



YOU MATTER!

2015 WOOD COUNTY EMPLOYEE HEALTH BENEFITS PLAN



FOUNDATION OF THE PLAN

**Trustees
of the Plan**

Board of County
Commissioners

James Carter
Doris Herringshaw
Joel Kuhlman

Committee Members

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

Insurance Consultant

Jason Beaver

Third Party Administrators

Health: Stacey Kelley, Meritain Health
Prescription: Tammie Wormley, PDMI
Dental: Karen Chapman, Delta Dental

Administrative Support

Cheryl Albrecht, Rachel Richmond, Steve Puffer,
Janese Diem, Pamela Boyer, Andrew Kalmar

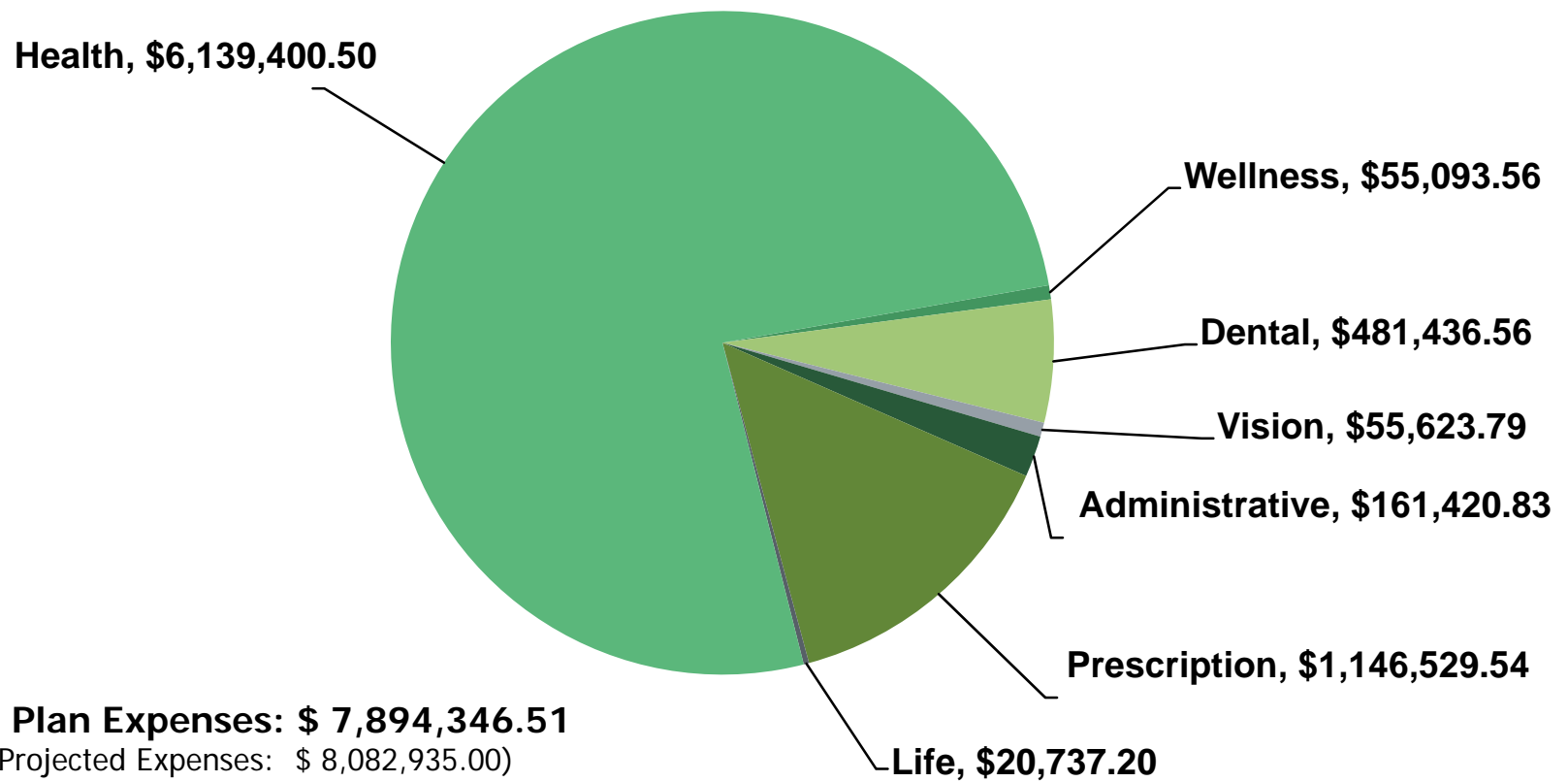
Engaged Members

You

STATUS REPORT

2013 Plan Expenses: \$ 8,060,241.98

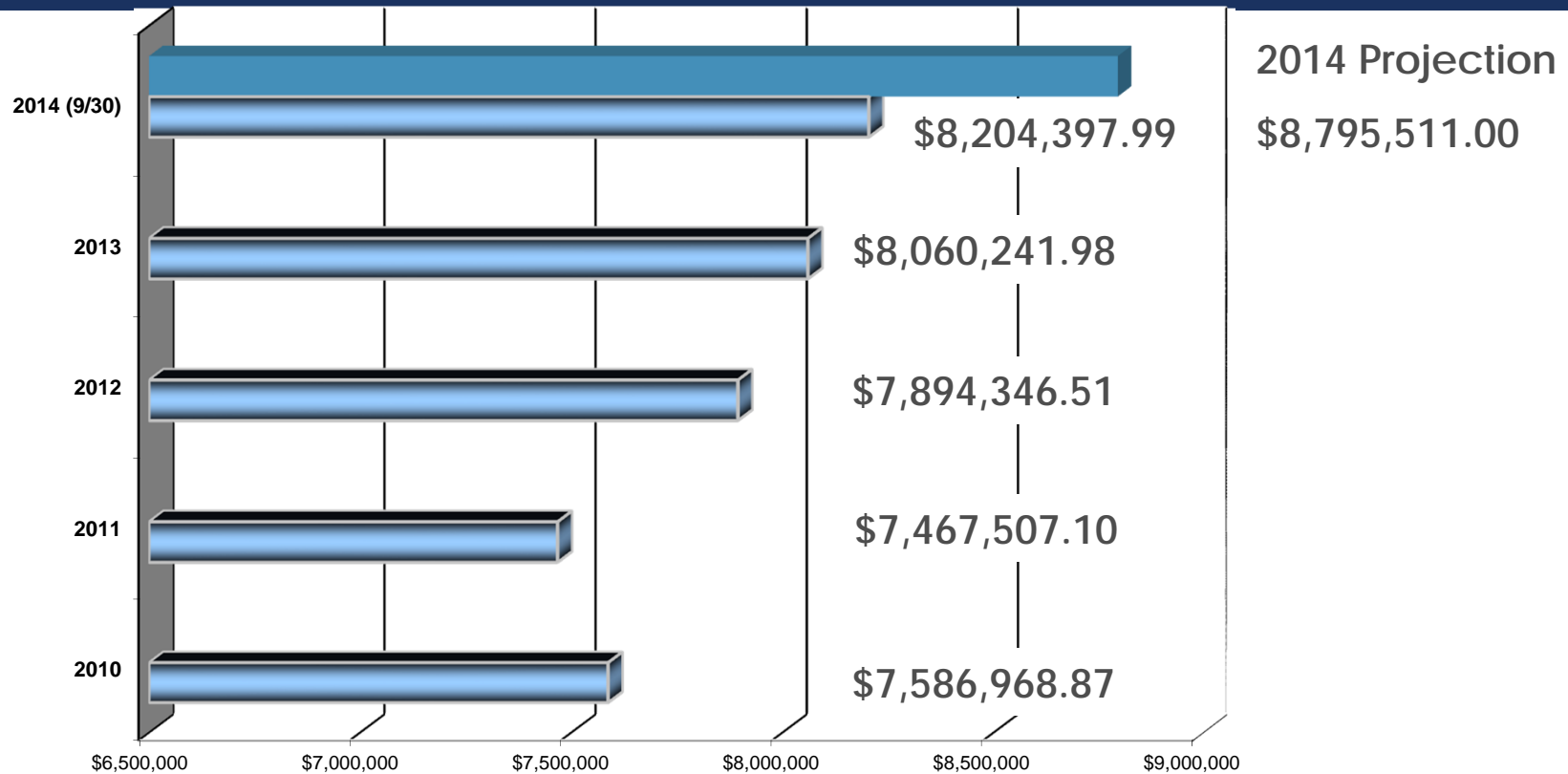
(2013 Projected Expenses: \$ 8,306,883.00)



