



Travis County Commissioners Court Agenda Request

Meeting Date:	June 10, 2014, Voting Session
Prepared By:	Shannon Steele, HRMD 854-6046 <i>Sms</i> John Rabb, HRMD 854-2472 <i>JR</i>
Elected/Appointed Official/Dept. Head:	Leroy Nellis, County Executive 854-8679
Sponsors:	Judge Samuel T. Biscoe <i>Leroy Nellis</i>

AGENDA LANGUAGE:

Consider and take appropriate action on the following employee healthcare items for Fiscal Year 2015 plan year, effective October 1, 2014.

- A. Discuss FY 15 Health Benefit plan design changes.
- B. Discuss contribution levels for Travis County Employee Health Plan for FY 15.
- C. Discuss funding of fully insured Vision insurance for FY 15.
- D. Discuss FY 15 Open Enrollment Dates as August 1, 2014 through August 30, 2014.
- E. Discuss passive Open Enrollment process for FY 15, allowing employees to continue with current benefit elections if no action is taken by the employee with the exception of the two Flexible Spending Accounts, Employee Only Vision coverage and Employee Only PPO Health coverage.

BACKGROUND/SUMMARY OF REQUEST AND ATTACHMENTS:

TRAVIS COUNTY EMPLOYEE BENEFIT PLAN FY 15 PLAN YEAR RENEWAL

On February 19, 2014, HRMD benefits staff and managers throughout the County were presented with the Plan Executive Report from United HealthCare (UHC). This Executive Report provided an analysis of the prior plan year costs, claims experience, plan trends and high dollar cost drivers. In April 2014, Milliman, the plan actuary, provided HRMD benefits staff with the initial actuary report indicating a higher than budgeted trend, driven by an increase in the number of high cost claimants, higher than expected prescription drug costs, and the high claim costs on the Travis County EPO Health Plan.

Since January, Purchasing, HRMD Benefits Staff and the RFP Evaluation Committee have conducted, reviewed and analyzed RFP responses for Third Party Administration (TPA) services, Pharmacy Benefit Management (PBM) services, Vision Insurance and Stop Loss Insurance. The result of the RFP process will yield lower administration costs to the health plan, lower prescription costs and a reduction in the overall cost of the vision plan for the County and the participants. With these cost reductions and updated claim experience, Milliman reduced the expected trend to the FY15 projected cost. The overall increase to the plan for FY15 is expected to be 4.64%, which is down from the initial Milliman projection of 6.29%. Along with these changes Milliman has incorporated plan design changes that are required by the Patient Protection and Affordable Care Act (PPACA or ACA).

Proposed Health Benefit Plan Design Changes

Out-of-Pocket Maximums

For FY 15, the County health plans will be required to apply all medical and pharmacy out-of-pocket expenses towards an annual out-of-pocket maximum. This maximum must be at or below \$6,350 per year per individual and \$12,500 for a covered family per year. The maximum must include all medical and prescription copays in addition to deductibles and co-insurances.

Currently, each County health plan has an out-of-pocket maximum for the deductible and co-insurance out-of-pocket expenses only. The plans do not accumulate medical or pharmacy copays towards this out-of-pocket maximum. In order to comply with the requirements and not cause a significant increase to the cost to the plan, the Benefits Committee recommends an increase in the medical out-of-pocket maximum and the introduction of a prescription out-of-pocket maximum. Both of these changes will keep the plans compliant and will be below the required threshold. This could also be a positive change for some of the plan participants as they will have a defined annual out-of-pocket maximum which would now include their medical and pharmacy copays.

As part of this change, the Benefits Committee is also recommending changes to the Hospital in-patient coverage for the PPO and CEPO plans. Both plans require a \$100 per day copay and then deductible and co-insurance after the copay. This benefit design meant members would always have a cost-share for hospitalizations even if the deductible and co-insurance reached the maximum. Now that all expenses must accumulate towards the out-of-pocket maximum, this benefit design is no longer applicable and is recommended for change. The committee is recommending the EPO plan design for hospitalizations remain the same (\$100 copay per day up to 4 days per confinement) but remove the \$1,000 annual copay maximum. All out-of-pocket expenses will now accumulate towards the overall medical \$3,500 maximum.

Mental Health Parity Requirements

For FY 15, the Benefits Committee is also recommending changes to the Mental Health and Substance Abuse coverages to remain compliant with the final regulations of the Mental Health Parity and Addiction Equity Act issued in November 2013. In summary, the regulations eliminated treatment or visit limits that differed between mental health or substance use benefits and medical/surgical benefits. Financial requirements, such as deductibles, copayments, and coinsurance, cannot be greater for mental health/ substance use benefits than for medical/surgical benefits.

In regards to office visit copays for mental health and substance abuse services, if the predominant level of a type of financial requirement that applies to substantially all medical/surgical benefits in a classification is the one charged for a medical/surgical generalist, then the financial requirement charged for all mental health or substance use benefits within that classification cannot be higher than the "generalist" financial requirement for medical/surgical benefits. Therefore the benefit committee recommends making all mental health/substance abuse services copays equal to the copays for primary care services.

