




HEALTHSOURCE
MISSOURI ASSOCIATION OF MANUFACTURERS
Est. 2006

Benefit Plans Exclusively for Missouri Manufacturers

Health Benefit Packages Specially-Crafted for Manufacturers



The Missouri Association of Manufacturers (MAM) understands the unique health insurance needs of manufacturers. Through years of advocacy and collective group purchasing, MAM is addressing the specific needs of its member businesses through partnership with our preferred carriers and MAM **HEALTHSOURCE**, an industry-based association health plan.

By utilizing its strength in numbers, MAM's goal is to achieve lower pricing and greater advantages than members would be able to obtain on their own. MAM **HEALTHSOURCE** participation is reserved for MAM members. The program provides:

- **Competitive group health insurance pricing**
- **Multiple plan offerings**
- **Greater risk pool protection**
- **Multi-year rate cap guarantees**
- **Premium dividend incentives**
- **Claims and administrative cost transparency**
- **Assistance with regulatory compliance**
- **Wellness information and programs**
- **Dedicated account service manager**
- **Long-term rate stability strategy**

Health Benefits

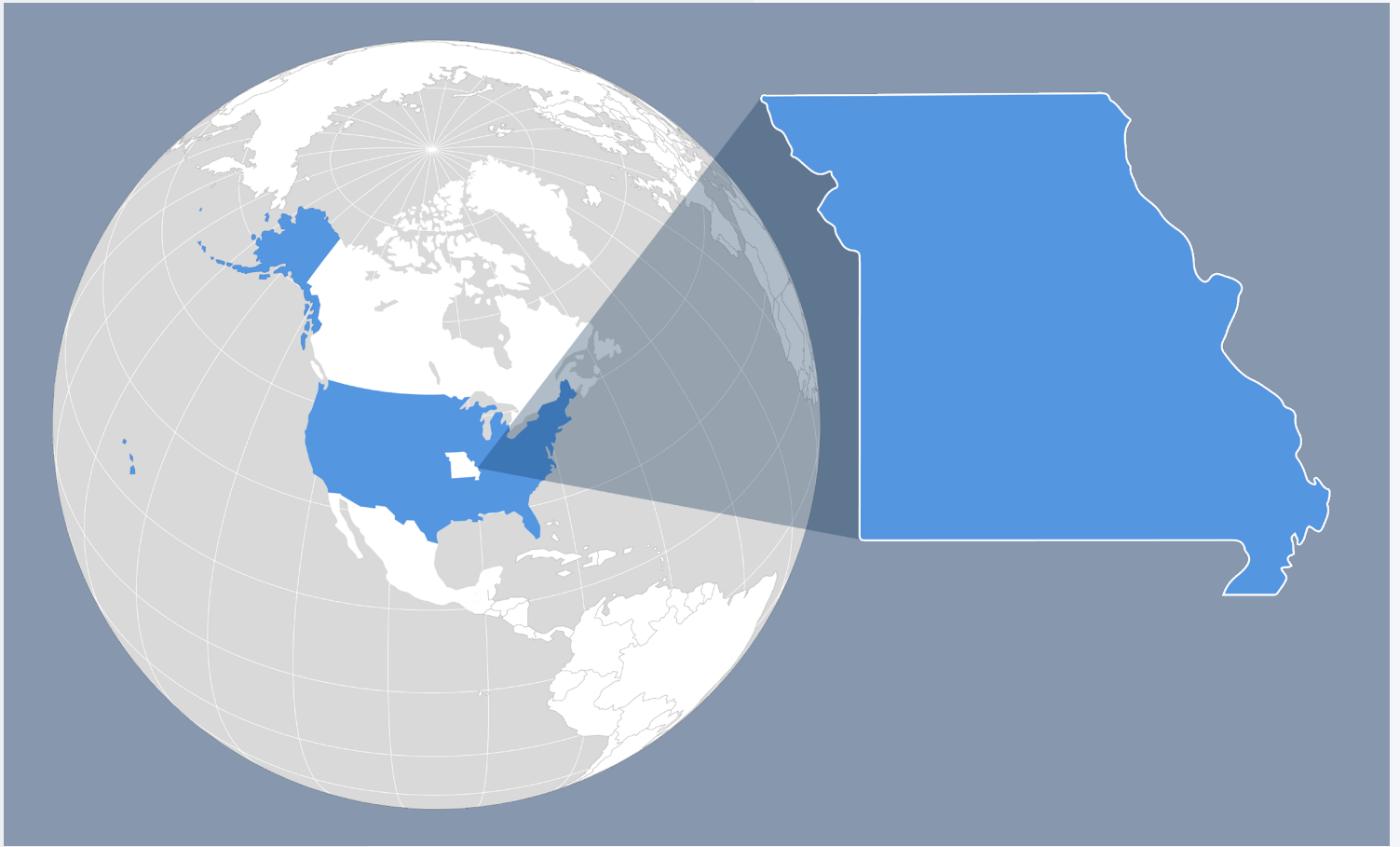


- Multi-year rate cap guarantees
- Dividend/earned premium rider offering return on savings
- Population Health Management tools administered by Higginbotham
- Employee Assistance Program (EAP) Services administered by Magellan Health Services

