

# Wood County Employee Health Benefits Plan

2021 Plan Year

Current as of 10/22/2020

# The Wood County Employee Health Benefits Plan is:

**Governmental (Non-Federal)**

**Self-Insured**

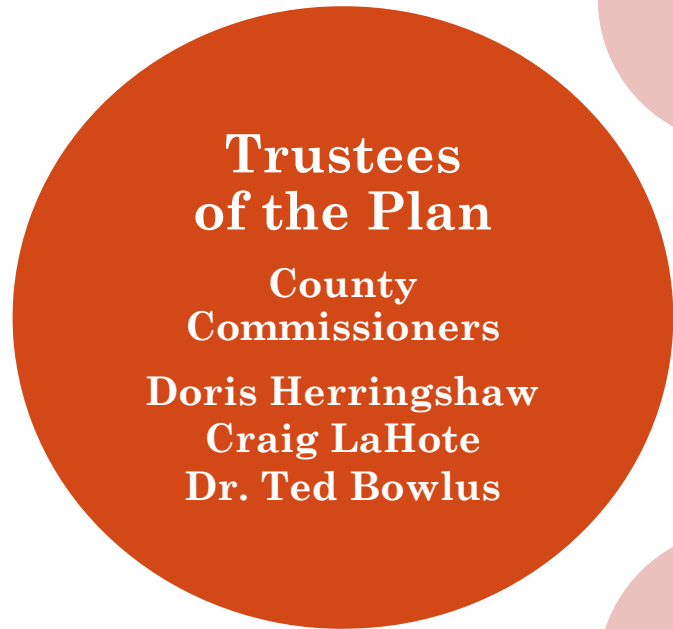
**Non-ERISA**

**Grandfathered under  
ACA\***

**Section 125  
Premium Only Plan**

\*Offers Minimum Essential Coverage and Meets Minimum Value and Affordability Standards

