



Dear Members,

Happy Spring! I don't know about you, but the increased daylight and warmer temperatures in Spring make a huge difference in my mood and energy level. At CGHC, we strive to help our members embrace a healthier lifestyle, which enhances well-being and contributes to more manageable healthcare costs.

Let Spring inspire you to revitalize your health and well-being. Here are a few tips for you to consider:

1. Make sure you have a primary care doctor.

A primary care provider (PCP) serves as the central point of contact for your healthcare needs. They get to know you and your health history, and they can help coordinate your care over time. They can also provide guidance on nutrition, exercise, stress management and other factors that contribute to your overall well-being. Do you need help finding a PCP? Use our online Find-a-Doctor search tool or call our Member Services team.

2. Schedule your preventive care services.

What's the old saying? An ounce of prevention is worth a pound of cure. We've seen firsthand the additional costs and severity of treatment patients incur when they put off important preventive care services. We encourage you to make your health a priority and schedule your annual check-up today. Then talk with your doctor about preventive care screenings to detect potential issues early and vaccinations to reduce your risk for getting certain diseases. If you ever need to know what's covered, call our Member Services team.

3. Consider participating in CGHC's Active & Fit Direct Program.

The Active & Fit Direct™ program is a flexible, comprehensive low-cost fitness program offered through American Specialty Health Fitness Inc. The program includes gym memberships, on-demand workout videos and one-on-one well-being coaching. To learn more about Active & Fit Direct, go to the My Health Portal at: <https://commongroundhealthcare.org/my-health-portal/>.

We share our members' concerns about rising healthcare costs and rising out-of-pocket expenses. We also recognize that we must all do our part to maintain optimal health and well-being. Spring gives us a great opportunity to embark on a journey to improve our health and well-being.

Stay well!

Tonni Larson

Message from Cathy



Cathy Mahaffey, CEO of CGHC

As many of you know from reading this column over the past several years, I invite members to write to me with any questions or concerns they may have. I personally read and answer each member's email, and it's my pleasure to do so.

A CGHC member recently wrote to me asking how the Affordable Care Act (ACA), which is also known as Obamacare, has helped consumers. The member noted that premiums continue to rise, which made them question the benefits of the ACA. I felt this was a great question and after we corresponded the member encouraged me to share this information with our entire membership.

The ACA was signed into law on March 23, 2010, and I find it is timely to speak about its impact given the ACA is celebrating its 14-year anniversary. I have been in the health insurance industry my entire career and I remember the days prior to the ACA. Back then it was difficult, if not impossible, for some individuals and families to obtain health insurance. If you read any of my media interviews, you will note that I often refer to the ACA as an imperfect law. While it has done many good things for individuals and families, it has fallen short in other areas.

Here are some of the good outcomes I have seen from the ACA:

- **Protections for pre-existing conditions**

Before the ACA, individuals could have their coverage denied, have certain conditions (or body parts) excluded from coverage, or have extremely high premiums charged to them because of existing medical conditions. I can only hope that we never go back to those days. It was heartbreaking to tell a consumer that their application for insurance was denied because they have a medical condition.

- **Coverage for essential health benefits**

The ACA requires all health plans to cover a defined set of benefits. These are benefits that most people expect should be covered by their health plan such as preventive care, prescription drugs, and mental health services. Prior to the ACA, this wasn't the case. Individual plans often didn't cover some of these basic services or the coverage was extremely limited. With the significant costs of prescription drugs today, can you imagine those life-saving drugs that individuals count on to treat their condition might not be covered at all?

- **Financial assistance**

The ACA provides financial subsidies to help individuals and families afford health insurance premiums. It also provides subsidies to lower-income families to help reduce out-of-pocket costs. Please note that premium subsidies were enhanced even further as part of the American Rescue Plan. We will advocate on behalf of our members that these enhanced subsidies be extended beyond the 2025 expiration date.

Combined, these positive aspects of the ACA have improved access to health insurance and helped millions of individuals and families. We know, however, that the ACA has not done enough to address the rising costs of medical care and pharmaceuticals. We will keep advocating for our members on this front. As a non-profit, members-first health plan, our goals are centrally aligned with those of our members.

We continue to thank you for being a member of CGHC!

Cathy

Do you have questions or feedback you want to share? Email me at AskTheCEO@CommonGroundHealthcare.org.

Stop Colorectal Cancer Before it Starts

Getting screened for colorectal cancer (cancer of the colon or rectum) may not sound pleasant, but it can actually prevent one of the most common cancers among men and women. Regular, on-time screening tests can find polyps (abnormal growths) in the colon and rectum before they turn into cancer. Colorectal polyps and cancer don't always cause symptoms. That is why getting screened regularly for this cancer is so important. Routine screening begins at age 45 and continues through age 75.

If you're 45 or older, or younger than age 45 and think you may be at high risk of getting colorectal cancer, talk to your doctor about screening options. They include colonoscopy, sigmoidoscopy, fecal occult blood test (FOBT) and stool tests such as Cologuard®. It's a conversation that could save your life!

All Common Ground Healthcare Cooperative (CGHC) plans include coverage for preventive care and diagnostic care as defined in your Certificate of Coverage (COC). You can find your health plan's COC on our website:

<https://commongroundhealthcare.org/coverage-details/>.