Proposed Health Plan Rates for Fiscal Year 15

HRMD benefits staff presented the Benefits Committee with its analysis, the latest available actuary data, and several plan options. The Benefits Committee recognized that increased funding will be required from the County employees and retirees for the FY 15 health plan. This will only be the fourth time in the last seven years that the plan has required a rate increase. The most recent increase was for the current FY 14 plan year and the last time before that was for FY 11. The Benefit Committee recognized the limited availability of resources in FY 15 and the need to further refine the plan to promote long-term stability. The Benefits Committee discussed and weighed all of the various options carefully, which resulted in the recommendation of Option 1 below. The recommended increases required from the County employees and retirees have been minimized by the proposed administrative and plan changes to provide a balance between reasonable contribution costs and out of pocket expenses. This Option shares the cost increase between the County and employees/retirees and introduces a \$10 premium for the Employee Only PPO coverage tier.

Option 1 - Required Plan Design Changes, Shared Premium Increase and \$10 PPO Employee Only Contribution

With the recommended benefit plan design changes and a \$10 premium for PPO Employee Only coverage, the increase in per employee per month (PEPM) contributions is as follows:

- County Contribution Increase of \$2,657,272 is based on:
 - 4.00% increase for Active employees
 - 4.75% increase for Retirees under 65
 - 4.55% increase for Retirees 65 and older
 - 125 Anticipated new retirees added to the plan during FY 15
- Employee Contribution Increase
 - 5.54% rate increase paid by Active employees
 - 4.84% rate increase paid by under 65 Retirees
 - 3.33% rate increase paid by Retirees 65 and older

Making the required plan design changes to the FY 15 benefit levels for the EPO, PPO and Co-Insured EPO plans, and changing the Employee Only premium for the PPO plan would require a \$2,657,272 increase to the County contribution and approximately a 4.7% increase in employee premiums.

Option 2 - Required Plan Design Changes, Shared Premium Increase and \$5 PPO Employee Only Contribution

With the recommended benefit plan design changes and a \$5 premium for PPO Employee Only coverage, the increase in per employee per month (PEPM) contributions is as follows:

- County Contribution Increase of \$2,773,204 is based on:
 - 4.26% increase for Active employees
 - 4.75% increase for Retirees under 65
 - 4.55% increase for Retirees 65 and older
 - 125 Anticipated new retirees added to the plan during FY 15
- Employee Contribution Increase
 - 4.01% rate increase paid by Active employees
 - 4.84% rate increase paid by under 65 Retirees
 - 3.33% rate increase paid by Retirees 65 and older

Making the required plan design changes to the FY 15 benefit levels for the EPO, PPO and Co-Insured EPO plans, and changing the Employee Only premium for the PPO plan would require a \$2,773,204 increase to the County contribution and approximately a 4.7% increase in employee premiums.

Health Plan Rate Recommendation

The Benefits Committee recommends Option 1 for approval. The FY 15 cost to the County for Option 1 is \$115,932 less than Option 2. The Planning and Budget Office has included \$2,657,272 for Option 1 in planning parameters for the FY 15 budget process. This option was recommended since the Benefits Committee felt that this solution struck a balance between what was affordable for FY 15 and continues to address long-term cost considerations, including the over-utilization of certain benefit plan features.

Proposed Vision Insurance Funding for FY 15

The County is currently funding \$3.00 per employee/retiree per month for Employee Only Vision coverage. All employees are enrolled in the vision coverage if enrolled in a County health plan and the premium has been included in the Third Party Administration admin fee paid by the County to United HealthCare each month. If employees or retirees elected to cover dependents under the vision insurance, then they were responsible for paying the additional premium through payroll deduction or through direct billing for retirees.

The County now has two options for coverage with the vision insurance. Option 1 is for fully voluntary coverage and the employee/retiree would be responsible for the full premium including Employee Only coverage. Option 2 is a continuation of the current funding method and enrollment process. The Benefits Committee recommends Option 1 for approval.

Vision Option 1 – Voluntary Coverage for all Vision Coverage Tiers

This funding option is a change to the funding method currently used for Vision insurance. The County could elect to change and make the vision coverage fully voluntary, even for Employee Only coverage. Since the enrollment numbers typically are reduced with this type of coverage, the overall rates are slightly higher than Option 2. This option does allow for employees who have declined health coverage with the County to enroll in the Vision coverage.

Estimated annual County funding for this option would be \$0.00 and would be an annual savings of \$180,043.00 compared to Option 2. This amount is based on enrollment of 5,247 employees and retirees as of April 2014. Based on the competitive bid process the rates for dependent coverage for this option will be below the current dependent coverage rates.