# Your Plan



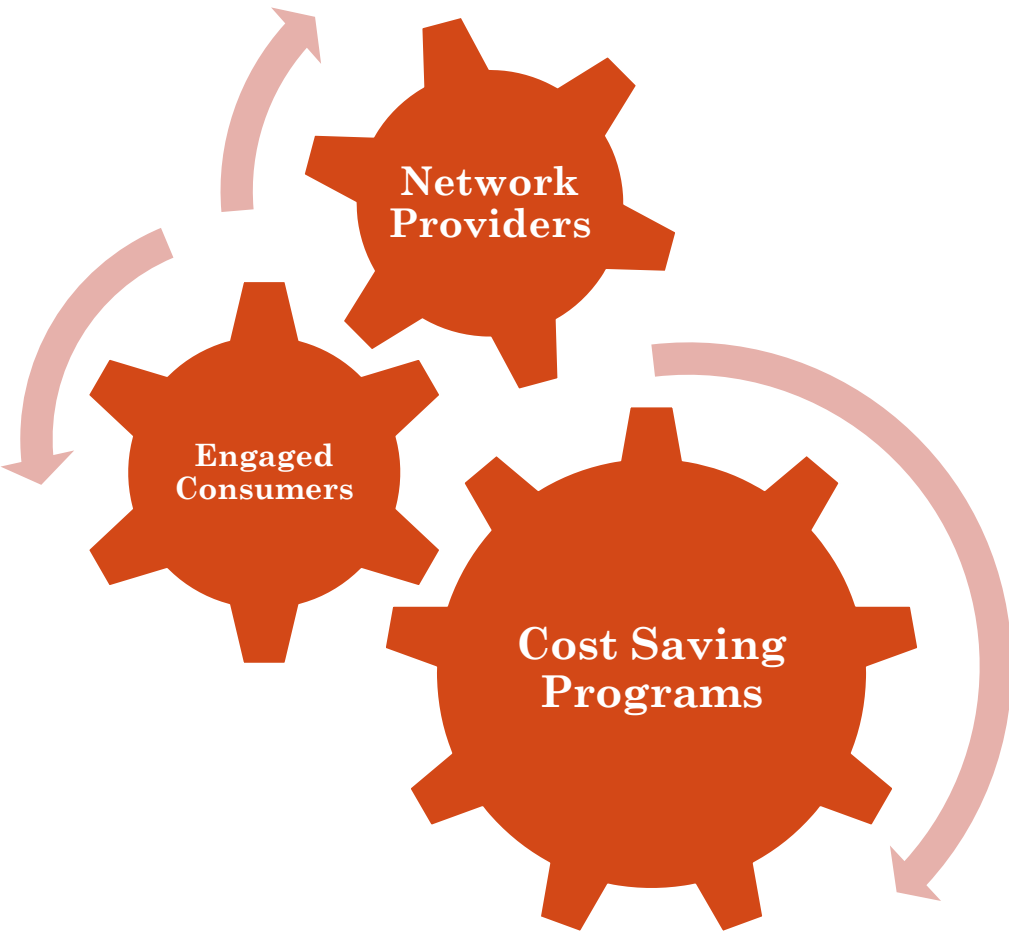
**Engaged Members**  
You

**Insurance Consultant**  
Jason Beaver  
Kaci Nungesser

**Third Party Administrators**  
Health: Meritain Health  
Network: FrontPath  
Prescription: PDMI  
Dental: Delta Dental

**Administrative Support**  
Cheryl Albrecht, April Hugg, Erica Noel,  
Pamela Boyer, Andrew Kalmar

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



## What Makes Our Plan Work?

- Plan Philosophy:  
Pay Now or Pay Later
- Educated Employees =  
Engaged Consumers
- Working with our  
Network Providers
- Innovative Programs to  
Help Save Money for  
Members and the Plan

# How Does Our Plan Compare?

2020 SERB Report: Cost of Health Insurance for Ohio's Public Sector

## Average Monthly Premiums - PPO (H/RX)

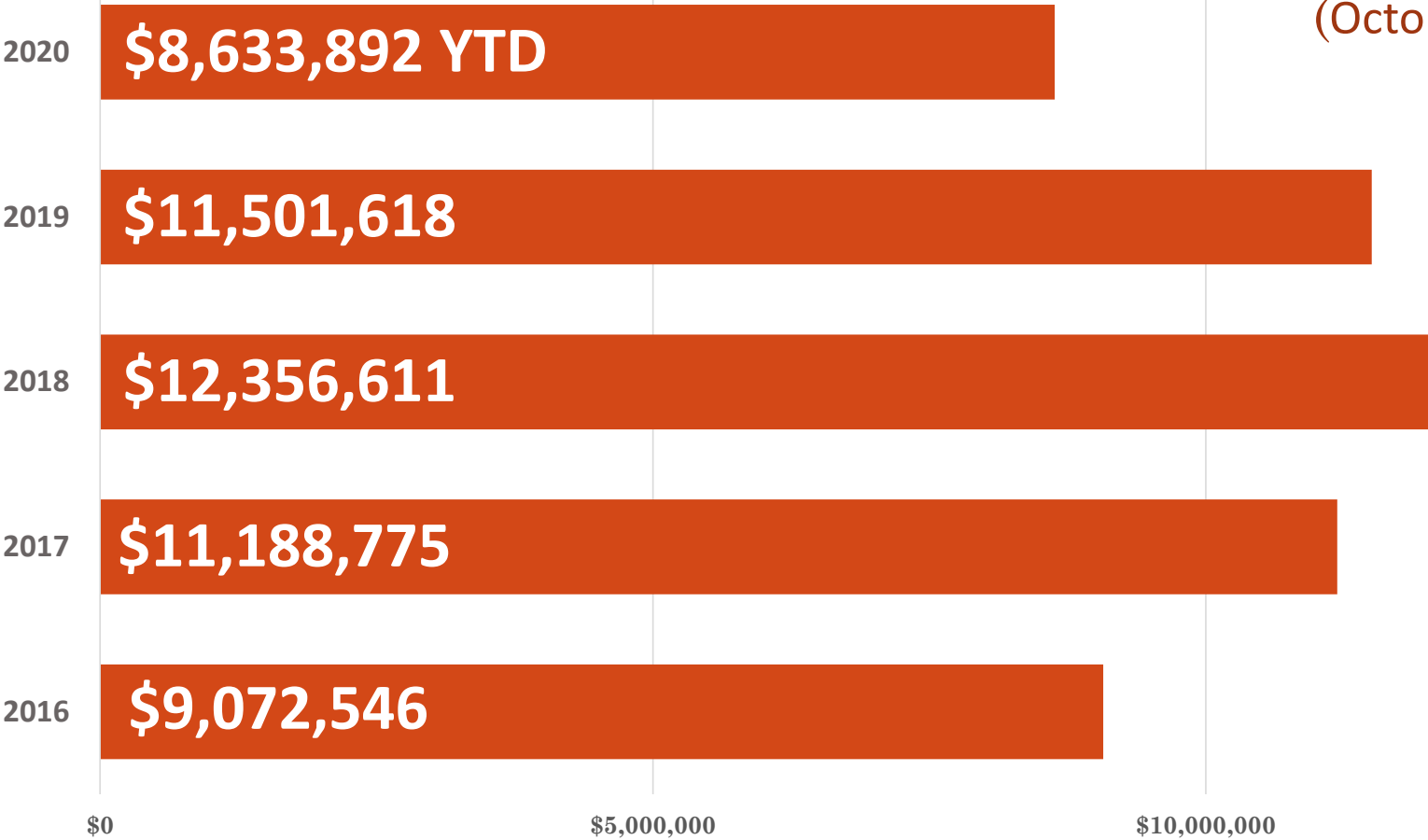
- Statewide: \$759 Single \$1,946 Family
- Counties: \$753 Single \$2,041 Family
- **Wood County: \$609 Single \$1,584 Family**