2012 Plan Expenses: \$ 7,894,346.51

(2012 Projected Expenses: \$ 8,082,935.00)

TOTAL PLAN EXPENSES 2009 - 2014 YTD (9/30)



2015 Estimated Plan Costs: \$10,697,648.49

2015 PROJECTED EXPENSES

- 2015 Total Plan Costs: \$10,697,649
 - Health:
 - Medical inflation = 9%
 - Higher Claim Utilization due to catastrophic claims
 - Prescription:
 - Medical inflation = 8% on non-specialty drugs, 20% on specialty drugs
- Change Single to Family Contract Ratio
 - 2.4 to 2.6 based on number of dependents
- Stop Loss Changes due to unlimited liability
 - Incorporated prescription under umbrella
- Elimination of Trust to Fund Premiums
 - Trust off-set portion of employer/employee premium 2010 – 2014
- Affordable Care Act
 - \$146,078 paid in fees to federal government in 2014 & 2015

PLAN FUNDING

Our Health Benefits Trust

Employer

85%



Employee

15%



Payment
of Claims

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

2015 MONTHLY RATES

	<u>Coverage</u>	<u>Total</u>	<u>Employer</u>	<u>Employee*</u>	<u>Trust</u>
Single	Health & Rx	\$ 587.58	\$ 499.44	\$ 88.14	\$ 0
	Vision	\$ 7.76	\$ 6.60	\$ 1.16	\$ 0
	Dental	\$ 32.46	\$ 27.60	\$ 4.86	\$ 0
	Life	\$ 8.12	\$ 8.12	\$ 0	\$ 0
	Total Single	\$ 635.92	\$ 541.76	\$ 94.16	\$ 0
Family	Health & Rx	\$ 1,527.68	\$ 1,298.54	\$ 229.14	\$ 0
	Vision	\$ 20.18	\$ 17.16	\$ 3.02	\$ 0
	Dental	\$ 84.40	\$ 71.74	\$ 12.66	\$ 0
	Life	\$ 8.12	\$ 8.12	\$ 0	\$ 0
	Total Family	\$1,640.38	\$1,395.56	\$244.82	\$ 0

* Split between first and second pay dates of the month. May be deducted on a pre-tax basis.

Employees are responsible to pay 15% of the total cost for coverage. Spousal & Adult Child Premium rates are in addition to a family contract.

IMPACT OF FEDERAL HEALTH CARE REFORM

- Trustees believe that this Plan is a “grandfathered” health plan within the meaning of section 1251 of the Affordable Care Act (ACA)
 - Plan provides minimum essential coverage; and
 - Meets the minimum value standard for the benefits it provides

IMPACT OF FEDERAL HEALTH CARE REFORM

- Shared Responsibility
 - No requirement to change eligibility in 2015 (safe harbor)
 - Reporting requirement to Federal Government in 2016 based on 2015 monthly enrollment with dependents by SS#
- Elimination of Certificates of Credible Coverage
- Updated Summary of Benefits and Coverage (SBC) available on employee website
- ACA Fees
 - Patient-Centered Outcomes Research Institute Fee (PCORI through 2019):
 - Approx. \$2,628 (\$2 ea.) in 2014 & \$2,741 (\$2.08 ea.) in 2015
 - Transitional Reinsurance Fee (TRF through 2016):
 - Approx. \$75,600 (\$63 ea.) in 2014 & \$57,992 (\$44 ea.) in 2015
- Unified Enrollment in Health & Prescription required in 2015

PLAN PERFORMANCE

Participation Features

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

Plan is designed for early treatment to avoid delayed care which increases pain/suffering and expenses.