Plan Name	Deductible		Maximum Out-of-Pocket		Coinsurance	Primary Care/ Specialty Care/Physician Office Visit	Emergency Room/Urgent Care	Rx Benefits (30-Day Retail)
	Per Covered Person	Per Family	Per Covered Person	Per Family				
HDHP 100*	\$6,500	\$13,000	\$6,500	\$13,000	0%	0% after deductible	0% after deductible	0% after deductible
HDHP 100*	\$4,000	\$8,000	\$4,000	\$8,000				
Partners 80 (MERP)**	\$10,000 (\$0)	\$20,000 (\$0)	\$12,000 (\$2,000)	\$24,000 (\$4,000)	20%	\$30 copay	\$300 copay/ \$75 copay	\$0 deductible 10/35/75/100
Partners 70	\$3,000	\$9,000	\$6,500	\$14,750	30%	\$30 copay	\$200 copay/ \$75 copay	\$0 deductible 10/35/75/100
Partners 80	\$2,000	\$6,000	\$5,500	\$13,000	20%			
Partners 90	\$1,250	\$3,750	\$4,500	\$10,250	10%			

This is only a summary of benefits, which is not intended to be comprehensive. The Certificate of Coverage is the governing document for benefit information. *HDHP Plans are HSA Qualified Plans. **MERP benefits are administered by a third-party vendor via a debit card. HRA benefits are illustrated in parentheses; copays are applicable after HRA funds have been exhausted.

Nationwide Provider Network



Coverage

MAM members have access to a wide variety of highly-qualified primary and specialty physicians across the state.

Nationwide Coverage

For members with a nationwide employee base, we partner with two top health networks to help ensure your employees have health care access anywhere they're working.

First Health Network

First Health offers our members a nationwide provider network outside of the primary service area. It's the leading PPO network in the United States, featuring more than 5,000 hospitals, over 90,000 ancillary care facilities and more than one million health care professionals. The network includes service locations covering urban, suburban and rural areas across our 50 states. Members have access to major national hospitals that include the Mayo Clinic, BJC HealthCare, M.D. Anderson and Cleveland Clinic Children's Hospital.

OptumHealth

Through our Centers of Excellence affiliation, our members receive the most exceptional care in the country, while maintaining cost efficiency through improved outcomes for organ and tissue transplantation. All of our health care partners mentioned above are also part of the Centers of Excellence network.

Medical Expense Reimbursement Plan

Nonstop Health™ has been designed to reduce premiums for your company and to greatly reduce upfront out-of-pocket costs for employees.

Employees who choose the medical expense reimbursement plan (MERP) option will have their entire deductible paid for through the Nonstop Health™ program. Employees will receive a Visa card preloaded with either \$10,000 (employee only plans) or \$20,000 (employee + dependent plans) that they can use to pay for their and their family's covered medical expenses* starting January 1, 2024.



A new way to control and reduce employee health insurance costs



White glove customer support



An integrated dashboard for finance, HR and employees



Reduced upfront out-of-pocket expenses



An easy to use Visa card for in-network medical visits



Increased wellbeing and enhanced loyalty because of a competitive health plan offering



Increased productivity due to better access to health care





That might sound too good to be true – but we promise it’s absolutely true! Employees who choose the PPO or EPO option will have their entire deductible paid for through the Nonstop Health™ program.

Plan Name	Deductible (Employee Only/ Employee + Dependents)	Out-of-Pocket Max (Employee Only/ Employee + Dependents)	Inpatient/ Outpatient Coinsurance	Primary Care/ Specialty Care Physician Copay	Emergency Room (ER)/ Urgent Care (UC) Copay	Rx Benefit Copay
MAM HealthSource PPO or EPO + Nonstop Health™	\$10,000/\$20,000 (covered in full with Visa card)	\$12,000/\$24,000 (employee responsibility: \$2,000/\$4,000)	20% after deductible is met	\$30/visit after Visa card funds are exhausted	\$300 Nonstop Health™ ER copay/\$75 UC copay after Visa card funds are exhausted	\$10/\$35/\$75/\$100 after Visa card funds are exhausted

Employee Responsibility

Employees are only responsible for the final \$2,000 or \$4,000 of their out-of-pocket maximum, if it's needed. Those who spend up to or less than their deductible will not have to pay one penny out of pocket for covered medical expenses for the year. Those expenses will be covered in full through the Visa card. Most employees will fall into this category!