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

- Statewide: \$2,172 Single \$4,377 Family
- Counties: \$2,663 Single \$5,381 Family
- **Wood County: \$400 Single \$1,200 Family**

# Total Plan Expenses

2016 to 2020 YTD  
(October 22, 2020)



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

## 2021 Monthly Premiums

<b>Coverage</b>	<b>Single</b>	<b>Family</b>	<b>Single COBRA*</b>
<b>Health/Rx</b>	<b>\$609.48</b>	<b>\$1,584.62</b>	<b>\$621.67</b>
<b>Vision</b>	<b>\$8.92</b>	<b>\$23.20</b>	<b>\$9.10</b>
<b>Dental</b>	<b>\$32.78</b>	<b>\$85.20</b>	<b>\$33.44</b>
<b>Life</b>	<b>\$8.76</b>	<b>\$8.76</b>	<b>n/a</b>
<b>All Coverage</b>	<b>\$659.94</b>	<b>\$1,701.78</b>	

\*Refer to SPD for Family COBRA rates and Spousal Premium Rates

## Our Health Benefits Plan

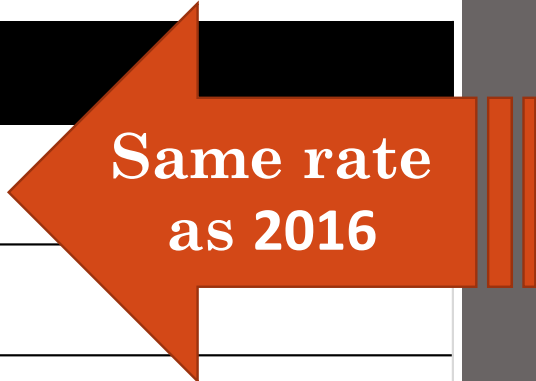


**Be an engaged consumer when pulling money out of the pocket.**



## 2021 Monthly Employee Premiums (15%)

Coverage	Single	Family
Health/Rx	\$91.42	\$237.70
Vision	\$1.34	\$3.48
Dental	\$4.92	\$12.78
Life	\$0.00	\$0.00
<b>All Coverage</b>	<b>\$97.68</b>	<b>\$253.96</b>



Employee premiums collected through payroll deduction that are split between 1<sup>st</sup> and 2<sup>nd</sup> pay dates of each month. If wages insufficient for payroll deductions employee must self pay full monthly premium.