Schedule of Benefits

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

Carrot vs. Stick

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

HEALTH INSURANCE

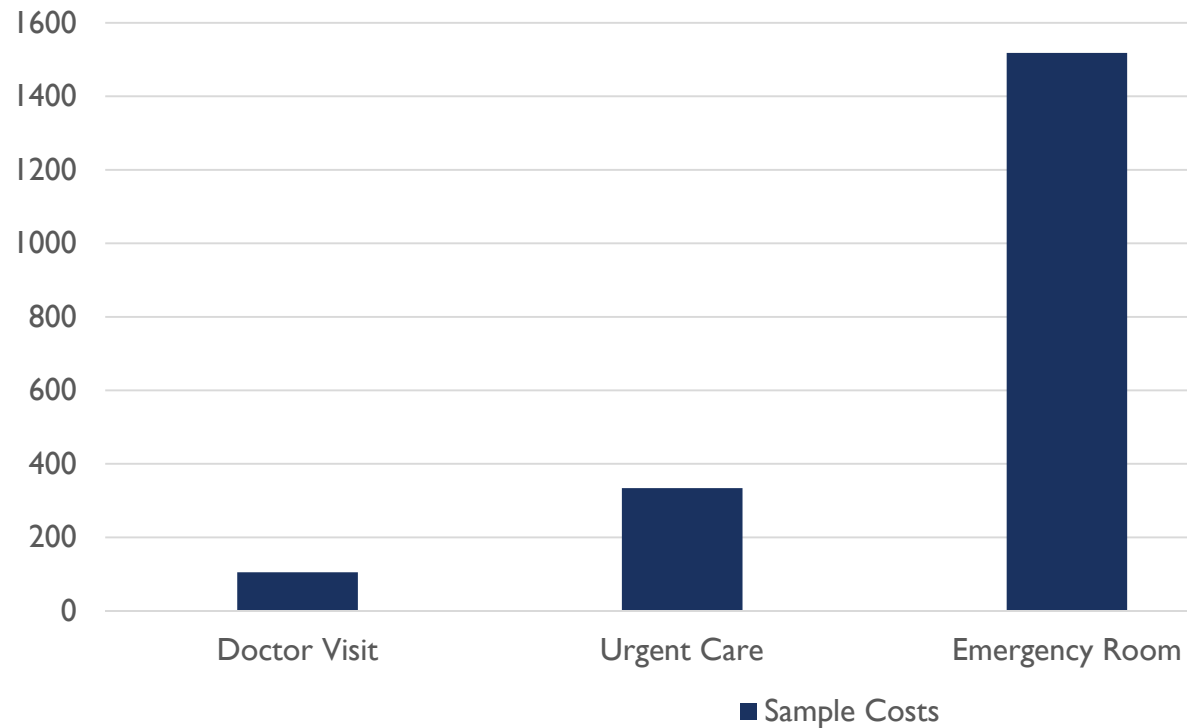
Third Party Administrator: Meritain Health
Network: FrontPath Health Coalition

Service	In-Network	Out-of-Network
Co-Payment (outside of deductible and co-insurance)	\$10 per Office Visit \$35 per ER Visit	\$10 per Office Visit
Deductible	\$150 Single \$450 Family	\$300 Single \$900 Family
Co-Insurance Percentage	80% Plan 20% Participant	60% Plan 40% Participant
Co-Insurance	\$250 Single \$750 Family	\$500 Single \$1,500 Family
Out-of-Pocket Maximum (deductible and co-insurance)	\$400 Single \$1,200 Family	\$800 Single \$2,400 Family

TAKE ACTION

- Have a primary care physician
 - Provide preventative care and teach healthy lifestyle choices
 - Identify and treat common medical conditions
 - Assess the urgency of your medical problems and direct you to the best place for that care
 - Make referrals to medical specialists when necessary
- How to find a primary care physician
 - FrontPath – provides directory of physicians
 - Wood County Community Health & Wellness Center (Wood County Health District)

KNOW YOUR PLAN



ER Treatment must be rendered within 72 hours of onset of symptoms. For a definition of Medical Emergency see the Plan Document.

TAKE ACTION

- Pre-Certification is the ultimate responsibility of the member on the following services
 - Hospital Care – Inpatient (including Mental Disorders and Substance Use Disorders)
 - Emergency room visit that leads to inpatient care
 - Birth of baby
 - Extended Care Facility/Skilled Nursing Facility
 - Outpatient Occupational or Physical Therapy - after 15 visits/year
 - Transplants
 - Chemotherapy or Radiation
 - Inpatient, Outpatient, or Physician's Office
- Penalty applied for non-compliance
 - 50% reduction in schedule of benefits

PRESCRIPTION:

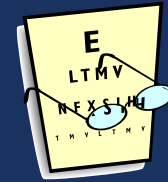
Pharmacy Benefits Direct, Inc. (PDMI)

