



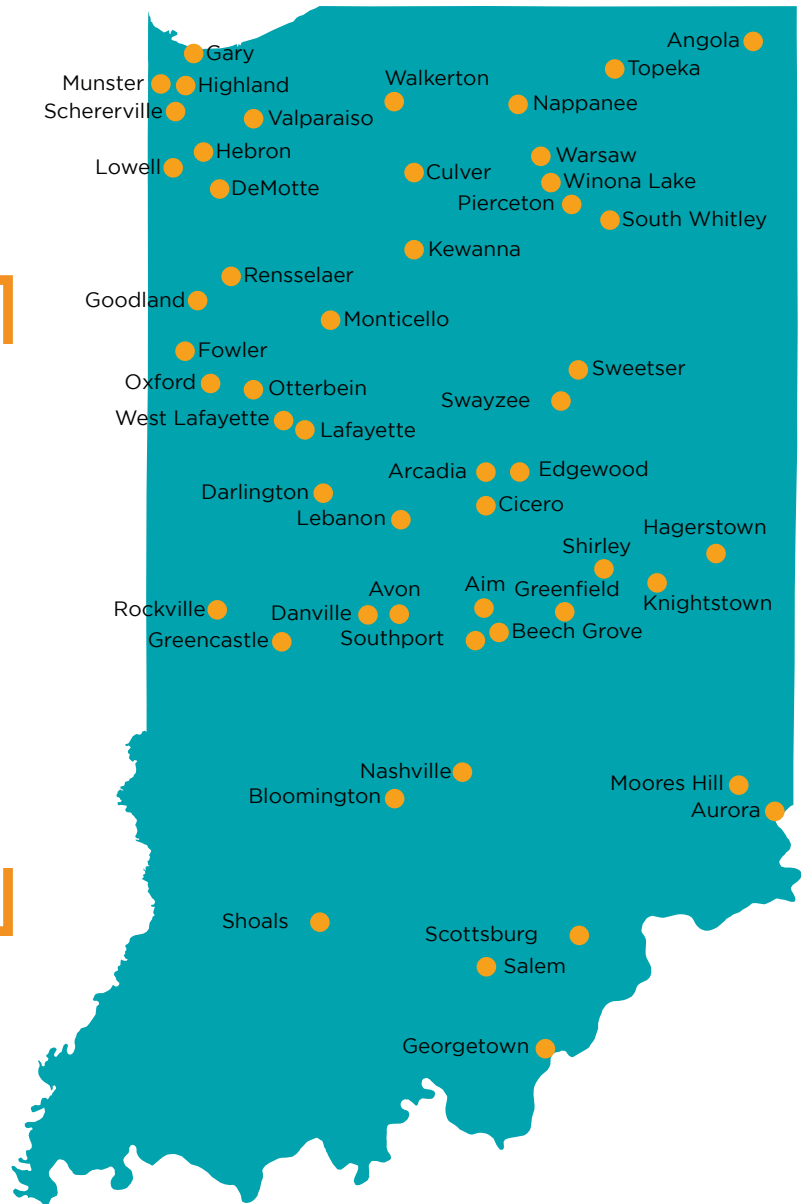
aim medical *trust*

Your Partner for Municipal Health



The Aim Medical Trust is
dedicated to improving the
well-being and quality of life of
Indiana municipal employees.

51
Municipalities
Ranging from
2 - 600+
Participant
Employees



Contact us to learn more about how the Aim Medical Trust can help you accelerate your municipality!



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The **Aim Medical Trust** (Trust) provides cities and towns across Indiana with a fiscally responsible approach to healthcare. The Trust pools the health insurance of over 4,000 employees to give member communities long-term stability in premiums with quality health plans for participant employees.

The Trust is part of Aim, Accelerate Indiana Municipalities, an organization you already know and trust. This member program is motivated by our members' desire to control and stabilize their healthcare costs. The initiative to develop a medical insurance pooling program began in early 2009, with four municipalities joining the Trust when it launched on January 1, 2010. Since then, forty-five additional cities and towns have joined.

