

BEHIND THE SCENES LOOK AT YOUR HEALTH BENEFITS PLAN

2020 Wood County Employee
Health Benefits Plan
Annual Presentation



The Wood County Employee Health Benefits Plan is:

Governmental (Non-Federal)

Self-Insured

Non-ERISA

Grandfathered under
ACA

Minimum Essential Coverage
and Meets Minimum Value
and Affordability Standards

Directors & Cast Members



**Trustees
of the Plan**
County
Commissioners
Doris Herringshaw
Craig LaHote
Dr. Ted Bowlus



Committee Members

Employee Health Benefits
Wellness Sub-Committee
Spousal Eligibility Exception Sub-Committee

Insurance Consultant

Jason Beaver
Gauri Airi

Third Party Administrators

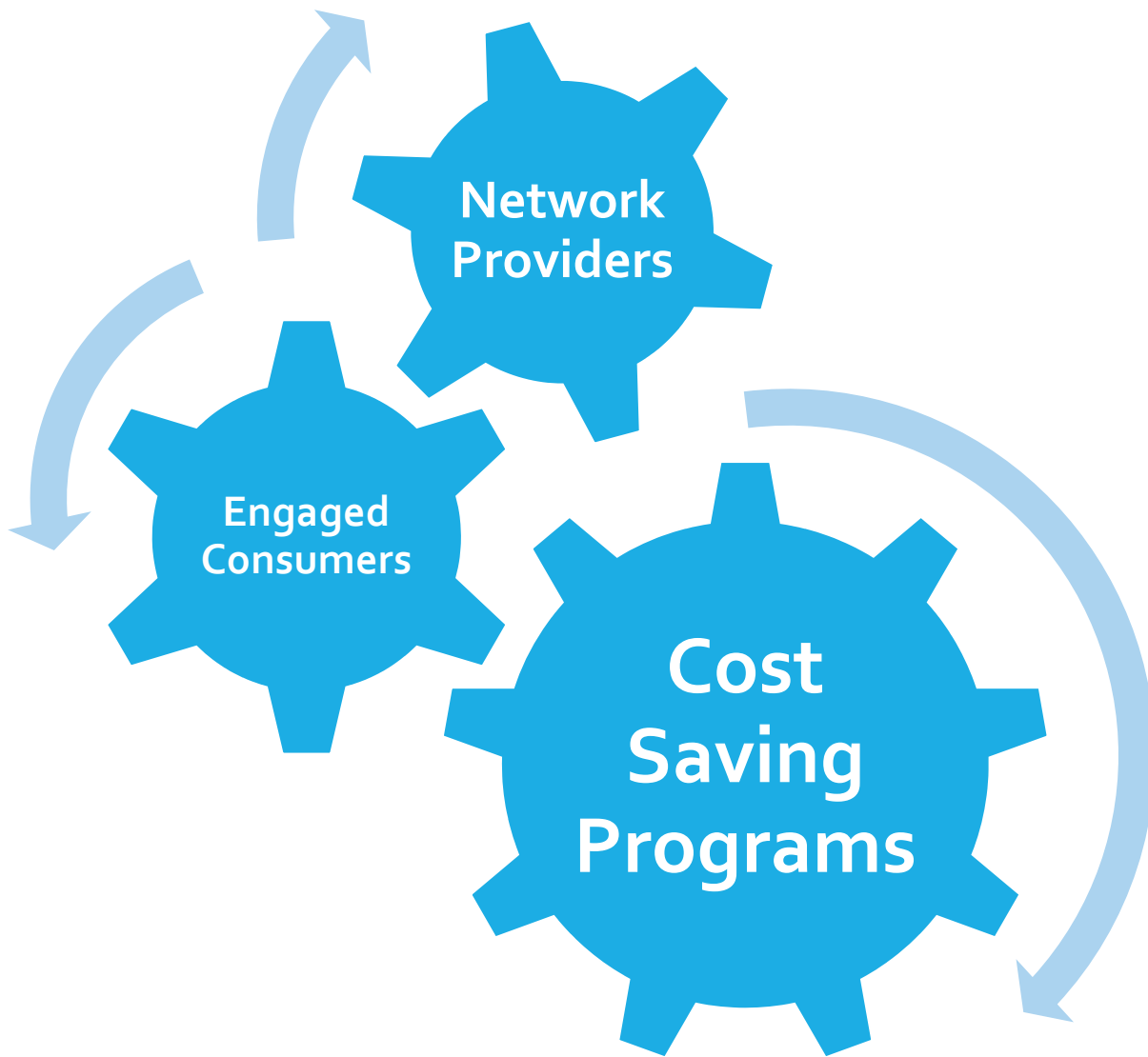
Health: Kelly Falardeau, Meritain
Jeannie Dohrmann, FrontPath
Prescription: Brian George, PDMI
Dental: Karen Chapman, Delta Dental

