

Frequently Asked Questions - Members of Minnesota Co-ops

1 Am I eligible to enroll?

Non-employee members who reside in Minnesota and deemed eligible by the Co-op can enroll, as well as immediate family members who are on their tax returns. Additionally, according to the new Agricultural Cooperative Health Plan Statute (MINN. STAT. 62H.18 2017), eligible members must (i) actively work in production agriculture in Minnesota and file either Form 1065 or Schedule F with an income tax return; or (ii) provide direct services to production agriculture in Minnesota.

2 Are my doctors and hospital covered?

Gravie will search through the large network options to make sure your providers are in the network.

3 How much does this cost?

The actual price depends on things like your age, location, and the coverage level chosen.

4 What is the benefit for me?

You have access to more coverage options, most of which save you money, all within a comfortable system that helps you from start to finish.

5 When can I start looking at my options?

The specific Open Enrollment period will be communicated later this Fall, but is targeted to begin in late October or early November. Your plan will be effective on January 1, 2018.

6 How do I enroll?

During Open Enrollment, contact Gravie by phone at 844.538.4690 or visit our website at www.gravie.com/mncoop. Information you need will be name, mailing address, email, date of birth, and co-op member number.

7 Is this just for medical coverage?

You can also purchase dental, vision, life insurance, accident insurance, or a Health Savings Account.

8 What about MNSure tax credits?

Some of the options offer tax credits. Gravie can help you choose the option that is best for you.

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9 Who answers questions I might have about my plans?

You will have direct access to Gravie Care. This team of friendly, licensed advisors helps you shop for, enroll in, and use your plans throughout the year. Gravie advisors are available by phone, email or appointment.

10 Can I change my plan during the year if my situation changes?

You can change plans like dental and vision at any time. The medical insurance only allows changes during the annual Open Enrollment period if you have a qualified life event like a:

- Birth/Adoption
- Change in Insurance Coverage
- Change of Address
- Change in Employment Status
- Death in the Family
- Dependent Child Reaches Limiting Age
- Divorce/Annulment/Legal Separation
- Marriage
- Spouse Loss of Other Coverage

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