The Trust offers a variety of competitive plans through UnitedHealthcare, a recognized leader in the insurance industry. This self-funded program is owned by the participating members, managed by Aim, governed by its member-controlled Board of Trustees, and regulated by the Indiana Department of Insurance.

INSURANCE PLANS AND SERVICES

The insurance plans provided by the Trust range from traditional PPO plans with low deductibles to high-deductible, consumer driven HSA health plans. The Trust has options for both large and small employers. UnitedHealthcare has assembled a nationwide provider network of physicians and hospitals that's second to none. UnitedHealthcare also provides the plan administration services, claims management, pharmacy benefits, COBRA administration and other services for our members.

Municipal members also have the option to purchase dental, vision, life, and disability coverage through the Trust at competitive rates.

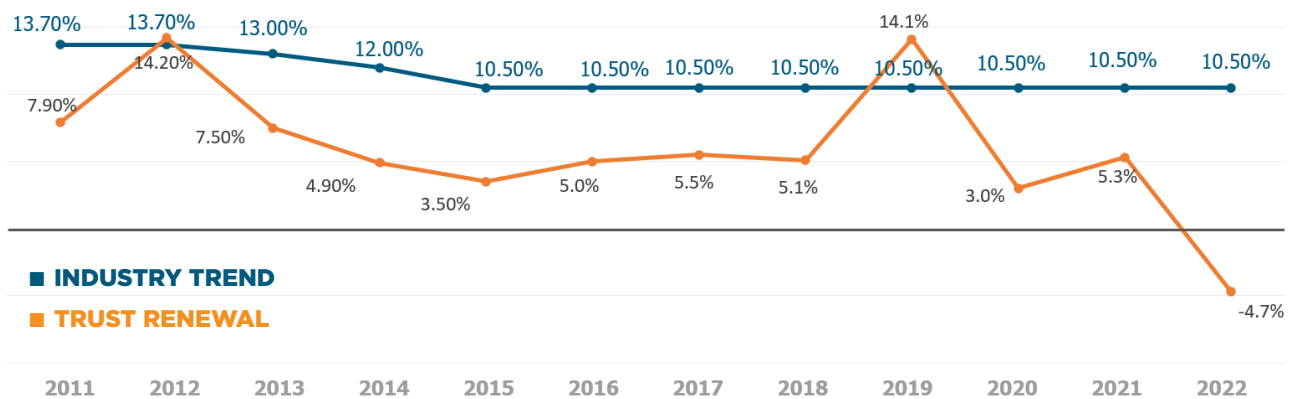
The Trust lightens the Human Resources load with professional support including:

- Direct access to a dedicated client service team
- Patient Protection and Affordable Care Act compliance and legal counsel
- Enrollment and eligibility management with one monthly premium invoice
- Benefits planning assistance and benefits consulting services
- Employee education along with annual open enrollment management
- Claims administration and claims resolution services
- Disease management programs
- Wellness incentives and program development
- Mental health support and services
- COBRA Administration



RESPONSIBLE FISCAL APPROACH

The Trust takes a fiscally responsible approach to healthcare that accumulates reserves over time. These reserves are used to offset annual premium renewals, improve current benefits, or provide new member benefits. Premium contributions from member communities fund 100 percent of the maximum claim liability as well as the total fixed costs to operate and insure the program. As membership grows, fixed costs decrease, claims are more predictable with less volatility, and excess reserves are returned to members by offsetting future premiums. In January 2021, over \$6 million of unused premiums were returned to members through a premium holiday. ***The annual renewals have been below medical trend for 10 out of 12 years!***



GOVERNANCE

The Trust is governed by a Board of Trustees representing member municipalities. The Board oversees the Trust's performance on behalf of its membership, and do not take their fiduciary responsibility lightly. They make every effort to protect the financial integrity of the Trust while offering competitive plan designs and excellent customer service for the benefit of the participating municipalities. The board is made up of Mayors, Clerk-Treasurers, Controllers, and HR Directors. The diversity represented on the Board is paramount to the Trust's success.