Administrative Support

Cheryl Albrecht, April Hugg, Erica Noel,
Janese Diem, Pamela Boyer, Andrew Kalmar

Engaged Members

You



What Makes Our Plan Work?

- Educated Employees = Engaged Consumers
- Working with our Network Providers
- Innovative Programs to Help Save Money for Members and the Plan

Thank you for being here and being engaged consumers!

How Does Our Plan Compare?

2019 SERB Report: Cost of Health Insurance for Ohio's Public Sector



Average Monthly Premiums - PPO (H/RX)

- Statewide: \$730 Single \$1,838 Family
- Counties: \$744 Single \$2,004 Family
- **Wood County: \$609 Single \$1,584 Family**

Medical In-Network Out-of-Pocket Maximums – PPO (H)

- Statewide: \$2,198 Single \$4,410 Family
- Counties: \$2,571 Single \$5,177 Family
- **Wood County: \$400 Single \$1,200 Family**

Total Plan Expenses

2019 YTD

\$8,855,586

2018

\$12,356,611

2017

\$11,188,775

2016

\$9,072,54

2015

\$9,946,784

\$0

\$5,000,000

\$10,000,000

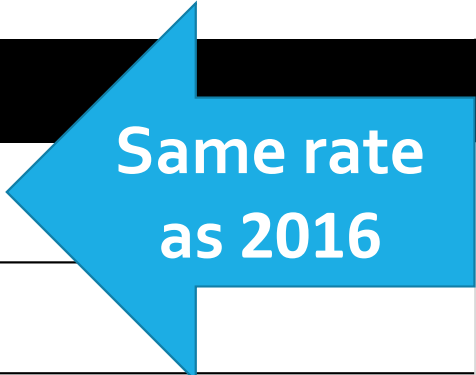
Plan Performance

2015 to 2019 YTD
(October 10, 2019)

Note: Board of DD entered
the Plan on 1/1/17
2018 Includes Stop Loss
Reimbursements

2020 Monthly Employee Premiums

Coverage	Single	Family
Health/Rx	\$91.42	\$237.70
Vision	\$1.34	\$3.06
Dental	\$4.92	\$12.32
Life	\$0.00	\$0.00
All Coverage	\$97.68	\$253.96



Commissioners approved a “premium holiday” for November 2019.

Employer

85%



Employee

15%



Our Health Benefits Plan



Payment
of Claims

**Be an engaged
consumer
when pulling
money out of
the pocket.**



EXCLUSIVE BEHIND THE SCENES LOOK

STOP LOSS = Insurance for the Insurance Plan



The Plan had four Stop Loss "hits" in 2018.


Stop Loss "Hit" results in Eligibility Audit to ensure member was eligible for benefits. If found not eligible, member is responsible for all claims.

