# DECEMBER 1, 2019 RENEWAL



PREPARED FOR:

Warren County

PRESENTED BY:
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August 29, 2019

Prepared by Jaeger & Flynn



#### **RECOMMENDED MEDICAL & PRESCRIPTION PREMIUM EQUIVALENTS**

EPO 5098 (659 employees enrolled)			
	Current Renewal		% Change
<b>Employee Only</b>	\$746.02 \$759.95		2%
Employee + 1	\$1,529.32	\$1,557.87	2%
Family	\$2,144.54	\$2,184.57	2%
EPO 6398 (55 employees enrolled)			
	Current Renewal % CI		% Change
<b>Employee Only</b>	\$573.20	\$579.49	1%
Employee + 1	<b>1</b> \$1,175.06 \$1,187.95 1%		1%
Family	\$1,647.76	\$1,665.84	1%

#### PLAN DESIGN ENHANCEMENTS

- Telemedicine Copay (EPO 5098): Telemedicine plans saves members a significant amount of time, and as of 12/1, will also save them money. The telemedicine copay will go from \$25 to \$10 on the EPO 5098.
- 2020 NYS Mandates (optional for self-funded plans)
  - Mandate 1: Fertility Preservation, Artificial Insemination, and In-Vitro
  - Mandate 2: Outpatient and Physician Mental Health and Substance-Use Disorder Cost-Share (cannot exceed PCP cost-share)
  - o Mandate 3: Inpatient Substance-Use Disorder Prior-Authorization Change to 28 days
  - Mandate 4: Inpatient Mental Health Treatment for Members under 18 Prior
     Authorization Change to 14 Days
- SaveONSP: Prescription manufacturers make funds (sometimes referred to as coupons) available to assist members with their cost share. This program with Blue Shield targets over 45 specialty drugs, reducing the members cost to \$0, and benefiting Warren County with the remaining coupon value. Members filling eligible specialty medication will be notified and onboarded with Accredo (Express Scripts specialty pharmacy).

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#### **ADDITIONAL LINES OF COVERAGE**

• Medicare eligible retirees: The Humana increase is 8.16%, of which 6% is made up of federal mandates. The Humana plan is still well below the previous CDPHP & Empire plans.

Huma	na (486 retirees & :	spouses enrolled)	
Rate per person	<b>Current</b>	<b>Renewal</b>	% Change
	\$191.88	\$207.53	8%

• **Dental:** The Delta Dental plan is renewing with a 0% increase. Warren County's cost is fixed, and there is no cost impact to Warren County.

Delt	a Dental (550 empl	oyees enrolled)	
	Current	Renewal	% Change
<b>Employee Only</b>	\$29.75	\$29.75	0%
Family	\$76.56	\$76.56	0%

• Vision: The Empire voluntary vision plan is experiencing the first rate change since inception of 2%, which is \$0.12/month for single, and \$0.30/month for family coverage. Being that the plan is voluntary, there is no cost impact to Warren County.

	Empire (407 employees enrolled)		
Current Renewal		% Change	
Employee Only	\$5.30	\$5.42	2%
Family	\$13.78	\$14.08	2%

• NEW as of 12/1/19 – Voluntary Life: A voluntary term insurance plan offered through Guardian that helps protect employees and dependents financially. Elections can be made up to a maximum of \$200,000 for employees, \$50,000 for a spouse, and \$10,000 for child(ren) without answering health questions or needing to qualify through a medical exam. This plan also provides the flexibility for employees to increase their

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benefit amounts up to the maximum in subsequent years, without submitting evidence of insurability. See Exhibit 1

NEW as of 12/1/19 – Voluntary Accident: A voluntary plan offered through Guardian
that will provide employees and their dependents a cash benefit for covered injuries,
treatments and services, in addition to what Warren County's medical plan may cover.
 Easy enrollment with no medical questions. See Exhibit 2

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EXHIBIT 1	VOLUNTARY LIFE Guardian
Benefits	
Minimum Number of Hours	30
Rate Guarantee	December 1, 2021
Benefit Amount	
Employee	Up to \$200,000 in \$10,000 increments
Spouse	Up to \$50,000 in \$5,000 Increments, not to exceed 50% of employee's benefit
Child(ren)	Age 14 days to Age 26, \$10,000
Annual Open Enrollment	Annual O/E with Full GI*
Guarantee Issue	Annual Of E With Full Ci
Employee	\$200,000
Spouse	\$50,000
Conversion	Included
Portable	Included
Waiver of Premium	Included
Accelerated Benefit	50%
Reduction Schedule	Reduces by 35% @ Age 65 60% @ Age 70 75% @ Age 75 85% @ Age 80
Participation Requirements	25%
Monthly Rate per \$1,000	
<25	\$0.094
25-29	\$0.094
30-34	\$0.099
35-39	\$0.136
40-44	\$0.191
45-49	\$0.305
50-54	\$0.507
55-59	\$0.787
60-64	\$1.213
65-69	\$2.407
70-74	\$4.596
75-79	\$4.596
AD&D	\$0.030
Child(ren)	\$0.15 per \$1,000, regardless of the number of children.
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<sup>\*</sup>If an employee would like to increase their benefit amount in subsequent years, they will be allowed to do so without submitting evidence of insurance.

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#### **EXHIBIT 2**

	VOLUNTARY ACCIDENT  Guardian
Employee Eligibility	Employees work 20+ hrs/wk
Spouse Eligibility	Employees work 20+ hrs/wk
Child Eligibility	To Age 26
Minimum Participation	No minimum if placed on Employee Navigator immediately after Medical Coverage*
Portability	Included
Type of Plan	On and Off the Job
Accident Emergency Treatment Benefit	\$175
Dislocation Benefit	Up to \$4,400
Fracture Benefit	Up to \$5,500
Initial Accident Hospitalization Benefit	\$1,000 Non-ICU \$2,000 ICU
Accident Hospital Income Benefit	\$165 per day up to 1 year
Accident ICU Benefit	\$165 per day up to 15 days
Physical Therapy Benefit	\$25 per day up to 10 days
Ambulance Benefit	Ground \$150 / Air \$1,000
Common Carrier Accidental Death	200% of AD&D Benefit
Automobile Accidental Death	Seatbelts \$10,000, Airbags \$15,000
Other Accidental Death	Employee: \$25,000 Spouse: \$12,500 Child: \$5,000
Accidental Dismemberment Benefit	25% - 100% of AD&D Benefit
Burns	\$0 - \$12,000
Lacerations	Up to \$400
Eye Injury	\$300
Emergency Dental Work	\$300/Crown, \$75/Extraction
Chiropractic Visits	\$25 per visit, up to 6 visits

Monthly Rate	
Employee	\$10.26
Employee + Spouse	\$16.09
Employee + Child(ren)	\$16.20
Family	\$22.03

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