INDIANA DEPARTMENT OF INSURANCE

The Trust is regulated by the Indiana Department of Insurance (IDOI) and certified as a Multiple Employer Welfare Arrangement (MEWA). The IDOI protects the member municipalities and plan participants by mandating the funding mechanism and requiring minimum essential benefits. A MEWA is defined by Indiana Code 27-1-34-1. Multiple employers pooling together are often better positioned to provide competitive benefit packages due to the cost savings achieved from economies of scale and claims predictability of larger groups. The IDOI requires MEWA plans to be fully funded to the member group's maximum claim liability plus all operating costs. Both specific stop-loss and aggregate stop-loss reinsurance are required to protect the insurance program against unusual, multiple or major losses. The Trust files the plan summary documents, the entity's financial statements, audit reports, reinsurance contracts, and proof of fiduciary and general liability insurance to the IDOI on a quarterly and annual basis.

2022 PPO MEDICAL AND PRESCRIPTION PLAN OPTIONS

Plan Highlights	\$500 PPO Plan 1		\$750 PPO Plan 2		\$1,000 PPO Plan 3		\$1,000 PPO Prim Adv Plan 4		\$1,500 PPO Plan 5	
UnitedHealthcare Choice Plus	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Deductible										
Individual	\$500	\$1,000	\$750	\$1,500	\$1,000	\$2,000	\$1,000	\$5,000	\$1,500	\$3,000
Family	\$1,000	\$2,000	\$1,500	\$3,000	\$2,000	\$4,000	\$2,000	\$10,000	\$3,000	\$6,000
Coinsurance (applied after deductible is met)										
Paid by Insurance	80%	60%	80%	60%	80%	60%	50%	50%	80%	60%
Paid by Individual	20%	40%	20%	40%	20%	40%	50%	50%	20%	40%
Out-of-Pocket Maximum (includes deductible, medical copays, and prescription copays)										
Individual	\$3,000	\$6,000	\$3,250	\$6,500	\$3,500	\$7,000	\$6,500	\$10,000	\$4,000	\$8,000
Family	\$6,000	\$12,000	\$6,500	\$13,000	\$7,000	\$14,000	\$13,000	\$20,000	\$8,000	\$16,000
Co-Payments (paid by individual)										
PCP Office Visit (PP/Non-PP)	\$15/\$25	40%*	\$15/\$25	40%*	\$15/\$25	40%*	\$0	50%*	\$15/\$30	40%*
SCP Office Visit (PP/Non-PP)	\$30/\$50	40%*	\$30/\$50	40%*	\$30/\$50	40%*	\$100	50%*	\$30/\$60	40%*
Virtual Visit	\$0	n/a	\$0	n/a	\$0	n/a	\$0	n/a	\$0	n/a
Urgent Care	\$75	40%*	\$75	40%*	\$75	40%*	\$50	50%*	\$75	40%*
Emergency Room	\$250	\$250	\$250	\$250	\$250	\$250	50%*	50%*	\$250	\$250
Inpatient Hospital	20%*	40%*	20%*	40%*	20%*	40%*	50%*	50%*	20%*	40%*
Wellness Benefit										
	No Charge	Not Covered	No Charge	Not Covered	No Charge	Not Covered	No Charge	Not Covered	No Charge	Not Covered
Prescriptions (paid by individual)										
Tier 1	\$10	\$10	\$10	\$10	\$15	\$15	\$5	\$5	\$20	\$20
Tier 2	\$30	\$30	\$30	\$30	\$30	\$30	\$50	\$50	\$40	\$40
Tier 3	\$40	\$40	\$50	\$50	\$50	\$50	\$100	\$100	\$60	\$60
Specialty	\$100	n/a	\$100	n/a	\$100	n/a	\$250	n/a	\$100	n/a
Lifetime maximum is unlimited for all plan options.										

