

RAMHIC FREQUENTLY ASKED QUESTIONS

How do I determine if my business qualifies to obtain health insurance coverage through RAMHIC?

In order to obtain coverage through RAMHIC, a small business must meet three requirements.

1. The business must be a dues paying member of either, the Retailers Association of Massachusetts (RAM), the Massachusetts Package Store Association (MASSPACK), or the Northeast Retail Lumber Association (NRLA).
2. The business must fall within the definition of “Eligible Small Business,” as defined by law,
3. The business must maintain certain level of employee participation in the RAMHIC wellness program.

Can any type of business join RAM/MASSPACK?

No. Membership in RAM and MASSPACK is generally limited to businesses within the Retail Trade or Wholesale Trade SIC codes. Certain businesses with service sector SIC codes, that have a retail component to their business, may be eligible for membership as determined by RAMHIC on a case by case basis. If there are questions regarding a business’s eligibility please contact RAMHIC at 877-RAM-6580.

What constitutes as an “Eligible Small Business”?

An “Eligible Small Business” is one which, on at least 50% of its working days during the preceding year, employed from among one to not more than 50 Eligible Employees, the majority of whom worked in Massachusetts.

Eligible Employee is defined as an individual who works on a full-time basis with a normal work week of 30 or more hours AND who is hired to work for a period of not less than five months.

It is important to note that the employee threshold requirement is only based on Eligible Employees. Part time employees should not be included in the calculation. Therefore, a business employing more than 50 individuals may still qualify for coverage as long as its number of Eligible Employees remains below 50 and coverage is only offered to Eligible Employees.

What are the wellness program participation requirements?

In order to comply with wellness program participation requirements imposed by law, RAMHIC will require all businesses enrolled in the Cooperative to maintain an average annual wellness participation level of 50% of their eligible employees covered by RAMHIC.

Wellness activities that have been approved by RAMHIC to constitute participation are outlined below as well as in section 9 of the RAMHIC Membership Agreement that is reviewed and submitted by member businesses.

How do I register for the RAMHIC wellness program?

Members will utilize the wellness program offered by their selected carrier—My Healthy Health Plan for Fallon Health and Healthy Actions for Blue Cross Blue Shield of MA.

Fallon Health: Visit the [My Healthy Health Plan](#) site, click on the “Log in now” tab and then “REGISTER NEW ACCOUNT.”

Blue Cross Blue Shield of MA: Visit the [Healthy Actions](#) site, click on the “First Time? Register” tab under the IMPORTANT LINKS section on the right hand side of the page. Members can learn more about Healthy Actions by [clicking here](#).

What constitutes wellness participation?

Once registered, wellness participation may be completed in the following manner:

BCBSMA Healthy Actions

For individuals covered through BCBSMA, the employee must first complete the program’s health assessment survey and then request his or her doctor to fill out a Clinician Health Review form.

- (1) If the Clinician Health Review form indicates that the Covered Individual is healthy, then participation is complete upon submission of the form to the wellness vendor.
- (2) If the Clinician Health Review form indicates that the Covered Individual needs to improve his or her health, then the Covered Individual’s doctor will set a list of health goals to be met before the end of the plan year. Participation is complete once the goals are achieved to the satisfaction of the Covered Individual’s doctor and a subsequent Clinician Health Review form indicating such is completed and submitted to the wellness vendor.

FH My Healthy Health Plan

For individuals covered through FH, the employee must first complete the program’s health assessment survey. Based on the results of the survey, the program generates a Wellness Score for each individual. The Wellness Scores are divided into three categories—Low Risk, Moderate Risk and High Risk.

- (1) Employees receiving a Wellness Score between 80 and 100 are considered Low Risk and no further action is necessary to satisfy the participation requirement.
- (2) Employees receiving a Wellness Score between 60 and 79 are considered Moderate Risk and must complete 8 weeks of wellness workshops to satisfy the participation requirement.
- (3) Employees receiving a Wellness Score of 59 and below are considered High Risk and must complete 8 weeks of wellness workshops in addition to 4 sessions of health coaching to satisfy the participation requirement.

Where can I learn more about RAMHIC?

All up to date information regarding RAMHIC can be found on the RAM website (www.retailersma.org) by clicking on RAMHIC under the Member Benefits Tab.

