Welcome to the summer edition of our Member Insider newsletter. We've been hard at work on some exciting news and changes that we'll be introducing you to in these pages.

Hint: There's good news for our prices in 2019, and a new benefit is available to you right now! See inside for the details.

We're also getting to work on several changes inspired by the recent survey we sent to our members to gain feedback on what we should be prioritizing as a company. We appreciate the fantastic response from 4,185 of our members that have an email on file with us.

While there is positive news in the results, there is always room for improvement. Overall, 58 percent of respondents rated us a 9 or 10 when answering the question, "On a scale of 0 through 10, how likely are you to recommend Common Ground Healthcare Cooperative to a friend or relative?" Our average rating for this question, taking all 4,185 responses into account, was 8.21 out of 10 possible.

But there were also some members that expressed valid concerns about understanding their benefits. As a cooperative with a mission statement that calls out service to members and providing clear information, it's not okay that some of our members don't believe they have the resources they need to understand their benefits. We will be working hard to change this for all our members.

On another note, I'm excited to have been selected by my colleagues to serve as the Chair of your Board of Directors. We have many new faces on the board that you elected. Please visit our website to get to know them at www.cgcares.org/about-us/governance.

I hope you enjoy the newsletter and the remainder of your summer!
The days are getting shorter, Packer football is back on TV and that means the annual open enrollment period for 2019 coverage is fast approaching.

Open enrollment is the one time of year that individuals that purchase their own health insurance policies for themselves and their families can enroll in or change health plans. This year, open enrollment runs from November 1, 2018 to December 15, 2018 for coverage that begins January 1.

So what can you expect for next year's coverage? We have good news. **We are lowering our rates for 2019 by nearly 20% on average.** This is one of the great things about being part of a non-profit cooperative - if we believe we can lower rates we will! Your actual decrease could be lower or higher depending on your plan and where you live. It's important to know:

- If you don't qualify for a tax credit (otherwise known as an APTC), you are likely to see a decrease in your rates. You are also getting older, so some of that decrease will be offset by the adjustment in your age (sorry!).
- If you qualify for a tax credit, you may or may not see a decrease. Tax credits have a significant impact on your share of your monthly premium payment, and they are based on your income AND the price of the second lowest cost silver plan in your area. So if your tax credit goes down in 2019 which you'll find out in late October, your share of what you pay for health insurance could still go up. See the illustration below, which you should be able to see on your monthly invoice.

In 2019, we are reducing premiums by nearly 20% on average.

We have more positive news. We are expanding our service area to serve residents of Waupaca and Waushara Counties in 2019. As we continue to grow larger, we increase our bargaining power which improves our ability to push for positive change in the way your health care is delivered.

Our next newsletter will be full of information you'll want to know about renewing your plan and open enrollment. Until then, we are happy to share this good news with our members.
In speaking with members in our communities, it is apparent that there is growing curiosity about alternatives to comprehensive, fully-licensed and regulated insurance policies (otherwise known today as Obamacare, or ACA policies).

Understandably, the interest is especially strong among members that do not qualify for tax credits that help them afford their insurance policies. Comprehensive ACA policies are often a good deal for individuals who receive tax credits, but they can be unaffordable for those that do not.

Short term policies are not a new idea, they were designed to fill the gap when someone was between jobs or insurance policies. There is renewed interest in them today resulting from the President’s action to extend them to 12 months.

Healthcare ministry plans, or sharing ministries, are a relatively new idea but they are not insurance. They rely on members supporting one another through financial donations and prayer when a fellow member needs care.

The truth is, these plans often have a lower premium but there is a very good reason for this. What we hope to help our members understand is that in the world of health insurance, lower cost always comes with trade-offs. In this case, the trade-offs could get very personal for individuals buying these plans if they don’t have all the facts, while having a detrimental impact on the rest of the market at the same time.

Important: We urge our members that are considering one of these plans to please get the facts before they drop their insurance, because once you drop from your ACA compliant plan, the law prevents you from getting insurance again until an annual open enrollment period rolls around.

Proceed with Care on Short-Term and Ministry Plans

- **Short-term and health sharing plans may not cover benefits** such as prescription drugs, mental health care, maternity care or preventive services. It's important to understand what is covered in these plans before you buy them, because they can legally not cover some of the basic health needs.

- **Neither healthcare ministry plans nor short term medical plans are required to cover pre-existing conditions**, even if they haven't been diagnosed yet. Prescriptions or medical services related to a pre-existing condition will typically not be covered, even if you didn't seek treatment for the condition (or have symptoms) prior to coverage.

- **Short term and healthcare ministry plans don't have to renew your coverage** should you get sick or injured while you are covered.

- **Healthcare ministry plans are not health insurance plans**. They are not regulated by departments of insurance and you have no consumer protections in place in the event you were to have an issue with the payment of your medical bills.

- **Your exposure to really high dollar medical charges are much greater** in short-term and ministry plans. ACA-compliant plans are required to limit your maximum out of pocket, and are prohibited from placing annual or lifetime limits on your coverage. Short-term and ministry plans are not.

- **There are no regulations in place that will cover your medical bills** should a health sharing ministry fold while you are a participant.

Read More on our Blog
www.cgc cares.org/blog
Introducing Your 24/7 Online Clinic.

Members, we have great news! You now have access to an online clinic called virtuwell as part of your benefit plan.

We've brought this service to you with the hope that it will save you money and ease your mind when it comes to the predictability of your health costs.