Notes:

- *After deductible
- Medical and prescription co-payments accumulate towards the out-of-pocket maximum.
- Premium rates are calculated for new municipal members based upon underwriting requirements set forth by the Indiana Department of Insurance.
- PP - Premium Provider Designation
- Non-PP - Non-Premium Provider Designation

2022 HDHP MEDICAL AND PRESCRIPTION PLAN OPTIONS

Plan Highlights	\$2,800 HDHP Plan 7		\$2,800 HDHP Plan 8		\$3,000 HDHP Plan 9		\$3,500 HDHP Plan 10	
UnitedHealthcare Choice Plus	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Deductible								
Individual	\$2,800	\$5,600	\$2,800	\$5,600	\$3,000	\$6,000	\$3,500	\$7,000
Family	\$5,600	\$11,200	\$5,600	\$11,200	\$6,000	\$12,000	\$7,000	\$14,000
Coinsurance (applied after deductible is met)								
Paid by Insurance	100%	80%	80%	60%	80%	60%	80%	60%
Paid by Individual	0%	20%	20%	40%	20%	40%	20%	40%
Out-of-Pocket Maximum (includes deductible, medical copays, and prescription copays)								
Individual	\$2,800	\$8,450	\$4,350	\$8,450	\$6,000	\$12,000	\$4,750	\$9,250
Family	\$5,600	\$16,900	\$8,700	\$16,900	\$12,000	\$24,000	\$9,500	\$18,500
Co-Payments (paid by individual)								
PCP Office Visit (PP/Non-PP)	0%*	20%*	10%*/ 20%*	40%*	10%*/ 20%*	40%*	10%*/ 20%*	40%*
SCP Office Visit (PP/Non-PP)	0%*	20%*	10%*/ 20%*	40%*	10%*/ 20%*	40%*	10%*/ 20%*	40%*
Virtual Visit	0%*	n/a	20%*	n/a	20%*	n/a	20%*	n/a
Urgent Care	0%*	20%*	20%*	40%*	20%*	40%*	20%*	40%*
Emergency Room	0%*	0%*	20%*	20%*	20%*	20%*	20%*	20%*
Inpatient Hospital	0%*	20%*	20%*	40%*	20%*	40%*	20%*	40%*
Wellness Benefit								
	No Charge	Not Covered	No Charge	Not Covered	No Charge	Not Covered	No Charge	Not Covered
Prescriptions (paid by individual)								
Tier 1	0%*	0%*	20%*	20%*	20%*	20%*	20%*	20%*
Tier 2	0%*	0%*	20%*	20%*	20%*	20%*	20%*	20%*
Tier 3	0%*	0%*	20%*	20%*	20%*	20%*	20%*	20%*
Specialty	0%*	n/a	20%*	n/a	20%*	n/a	20%*	n/a
Lifetime maximum is unlimited for all plan options.								

Notes:

- *After deductible
- Medical and prescription co-payments accumulate towards the out-of-pocket maximum.
- Premium rates are calculated for new municipal

members based upon underwriting requirements set forth by the Indiana Department of Insurance.

- PP - Premium Provider Designation
- Non-PP - Non-Premium Provider Designation

2022 HDHP MEDICAL AND PRESCRIPTION PLAN OPTIONS

Plan Highlights	\$4,000 HDHP Plan 11		\$6,500 HDHP Plan 12		\$5,000 HDHP Plan 13	
UnitedHealthcare Choice Plus	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Deductible						
Individual	\$4,000	\$8,000	\$6,500	\$13,000	\$5,000	\$10,000
Family	\$8,000	\$16,000	\$13,000	\$26,000	\$10,000	\$20,000
Coinsurance (applied after deductible is met)						
Paid by Insurance	80%	60%	100%	60%	100%	80%
Paid by Individual	20%	40%	0%	40%	0%	20%
Out-of-Pocket Maximum (includes deductible, medical copays, and prescription copays)						
Individual	\$6,250	\$12,500	\$6,500	\$16,250	\$6,250	\$12,250
Family	\$12,500	\$25,000	\$13,000	\$32,500	\$12,500	\$24,500
Co-Payments (paid by individual)						
PCP Office Visit (PP/Non-PP)	10%*/ 20%*	40%*	0%*	40%*	0%*	20%*
SCP Office Visit (PP/Non-PP)	10%*/ 20%*	40%*	0%*	40%*	0%*	20%*
Virtual Visit	10%*	n/a	0%*	n/a	0%*	n/a
Urgent Care	20%*	40%*	0%*	40%*	0%*	20%*
Emergency Room	20%*	20%*	0%*	0%*	0%*	0%*
Inpatient Hospital	20%*	40%*	0%*	40%*	0%*	20%*
Wellness Benefit						
	No Charge	Not Covered	No Charge	Not Covered	No Charge	Not Covered
Prescriptions (paid by individual)						
Tier 1	20%*	20%*	0%*	0%*	\$10	\$10
Tier 2	20%*	20%*	0%*	0%*	\$30	\$30
Tier 3	20%*	20%*	0%*	0%*	\$60	\$60
Specialty	20%*	n/a	0%*	n/a	\$100	n/a
Lifetime maximum is unlimited for all plan options.						