Vision Option 2 – County Funded Employee Only Vision; Voluntary Coverage for Dependents

The second funding option is a continuation of the current funding and enrollment process. The County would fund the Employee Only coverage for all enrollees of the County's health insurance. The employee or retiree would then pay the difference between the Employee Only coverage and the total premium if they wish to enroll dependents in the plan. Currently we enroll all employees who have elected health coverage into an Employee Only vision

plan unless the employee selects to enroll dependents as well. This option does not however allow for an employee to take the vision coverage if they have declined enrollment in health coverage.

Estimated annual County funding for this benefit option is \$180,043.00 This amount is based on enrollment of 5,247 employees and retirees as of April 2014. The current Vision plan is \$3.00 for Employee Only coverage and would be \$2.86 for Option 2.

Vision Recommendation

The Benefits Committee recommends approval of Option 1 for October 1, 2014. This would be at no cost to the County.

Open Enrollment Process for FY 15

Court approved a "passive" open enrollment process for FY 14. This meant all employee benefit elections, with the exception of Flexible Spending Accounts, were rolled over from FY 13 unless the employee elected to make a change. This process was approved for both active employees and retirees. This process was well received by both employees and retirees and the feedback was very positive. It is also recommended that Court approve the Open Enrollment dates as August 1, 2014 through August 30, 2014.

For FY 15, the Benefits Committee is recommending passive enrollment again with the following exceptions. The health and vision exceptions would only apply if Court approves Option 1 for the health plan rates and Option 1 for the vision funding.

- Employees enrolled in Employee Only PPO Medical. If Court approves Option 1, the Employee Only PPO premium would increase from \$0 to \$10 per month. It is recommended employees enrolled in this option are not rolled over automatically and would need to make an enrollment election for FY 15. Employees enrolled in this tier will be specifically notified and if a medical coverage selection is not made by the end of Open Enrollment they will be defaulted to CEPO Employee Only coverage. This only applies to active employees and not retirees.
- Employees/Retirees enrolled in Employee Only Vision. If Court approves the recommendation, the Employee Only Vision coverage will be increasing from \$0 to \$4.26 per month. It is recommended employees enrolled in this option are not rolled over automatically and would need to make an enrollment election for FY 15. Employees enrolled in this tier will be specifically notified and if a vision coverage selection is not made by the end of Open Enrollment they will be defaulted to no Vision coverage.
- Flexible Spending Accounts. Both medical and dependent care flexible spending accounts require an annual election each year. If an employee does not re-enroll then their election does not roll over to the next year.

Attachments:

- **Attachment 1** – Recommended FY 15 Plan Design Changes
- **Attachment 2** – Summary of Health Contribution Rates for Options 1 and 2
- **Attachment 3** – Active Rate Changes for Option 1 – With Plan Design Changes
- **Attachment 4** – Under 65 Rate Changes for Option 1 - With Plan Design Changes
- **Attachment 5** – 65 and Over Retiree Rate Changes for Option 1 - With Plan Design Changes
- **Attachment 6** – Benefits Update Presentation

STAFF RECOMMENDATIONS:

Action items will be presented to the Court following the Employee Hearing.

ISSUES AND OPPORTUNITIES:

Staff believes that employee education and engagement will continue to be critical to the success of the health plan program on an ongoing basis. If the employees respond and take ownership of programs through the County's wellness program as well as with United Healthcare, collectively plan participants can reduce the rate of future increases to the pharmacy and medical plan and empower participants to be good healthcare consumers on an ongoing basis.

HRMD benefits staff continues to monitor and follow the legislative process for the Patient Protection and Affordable Care Act (PPACA). Recommended plan design changes are in compliance with the provisions in the Act.

FISCAL IMPACT AND SOURCE OF FUNDING:

The fiscal impact to the FY 15 budget for the recommended Option 1 to the General Fund is \$2,657,272. The Planning and Budget Office believes that this amount can be accommodated within the available resources currently estimated for FY 15.

REQUIRED AUTHORIZATIONS:

Human Resources Management John Rabb
Human Resources Management Shannon Steele
Human Resources Management Debbie Maynor
Planning and Budget Office Diana Rodriguez
Planning and Budget Office Leroy Nellis
County Judge's Office
Commissioners Court

Attachment 1

Recommended Benefit Plan Design Changes

Current Deductible	\$300 Individual \$750 Family	\$500 Individual \$1,250 Family	\$1,000 Individual \$2,500 Family	\$700 Individual \$1,750 Family
Current Coinsurance	100% / 0%	90%/ 10%	60%/40%	80% / 20%