**Employee Engagement and Plan Design resulted in excellent Trust performance.**

● November 2019  
Premium Holiday  
(Employee Only)

● March 2020  
Premium Holiday  
(Employee & Employer)



● November  
2020 Premium  
Holiday  
(Employee & Employer)

**+ No Rate  
Increase for  
2021**

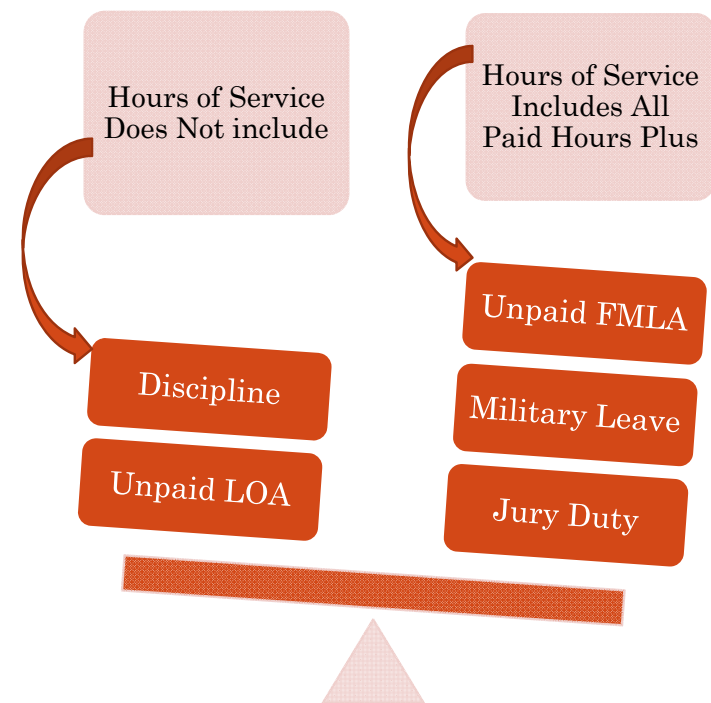
# DETERMINING EMPLOYEE ELIGIBILITY FOR THE PLAN

Full Time (ACA) is defined as 30 Hours of Service or more per week, Non-Seasonal

**Hours of Service = Hours worked + Paid leave**

If eligible, coverage is offered upon completion of 30-day waiting period and is effective first day of the next month

Must complete all forms and wellness screening during waiting period.



# Full Time: Monthly Measurement Method

Looks at employee's Hours of Service each month until placed in a Standard Stability Period (SSP).



- Used for New Hires with 30 or more Hours of Service hours per week (Non-Seasonal)
- Hours measured each month to determine on-going eligibility
  - Eligibility may change monthly based on Hours of Service
- Transition to Look-Back Method following completion of full Standard Measurement Period
- May take up to 24 months for transition from Monthly Method to Look-Back Method

# Part Time, Seasonal or Variable Hour: Look Back

- Offer of coverage is delayed utilizing Initial Look-Back Method to determine benefit eligibility
  - Measures Hours of Service during first full 26 consecutive pay periods
  - Notification will be sent if determined benefit eligible
- Employees may participate in quarterly wellness events and challenges



# Ongoing Eligibility: Standard Look-Back Method



- ALL employees Hours of Service are measured each year
  - Standard Look-back Method (Oct-Oct)
    - Must complete entire period to be measured in Standard Look-Back
    - 2021 Plan Year Eligibility (SSP) - Oct. 13, 2019 to Oct. 10, 2020
    - 2022 Plan Year Eligibility (SSP) - Oct. 11, 2020 to Oct. 9, 2021
  - If eligible, coverage offered for next calendar year