Notes:

- *After deductible
- Medical and prescription co-payments accumulate towards the out-of-pocket maximum.
- Premium rates are calculated for new municipal members based upon underwriting requirements set forth by the Indiana Department of Insurance.
- PP - Premium Provider Designation
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OPTIONAL ANCILLARY BENEFITS

The Aim Medical Trust offers optional ancillary benefits for the Trust member municipalities participating in the medical plan. Dental, vision, life, and disability insurance plans are available to make the Trust a “one-stop shop” for employee benefits. The member municipality pays one invoice a month for all lines of coverage purchased through the Trust. This also allows the key benefit administrator and plan participants to work with one client service team when questions arise about the covered benefits, claims, or other service needs.

All of the available benefits below can be contributory, non-contributory, or voluntary. When coverage is contributory, employees contribute toward the premium. The amount of the employee’s contribution is determined by the municipality. When coverage is non-contributory, the municipality pays 100% of the premium and the participant employee does not contribute anything towards the benefit. When coverage is offered as a voluntary benefit the employee pays 100% of the premium. The employee can waive coverage and is not required to be a plan participant whether the coverage is contributory, non-contributory or voluntary.

DENTAL INSURANCE

Delta Dental is the Trust’s partner for dental insurance. Delta Dental offers access to the nation’s largest dentist networks, delivering the best value for your employee benefits dollar. The Trust offers two basic dental plans. The Trust member municipality can offer one of the two plans.

VISION INSURANCE

VSP is the Trust’s partner for vision insurance. Your eyes and overall health come first with VSP. As the only national not-for-profit vision care company, VSP is committed to delivering quality care and savings plan participants deserve. The Trust offers three basic vision plans and the member municipality can select one of the plans to offer employees.

LIFE INSURANCE

MetLife is the Trust’s partner for life and accidental death and dismemberment (AD&D) insurance. In the event of the employee’s passing, life insurance is a promise to pay money directly to the employee’s beneficiaries. AD&D coverage generally pays for accidental loss of life, limbs, speech, hearing or sight, paralysis and more.

The Trust offers four life insurance plans. The Trust member municipality can provide one of the four plans for the municipal employees. The Trust also offers two dependent life plans. A municipal member can select one of the two dependent life plans as an additional option with the basic life and AD&D benefit.

DISABILITY INSURANCE

The Trust offers a short and long term disability program through Lincoln Financial Group. The disability benefit can be offered as an employer paid benefit or as contributory benefit with the employer and employee both funding the premium. If your municipality has disability coverage in place today, your current plan design can be mirrored or closely matched. If your municipality does not have disability coverage, a plan design can be recommended for you.

DENTAL PLAN OPTIONS

Delta Dental	Option 1	Option 2	Option 3
Deductible (Single / Family)	\$50 / \$150	\$50 / \$150	\$50 / \$150
Coinsurance (Preventive / Basic / Major / Ortho Services)	100 / 80 / 50 / 50	100 / 80 / 50 / 50	100% Preventive* / 80% Minor*
Annual Dental Maximum (per insured)	\$1,500	\$1,000	\$1,000
Lifetime Child Ortho Maximum (to age 19)	\$1,500	\$1,000	Not Included
Out-of-network	Fee Schedule	Fee Schedule	Fee Schedule
Endodontics & Periodontics	Basic	Basic	Not Included
Monthly Premium Rates (Guaranteed through December 31, 2023)			
Employee Only	\$26.32	\$24.41	\$14.14
Employee / Spouse	\$52.66	\$48.81	\$28.10
Employee / Child(ren)	\$71.12	\$64.68	\$40.46
Family	\$106.88	\$97.63	\$60.10

Notes:

- *Dental Option 3 includes coverage for Preventive and Minor services only. Minor services include fillings and crown repair.
- Dental coverage is available to municipalities participating in the medical plan.
- Dental coverage can be provided as a contributory, non-contributory, or voluntary insurance benefit.