Proposed Benefit Changes	EPO	PPO In-Network	PPO Out-of-Network	Co-Insured EPO
Medical Out-of-Pocket Maximum (only includes deductible and co-insurance)	\$1,500 Individual None - Family	\$3,000 Individual \$6,000 Family	\$4,000 Individual \$7,500 Family	\$3,000 Individual \$6,000 Family
Proposed Medical Out-of-Pocket Maximum – (include all copays, deductible, co-insurance and any other out-of-pocket expense)	\$3,500 Individual \$7,000 Family	\$3,500 Individual \$7,000 Family	\$4,500 Individual \$9,000 Family	\$3,500 Individual \$7,000 Family
Pharmacy Out-of-Pocket Maximum	No maximum	No maximum	No maximum	No maximum
Proposed Pharmacy Out-of-Pocket Maximum	\$2,500 Individual \$5,000 Family	\$2,500 Individual \$5,000 Family	\$2,500 Individual \$5,000 Family	\$2,500 Individual \$5,000 Family
Current Hospital - Inpatient Stay	\$100 co-pay per day up to 4 days confinement, plus Deductible (\$1,000 annual co-pay maximum)	\$100 co-pay per day up to 3 days confinement, plus Deductible & Coinsurance (\$1,000 annual co-pay maximum)	\$125 co-pay per day up to 3 days confinement, plus Deductible & Coinsurance (\$1,000 annual co-pay maximum)	\$100 co-pay per day up to 2 days confinement, plus Deductible & Coinsurance (\$1,000 annual co-pay maximum)
Proposed	\$100 co-pay per day up to 4 days confinement, plus Deductible	Deductible + Coinsurance	Deductible + Coinsurance	Deductible + Coinsurance
Current Mental Health and Substance Abuse Office Visit Services	\$35 per visit for a PCP, \$50 per visit for a Specialist	\$30 per visit for a PCP, \$45 per visit for a Specialist	Deductible + Coinsurance	\$25 per visit for a PCP, \$40 per visit for a Specialist
Proposed	\$35 Copay	\$30 Copay	Deductible + Coinsurance	\$25 Copay
Current Mental Health and Substance Abuse Services – Inpatient and Intermediate Network and Non-Network Benefits are limited to 2 series per lifetime.	\$100 Co-pay per day up to 4 days confinement and deductible *Call Care Coordination for authorization PRIOR to receiving services	\$100 Co-pay per day up to 3 days confinement, then Ded+Coinsurance *Call Care Coordination for authorization PRIOR to receiving services	\$125 Co-pay per day up to 3 days confinement, then Deductible+Coinsurance *Call Care Coordination for authorization PRIOR to receiving services	\$100 Co-pay per day up to 2 days confinement, then Ded+Coinsurance *Call Care Coordination for authorization PRIOR to receiving services
Proposed (No limits on series per lifetime)	\$100 co-pay per day up to 4 days confinement, plus Deductible (prior auth removed)	Deductible + Coinsurance (prior auth removed)	Deductible + Coinsurance	Deductible + Coinsurance (prior auth removed)

Attachment 2
Summary of Health Contribution Rates for Options 1 and 2

Option 1 – Summary of Increased Contribution Rates with Required Plan Design Changes and \$10 PPO Employee Only Premium

County	FY 14 Composite Rate	FY 15 Composite Rate	Increase
Increase for Active Employees	\$779.32	\$810.50	4.00 %
Increase for Retirees under 65	\$1,414.24	\$1,481.36	4.75 %
Increase for 65 and Older Retirees	\$406.90	\$425.40	4.55 %
Increase in County Contribution Funding*			\$2.65 Million
<i>*Increase in County Contribution funding includes additional funds for new retirees.</i>			

Employee Contribution Increases	% Increase In Employee Contributions
Increase for Active Employees	5.54 %
Increase for Retirees under 65	4.84 %
Increase for 65 and Older Retirees	3.33 %

Option 2 – Summary of Increased Contribution Rates with Required Plan Design Changes and \$5 PPO Employee Only Premium

County	FY 14 Composite Rate	FY 15 Composite Rate	Increase
Increase for Active Employees	\$779.32	\$812.54	4.26%
Increase for Retirees under 65	\$1,414.24	\$1,481.36	4.75%
Increase for 65 and Older Retirees	\$406.90	\$823.74	4.55%
Increase in County Contribution Funding*			\$2.77 Million
<i>*Increase in County Contribution funding includes additional funds for new retirees.</i>			

Employee Contribution Increases	% Increase In Employee Contributions
Increase for Active Employees	4.01%
Increase for Retirees under 65	4.84%
Increase for 65 and Older Retirees	3.33%

Attachment 3 (Recommended)