# Eligibility Certification Process

- Spousal Certification Required for lawful spouses seeking Primary Coverage
  - Applies to Health, Prescription, Vision & Dental coverage
  - 2021 Plan Year will use tax forms filed in 2020 (2019 earnings)
  - Spousal Premium, if applicable, is in addition to Family Coverage
    - See Summary Plan Description for spousal income levels and spousal premium rates
- Dependent Certification Required annually for Dependents Ages 20 to 22
  - Applies to Vision and Dental coverage
  - Coverage ends at the end of calendar year in which dependent turns 19 unless certified to continue coverage
  - Conditional on multiple factors including full-time student status
    - Loss of student status = loss of eligibility beginning of next month
- Recertify annually: August 15 to September 15
  - Applies to next calendar year or Plan Year provided no change in eligibility

# Coordination of Benefits: Know the Rules When Enrolled in Multiple Plans

## 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. Parent's birthday that comes first in calendar year is primary.
- Primary coverage must be documented to enroll as secondary

## High Deductible Plans

- IRS restricts enrollment in other coverage if enrolled in a High Deductible Plan that is partnered with a Health Savings Account (HAS)



# STOP LOSS: Insurance for the Insurance Plan

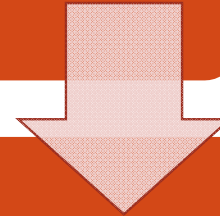


Stop Loss “Hit” results in Eligibility Audit to ensure member was eligible for benefits. If found not eligible, member is responsible for all claims.

# PLAN DESIGN

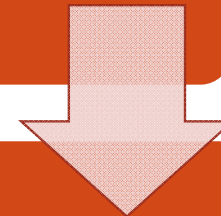
## Participation Features

- 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 secures drugs at a reduced cost and directs patient 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 Provider for greater savings



*Leading the Way  
to Better Healthcare*

# FrontPath

In-Network Providers

View a list of providers at [www.frontpathcoalition.com](http://www.frontpathcoalition.com).

# Use FrontPath Network to Save Money

FrontPath = In-Network

Professional  
Co-Payment  
(Office Visit)  
\$15

ER  
Co-Payment  
\$45

Deductible  
\$150 Single/  
\$450 Family

Co-Insurance  
80%/20%  
\$250 per  
person

**Balance billing protection**

Non-FrontPath = Out-of-Network

Professional  
Co-Payment  
(Office Visit)  
\$15

ER  
Co-Payment  
\$45

Deductible  
\$300 Single/  
\$900 Family

Co-Insurance  
60%/40%  
\$500 per  
person

**No balance billing protection**

←  
Out-of-Network  
Applies to  
In-Network Only  
←

# Benefits of Using In-Network Providers

Provider	FrontPath = In-Network	Non-FrontPath = Out-of-Network
Billed Amount	\$1,000	\$1,000
- Discount* (Only protected In-Network)	<b>\$400</b>	<b>\$200 (Not Balance Bill Protected)</b>
Amount to be Paid	\$600	\$800
Plan Pays	<b>\$480 (80%)</b>	\$480 (60%)
<b>Patient Pays</b> (Co-Insurance)	<b>\$120 (20%)</b>	\$320 (40%)
<b>Patient Total Amount Due**</b>	<b>\$120</b>	<b>\$320 + \$200 = \$520</b>

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

**\$400**



# 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](http://www.meritain.com)
- Release Required to share Protected Health Information (PHI)
  - Annual for family members
  - Release available on county website