Coordination of Benefits: Know the Rules for Dual Enrollment

Other Group Coverage

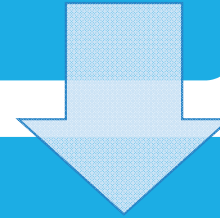
- Person holding contract is primary: secondary on other coverage if enrolled in another plan
- If both parents cover children, the birthday rule applies to determine who carries primary coverage
- Primary coverage must be documented to enroll as secondary

High Deductible Plans

- If partnered with a Health Savings Account (HSA), not eligible to enroll in other coverage
 - IRS Rule
- 

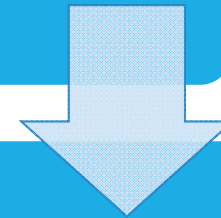
Participation Features

- Low monthly premiums
- Low deductibles, co-insurance, copayments



Schedule of Benefits


- Comprehensive scope of coverage
- Large network access
- Wellness Programs



Carrot vs. Stick

- Voluntary participation
- Designed for prevention/early detection & appropriate treatment

Help Bend the Trend of Rising Insurance Costs

- **CHOOSE IN-NETWORK PROVIDERS:** FrontPath = In-network with balance billing protection
 - **SITE OF CARE:** Out-patient Infusions/Injections directed to specific providers
 - **RX SAVINGS PROGRAM:** Use the Wood County Community Health Center for Primary Care and gain access to the Rx Savings Program
 - **DENTAL PROVIDERS:** Choose Preferred providers for greater savings
- 



*Leading the Way
to Better Healthcare*

FrontPath

In-Network Providers

Use FrontPath Network to Save Money

FrontPath = In-Network

Professional
Co-Payment
(Office Visit) \$15

ER
Co-Payment
\$45

Deductible \$150
Single/ \$450
Family

Balance billing protection

Non-FrontPath = Out-of-Network

Professional
Co-Payment
(Office Visit) \$15

ER
Co-Payment
\$45

Deductible \$300
Single/ \$900
Family


No balance billing protection

Out-of-Network
Applies to
In-Network Only



Benefits of Using In-Network Providers

Provider	Non-FrontPath = Out-of-Network
Billed Amount	\$1,000
- Discount*	\$250 (Not Balance Bill Protected)
Amount to be Paid	\$750
Plan Responsibility	60% of \$750 = \$450
Patient Responsibility	40% of \$750 = \$300
Total Patient Responsibility**	\$300 + \$250 = \$550
Total Patient Responsibility for Same Service In-Network	\$100



*Discounts vary by provider. ** Does not include co-payments.

Choose Quality Network Providers

www.frontpathcoalition.com

You wouldn't trust just anyone to watch your kids or remodel your house. Would you?

Doesn't your health deserve the same considerations?



419.891.5206 Option 5

[Home](#) [Our Solutions](#) [Cost/Quality Compare](#) [Provider Directory](#) [Contact Us](#)

You are here: [Home](#) / [Cost and Quality Portal](#)

COST AND QUALITY PORTAL

[Logout](#)

Use our member only portal to compare quality and cost in the FrontPath network.

- Compare the QUALITY of inpatient care provided by hospitals in the FrontPath network. Quality is based off indicators such as complication rates, readmission rates, and mortality.
- Compare the COST of inpatient and outpatient procedures performed in the FrontPath network. If different places charge different amounts for the same service, you deserve to know who is the most cost effective!
- If data is missing for a provider, that means there is not sufficient data to provide an accurate rating.

What type of report would you like to view?

Quality

Cost

Patient Satisfaction

- Meritain provides Monthly Statements summarizing claim activity
- Adverse Benefit Determinations are communicated via Explanation of Benefits (EOB)
- Access Meritain's Website to view activity 24/7/365
 - Meritain Connect www.meritain.com
- Release Required to share Protected Health Information (PHI)
 - Annual for family members
 - Release available on county website



Checking Claim Status

SITE OF CARE

Site of Care for Out-Patient Injections & Infusions

- Directs Member to specific site of care for out-patient services
- Members receive same services close to home
- Drug costs paid from Rx benefit instead of Medical benefit
- Precertification and Medical Necessity Review applies



Patient	Medical	Prescription
1	\$11,774	\$4,709
2	\$25,710	\$6,391
3	\$81,900	\$33,150