Active Rate Changes for Option 1 – With Plan Design Changes

PROPOSED FY 15 RATES-					ACTIVES	
Total Contribution Proposed (per employee per month)	Emp only	Emp+1 Adult	Emp+1 Child	Emp+ Children	Emp+adult +Child	Emp+adult +Children
EPO	725	1,567	1,006	1,406	1,991	2,391
PPO	626	1,299	840	1,166	1,649	1,975
Coinsured EPO	616	1,222	791	1,098	1,547	1,854
County Contribution Proposed (per employee per month)	Emp only	Emp+1 Adult	Emp+1 Child	Emp+ Children	Emp+adult +Child	Emp+adult +Children
EPO	616	1,020	760	975	1,234	1,433
PPO	616	1,020	760	975	1,234	1,433
Coinsured EPO	616	1,020	760	975	1,234	1,433
Employee Contributions-Proposed (per employee per month)	Emp only	Emp+1 Adult	Emp+1 Child	Emp+ Children	Emp+adult +Child	Emp+adult +Children
EPO	109	547	246	431	757	958
PPO	10	279	80	191	415	542
Coinsured EPO	0	202	31	123	313	421
FY14 Employee Premiums (prior year)	Emp only	Emp+1 Adult	Emp+1 Child	Emp+ Children	Emp+adult +Child	Emp+adult +Children
EPO	109	522	235	411	722	915
PPO	0	266	76	182	395	517
Coinsured EPO	0	192	29	117	298	401
Amount of Monthly Increase to Employee	Emp only	Emp+1 Adult	Emp+1 Child	Emp+ Children	Emp+adult +Child	Emp+adult +Children
EPO	0	25	11	20	35	43
PPO	10	13	4	9	20	25
Coinsured EPO	0	10	2	6	15	20
Based on Milliman 6C			Proposed County Composite Rate per emp per month		\$	810.50

Attachment 4 (Recommended)

Under 65 Rate Changes for Option 1 - With Plan Design Changes

Proposed FY 15 RATES- UNDER AGE 65 Retirees						
FY 15 Total Contribution-Proposed (per retiree per month)	Emp only	Emp+1 Adult	Emp+1 Child	Emp+ Children	Emp+adult +Child	Emp+adult +Children
EPO	1,785	2,530	2,034	2,341	2,778	3,086
PPO	1,628	2,180	1,811	2,040	2,364	2,593
Coinsured EPO	1,536	2,032	1,699	1,904	2,195	2,399
County Contribution-Proposed (per retiree per month)	Emp only	Emp+1 Adult	Emp+1 Child	Emp+ Children	Emp+adult +Child	Emp+adult +Children
EPO	1,404	1,655	1,530	1,655	1,655	1,655
PPO	1,404	1,655	1,530	1,655	1,655	1,655
Coinsured EPO	1,404	1,655	1,530	1,655	1,655	1,655
Retiree Contributions-Proposed (per retiree per month)	Emp only	Emp+1 Adult	Emp+1 Child	Emp+ Children	Emp+adult +Child	Emp+adult +Children
EPO	381	875	504	686	1,123	1,431
PPO	224	525	281	385	709	938
Coinsured EPO	132	377	169	249	540	744
Prior Year FY14 retiree Contributions	Emp only	Emp+1 Adult	Emp+1 Child	Emp+ Children	Emp+adult +Child	Emp+adult +Children
EPO	364	837	482	656	1,074	1,368
PPO	214	502	269	368	678	897
Coinsured EPO	126	360	162	238	516	711
Retiree	Emp only	Emp+1 Adult	Emp+1 Child	Emp+ Children	Emp+adult +Child	Emp+adult +Children
EPO	17	38	22	30	49	63
PPO	10	23	12	17	31	41
Coinsured EPO	6	17	7	11	24	33
Based on Milliman 6C				Proposed County Composite Rate <65 per month	\$	1,481.36

Attachment 5 (Recommended)

65 and Over Retiree Rate Changes for Option 1 - With Plan Design Changes

PROPOSED FY 15 RATES-				OVER AGE 65 RETIREES		
FY 15 Total Contribution-Proposed (per retiree per month)	Emp only	Emp+1 Adult	Emp+1 Child	Emp+ Children	Emp+adult +Child	Emp+adult +Children
EPO	569	739	711	854	881	1,024
PPO	478	604	586	690	711	816
Coinsured EPO	451	565	548	641	660	754
Pharmacy only Plan	277	316				
County Contribution-Proposed (per retiree per month)						
	Emp only	Emp+1 Adult	Emp+1 Child	Emp+ Children	Emp+adult +Child	Emp+adult +Children
EPO	409	460	460	460	460	460
PPO	409	460	460	460	460	460
Coinsured EPO	409	460	460	460	460	460
Pharmacy only Plan	239	239				
Retiree Contributions-Proposed (per retiree per month)						
	Emp only	Emp+1 Adult	Emp+1 Child	Emp+ Children	Emp+adult +Child	Emp+adult +Children
EPO	160	279	249	391	419	561
PPO	69	144	125	229	250	354
Coinsured EPO	42	106	87	180	199	292
Pharmacy only Plan	38	77				
Previous FY 13 Retiree Premiums						
	Emp only	Emp+1 Adult	Emp+1 Child	Emp+ Children	Emp+adult +Child	Emp+adult +Children
EPO	153	267	240	376	402	539
PPO	66	138	120	220	240	340
Coinsured EPO	40	101	84	173	191	281
Pharmacy only Plan	38	77				
Amount of Monthly Increase to Retiree						
	Emp only	Emp+1 Adult	Emp+1 Child	Emp+ Children	Emp+adult +Child	Emp+adult +Children
EPO	7	12	9	15	17	22
PPO	3	6	5	9	10	14
Coinsured EPO	2	5	3	7	8	11
Pharmacy only Plan	0	0	N/A	N/A	N/A	N/A
Based on Milliman 6C	Proposed County Composite Rate >65 per month				\$	425.40