- Pharmacy Network Required
 - Includes all area chain pharmacies – Meijer, Wal-Mart, RiteAid, CVS, WalGreens, etc.
- Retail Pharmacy Co-payments per Rx (Max 34 day supply)
 - Select OTC \$0
 - Tier 1 – Generic \$5
 - Tier 2 - Brand Name Formulary \$15 + 20% of the AWP \$35 max
 - Tier 3 - Brand Name Non-Formulary \$15 + 20% of the AWP \$65 max
- Mail Order: MedVantX (Max 90 day supply)
 - Select OTC \$0
 - Tier 1 - Generic \$10
 - Tier 2 - Brand Name Formulary \$30 + 20% of the AWP: \$70 max
 - Tier 3 - Brand Name Non-Formulary \$30 + 20% of the AWP: \$130 max

TAKE ACTION

- Price Shop for Prescriptions
 - RxEOB website
 - Use Lowest Tier for Cost Savings
 - Free OTC with Prescription: Nexium OTC & Nasacort OTC
 - Watch for changes in 2015 Formulary
 - Use the Mail order for refills on maintenance drugs
 - 3 months for the price of 2
 - 30-day script must be filled at pharmacy prior to using 90-day mail order
 - Free or \$4/\$10 generics at pharmacy
 - List of prescriptions varies by pharmacy
 - Present your insurance cards to check for drug interactions

VISION



- Reimbursement 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
- Benefit Period and Reimbursement Limit
 - \$200 per participant during 2 year period ending 12/31/15
 - 2014 claims must be submitted prior to March 31, 2015
- Covers
 - Exams
 - Prescription glasses/frames and contacts
 - Refractive Surgery

DENTAL

Third Party Administrator: Delta Dental



- Delta Dental Premier or Preferred Network
- \$100 Annual Deductible / \$1,500 Annual Maximum per person
- Class I: Covered at 100% of UCR & not subject to deductible:
 - 2 cleanings, 2 fluoride treatments, 1 set bitewing radiographs, sealants under age 14
- Class II: Covered at 80% of UCR after deductible
 - Radiographs (full mouth x-rays 1x in 5yr), Oral Surgery, Minor Restorative, Periodontics, Endodontics
- Class III: Covered at 50% of UCR after deductible
 - Prosthodontics, Major Restorative
 - Orthodontics (\$1,500 per lifetime not subject to deductible - to the end of the year in which they turn 19)
- Useful Tip: Predetermination of benefits for services over \$200

LIFE INSURANCE: METLIFE



- Term Insurance
 - \$20,000 policy
- Benefit Terminate at Separation of Employment
 - Conversion Opportunities
- Accelerated Death Benefit
- Waiver of Premium
- Life Certificate Available on Employee Website
 - New vendor for 2015

TAKE ACTION: ENGAGE IN YOUR HEALTH

Are you
happy with
your current
health
status?

Catastrophic

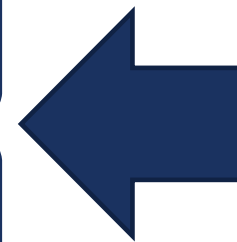
Disease Management

Lifestyles

Screenings



Generally more
difficult to start
from the top and
work down



Generally easier
to manage health
issues at an early
state

YOU MATTER!

WHAT YOU DO IS YOUR CHOICE

- Participate to be Entered to Win Quarterly Prizes
- Earn a \$100 Deductible Credit on 2016 Health Coverage
 - 1. Know Your Numbers
 - Automatic credit given for participation in 2013 or 2014
 - 2. Stay Informed
 - Attend Annual Insurance Meeting for the 2016 Plan Year
 - 3. Get Engaged - You Pick Categories
 - Complete one program in three of the four categories:
 - Exercise/Fitness Program
 - Diet/Nutrition Program
 - Stress Reduction/Well-Being Program
 - Tobacco Termination

WELLNESS PROGRAM ELIGIBILITY

- Available to employees and their family members eligible for coverage regardless of enrollment
 - You already pay for programming in your premiums, so participate and get money back.
- Part-time employees encouraged to participate
 - Prizes and quarterly drawings
 - Deductible credit if become eligible for benefits
 - Not eligible for wellness screenings or reimbursement as the Plan pays costs associated with these programs

KNOW YOUR NUMBERS

- Appointments available at your convenience at the Wood County Hospital
 - We pay if you keep your appointment
- Confidential Results with Wellness Coach
 - Identify Risk Factors
 - Set Goals for Improvement
- Maintain Not Gain = Improvement