Even better, up to 10 virtuwell e-visits are covered at NO COST to members in most of our plans. Health Savings Account (HSA) plans are the only exception – the law requires HSA plan members to meet their deductibles before getting other benefits. If you are in an HSA plan, you will only pay $49 for your virtuwell visits until your deductible is met.

It's a lot like going to your doctor's office, except there are no appointments, no hidden costs and there's a money back guarantee. All you need to do is access to the Internet, visit www.virtuwell.com and click the "Get Started" button.

Virtuwell will then ask you to select the category that best describes your concern and take you through an interview much like you would experience in a doctor's office. Once you answer all the questions, it will ask you for your CGHC member ID number. Fill in the information, then hit submit.

Virtuwell's Board Certified Nurse Practitioners will review your information and send you a treatment plan within 30 minutes of hitting the submit button. If the nurse practitioner needs more information, he or she will reach out you. You can also request a free follow-up call with the nurse practitioner as well.

To find out more, visit:

www.cgcares.org/virtuwell

Don't miss exciting announcements like this!

Facebook.com/CommonGroundHealthcare  @CGHealthcare
virtuwell treats more than 60 conditions

Sinus, Cough & Allergy
- Bronchitis
- Common Cold
- Laryngitis
- Pet Allergies
- Seasonal Allergies
- Sinus Infection
- Upper Respiratory Infection

Skin & Rash
- Acne (Age 12+)
- Athlete’s Foot
- Canker Sore
- Cellulitis
- Chicken Pox
- Cold Sore
- Deer Tick Bites
- Diaper Rash
- Eczema
- Fifth Disease
- First/Second Degree Burns
- Folliculitis
- Hives
- Insect Bites
- Impetigo
- Ingrown Nail
- Jock Itch
- Lice
- Nail Infection
- Pityriasis Rosea
- Rash
- Ringworm
- Rosacea
- Scabies
- Seborrheic Dermatitis
- Shingles
- Sunburn
- Warts
- And more

Eye & Ear
- Ear Infection (Age 5+)
- Ear Pain (Age 2+)
- Eustachian Tube Dysfunction
- Pink Eye
- Stye
- Swimmer’s Ear

Women’s Health
- Bacterial Vaginosis (Age 26+)
- Birth Control (Ages 18-34)
- Bladder Infection (UTI)
- Breast Infection (Mastitis)
- Clogged Duct
- Emergency Contraception (Age 18+)
- Genital Herpes
- Yeast Infection

Sexual Health
- Birth Control (Ages 18-34)
- Chlamydia
- Emergency Contraception (Age 18+)
- Genital Herpes
- Gonorrhea
- Trichomoniasis

Kid’s Health
- We treat kids ages 2+ for most conditions.

Flu
- Influenza (Seasonal)
Recently, Common Ground Healthcare Cooperative conducted a survey of its members that have an email address on file with us. We asked two questions. The first question was, on a scale of 0-10, how likely is it that you would recommend us to a friend or relative?

The Results:

Responses: 4185

Q1 On a scale of 0 to 10, how likely are you to recommend Common Ground Healthcare Cooperative to a friend or relative?

Average Score: 8.21

The second question was, “what is one thing we could do to improve our score?” There was a wide array of responses. Of course, a lot of members want lower prices and lower costs, and we are working to do everything we can on that front. But there were several members that expressed frustration at getting through to member services or finding a provider. As a member-driven cooperative, that should never happen. Changing this before we do this survey again next year is a high priority for us.
A main theme in comments made in our survey is that you want information at your fingertips to help yourself when it comes to understanding benefits and keeping up with your payments. Member services is an important channel that you should always be able to rely on, but we have other resources such as this newsletter, your plan materials that are sent upon sign-up, our website, occasional emails, member meetings, Facebook and our blogs that are designed to help you save money. We use all channels to deliver useful information you can use. Over the course of the next year, we will be stepping up our game on education and communication. Take part and connect with us! See below on how you can do that.

Some of the concerns raised in our survey were misconceptions we'd like to clarify below.

**YES! You can pay an entire year of premium at once.**
Some of our members expressed frustration that they were making small monthly payments to keep their health insurance payments up to date. If you want to pay for the remainder of your 2018 premium, simply send us a check for the full amount to Box 78553, Milwaukee, WI 53278-8553.

**YES! You can request to be transferred "up the ladder" if you are unhappy when you call.**
If you are not happy with the service you receive while you are speaking with one of our member services representatives, you can and should ask to speak with the manager. In this cooperative, YOU are the boss. You can even speak with the CEO if you’d like. Our representatives are trained to make this happen. Or, send an email instead to CEO@commongroundhealthcare.org. We assure you that Cathy Mahaffey, our CEO, reads every email sent to this inbox and takes them very seriously.

**YES! You can get a 90 day fill on certain prescriptions.**
CGHC offers a mail order benefit on certain maintenance medications. If you are interested in signing up for mail order, call 855.577.6545 to find out if the medication you are taking is eligible. Then you can get a three-month’s supply for only two copays.

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**Member Education Resources**

**WEBSITE RESOURCES**
Your benefit information, in one place: [www.cgcares.org/what-you-need](http://www.cgcares.org/what-you-need)
Keep up with the latest on health reform: [www.cgcares.org/action](http://www.cgcares.org/action)

**THE TORCH BLOG**
Sign up to receive this blog delivered right to your inbox, and don’t miss another money saving tip.
[www.cgcares.org/blog](http://www.cgcares.org/blog)

**FACEBOOK**
Follow us to ensure you don’t miss any announcements from CGHC
Facebook.com/CommonGroundHealthcare