Benefits Update Agenda

- ▶ Health Plan Overview and Recent History
- ▶ Health Plan Cost Drivers
- ▶ Health Plan Cost Projections
- ▶ Proposed Benefit Changes
- ▶ Vision Funding and Rates
- ▶ Open Enrollment
- ▶ Health & Wellness

Administration of Plan

- ▶ An evaluation committee along with Purchasing, County Attorney's office, Gallagher Benefit Services and HRMD staff have been reviewing proposals and finalizing contracts for recommendation to Court for Third Party Administration (TPA) services, Pharmacy Benefit Management (PBM) services, fully insured Vision Insurance and fully insured Stop Loss Insurance.
- ▶ Anticipate savings in administration costs, an increase in services and reduction in fully insured premiums for Vision and Stop Loss due to the competitive bid process.

Health Plan Overview

- ▶ As part of the annual budget process, the Benefits Committee works with the County's actuary to estimate future plan requirements and make recommendations for rates and plan design changes for the next fiscal year to the Commissioner's Court.
- ▶ The compounded annual growth in the County's contribution, for active employees, has been 4% per year for the last 10 years. The national average has been 6% per year over the last 6 years.*
- ▶ The County has been able to maintain costs through plan design changes, rate structure changes and engagement in wellness initiatives including on-site clinics.

Source: Aon Hewitt Health Value Initiative database of large U.S. employers' health care costs.

Recent Health Plan History

- ▶ For FY 2013, Court approved a 5.68% increase in the County's contributions for active employees and a 4.63% increase to employee contributions.
 - ▶ Benefit plan design changes were made to deductibles, out-of-pocket maximums, urgent care copays, hospital copays, ambulance copays and ER copays.
 - ▶ Without the recommended plan design changes the projected increase was 7.68% for the County and 6.82% for active employees.
- ▶ For FY 2014, Court approved a 5.94% increase in the County's contributions for active employees and a 4.02% increase to employee contributions.
 - ▶ Benefit plan design changes were made to deductibles, out-of-pocket maximums, rehab/outpatient therapy copays, chiropractic services and ER copays.
 - ▶ Without the recommended plan design changes the projected increase was 8.68% for the County and 6.68% for active employees.

Health Care Reform (PPACA)

- ▶ 2014
 - ▶ Public health insurance exchanges began
 - ▶ Offer coverage to full-time employees (30 hours/week) as measured by a "measurement period" and then a "stability period"
 - ▶ Analysis has been conducted by HRMD and PBO.
 - ▶ Traditional Reinsurance Fee
 - ▶ \$63 per member per month payable in two installments; First installment of approximately \$446,000 (\$52 PMPM) is due in January. Second installment due in November 2015.
 - ▶ Begin working on a transition plan before "Cadillac Tax" begins in 2018
 - ▶ Multi-year effort in coordination with Human Resources, Planning and Budget, and the Employee Benefits Committee
- ▶ 2018
 - ▶ "Cadillac Tax" begins
 - ▶ Excise tax for premiums over \$10,200 for Individual coverage and \$27,500 for Family coverage
 - ▶ EPO plan currently is \$8,676 for Individual and \$28,140 for Family coverage

Health Plan Cost Drivers and Trends

- ▶ Medical claims costs increased 5.1% on a Per Member Per Month (PMPM) basis from FY 12 to FY 13.
- ▶ Pharmacy plan paid PMPM increased 10.3%;
- ▶ Combined medical and pharmacy PMPM trend increased 6%, which is better than national trend.
- ▶ The County paid 90.6% of the covered services, while members picked up the rest. The County percent is higher than our peer groups.
- ▶ Claims over \$50k increased 31%; Claim risk increased 8%
- ▶ ER utilization decreased by 6% and physician utilization increased by 2%

Source: UnitedHealthcare Travis County Healthplan Performance Review 2014

Additional Cost Drivers and Trends

- ▶ Compared to our peer group, Travis County has:
 - ▶ Higher prevalence of Diabetes +3%
 - ▶ Heart Disease +20%
 - ▶ Back Pain +26%
 - ▶ Higher number of inpatient admissions +19%
 - ▶ More high cost claimants +12%

Additional Cost Drivers and Trends

- ▶ **Diabetes**
 - ▶ 9% of members and 18% of cost (749 members in the current period, 716 in the prior, a nearly 5% change)
 - ▶ Average paid for Diabetic \$11,815; Non-Diabetic \$4,768
 - ▶ Over the next 12 months we expect 55 non- or pre-diabetics to convert to a diabetic, adding 1 point to medical trend
- ▶ **Back Pain**
 - ▶ 30% of back pain spend is due to high cost surgeries; 67% of claimants went straight to surgery without trying injections or PT
 - ▶ 59% Premium provider utilization