NEW FOR 2015

- Anytime Challenges
 - Couch to 5K
 - Set a goal to walk or run a 5k
 - Catch Some ZZZs Challenge
 - Sleep is an important part to maintain a healthy lifestyle
 - Sleep hygiene can help maximize hours spent sleeping
 - Get Fit for Fall: Stretch and Flex Challenge
 - 10 week program using Active for Life website



TAKE ACTION

- Open Election: Nov. 15 to Dec. 15
 - Changes permitted without a Qualifying Event/Special Enrollment Right
- Unified Enrollment on Health & Prescription Coverage effective 1/1/15
 - Enrollment in Health must match Prescription
 - Same coverage: Single or Family contract
 - Same dependents if Family coverage

TAKE ACTION

- Review Individual Enrollment Verifications
 - Only use legal names as listed on Social Security Cards
 - 2015 enrollment reported to federal government in 2016
 - Report primary coverage if electing secondary at County
- Report Changes within 30 days of Event
 - Qualifying Events, e.g. birth, wedding, divorce
 - Changes in primary/secondary coverage
- Coordination of Benefits

EMPLOYEE WEBSITE: WWW.CO.WOOD.OH.US/EMPLOYEE

Insurance x
 www.co.wood.oh.us/employee/insurance/default.html

Wood County Employee Information and Links

Home | Policies | Forms | Insurance | Wellness | Safety | Newsletter | Department Head Meetings | Web Links | Training | Wood Lane Employees

Employee Health Benefits Plan

Wood County is committed to maintaining a quality, affordable health care plan for its employees, although it is not a statutorily-mandated benefit.

The Commissioners are the trustees of the Health Benefits Plan. They believe this governmental, self-insured, non-ERISA Plan is a "grandfathered health plan" under the Federal Health Care Reform: Patient Protection and Affordable Health Care Act. As permitted by this Act, a grandfathered health plan can preserve basic health coverage that was already in effect when the law was enacted. Questions regarding which protections apply and which protections do not apply to a grandfathered health plan and what might cause a plan to change from grandfathered status can be directed to the Commissioners' Office at 419.354.9100. You may also contact the U.S. Department of Health and Human Services at www.healthreform.gov.

Members of the Employees Health Benefits Committee take their role of preserving the long-term viability of employee benefits very seriously. Their task is difficult when weighing employee satisfaction and preservation of benefits.

Plan Document (Subscriber Booklet)

Summary Plan Description	2014	2015
Plan Administrators and Network Information	2014	2015
Prescription Formulary	2014	2015 - Coming Soon
Marketplace Notice	2014	2015
Summary of Benefits and Coverage	2014	2015 - Coming Soon

Wellness Programs

Miscellaneous Documents

- Dental Certificate
- Dental Summary of Benefits
- Life Certificate through 12/31/14
- Glossary of Health Coverage and Medical Terms

Forms

- Universal Application
- Eligibility Guide
- Dependent Certification
 - 2014 Plan Year
 - 2015 Plan Year
- Spousal Certification
 - 2014 Plan Year
 - 2015 Plan Year
- Spousal Eligibility Exception Review [\(Policy\)](#)
- OBRA Primary Coverage Selection
- Health Claim Form
(Use mailing address on back of insurance card)
- Prescription Claim Form [Mail Order Program](#)
- Vision Claim Form
- Dental Claim Form
- Prescription: Request for Medical Necessity Review
- COBRA Personnel Action Report
- HIPPA Confidentiality Statement
- Wellness Waiver

Links

- FrontPath Health Coalition (Primary Network) [View Presentation](#)
- HealthSmart (Wrap Around Network)
- Meritain Health
- Delta Dental
- RX FOB
- Database of Low Cost or Free Medications Available at Pharmacies

Group Representative Forms

- 2015 Insurance Schedule
- 2014 Insurance Schedule
- Monthly Insurance Report (excel file)
- Monthly Vision Report (excel file)
- Part Time Employee Insurance Checklist
- Full Time Employee Checklist

Previous Group Rep Presentations

QUESTIONS?

- Jason Beaver, Mercer Insurance Consultant
- Stacey Kelley, Meritain Health
- Tammie Wormley, Pharmacy Benefit Direct, Inc. (PDMI)
- Karen Chapman, Delta Dental
- Commissioners' Office Staff
 - Cheryl Albrecht
 - Rachel Richmond
 - Janese Diem
 - Pamela Boyer
 - Andrew Kalmar

Thank You!