Those employees who spend more than the deductible will be responsible for the final \$2,000 or \$4,000, but these costs will be split with the carrier through copays and coinsurance. This means employees would not be responsible to pay those costs in one lump sum, but rather would only pay the copay or coinsurance for a medical service or prescription until they hit their out-of-pocket maximum.

*Services and prescriptions must be covered under the PPO or EPO medical plan and be received at in-network providers and facilities.

Population Health Management

Wellness Beyond Health

A well-designed worksite wellness program does more than improve the health of your employees. It enhances morale, improves productivity, boosts organizational performance, supports recruitment and retention and contains costs—but only if the program is customized to meet the needs and interests of your employees and address the goals of your company. Together, we develop a winning strategy that goes beyond employee health to inspire a high-performing workforce.

Steps Toward Success

Higginbotham's population health management consultants focus on five proven principles:

1. Analyze Culture & Claims

A population health management program goes from good to great when it takes into account the overall well-being of your employees, their current risks and their work environment. A strategic and cultural analysis paired with a claims review helps identify workforce issues and needs that can be targeted with the right solutions. This assessment provides a solid foundation for program development, implementation, facilitation and evaluation.

2. Engage Management

Senior leadership support is crucial to the success of a population health management program. Employers who serve as a role-model and integrate well-being into the business strategy create a culture where healthy lifestyles are valued, promoted and incentivized.

3. Create Awareness

A holistic approach to population health considers your employees' work-life balance, existing resources, potential solutions and focuses on the specific health risk factors affecting them to create awareness. A comprehensive program may focus on many pillars of well-being, including social, mental, physical, spiritual, occupational, intellectual, environmental and financial wellness.

4. Provide Education

A careful evaluation of health improvement solutions is important to keep employees informed and engaged. Resources may be provided through our Population



Health Management department, the community, a medical carrier or a vendor partner to encourage employees to make more informed health care decisions, take steps toward sustainable lifestyle changes and take ownership of their individual well-being.

5. Measure Success

Setting tangible goals and analyzing aggregated data gives us powerful information to see what initiatives are working and what needs attention. Baseline measurements for success may include medical and pharmacy utilization, medical claims costs, employee engagement and participation and overall employee satisfaction.

Employee Assistance Program



MAM **HEALTHSOURCE** partners with Magellan Health to offer expanded resources for member employees. A top-rated behavioral health network, Magellan delivers an Employee Assistance Program (EAP) with individual and organizational services.

These services are designed to improve:



**Employee
productivity**



**Health care
cost mitigation**



**Organizational
health**



**Increased work
satisfaction**



**Workplace risk
mitigation**

For employees and households, Magellan EAP access includes 24/7 phone support, referral directory assistance, phone-based behavioral coaching and personal counseling within Magellan's EAP network.

Management and human resources employees can use EAP for services that include 24/7 phone consultation, web-based library of management and HR resources, workplace training and traumatic event response.

Dental and Vision Benefits

Our simple, accessible benefit plans are designed to help you meet a diversity of needs and help you attract and retain the best talent. And it's more affordable for you and your employees than you might think. See below for the impact dental and vision benefits can have on your employees' out-of-pocket costs.

Dental Services	Employee Cost Without Insurance ⁽¹⁾	Employee Cost With Dental Benefits ⁽²⁾
Two preventative visits ⁽³⁾	\$248	\$0
Filling	\$237	\$61 ⁽⁴⁾
Crown	\$1,166	\$289
Total	\$1,651	\$350

(1) Based on the 80th percentile U&C in zip code 65810 (2) MetLife participating dentist in-network charge for zip code 65810 (3) Preventive visit composed of exam, cleaning and x-ray (4) Includes \$50 deductible

Vision Services	Employee Cost Without Insurance ⁽¹⁾	Employee Cost With Vision Benefits ⁽²⁾
Eye Exams	\$154	\$10
Single Vision Lenses	\$86	\$25
Frames	\$200	\$50
Total	\$446	\$85

(1) Cost estimates for zip code 65810 (2) Costs based on MetLife VSP network discount for zip code 65810

Dental Insurance

MAM members have three plans to choose from, plus an alternate option that includes orthodontia coverage.