Benefit Plan Design Changes

- ▶ **Benefit plan design changes are recommended to ensure compliance with federal regulations**
- ▶ **Out-of-Pocket Maximums**
 - ▶ All out-of-pocket health plan expenses must accumulate to a maximum of \$6,350 per individual and \$12,500 per family
 - ▶ Current plan design only accumulates deductibles and coinsurance towards the out-of-pocket maximum. It does not include medical of pharmacy copays.
 - ▶ Recommending the introduction of a Medical and Pharmacy out-of-pocket maximum
- ▶ **Mental Health Parity**
 - ▶ Regulations eliminated treatment or visit limits that differed between mental health or substance use benefits and medical/surgical benefits
 - ▶ Copays must be at or less than the predominant medical/surgical copay amount

Benefit Plan Changes

		EPO	PPO In-Network	PPO Out-of-Network	CEPO
Medical Out-of-Pocket Maximum	Current	\$1,500 Individual None - Family	\$3,000 Individual \$4,000 Family	\$4,000 Individual \$7,500 Family	\$3,000 Individual \$4,000 Family
	Proposed	\$3,500 Individual \$7,000 Family	\$3,500 Individual \$7,000 Family	\$4,500 Individual \$9,000 Family	\$3,500 Individual \$7,000 Family
Pharmacy Out-of-Pocket Maximum	Current	No Maximum	No Maximum	No Maximum	No Maximum
	Proposed	\$2,500 Ind \$5,000 Family	\$2,500 Ind \$5,000 Family	\$2,500 Ind \$5,000 Family	\$2,500 Ind \$5,000 Family
Hospital - Inpatient Stay	Current	\$100 co-pay per day up to 4 days confinement, plus Deductible (\$1,000 annual co-pay maximum)	\$100 co-pay per day up to 3 days confinement, plus Deductible & Coinsurance (\$1,000 annual co-pay maximum)	\$125 co-pay per day up to 3 days confinement, plus Deductible & Coinsurance (\$1,000 annual co-pay maximum)	\$100 co-pay per day up to 2 days confinement, plus Deductible & Coinsurance (\$1,000 annual co-pay maximum)
	Proposed	\$100 co-pay per day up to 4 days confinement, plus Deductible	Deductible + Coinsurance	Deductible + Coinsurance	Deductible + Coinsurance

Proposed Benefit Plan Changes

		EPO	PPO In-Network	PPO Out-of-Network	CEPO
Mental Health and Substance Abuse Office Visit Services	Current	\$35 per visit for a PCP, \$50 per visit for a Specialist	\$30 per visit for a PCP, \$45 per visit for a Specialist	Deductible + Coinsurance	\$25 per visit for a PCP, \$40 per visit for a Specialist
	Proposed	\$35 Copay	\$30 Copay	Deductible + Coinsurance	\$25 Copay
Mental Health and Substance Abuse Services - Inpatient and Intermediate	Current	\$100 Co-pay per day up to 4 days confinement and deductible *Call Care Coordination for authorization PRIOR to receiving services	\$100 Co-pay per day up to 3 days confinement, plus Ded+Coins *Call Care Coordination for authorization PRIOR to receiving services	\$125 Co-pay per day up to 3 days confinement, plus Deductible+ Coins *Call Care Coordination for authorization PRIOR to receiving services	\$100 Co-pay per day up to 2 days confinement, plus Ded+Coins *Call Care Coordination for authorization PRIOR to receiving services
	Proposed	\$100 co-pay per day up to 4 days confinement, plus Deductible (prior auth removed)	Deductible + Coinsurance (prior auth removed)	Deductible + Coinsurance	Deductible + Coinsurance (prior auth removed)

Health Plan Premiums

- ▶ Recommending a cost share between County and Employees/Retirees to cover cost increase
- ▶ Average Premium Increase Per Tier
 - ▶ Actives w/ dependent coverage = 5.08%
 - ▶ Retirees Under 65 = 4.60%
 - ▶ Retirees 65 and Over = 4.23%
- ▶ Employee Only Premiums

	Current	Option 1	Option 2
Employee Only EPO Plan	\$109	\$109	\$109
Employee Only PPO Plan	\$0	\$10	\$5
Employee Only CEPO Plan	\$0	\$0	\$0

Open Enrollment Process

- ▶ Court approved a "passive" open enrollment for FY 14 and feedback from employees and retirees was positive.
- ▶ Recommending a "passive" open enrollment again for FY 15 with the following exceptions.
 - ▶ Flexible Spending Account (FSA) elections can not roll over from year to year so employees are required to elect an annual amount to participate in FY 15.
 - ▶ EE Only PPO Health Enrollment
 - ▶ EE Only Vision Enrollment

Open Enrollment PPO Health

- ▶ **Employee Only PPO Health Insurance.**
 - ▶ If Court approves Option I, the Employee Only PPO premium would increase from \$0 to \$10 per month.
 - ▶ Recommend employees enrolled in this option are not rolled over automatically and would need to make a medical enrollment election for FY 15.
 - ▶ Employees enrolled in this tier will receive targeted communication and if a medical coverage selection is not made by the end of Open Enrollment they will be defaulted to the CEPO Employee Only coverage.
 - ▶ This applies only to active employees and not retirees.