**Annual Projected Plan
Savings = \$326,171**

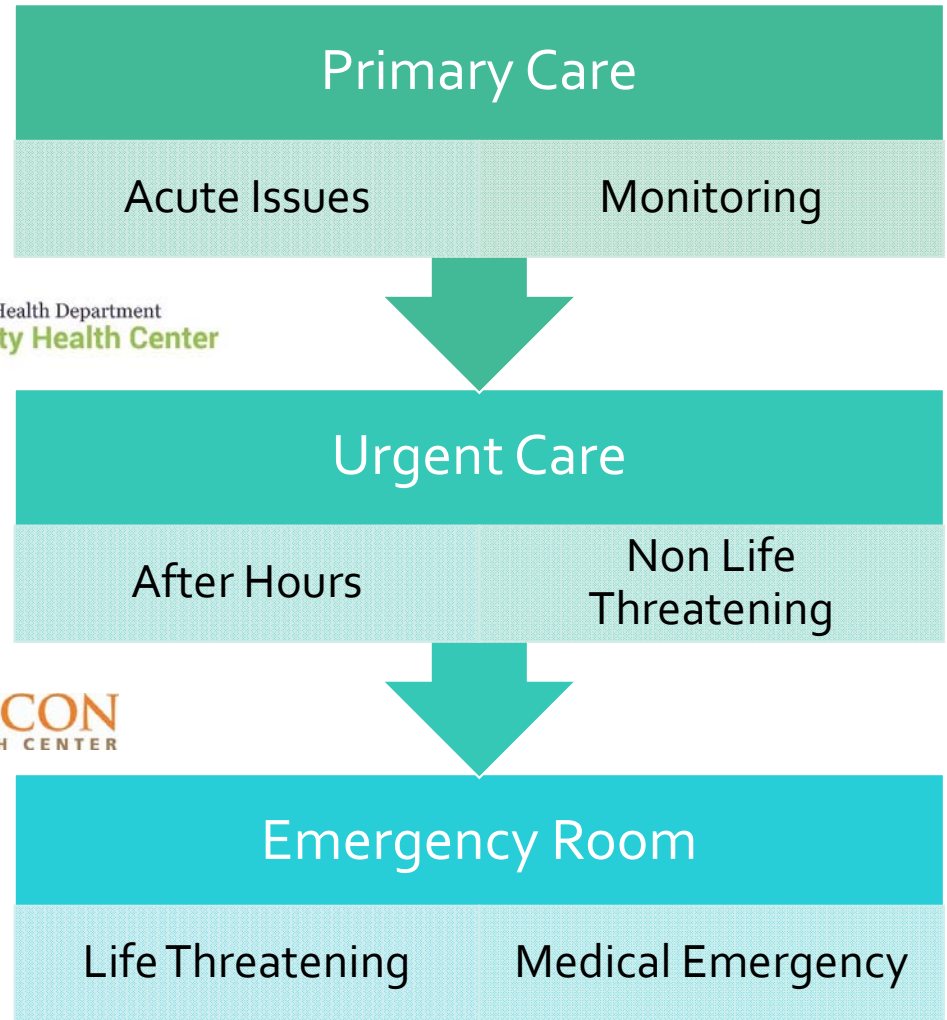
- Have a primary care physician
 - Wood County Community Health Center is taking new patients
 - Offers Sliding Fee Schedule even for those with insurance coverage
 - Provides access to the Rx Savings Program



- Searching for a specialist?
 - Wood County Hospital offers a network of specialty physicians
 - Search physicians at woodcountyhospital.org

- Falcon Health bills at the doctor office rate, which is lower than an urgent care facility