Plan features include:

- An annual maximum benefit of \$1,250, \$1,500 or \$1,750
- Protection out-of-network up to the 99th percentile to virtually eliminate balance billing
- Coverage for major procedures such as implants, crowns and dentures
- Optional orthodontia coverage for children up to age 19 (Alt Plan 3)

Dental Plan Options

	Option 1	Option 2	Option 3	Option 3 (Alt)
Maximum Benefit	\$1,250	\$1,500	\$1,750	\$1,750
Deductible	\$0 preventive \$50 basic and major \$150 family maximum	\$0 preventive \$50 basic and major \$150 family maximum	\$0 preventive \$50 basic and major \$150 family maximum	\$0 preventive \$50 basic and major \$150 family maximum
Out-of-Network Reimbursement	99th	99th	99th	99th
Preventive	100%	100%	100%	100%
Basic	80%	90%	90%	90%
Major	50%	50%	60%	60%
Child Orthodontics	Not covered	Not covered	Not covered	50% to \$1,000 lifetime
Monthly Rates	Option 1	Option 2	Option 3	Option 3 (Alt)
Employee	\$25	\$27.50	\$32	\$32
Employee + Spouse	\$53	\$57	\$65	\$65
Employee + Child(ren)	\$67	\$72	\$77	\$85
Family	\$95	\$100	\$110	\$120

This comparison illustrates in-network benefits only and is only a partial description of benefits offered. It does not include all the terms, coverages, exclusions, limitations and conditions of the actual contract language. See the policies and contracts for actual language. This illustration is only to assist in determining what plan(s) you will offer. The plan document will supersede this illustration. This illustration is not a contract and offers no contractual obligation on behalf of MetLife or Higginbotham. Policy forms for your reference will be made available upon request.

Vision Insurance

Plan features include:

- The latest research and industry-leading standard features
- Built-in savings for employees on out-of-pocket costs for eye exams, prescription glasses, sunglasses and contact lenses

	VSP		
Exam Copay	\$10		
Frames & Lenses Copay	\$25		
Lenses (per year)			
Single Vision	\$25 copay		
Bifocal	\$25 copay		
Trifocal	\$25 copay		
Lenticular	\$25 copay		
Frame Allowance	\$150		
Contact Lens Allowance - Elective	\$150		
Contact Lens Allowance - Necessary	Covered in full after eye wear copay		
Contact Fitting & Evaluation	Copay not to exceed \$60		
Frequencies (months)	Exam: 12	Lens: 12	Frame: 24
Additional Discounts	Get 20% off the cost for additional pairs of prescription glasses and non-prescription sunglasses, including lens enhancements. At times, other promotional offers may also be available.		
Safety Eye Care	In-Network		Out-of-Network
Eye Exam	Covered in full		\$8 allowance
Frames	\$65 allowance		\$25 allowance
Lens Corrective lenses with a minimum prescription of ±0.50 diopters	Standard plastic or glass lenses covered in full after materials copay		Single vision: \$35 allowance Bifocal: \$45 allowance Trifocal: \$60 allowance Lenticular: \$90 allowance Progressive: \$45 allowance
Lens Enhancements	Same as standalone vision plan		Applied to the allowance for the applicable corrective lens category
Monthly Rates			
Employee	\$7.60		
Employee + Spouse	\$16.36		
Employee + Child(ren)	\$13.24		
Family	\$22.04		

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Get Started

Elevate your manufacturing business with the Missouri Association of Manufacturers' exclusive group insurance program!

Calling all manufacturers and industry leaders,

Unveil the potential of our tailored exclusive group health insurance plan, Missouri Association of Manufacturers **HEALTHSOURCE**, proudly presented by the Missouri Association of Manufacturers and Higginbotham. Safeguard your workforce with comprehensive coverage and address industry-specific challenges while keeping costs manageable. Plus, benefit from a unique three-year seven percent rate cap, helping ensure stability and forecasting in your insurance rates.

This plan is your gateway to more than just insurance — no matter the structure of your plan — it's a strategic advantage. Attract and retain top talent by demonstrating your commitment to their well-being. Enjoy expert support, connect with fellow manufacturers and access competitive rates that optimize your budget.

Now is the time to strengthen your business and secure your employees' future. Reach out to us at (417) 207-0912 or afay@higginbotham.com to craft a personalized plan with our experienced manufacturing advisors. Seize this opportunity to lead with confidence in the manufacturing arena!

Empower your manufacturing business today through the Missouri Association of Manufacturers and the **HEALTHSOURCE** plan.



HEALTHSOURCE

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Est. 2006

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