Open Enrollment Vision

- ▶ **Employee Only Vision Insurance.**
 - ▶ If Court approves the recommendation, the Employee Only Vision coverage will be increasing from \$0 to \$4.26 per month.
 - ▶ Recommend employees enrolled in this option are not rolled over automatically and would need to make an enrollment election for FY 15.
 - ▶ Employees enrolled in this tier will receive targeted communication and if a vision coverage selection is not made by the end of Open Enrollment they will be defaulted to no Vision coverage.
 - ▶ This applies to both active employees and retirees.

Open Enrollment by Benefit

Benefit Enrollment	Rollover to PY 15?	If no action taken:
Enrollment in EPO or CEPO Health Plan	Yes	Current benefit election will continue for the next year
PPO Employees Only Coverage	No	PPO Coverage will end on 09/30/14 and will be enrolled in the Employee Only CEPO plan 10/01/14.
PPO Coverage Tier with Dependents	Yes	Current benefit election will continue for the next year
Dental Plan Enrollment	Yes	Current benefit election will continue for the next year
Vision Employee Only Tier	No	EE Only coverage will end on 09/30/2014
Vision Coverage Tier with Dependents	Yes	Current benefit election will continue for the next year
Life Insurance and Disability Insurance	Yes	Current benefit election will continue for the next year
Medical or Dependent Care Flexible Spending Account	No	Participation will end on 09/30/2014. Must elect a new annual amount to continue.

Engagement Programs and Initiatives

- ▶ **Health and Wellness Clinic**
 - ▶ Past year has been focused on improving efficiencies and increasing visits.
 - ▶ Clinic Assessment under review and results and recommendations will be brought to the Court.
- ▶ **Introduction of the Travis County C.A.R.E. program.**
 - ▶ Wellness sub-committee has been working for the last year on building the foundation and idea for a new and redesigned wellness program for Travis County.
 - ▶ Focus is on engagement and promotion of programs and activities to help plan participants manage their health and improve outcomes.



The mission of the Travis County C.A.R.E. program is to promote a healthy, productive you and help you manage Travis County Health Plan costs by developing and implementing initiatives that encourage healthy choices and outcomes.



TRAVIS COUNTY C.A.R.E. Program

- ▶ **Checkups.**
 - ▶ Checkups are an important opportunity for you to work with your doctor to improve your health and reduce your risk of disease. Regular health exams and tests can help find problems early, when your chance for treatment and cure are better. By getting the right health services, screenings, and treatments, you are taking steps that help your chances for living a longer, healthier life.
- ▶ **A Healthy Outlook.**
 - ▶ You can achieve a healthy outlook by choosing to balance the needs of your mind, body and spirit. Regular exercise, eating right, resting or meditation and seeking support can lead to emotional and physical well being.
- ▶ **Regular Exercise.**
 - ▶ Regular exercise or physical activity helps many of the body's systems function better, keeps heart disease, diabetes, and a host of other diseases at bay, and is a key ingredient for losing weight. All these health benefits are yours for the taking, regardless of your age, sex or physical ability.
- ▶ **Eating Right**
 - ▶ Eating right by making informed food choices will give you more energy and improve your health. Good eating habits can help reduce obesity and your risk of disease.



TRAVIS COUNTY C.A.R.E. Program

- ▶ **Program Goals for FY 15**
 - ▶ Get approval to hire staff to finish design and roll-out of the C.A.R.E. program
 - ▶ Gather baseline data for the health plan cost drivers and risk factors. This data will be used to create and design programs and activities and can be used to compare and measure the success of the program in future years.
 - ▶ The focus on improving the health and well-being of the employee population and therefore reducing short- and long-term health plan costs.
 - ▶ Complete the build-out of the C.A.R.E. web site with a wide variety of resources and information for employees.

Other Benefits

- ▶ **Dental (Assurant Dental)**
 - ▶ Increase in rates for the Assurant PPO and Assurant MAC plans.
 - ▶ 6% Increase for the Mac plan and 3% for the PPO Plan
 - ▶ This will be the fifth year with Assurant for dental insurance. HRMD staff and Purchasing are planning on releasing an RFP for dental insurance for FY 16.
- ▶ **Life Insurance (Unum and Cigna)**
 - ▶ No rate increase
- ▶ **Short and Long-Term Disability (Cigna)**
 - ▶ No rate increase
- ▶ **Stop-Loss Insurance** is still under review by the evaluation committee and final rates are pending.

Proposed Calendar

- ▶ Wednesday, June 11 – Wednesday, June 25 - Employee and Retiree education sessions on recommended plan design changes.
- ▶ Thursday, June 26 – Employee Public Hearing on Compensation and Benefits Issues (4:30pm, Commissioners Courtroom).
- ▶ Tuesday, July 1 – Commissioners Court considers and approves changes to Employee Health Benefits Plan and contributions.
- ▶ August 1-30 – Employee and Retiree Open Enrollment period