How do insurance brokers become certified to market and sell RAMHIC products?

To become certified to market and sell RAMHIC products, brokers must first have a brokerage license with our contracting carriers—FH and BCBSMA. Licensed brokers may then visit www.retailersma.org to complete the broker certification process. Follow RAMHIC link under the Member Benefits tab and then scroll down to click on “Become a RAMHIC Certified Broker” to find an online application form. Upon completion and submission of the online form, brokers will be provided a link to the RAMHIC agency agreement which must be reviewed, signed and returned to RAMHIC via email to info@retailersma.org or by fax to 617-523-4321. Once approved, the broker will receive notification of their certification via an email which will include the [RAMHIC Membership Application Packet](#) to be used when enrolling clients into the Cooperative.

Which Carriers offer plans through RAMHIC?

RAMHIC has contracted with Fallon Health and Blue Cross Blue Shield of Massachusetts to offer a robust selection of health benefits plan offerings. All of the plans offered through RAMHIC have been approved to be sold at a discounted rate to RAMHIC members.

BLUE CROSS BLUE SHEILD OF MASSACHUSETTS QUESTIONS

What BCBSMA products are available through the cooperative?

As a member of RAMHIC you have access to the following medical, dental and ancillary plan options:

Medical plans

BCBSMA is excited to offers all plans available in the small group market to be purchased through RAMHIC. **Please note that all BCBSMA plans offered through RAMHIC MUST be purchased with the Healthy Actions wellness option attached.**

USAbLe Hospital Indemnity Plan

Businesses with two or more subscribers covered by a BCBSMA plan through RAMHIC will receive this supplemental coverage offered by USAbLe for all subscriber employees. This benefit provides a reassuring layer of financial protection for employees and their families by paying the employee cash to cover unexpected expenses in the event of hospitalization.

USAbLe Group Term Life

Businesses covered by a BCBSMA plan through RAMHIC receive a \$10,000 group life insurance policy for all subscribers covered by the plan at no additional cost.

Dental Plans

RAMHIC members have access to BCBSMA’s full dental product suite, which covers members for preventative care, and other services like fillings, crowns, treatment for infections, and more.

Vision Plan

The Blue 20/20 plan provides your workforce with more choice, value and flexibility in your vision coverage. The plan includes access to one of the nation’s largest vision networks, exclusive savings, and award winning member service and customer support.

For more information please visit the RAMHIC/BCBSMA [microsite](#).

How do I get a BCBSMA quote through the cooperative?

If you are an eligible small business, contact your broker or call BCBSMA directly at 1-888-723-4840.

FALLON HEALTH

What are the FH plan options?

RAMHIC is currently offering ten plan options through FH. The plans are designed around Fallon's Direct Care and Select Care provider networks to suit the needs of our diverse membership. The plans are offered with an employer contribution option which allows employers to set a monthly dollar amount based on one of the offered plan options and then allow their employees to buy up or down to best meet their own needs.

Fallon Plans

- QHD 3000 HSA
- QHD 2000 HSA
- Bronze Deductible
- Deductible 5000 Low
- Deductible 4000 Low
- Deductible 3000 Low
- Deductible 2500 Low
- Deductible 2000 Low
- Copay 1000 Hybrid
- Copay 500

Fallon Networks

- *Direct Care* is a limited provider network, custom built around some of the state's premier physician groups. It offers more coordinated, cost-efficient care, and delivers a 12% premium savings over FH Select Care. This plan provides access to a network that is smaller than FH Select Care Network.
- *Select Care* provides access to an extensive network of doctors and community-based hospitals throughout Massachusetts and New Hampshire at a competitive price.

How do I know if my doctors are within the FH provider networks?

To determine which providers are included in each of the FH plans please consult the FH provider directory by visiting the provider search tool at www.fchp.org or by calling the FH Customer Service Department at 1-800-858-5200 to obtain a paper copy of the directory.

Can everyone take advantage of the FH limited provider networks?

No. FH has a live-in or work-in policy for selection of the limited network plans. The policy is based on the employee and not the employer. Therefore, an employee seeking a limited network plan must live or work within that network's service area.

How do I get a FH quote through the cooperative?

If you are an eligible small business, contact your broker or call FH directly at 866-906-0099.