Put your health first and use the preventive care benefits included in your CGHC plan to help maintain optimal health.

Learn more about colorectal cancer screening on the U.S. Centers for Disease Control and Prevention (CDC) website at:

https://www.cdc.gov/cancer/colorectal/basic_info/screening/.

Want to check how much you know about Colorectal Cancer?

For example, do you know which of these are symptoms of colorectal cancer?

- Blood in or on your stool (bowel movement).
- Abdominal pain, aches, or cramps that don't go away.
- Weight loss and you don't know why.
- All of these.
- None of these.

Learn the correct answer by taking the Quick Quiz on the CDC website at:

<https://www.cdc.gov/cancer/colorectal/quiz/index.htm/>.



Share Your Feedback – QHPEE Survey

Did you receive an invitation to complete the Qualified Health Plan Enrollee Experience (QHPEE) survey from Press Ganey? If so, please give us a few minutes of your time to tell us about your experience as a member of a CGHC health plan.

Why does the QHPEE survey matter?

All insurers that offer health plans on the Health Insurance Marketplace® (Exchange) are required to conduct the annual QHPEE survey – the results of which are displayed on the Exchange website, Healthcare.gov. This information allows individuals to assess enrollee experience among comparable health plans.

When and how is the survey sent?

CGHC uses Press Ganey, a vendor approved by the Department of Health and Human Services (HHS), to administer this survey on our behalf. In February, Press Ganey sent an email with a link to the online survey and/or mailed a printed survey via U.S. Postal Service to a sample of CGHC members. A postage paid return envelope was provided for those who received the printed survey. Any CGHC adult member with an On-Exchange health plan who was continuously enrolled in 2023 could have been invited to complete the survey. Participants are randomly selected. Please check your inbox, junk, and/or deleted folder(s) for an email from Press Ganey regarding the QHPEE survey.

Your feedback always matters at CGHC. We want to hear about your experiences with us! Thank you in advance for participating.

Special Meeting Notice

The Common Ground Healthcare Cooperative Board of Directors is calling a special meeting of members. The Special Meeting will take place upon the conclusion of the Annual Meeting.

Meeting Information

Tuesday, April 23, 2024 - 6:15 p.m.
Oneida Hotel
2040 Airport Dr
Green Bay, WI 54313

Agenda

The Common Ground Healthcare Cooperative (CGHC) Board of Directors approved the execution of a Letter of Intent to pursue an affiliation with CareSource of Ohio, a 501(c)3 nonprofit nationally recognized managed care organization. The affiliation with CareSource will enable CGHC to further its mission to serve individuals and families in Wisconsin and will strengthen CGHC's service to its members by using CareSource's best-in-class operations. The affiliation will provide CGHC with financial support and therefore contribute to CGHC's long-term sustainability.

CGHC members will be asked to vote on a resolution to approve the Affiliation Agreement with CareSource. Members will also be asked to approve amendments to the Cooperative's Articles of Incorporation and Bylaws which include designation of CareSource as the sole voting member to allow for the affiliation to take effect. If approved by the members, the Affiliation Agreement and amendments to the Articles of Incorporation and Bylaws would take effect after all contingencies are met, including regulatory approval. The Cooperative is targeting January 1, 2025 for the effective date.

RSVP

Please register for the special meeting by April 15, 2024 by emailing RSVP@commongroundhealthcare.org or by calling 1-877-514-2442.

A Guide to Preventive Care

You might think going to the doctor is something you do only when you're feeling sick or need help for a specific condition. But regular checkups are one of the best things you can do to stay healthy and catch issues early. Preventive healthcare often starts with your annual checkup or yearly physical. This is a critical healthcare visit for men, women, and children alike. And since it is covered by every CGHC health plan, there's no good reason to skip this important benefit.

What procedures are considered preventive care?

According to the [U.S. Department of Health and Human Services](https://www.hhs.gov/), health plans must cover a certain set of preventive services at no cost to you. Depending on your age, you may have access to services including:

- Blood pressure, diabetes, and cholesterol tests.
- Many cancer screenings, including mammograms, pap smear, Cologuard® and colonoscopies.
- Opportunities to help guide you through changes related to smoking, losing weight, eating healthfully, treating depression, and reducing alcohol use.
- Screenings and preventions related to sexually transmitted diseases.
- Regular well-baby and well-child visits.
- Routine vaccinations against common illnesses for:
 - Children including the flu or diseases such as measles, polio, or meningitis.
 - Adults such as Tetanus and pneumonia.



Learn more on the Coverage Details page of our website at: <https://commongroundhealthcare.org/coverage-details/>. There you can find a complete list of preventive care services covered by your plan. Your Certificate of Coverage, which is also available on this page, contains complete details about your health plan benefits.

A regular schedule of preventive services combined with healthy lifestyle decisions will give you the best chance to live a long and healthy life by:

- Actively preventing chronic illness and disease.
- Helping you maintain your current level of health.
- Improving health outcomes and preventing further complications.

Preventive care is limited to specific services, screening tests, and medications received from your in-network provider. So be sure your provider knows you're coming in for an annual wellness check when you make the appointment. Then when you're at the doctor's office, remind the staff you want the visit billed as preventive care.

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