



YOUR WELLNESS PLAN











WELLNESS

IS ABOUT MORE THAN JUST YOUR PHYSICAL HEALTH

As a member of the MILA National Health Plan, you are eligible for the Member Assistance Program (MAP) and to receive comprehensive behavioral health benefits. Beginning January 1, 2011, these services will be administered by CIGNA Behavioral Health.

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Life can be challenging, and everyone needs support from time to time. That's why MILA offers the Member Assistance Program (MAP), as well as comprehensive behavioral health benefits.

Your coverage includes:

- round-the-clock telephone access to a personal advocate who is ready to help assess your needs, develop a solution to resolve concerns or direct you to community resources and online tools;
- face-to-face counseling:
- inpatient treatment and outpatient care for mental illness and related issues or substance abuse;
- helpful information on elder care, special needs and gifted children, legal assistance, estate planning, debt and bankruptcy and other important life issues; and
- discounts on a range of health and wellness services and products from participating providers.



Introducing Our New Administrator

In 2011, CIGNA Behavioral Health (CBH) will replace ComPsych as the administrator of our Member Assistance Program (MAP) and behavioral health benefits. CBH was selected for its long-term commitment to service, value, quality and innovation. It has an extensive network of more than 70,000 providers nationwide, all of whom meet licensing requirements, have clinical experience and are credentialed according to stringent National Committee on Quality Assurance (NCQA) standards.

In addition to seamless coordination of your medical, MAP and behavioral health benefits, you'll benefit from many complementary, self-service resources. These include online tools such as interactive coaching, personal health assessments, provider searches and over 1,500 articles in an online health information library. The Healthy Rewards® program also offers discounts on health and wellness products and services.

You Have Options When You Need Help

1 Call the Member Assistance Program

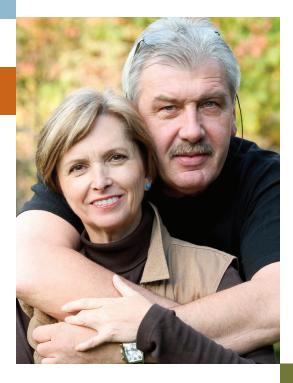
Call the Member Assistance Program (MAP) at 1-800-794-7882 for help with a variety of issues, or to be directed to the best resource. MAP is available 24 hours, 365 days a year. Whether you're looking for a good daycare center, need help locating a community resource or assistance with an addiction or mental health issue, you'll get the answers you need. Up to three free visits are also included with your coverage. If further support is necessary, your care will be coordinated through your behavioral health benefits program.

2 Visit Your Doctor

If your physician is your most trusted resource for health-related issues, you should voice your concerns during a visit. He or she can refer you to another specialist for continuing care. Make sure your doctor knows you prefer a CBH network provider.

3 Gather Information and Self-Refer

A wealth of information is available at www.mycigna.com. You can find specifics on your benefit coverage, take a self-assessment and get suggestions on how to maintain wellness and a good work/life balance. You can also research network providers and select a behavioral health specialist from whom you'd like to receive care. Because your behavioral health benefits do not require precertification to receive outpatient care, you can make an appointment with any CBH network provider you choose.



Healthy Rewards®

CBH also offers discounts through the Healthy Rewards Program. With Healthy Rewards, you'll find it easier to stay healthy and more affordable too — you'll receive up to 60% off a variety of health and wellness products and services.

Visit the Education and Resource Center available at www.mycigna.com to learn more about discounts on services such as:

- Acupuncture
- Chiropractic, Dental, Hearing and Vision Care
- Fitness Club Memberships
- Healthy Roads for Living Mind/Body Program
- Drugstore.com
- Lasik Vision Correction
- Magazine Subscriptions
- Massage Therapy
- Mayo Clinic Books
- Natural Supplements
- Tobacco Cessation Solutions
- Walking Programs
- Weight Management and Nutrition
- Yoga Journal

Your MAP to Wellness

Maintaining a healthy work/life balance is an important part of leading a happy, fulfilling life. But sometimes it may feel like you don't have enough arms or hours in the day. When everyday issues affect your health and wellness, MILA's Member Assistance Program (MAP) can help.

MAP services include counseling, work/life balance and wellness resources. <u>All care is confidential</u>. No one other than you, your treatment provider and CIGNA Behavioral Health knows what treatment you are receiving, or why you are being treated.