- ER visit for non-emergency may not be covered by the Plan



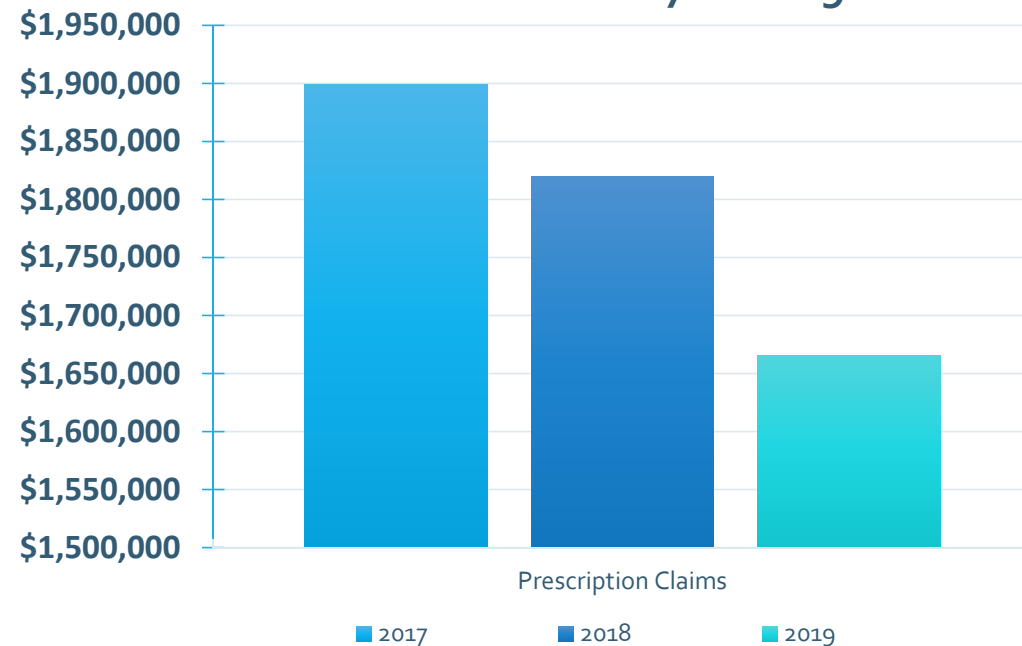
RX SAVINGS PLAN

Bending the Trend on the Rising Cost of Prescriptions

40% of claim utilization

- Increased by 25%

Claims Paid 2017 to 2019 YTD



Formulary	Prescription Savings Program Copay 90-day supply*	Retail Pharmacy Copay 34-day supply Maximum	Mail Order Copay 90-day supply Maximum
Tier 1 or select OTC with prescription	\$5	\$5	\$10
Tier 2	\$5	\$20 plus 20% AWP \$45 Maximum	\$40 plus 20% AWP \$90 Maximum
Tier 3	\$5	\$20 plus 20% AWP \$85 Maximum	\$40 plus 20% AWP \$170 Maximum
Medical Necessity Review	\$5	\$20 plus 50% AWP \$200 Maximum	\$20 plus 50% AWP \$400 Maximum

- Use the Community Health Center to help lower the cost of your prescription medications
- Use RxEOB to view medications in the formulary and price shop to save

*Some restrictions apply

See the Savings with the Prescription Savings Program

HUMALOG INJ 100 ml for diabetes

Location	Co-Payment
Retail Pharmacy 12 – 30-day fills	\$45 per month \$540 annually
Mail Order	Not available: Drug >\$1,000 Limited to Retail Pharmacy or RX Savings Program
RX Savings Program 4 – 90-day fills	\$5 – up to a 90 day fill \$20 annually

**Member saves up to
\$520 annually.**

**The Plan saves too!
Up to \$3,265 per year.**

Prescription Savings Program Update



6 Month Period	Employee Savings	Plan Savings
Jan – June 2019	\$12,595	\$166,156
Jan – June 2018	\$10,180	\$119,000



DENTAL
PROVIDERS

Where you go does make a difference



Maximize your savings with a PPO provider.

Sample Cost for a Crown (not actual costs)	PREFERRED (PPO) Dentist	PREMIER Dentist
Submitted Fee	\$950	\$950
Maximum Allowed	\$675	\$898
Coverage Level	50%	50%
Plan Responsibility	\$337.50	\$449
Patient Responsibility	\$337.50	\$449

View a list of providers at www.deltadentaloh.com.

