



**Ohio Turnpike Commission
Hearing Plan
Bargaining and Non-Bargaining
Effective 1-1-2011**

Benefit Description	Dollar Maximum	Frequency
Benefit Period	January 1 st through December 31 st	
Dependent Age Limit	26	
Over Aged Child	28	
	Removal upon End of Month	
Coinsurance	90%	
Audiometric Exam	90% Traditional Amount	1 every rolling 36 months
Hearing Aid Evaluation	90% Traditional Amount	1 every rolling 36 months
Conformity Evaluation	90% Traditional Amount	1 every rolling 36 months
Hearing Aid	90% Traditional Amount	1 every rolling 36 months

Note: Benefits will be determined based on Medical Mutual's medical and administrative policies and procedures.

This document is only a partial listing of benefits. This is not a contract of insurance. No person other than an officer of Medical Mutual may agree, orally or in writing, to change the benefits listed here. The contract or certificate will contain the complete listing of covered services.

In certain instances, Medical Mutual's payment may not equal the percentage listed above. However, the covered person's coinsurance will always be based on the lesser of the provider's billed charges or Medical Mutual's negotiated rate with the provider.