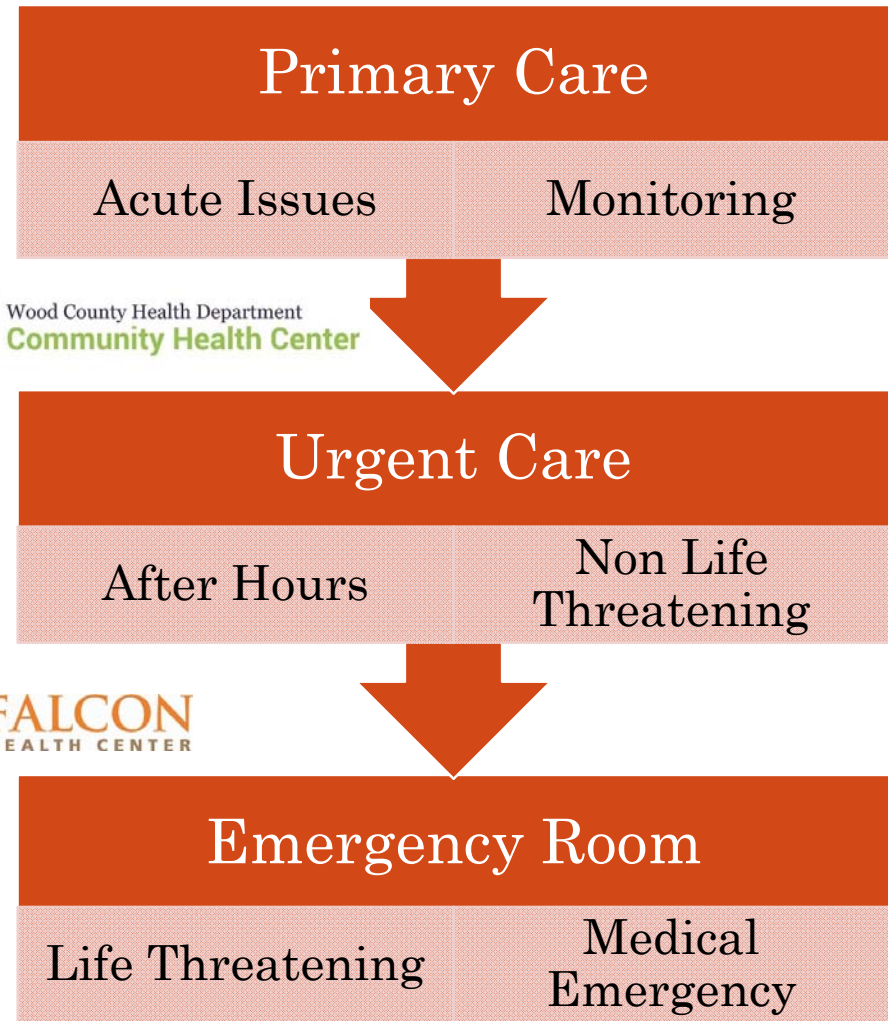
# Checking Claim Status



- 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](http://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**



Wood County Health Department  
Community Health Center



FALCON  
HEALTH CENTER

# Coverage for Telehealth (Virtual Doctor Visits )

- COVID diagnosis coverage ends 1/20/21
- Mental Health Visits coverage ends 3/31/21
- All other telehealth coverage ends 12/31/20

Dates are subject to change to comply with Federal regulations.

# Bending the Trend on Rising RX costs

# Programs developed to save money for you and the plan.

## **Site of Care:**

Allows the Plan to secure medication at the lowest price.

Directs infusions and other high cost medications through the Wood County Hospital or pre-approved facility to save the employee and the Plan money.

## **Prescription Savings Program:**

Provides employees who select the Wood County Community Health Center for primary care to secure a 90-day supply of eligible prescriptions for \$5, including most prescriptions approved under the Medical Necessity Review process

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

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

Location	Co-Payment
Retail Pharmacy 12 – 30-day fills	\$45 per month <b>\$540 annually</b>
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 <b>\$20 annually</b>



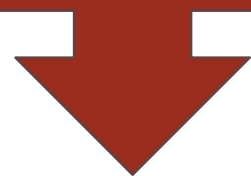
Breo Ellipta Inhaler for  
Asthma

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

**The Plan also  
saves. Up to  
\$1,966 per year.**

# Savings under RX Savings Program

If five people made the switch on this medication alone, the Plan could experience a savings of \$9,830.