Dental Benefit



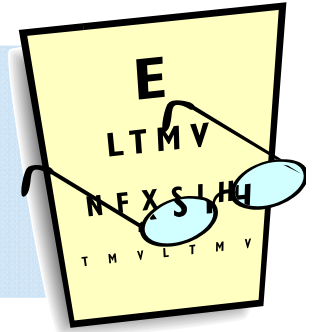
- \$100 Annual Deductible
- \$1,500 Annual Maximum per person
- 2 cleanings, 1 bitewing radiograph, and 2 fluoride treatments preventative not subject to deductible
- Useful Tips:
 - Discuss composite resin (white) restorations and porcelain crowns on posterior teeth
 - Recommend a Preferred Network Provider to make benefits go farther
 - Obtain a Predetermination of Benefits Prior to Service

Vision Program

- Payable only as primary (no coordination of benefits)
- No restriction on access
- Requires original receipt and claim form with patient and services clearly identified

Covers

- Exams
- Prescription glasses/frames and contacts
- Refractive Surgery



Benefit Period

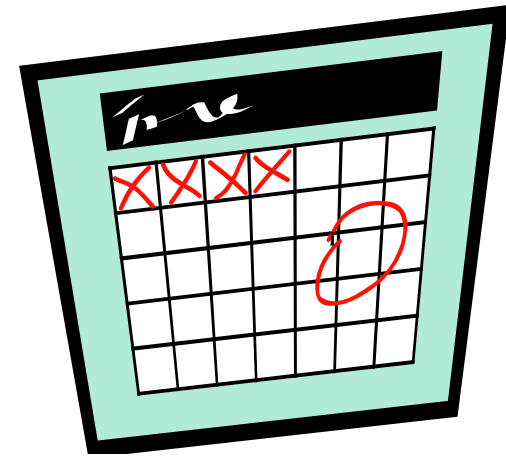
- \$200 per participant during 2 year period.
- **2-year period resets in 2020**
- 2019 claims must be submitted prior to March 31, 2020

WELLNESS PROGRAMS



You Matter!

- If you are ready to invest in yourself, now or a few months down the road, the Wellness Programs are ready for you
- Sooner rather than later as age & time are working against us



When is up to you!



Start here!

Wellness Rewards: Earn up to \$100 in Deductible Credit

Complete a Wellness Awareness Screening

- Health Risk Assessment
- Blood Pressure
- Coronary Risk
(cholesterol with LDL,
HDL, Triglyceride)
- Blood Sugar (A1C)
- Occult Blood Screening
- Bone Density
& Sun Damage

- Confidential
- Available every three years to benefit eligible employees and dependents over 18
- Employee receives Wellness Reward Credit if completed in 2017 or 2018
 - Spouses & Dependents currently not eligible to earn deductible credit
- On-site or anytime at the Hospital
 - 24 hour cancellation notice applies or employee charged for visit
- Encourage taking advantage of this lower cost screening option for bloodwork if already seeking treatment
- December 21 is the Last Day to Complete a Screening for 2019

Earn a \$25 deductible credit each Quarter: Up to \$100 in the Year

Participate in quarterly wellness events and challenges, along with the wellness screening to earn your credit.

Complete a Wellness Awareness Screening

Winter Wellness (Jan. – March)	Spring Shape-Up (April – June)	Summer Stretch (July – Sept.)	Fall into Fitness (October – December)
Wellness Events (attend one each quarter)			
<ul style="list-style-type: none"> • KEPRO On-line Seminar • Financial Planning Session 	<ul style="list-style-type: none"> • Poker Walk at BGSU • Employee Walk at BG City Park • Employee Picnic & Safety Fair 	<ul style="list-style-type: none"> • KEPRO On-line Seminar • Employee Walk at BG City Park 	<ul style="list-style-type: none"> • Employee Insurance Meetings
Six Week Wellness Challenge Options (complete one each quarter)			
<ul style="list-style-type: none"> • Brown Bag It • Shake the Salt 	<ul style="list-style-type: none"> • This for That • Catch Some Zzzs 	<ul style="list-style-type: none"> • Reduce Your Stress • Walk It Off 	<ul style="list-style-type: none"> • Stretch & Flex • Kick the Can


