Maternity Program, Weight Watchers, and access to MMO's Wellness Portal are covered in this section.

For help with logging on or website issues, please call MMO Technical Support at 800.218.2205 Monday—Friday 7:30 am—8:00 pm (EST) and Saturday 9:00 am—1:00 pm (EST).