Remember, the Plan's  
money is Your money too!



# How to Access the Wood County Community Health Center

## It's Easy!

- Sign-off on a Release of Information to transfer information from current primary care provider to the Community Health Center
- Schedule an appointment
  - Call 419.354.9049
- Can keep your specialist!
  - Reverse referral process for prescriptions

## Center offers:

- Health care services for your entire family
- Pharmacy services for Center patients
- Reproductive health services
- Social work services
- Financial assistance/sliding fee scale for those who qualify (even those with insurance)
- Evening appointments



Wood County Health Department  
**Community Health Center**



# Prescription Savings Program Plan Update



<b>6 Month Period</b>	<b>Employee Savings</b>	<b>Plan Savings</b>
<b>Jan – June 2020</b>	<b>\$6,385</b>	<b>\$146,861</b>
<b>Jan – June 2019</b>	<b>\$12,595</b>	<b>\$166,156</b>
<b>Jan – June 2018</b>	<b>\$10,180</b>	<b>\$119,000</b>

Fewer brand name drugs were filled under the program in 2020; however, the number of generic and specialty medication fills increased.

# DENTAL PROVIDERS

# Where you seek treatment makes a difference



Maximize your savings with a PPO provider.

<b>Sample Cost for a Crown (not actual costs)</b>	<b>PREFERRED (PPO) Dentist</b>	<b>PREMIER Dentist</b>
Submitted Fee	\$950	\$950
Maximum Allowed	\$675	\$898
Coverage Level	50%	50%
Amount Plan Pays	\$337.50	\$449
<b>AMOUNT YOU PAY</b>	<b>\$337.50</b>	<b>\$449</b>

View a list of providers at [www.deltadentaloh.com](http://www.deltadentaloh.com).

# Dental Benefit



- \$100 Annual Deductible
- \$1,500 Annual Maximum per person
- 2 cleanings, 1 bitewing radiograph, and 2 fluoride treatments
- Preventative services not subject to deductible (some limits apply)

# Dental Benefit



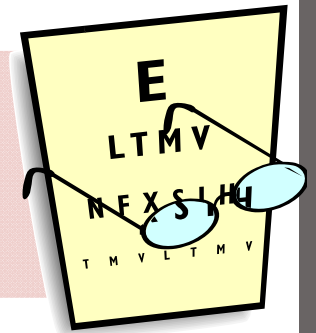
- Useful Tips:
  - Recommend a Preferred Network Provider to make benefits go farther
  - Obtain a Predetermination of Benefits prior to obtaining services of over \$200
  - Discuss composite resin (white) restorations and porcelain crowns on posterior teeth
    - The Plan does not cover the difference in cost on posterior teeth

## Vision Program

- Payable only as primary (no coordination of benefits)
- No restriction on access
- Retro-reimbursement that 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 reset in 2020 (ends Dec. 31, 2021)
- 2020 claims must be submitted prior to March 31, 2021

# WELLNESS PROGRAMS



# Employee Assistance Program



1-800-607-1522

- Available 24/7/365
- Confidential & Free
- Up to 5 visits per presenting issue



# Employee Assistance Program

[www.eaphelplink.com](http://www.eaphelplink.com)

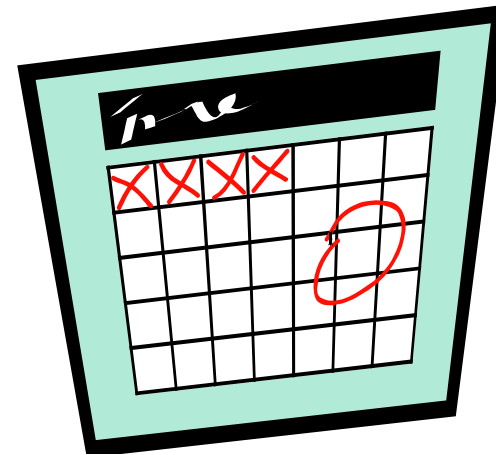
- eLearning Courses
- Savings Center
  - Discount shopping program
- Relocation Center
  - Resources to help with a move
- Locate Providers
  - Child Care
  - Older Adult Services
- Yearly Planners
  - Meal Planner
  - Task Planner
  - Weekly Planner



Refer to the printed Summary Plan Description or see your Group Representative for the Company Code to access the website.