Employee Assistance Program

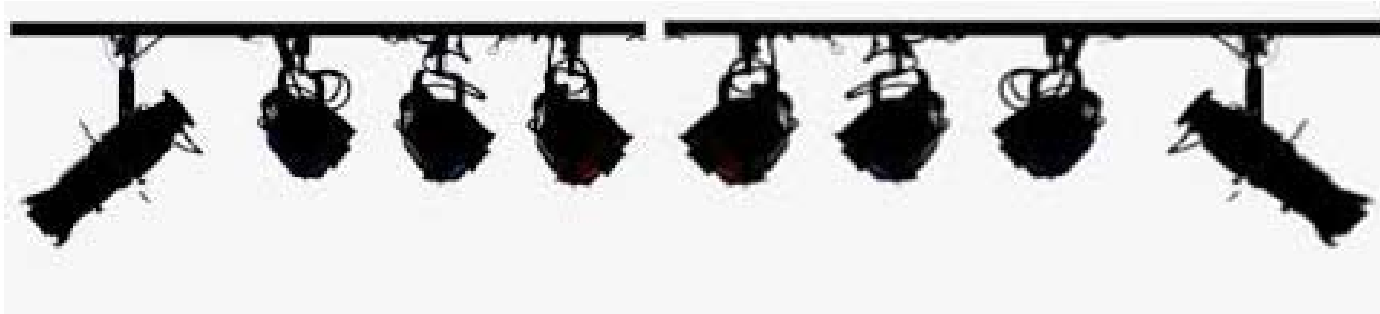


1-800-607-1522

- Confidential & Free
- Up to 5 visits
- Website with monthly on-line seminars and resources

Take action

- Review Individual Enrollment Verifications
 - Only use legal names as listed on Social Security Cards
 - Report primary coverage if electing secondary at County
 - Return sign-off by Nov. 15
 - Report Changes within 30 days of Event
 - Qualifying Events, e.g. birth, wedding, divorce
 - Changes in primary/secondary coverage
 - Application Required
 - Notify Providers/Pharmacy Following Loss of Benefits
- 



Open Election: Nov. 15 to Dec. 15

Changes permitted without a Qualifying Event/Special Enrollment Right

[Application Required](#)

Additional Assistance Available



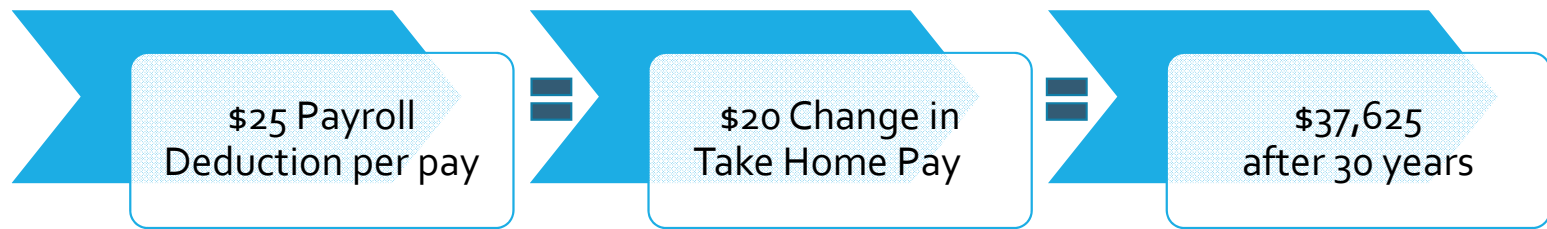
• EXCLUSIVE BEHIND THE SCENES LOOK

Public Employee Benefits

- OPERS
 - Ongoing changes – Keep up to date at opers.org
 - Notify OPERS of address changes – employer cannot update on your behalf
 - Webinars: Bridging the Gap – Financial Wellness
- Social Security Webinars
 - Basics for Public Employees: Impact of Public Benefits on Social Security Payments
 - December 4 & December 11
 - Information posted on Employee Website

Public Employee Benefits

- Deferred Compensation
 - Payroll deducted prior to federal and state withholding
 - Funds available when you separate employment
 - No penalty for withdrawals prior to age 59 ½



CCAO
Deferred
Compensation
Plan

The information presented above is hypothetical and is not intended to serve as a projection or prediction of the investment results of any specific investment.

www.co.wood.oh.us/employee



COMING SOON

New Member ID Cards

Updated Plan Document