MAP can help with many challenges, including:

- Stress at home or work
- Parenting challenges
- Caring for elderly parents
- Relationship concerns
- Health crisis
- Substance abuse
- Depression
- Financial issues
- Gambling
- Death of a loved one

Here's How MAP Works

We understand that it can be hard to address an issue head-on. But by dealing with concerns when they arise, you can often prevent them from becoming more serious. When you need support, you have options:

- Call 1-800-794-7882 to speak with a MAP personal advocate. Whether it's a simple question, a sudden emergency or an ongoing problem, you can reach a compassionate ear and learn about many helpful resources.
- MAP services are free, confidential and available around-the-clock to you, your dependents and all household members.
- Your MAP personal advocate will connect you with the appropriate resource to address your issue. If necessary, up to 3 face-to-face counseling sessions will be arranged at no cost to you for a complete assessment. For issues requiring additional support, your care will continue uninterrupted through your behavioral health benefits.
- You can also visit www.mycigna.com for comprehensive self-help tools and resources to assist with a variety of life issues —
 including finances, dependency, caregiving and wellness.

Costs

MAP services are provided free of charge to you and members of your household. There may be charges associated for the cost of services to which you are referred, but every effort will be made to secure assistance from professionals covered by your behavioral health benefits, or whose help may be of minimal cost.

24/7 Crisis Help

If you are experiencing a crisis, simply call tollfree, anytime, to speak directly with a counselor. No issue is ever too small or too serious.

MAP Telephone Support is available 24/7 by calling 1-800-794-7882. Topics include:

Adoption

State adoption specialist, support groups, private adoption and national adoption organizations

Child Care

Child care centers, family child care homes, in-home care, baby-sitting / nanny agencies and other options

Education

Kindergarten, before- and after-school programs, public schools and undergraduate/ graduate programs

Financial Services

Free 30-minute phone consultation with a qualified specialist on issues such as tax preparation, debt counseling and planning for retirement as well as a 25% discount off of tax preparation services

Identity Theft

Free 60-minute consultation with a fraud specialist, counseling on notification procedures and forms for reporting

Legal

30-minute free consultation, 25% discount on usual fees and referrals to a local provider

Parenting

Child development, sibling rivalry, separation anxiety, sleep and bedtime routines and toilet training

Pet Care

Veterinarians, insurance, pet-sitting resources, obedience training, pet store and pet supply catalogs

Prenatal Care

Birthing methods, nutrition, exercise and diet, child care pre-planning, breastfeeding and formula feeding

Senior Care

Home health agencies, nursing homes, assisted living facilities and continuing care retirement communities

Special Needs

Common childhood illnesses, children with multiple disabilities and developmental delays

Summer Care

Residential camps, day camps, traditional camp programs and specialized camp programs

Online Resources

Visit www.mycigna.com for convenient access to a variety of resources that can help you lead a happier, healthier life.

Take a Self-Assessment

For quick information about yourself or an issue you face, or if you could use perspective on a current problem (but aren't sure you're ready to discuss it with another person), you may find an online self-assessment helpful. This simple, 20-question assessment is designed to help you generally gauge the current state of your behavioral health, and to give you a snapshot of your emotional and social outlook, your stress level and general well-being. It can offer some basic, confidential information for you to consider on your own. It can also help you identify concerns you might like to get more written information about, or that you may wish to discuss with a behavioral health professional.

Get Benefit Information

Review details on available services, copays and eligibility, and download important forms.

Education and Resources

Hundreds of easy-to-read and print articles are available on all kinds of topics. You'll find answers, tips, and facts that are relevant to maintaining a positive work/life balance. Convenient, practical and confidential tools and information are also available on topics such as family and caregiving, health and wellness, daily living and working smarter.

Create Reminder Messages

Create easy-to-use reminders about medication refills, therapy appointments and other events that can be sent to an email address or via text message to help you manage your health and well-being.



Your Behavioral Health Benefits

When you or a covered family member need help with any behavioral health issue, it's important to be able to get help quickly and in total confidence. This is particularly true if the issue involves mental illness or substance abuse. The MILA National Health Plan will support you in seeking dedicated professional care.

Here's How Your Behavioral Health Benefits Work

- You and your dependents covered by a MILA Medical Plan are eligible to receive behavioral health benefits. These benefits are coordinated with your medical coverage and Member Assistance Program (MAP) for seamless care.
- You can visit a network provider without referral, or you may be referred by MAP or your doctor. For MAP referrals, your care will continue uninterrupted and, in most cases, without the need to change providers. Precertification is required for all inpatient care.
- The calendar year deductible applies to medical and behavioral health benefits combined. This amount must be met before the plan will pay benefits.