# 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 2019 or 2020
  - Spouses & Dependents currently not eligible to earn deductible credit
- Anytime at the Wood County 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 18 is the Last Day to Complete a Screening for 2020

# 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.

## 1. Complete a Wellness Awareness Screening

Winter Wellness (Jan. – March)	Spring Shape-Up (April – June)	Summer Stretch (July – Sept.)	Fall into Fitness (Oct. – Dec.)
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## 2. Wellness Events (attend one each quarter)

Eligible events will be announced prior to each quarter. Due to the current pandemic, in person events may be limited.

Deferred Compensation webinars and OSU Extension programs will be offered. (Kepro has suspended the eLearning Courses as of December 1, 2020.)

## 3. Six Week Wellness Challenge Options

(complete one each quarter)

<ul style="list-style-type: none"> <li>• Save Your Moola</li> <li>• Stay Hydrated</li> </ul>	<ul style="list-style-type: none"> <li>• Eat Clean</li> <li>• Stand Up for Heart Health</li> </ul>	<ul style="list-style-type: none"> <li>• Stretch &amp; Flex</li> <li>• Make or Break a Habit</li> </ul>	<ul style="list-style-type: none"> <li>• Unplug &amp; Unwind</li> <li>• Make Your Plate Colorful</li> </ul>
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# 2020 Reimbursement Programs

- **Fitness Program**

- Modified requirements January – June 2020 due to COVID-19
- Fitness Program **suspended** for the July – December 2020, (submitted January 2021)

- **Tobacco Termination Program**

- Request reimbursement within 30 days of last dated receipt.
- If dated in December, must be submitted by December 31.

Note: 2021 Wellness Programming is subject to change due to the pandemic. Changes will be communicated.

## TAKE ACTION!

- Report Changes within 30 days of Event
  - Qualifying Events, e.g. birth, wedding, divorce, dependent aging out
  - Gain/Loss of Other Coverage
  - Application Required
- Notify Providers/Pharmacy Following Loss of Benefits
  - COBRA offered
- Review Individual Enrollment Verifications
  - Provided annually to document enrollment and after changes made to Plan
    - Only use legal names as listed on Social Security Cards
    - Report primary coverage if electing secondary at County
    - Immediately report errors to Group Representative

# Open Election: Nov. 15 to Dec. 15

Changes permitted without  
a Qualifying Event/Special Enrollment Right

## Application Required

Application and other required forms must be  
received by your Insurance Group  
Representative by 4:30 p.m. on Dec. 15

# Public Employee Benefits

- OPERS: [opers.org](http://opers.org)
  - Create an on-line account
  - Notify OPERS of address changes – employer cannot update on your behalf
  - Webinars and Recorded Presentations Available:
    - Bridging the Gap to Retirement & Personal Budgeting
    - Ready to Retire (Pension/Health Care)
    - Active Member Pension & Health Care Updates
- Social Security: [ssa.gov](http://ssa.gov)
  - On-line Retirement Estimator
  - Public Sector Employee Information:
    - Government Pension Offset & Windfall Elimination Provision



# 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.woodcountyohio.gov/employee](http://www.woodcountyohio.gov/employee)

County website and employee email addresses are transitioning to new [www.woodcountyohio.gov](http://www.woodcountyohio.gov) extensions.

## **Have questions about your coverage?**

- Call Number on back of Insurance Card
- Refer to the Plan Administrator Information on the back page of the Summary Plan Description
- Contact your Insurance Group Representative or the Commissioners' Office at 419.354.9100