VISION PLAN OPTIONS

VSP Vision Plan	Option 1	Option 2	Option 3
Exam Copay	\$10	\$15	\$10
Materials Copay	\$20	\$25	\$20
Frequency (Exam/Lenses/Frames)	12 / 12 / 24	12 / 24 / 24	12 / 12 / 24*
Monthly Premium Rates (Guaranteed through December 31, 2023)			
Employee Only	\$6.15	\$4.59	\$7.08
Employee / Spouse	\$12.33	\$9.20	\$14.15
Employee / Child(ren)	\$13.16	\$9.82	\$15.15
Family	\$21.05	\$15.70	\$24.20

Notes:

- *Vision Option 3 includes Kid-Care Plan with 2 exams and 1 pair of glasses every year.
- Vision coverage is available to municipalities participating in the medical plan.
- Vision coverage can be provided as a contributory, non-contributory, or voluntary insurance benefit.

BASIC LIFE AND AD&D PLAN OPTIONS

Plan Highlights	Plan 1	Plan 2	Plan 3	Plan 4
Class Description	All Full Time Active Employees	All Full Time Active Employees	All Full Time Active Employees	All Full Time Active Employees
Life Benefit	\$25,000	\$50,000	1 x Basic Annual Earnings to \$50,000 Max	2 x Basic Annual Earnings to \$100,000 Max
AD&D Benefit	\$25,000	\$50,000	1 x Basic Annual Earnings to \$50,000 Max	2 x Basic Annual Earnings to \$100,000 Max
Age Reduction Schedule				
Age 65	35%	35%	35%	35%
Age 70	50%	50%	50%	50%
Age 75	65%	65%	65%	65%
Retirement	Terminate	Terminate	Terminate	Terminate
Guaranteed Issue	\$25,000	\$50,000	\$50,000	\$100,000
Dependent Life: Spouse / Child(ren)				
Option 1	\$2,500 / \$2,500	\$2,500 / \$2,500	\$2,500 / \$2,500	\$2,500 / \$2,500
	(14 days to 6 mos \$250)	(14 days to 6 mos \$250)	(14 days to 6 mos \$250)	(14 days to 6 mos \$250)
Option 2	\$10,000 / \$10,000	\$10,000 / \$10,000	\$10,000 / \$10,000	\$10,000 / \$10,000
	(14 days to 6 mos \$1,000)	(14 days to 6 mos \$1,000)	(14 days to 6 mos \$1,000)	(14 days to 6 mos \$1,000)
Employee Contributions	Non-contributory	Non-contributory	Non-contributory	Non-contributory
Minimum Participation	100%	100%	100%	100%
Monthly Premium Rates (Guaranteed through December 31, 2023)				
Life Rate per \$1,000 of Benefit	\$0.239	\$0.239	\$0.239	\$0.239
AD&D Rate per \$1,000 of Benefit	\$0.020	\$0.020	\$0.020	\$0.020
Monthly Premium Per Person	\$6.48 per month	\$12.95 per month		
Dependent Life Rate per Family Unit				
Option 1	\$1.50	\$1.50	\$1.50	\$1.50
Option 2	\$6.00	\$6.00	\$6.00	\$6.00

Notes:

- Life plan offers Value Added Features such as: Accelerated Life Benefits, Life Conversion, Beneficiary Assistance – Delivering The Promise.
- MetLife: A+ Superior Best Rating
- MetLife reserves the right to review, and if necessary, adjust the pricing for any group who requests a non-standard Plan design; has 25% or more retirees; and has 75 lives or more, and who's population is composed of 75% or more police/fire.