

Effective Date: 010125

Performance Guarantee: HSABLUES

10/18/2024 10:27 AM

Group

Group Number	Group Name	Section
190735	University of Toledo	005, 007, 009, 011,
	-	103, 105, 107, 203,
		205, 207

Signature

I have reviewed the entire Group Benefit Summary Report and it is approved with no changes:

Don Poulson

Print Name

Signature

Associate Director Total Rewards

10/21/2024

Grandfathered Status

I confirm this plan is Grandfathered as defined by the Affordable Care Act (45 CFR 147.140 Preservation of right to maintain existing coverage
Signature

Or, initial if not applicable_____

Quote Name: 190735,010125,HSABLUES

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Subcategory	Variable	Tier 1	Tier 2	Tier 3
Surgical Services - Surgery Facility	(except for removal of all extractions of teeth, which are not covered for all	95% after deductible	85% after deductible	70% after deductible
	places of service)(except for penile implants			
	which are not covered for all places of service)			

Quote Name: 190735,010125,HSABLUES

Drug

Subcategory	Variable	
General Information		
Product		Realtime Processing - External PBMs
Pharmacy Benefits Manager (PBM)		Cerpass RX

Benefits will be administered by Medical Mutual of Ohio. Benefits will be determined based on Medical Mutual's medical and administrative policies and procedures. This document is only a partial listing of benefits. This is not a contract of insurance. Only an officer of Medical Mutual may agree, orally or in writing, to change the benefits listed here. The contract or certificate will contain the complete listing of covered services. In nce will always be