



# MEDICAL MUTUAL®

## CDHP Set-Up Form

(This Form is for HSA ONLY;  
HRA on this CDHP Form is for future use;  
For HRA use the existing HRA Account Set-Up Form)

Market Segment (Select One):      2-50                      51-99                      100+

[ Instructions are on Page 3 ]

<b>Prepared By:</b>			
Name:	Cost Center:	Phone:	Date:
Group Account Executive Name:		Cost Center:	
<b>Group Set-Up:</b>			
Group Name:			
Group Address:			
Group Tax ID #:			
Group Accounting Contact:	Phone:	Email:	
Group HR Contact:	Phone:	Email:	
Other Group Contact(s):	Phone:	Email:	
<b>HSA:</b>			
Effective Date			
Group Number:	Section Numbers: (HSA Qualified)(For Internal Use Only)		
Card Stock:	Standard	Custom (100+ Groups Only)	
<b>Contribution Options (Choose ALL that apply):</b>			
Is the Employer making pre-tax contributions to the HSA? Yes      No	Will the Employee have pre-tax contributions withheld from payroll? Yes      No	Is the Employee making post-tax contributions to the HSA? Yes      No	
<b>Contribution Funding Method Options (Choose only one):</b>			
Medical Mutual to pull contributions from group's designated bank account via Online Upload of Excel Export (HSA Authorization for EFT banking form required).		Group to push contributions to HSA Accounts directly using Direct Deposit (No HSA Authorization for EFT banking form needed).	

**CDHP Set-Up Form**

Page 2

<b>HRA: (DO NOT USE)</b>			
Benefit Period Start Date:	Benefit Period End Date:		Reset Date:
Did the Group have a prior HRA?	Yes	No	Does the Group want Deductible Credits? Yes No
What is the Date Range for the Deductible Credits?			
Are they transferring balances from a prior carrier HRA?	Yes	No	Does the plan include Employee + 1 funding? Yes No
HRA Prorated?	Yes	No	Balance Tracking: Aggregate or Embedded?
HRA Billing – Weekly/Prepaid or Monthly/Postpaid?	Weekly	Monthly	Should the HRA balances carry over? Yes No
Carry Over Allowed – Per Year	Member/Single	Employee + 1	Family
	\$	\$	\$
Carry Over Allowed – Maximum	Member/Single	Employee + 1	Family
	\$	\$	\$
Does the HRA fund Network Only or All?	Network only All		
What is the Network Deductible?	Member/Single	Employee + 1	Family
	\$	\$	\$
What is the Out-of-Network Deductible?	Member/Single	Employee + 1	Family
	\$	\$	\$

<b>HRA / SUBSCRIBER FUNDING: (DO NOT USE)</b>			
	Member/Single	Employee + 1	Family
Level One – HRA	\$	\$	\$
	Member/Single	Employee + 1	Family
Level One – Subscriber	\$	\$	\$
	Member/Single	Employee + 1	Family
Level Two – HRA	\$	\$	\$
	Member/Single	Employee + 1	Family
Level Two – Subscriber	\$	\$	\$
	Member/Single	Employee + 1	Family
Level Three – HRA	\$	\$	\$
	Member/Single	Employee + 1	Family
Level Three – Subscriber	\$	\$	\$

<b>Product Approval: (DO NOT USE)</b>
Name:

## **Form Completion Instructions**

**Market Segment:** Choose whether the group falls under the 2-50, 51-99 or 100+ market segment.

**Prepared by:** Please indicate the internal MMO contacts data for this client.

**Group Set-Up:** Enter group name, group tax ID, group address, accounting contact and group HR contact. An additional box has been added for any other contact that may need to be listed. Please also include a contact number and/or email address.

### **HSA Set-Up:**

**Effective Date:** Enter the effective date of the qualified HDHP/HSA

**Group Number:** Enter the group's Medical Mutual group number.

**Section Numbers (HSA Qualified):** Please identify all of the sections that are HSA compatible. If an incorrect section number is identified, it will prolong the client set-up process.

**Card Stock:** Standard cardstock is MMO branded and custom card stock is co-branded with client name and logo. The cost that applies is Pass Through (what we are charged is what the group is responsible for, any additional cost/fees has not yet been determined). The fee for co-branding is TBD and is a six week lead time. The minimum requirement of eligible participants for custom card stock is 750-1,000 due to the print of being 1,000 cards.

**Contribution Funding Options:** Select all of the funding options that apply.

- Is the Employer making pre-tax contributions to the HSA? Select yes or No. See My Sales Tools for the Contribution Manager Job Aide.
- Will the Employee have pre-tax contributions withheld from payroll? Select Yes or No. See My Sales Tools for the Contribution Manager Job Aid.
- Is the Employee making post tax contributions to the HSA? This is completed from MHP>HSA tab>Fund My Account. See Fund My HSA guide in My Sales Tools.

**Contribution Funding Method:** Choose either Medical Mutual to pull contributions from group's designated bank account via online upload or excel export using WealthCare Admin portal. The Employer will utilize the WealthCare Admin portal and the Contribution Manager Job Aide to provide the CDHP Operations team with their Employee and/or Employer HSA contributions. Medical Mutual will pull the grand total contribution amount from the group's designated bank account. The Employee and/or Employer HSA contribution amounts will be posted to each participant's Health Savings Account. The HSA Authorization for EFT banking form is required on My Sales Tools. Also see the Contribution Manager Job Aide on My Sales Tools.

Or choose to push Employee and/or Employer HSA contributions directly to employees' Health Savings Accounts via direct deposit. The information needed for direct deposit into the employees' Health Savings Accounts is the bank custodian's routing number and the employees' HSA account numbers being funded. The CDHP Operations team will provide the additional details needed for this contribution funding method.