- There is no limit to outpatient visits scheduled with a network provider. In most cases, you will only be responsible for a copay at each visit.
- Members enrolled in the Premier Plan may choose to seek care out-of-network. However, the coverage for network care is more generous.
- Rest assured that your care remains confidential.
 CIGNA Behavioral Health network practitioners are fully trained on state and federal legislation regarding confidentiality of behavioral health services.

Precertification

Advance approval is required for all non-emergency inpatient care and for specified treatment as outlined in your Summary Plan Description. If you do not receive a required advance approval but the care is subsequently approved as medically necessary, reimbursement will be reduced by 20% of the covered cost. If the care would not have been approved, the charges will not be covered and you will be responsible for their full cost.

To receive precertification, contact CIGNA Behavioral Health by calling 1-800-794-7882.

Claims

When you visit a network provider, claim forms will be filed for you. Premier Plan participants who wish to receive reimbursement for visiting an out-of-network provider will need to complete and sign an out-of-network claim form, attach your itemized receipts and send to:

CIGNA Behavioral Health
 Attn: Claims
 P.O. Box 182223
 Chattanooga, TN 37422-7223

Out-of-network claim forms are available for download at www.mycigna.com or by calling MAP at 1-800-794-7882.

Continuation of Care

If you are currently receiving behavioral health care, you or your provider should contact CIGNA Behavioral Health by calling 1-800-794-7882. During the first 90 days of 2011, care that was certified by ComPsych during 2010 will continue to be covered by MILA while CIGNA attempts to certify your provider in the CIGNA Behavioral Health system. When possible, care will continue with an existing provider.

Emergency Care

In any life-threatening emergency, seek care immediately. If you're uncertain whether your situation is an emergency, contact CIGNA Behavioral Health at 1-800-794-7882. Working together, you'll receive quality care, quickly.

Benefit Highlights — Amount You Pay	Core Plan	Basic Plan	Premier Plan	
	Network Only	Network Only	Network	Out-of-Network
Calendar Year Deductible — This deductible applies to both medical and behavioral health benefits.				
Individual	\$750	\$400	none	\$300
■ Family	\$1,500	\$700	none	\$600
Out-of-Pocket Maximum — This maximum includes your deductible and coinsurance payments for behavioral health benefits only.				
Individual	\$7,500	\$5,000	none	\$6,500
■ Family	\$15,000	not applicable	none	\$13,000
Lifetime Maximum	none	none	none	none
Behavioral Health Provider	\$35 copay per visit	\$15 copay per visit	\$15 copay per visit	40% of R&C after deductible plus excess over R&C
Urgent Care	\$50 copay per visit	\$25 copay per visit	\$25 copay per visit	40% of R&C after deductible plus excess over R&C
Ambulance	40% of R&C after deductible	30% of R&C after deductible	\$0 (paid in full by plan)	40% of R&C after deductible plus excess over R&C
Inpatient Care — Benefit is limited to 30 days per calendar year, but no more than 2 detoxification admissions per lifetime. Precertification required.	40% of R&C after deductible	30% of R&C after deductible	\$0 (paid in full by plan)	40% of R&C after deductible plus excess over R&C
Outpatient Care	40% of R&C after deductible	30% of R&C after deductible	\$0 (paid in full by plan)	40% of R&C after deductible plus excess over R&C

Terms to Know

Calendar Year Deductible: The amount you pay before the plan begins to pay for services.

Copay: The fixed amount you pay to a network provider at the time a service is rendered.

Inpatient Care: Treatment provided in a hospital or similar facility that requires at least one overnight stay.

Network Provider: Providers in the CIGNA Behavioral Health network who are contracted to provide services at a negotiated rate and file claim forms on your behalf. Out-of-Network Provider: Providers who are not contracted with the CIGNA Behavioral Health network. When you visit an out-ofnetwork provider, you will pay the full cost at the point of service and be reimbursed up to the maximum. You will also be responsible for submitting claim forms.

Reasonable and Customary (R&C): The base amount that is treated as standard or the most common charge for a particular service.









About This Brochure

The benefits summarized in this brochure are governed by the official Plan Document. If there is any conflict between the information presented in this brochure and the official Plan Document, the Plan Document will prevail. This brochure does not represent a promise of benefits nor does it represent that you are eligible for benefits. In addition, the Board of Trustees reserves the right, in its sole and absolute discretion, to amend or end the Plan, including MAP and behavioral health benefits, at any time, subject to the terms of the applicable collective bargaining agreements. Finally, the parties to the Master Contract reserve the right to amend or end the Plan, including MAP and behavioral health benefits, at any time.

