



## NEWS FOR EMPLOYERS

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### Year-end message from Andrew Marshall

After a year of virtual meetings in 2020, we've enjoyed every opportunity to get out and meet our customers and partners in 2021, to grow relationships and learn more about how we can address the unique needs of those we serve and work with.

As the pandemic continues, we're reminded of how important it is to work together to support the health and well-being of our members and the communities where we live and work. Like you, we've proudly supported organizations who need our help more than ever, and it warms our hearts this season to know that we can make a difference in the lives of others.

Our sincere wishes to you for a happy and healthy New Year. We're grateful for your continued partnership and the trust you've placed in Medica.

Happy Holidays,

Andrew Marshall  
VP/GM, Commercial Markets

### A new member website is coming your way soon!

Beginning in January, we'll be kicking off the launch of a new member experience for commercial members, delivering an easier way to access health plan benefits and wellness resources.

#### Updated navigation and new features

Members will be able to download their member ID card, access benefits, check on claims, find providers, explore wellness resources, and much more.

The transition to our new member website will be staggered across commercial customers, starting in January with completion expected by April 2022.

Please contact your Medica representative with any questions.

### COVID vaccine updates – a resource for employers

The Centers for Disease Control and Prevention (CDC) is recommending vaccines for children over age 5, and for adults already vaccinated against COVID-19, booster shots are now available for everyone over age 18. Feel free to use the messaging below with your employees as you encourage them to stay healthy this winter.

## COVID-19 updates for kids and adults

### It's the kids' turn for vaccines

The COVID-19 vaccine is now available to kids ages 5-11 at no cost to you. It's approved as a safe and effective way to get protected, and to protect the health of family and friends. Since the COVID-19 virus is still spreading, having your child vaccinated against the virus is considered the best step you can take to protect their health. It can also help to keep your child attending school and other activities, which are important for their physical and mental health.

Currently, the Pfizer BioNTech mRNA vaccine is the only one available for kids ages 5-11 in the U.S. It has a lower dose than what's given to people ages 12+, and it requires two doses for full vaccination against the virus.

Here's a checklist as you prepare for your child's COVID-19 vaccine:

- Call your child's primary health care provider to tell them you're planning to have your child vaccinated. Ask questions if you have any concerns.
- Schedule your child's first COVID-19 vaccine appointment or attend a hosted clinic. Some may even offer walk-in options.
- Consider other routine vaccines your child may need (such as a flu shot) and ask about getting them at the same time.
- Talk with your child before the appointment to try to make it a positive experience.
- Schedule the second COVID-19 vaccine dose for 21-days after their first vaccine. Your child is considered fully vaccinated two weeks after the second dose of the vaccine.
- Take a photo and make copies of their vaccine card to provide to their health care provider and school if needed. Keep the original paper vaccine card in a safe place.

### Booster shots now available

It might also be time to get your COVID-19 booster shot. Everyone ages 18 or older are now eligible for a booster shot. Booster shots are highly recommended by the Centers for Disease Control and Prevention (CDC). See the CDC website [COVID-19 Vaccine Booster Shots page](#) for more information about scheduling your booster shot.

## Updated My Health Rewards by Medica<sup>®</sup> materials available

My Health Rewards by Medica<sup>®</sup> motivates and rewards employees when they establish and maintain healthy goals. The My Health Rewards member user guides have been updated with important program information for 2022, including the new rewards total of \$220 annually for My Health Rewards *Standard* and *Results* members. Use these materials to help promote the program and opportunities to earn rewards.

[My Health Rewards \*Standard\* user guide](#)

[My Health Rewards \*Results\* user guide](#)

[My Health Rewards \*Invest\* user guide](#)

[View all the My Health Rewards materials available on Medica.com](#)

In addition, updated employer fliers are available. To learn more about My Health Rewards, contact your Medica representative.

[My Health Rewards \*Standard\* employer flier \(for fully insured small groups\)](#)

[My Health Rewards \*Standard\* + \*Results\* employer flier](#)

[My Health Rewards \*Invest\* employer flier](#)

*My Health Rewards is included with fully insured plans and is a standard offering for self-funded employers. My Health Rewards Results and Invest are buy-up options for employers with 51+ employees (fully and self-insured).*

## Health savings account (HSA) year-end contribution reminder

Employers with health savings accounts (HSAs) should ensure their year-end contributions are applied to the correct year. The tax year for Medica ONESource HSA contributions is determined by the transaction posting date, not the process date for both payroll deductions and employer contributions. Please see below for how contributions are applied.

Contribution date	Post date	Process date*	Tax year impact
Jan. 1, 2022	Jan. 1, 2022	Jan. 3, 2022	The contribution is applied to the 2022 tax year
Jan. 1, 2022	Dec. 31, 2021	Jan. 3, 2022	The contribution is applied to the 2021 tax year
Dec. 31, 2021	Dec. 31, 2021	Jan. 1, 2022	The contribution is applied to the 2021 tax year

\*The process date is the date funds are available for the member to spend.

## Reporting requirements for employer-sponsored health insurance

The Affordable Care Act (ACA) requires large fully insured employers (with 50 or more full-time equivalent employees) and self-insured employers to provide an annual statement to employees regarding the health insurance coverage they were offered during the preceding calendar year. The ACA also requires applicable large employers to file an annual information return with the Internal Revenue Service (IRS).

These reporting requirements, outlined in IRS Section 6056, are effective for coverage offered in 2021, to be reported in 2022 and are applicable to both fully and self-insured employers.

Employers must file their 1094-C transmittal file with the IRS no later than Feb. 28, 2022 (March 31, 2022 if filing electronically). Additionally, applicable large employers must provide each full-time employee with Form 1095-C by Jan. 31. Employers may choose to hire a vendor to handle this process for them.

Medica can provide reporting to assist with completion of Parts I and III of Form 1095-C. Upon request, Medica will provide data in a standard Excel file format. The annual report will be available in mid-January 2022. For more information, please visit this topic on [irs.gov](https://www.irs.gov).

## End-of-year invoice reminder

This time of year brings a higher than average number of enrollment transactions that impact monthly invoices. Please pay your invoice as billed. Any transactions not captured on your current invoice will be reconciled on the next one.

## 4members December email newsletter

The *4members* email newsletter will be distributed this week. Active commercial members who have registered on their Medica member website will receive these emails.

*4members* is available via PDF for employers and brokers who would like to distribute the content. Encourage your employees to register on their Medica member website to receive this member publication.

## Member topic of the month: Out-of-network care

Every month we feature ready-made promotional materials for one of our member programs or services. Print the flier or email it to your employees, whichever you prefer!

The topic this month is out-of-network care. See how much more it costs to visit providers outside a plan's network.

[View out-of-network care tip sheet.](#)

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