



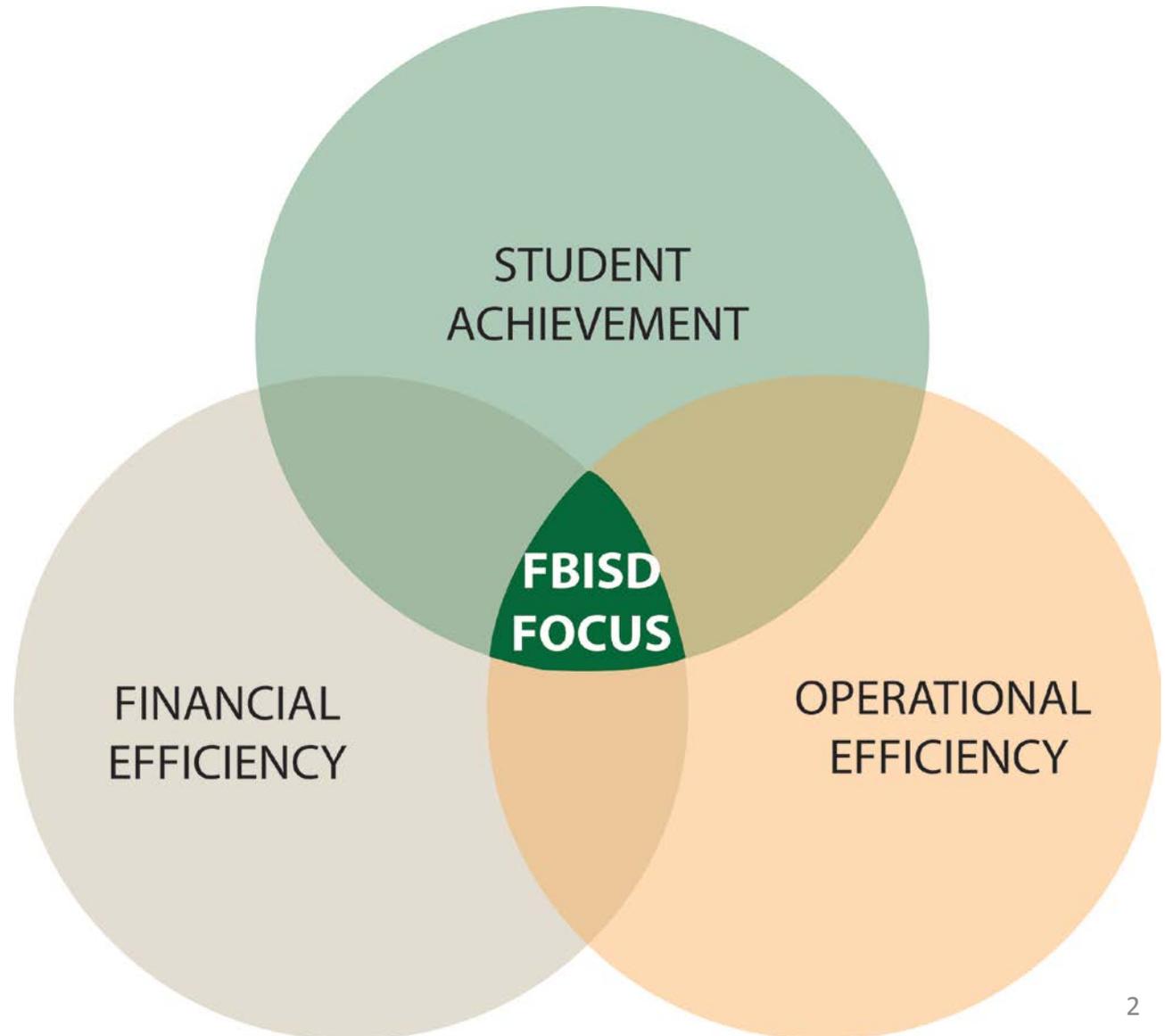
# 2014-2015 Benefits Committee

## September 24, 2014



INSPIRE • EQUIP • IMAGINE

## Our Focus



## Our Goal Benefits Committee

Goal is to support the budget process for 2015-16 that supports the District's Mission and Vision while balancing the need to improve employee benefits while achieving a balanced budget that does not require a tax increase.

Goals will be to help assure current insurance benefits are appropriately structured and financed to support institutional needs, including recruiting and retaining faculty and staff.

## Roles and Responsibilities

- Serve in an advisory capacity to the district leadership team
- Engage in productive dialogue
  - Be objective and maintain a **district level** perspective
- Explore possibilities
- ***Communicate committee work and outcomes to colleagues***
  - ***Confer with principal following each meeting***
  - ***Gather input from colleagues***

## Desired Outcomes of Meeting

- Financial update
- Review of benefits for 2015
- What's new for 2015?
- Review of medical plan parameters
- Overview of Pharmacy & Clinical Programs
- Where do we go from here?

## January-August 2014 Health Plan Performance

<b>FBISD Contributions</b>	\$24,523,604
<b>Employee Contributions</b>	\$14,206,857
<b>Total Revenue for Health Plan</b>	\$38,730,461

### Plan Expenses

#### Fixed Cost

Administration Fees	\$1,710,983
Stop Loss - \$450,000	\$653,457
Affordable Care Act Fees	\$453,984

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<b>Total Fixed Cost</b>	<b>\$2,818,424</b>
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<b>YTD Claims</b>	\$29,669,333
<b>Total Expenses</b>	\$32,487,757
<b>YTD Surplus</b>	<b>\$6,242,704</b>

# 2014-2015 Benefits Committee

**Effective 1/1/2015 there will not be any changes to the following benefits:**

Benefit	Carrier
Vision	VSP
Short Term Disability	Lincoln Financial
Long Term Disability	Lincoln Financial
Basic Life / AD&D	Lincoln Financial
Voluntary Life*	Lincoln Financial

\*Employees may see a change in their deduction amount if they fall into a higher age band as of 1/1/2015.

## Dental – Will Remain with Guardian for 2015

Current Dental Cleaning Frequency	2015 Dental Cleaning Frequency
1 every 6 months	2 per calendar year



# What's New for 2015???

## Employee Assistance Program (EAP):

An Employee Assistance Program will be offered for 2015

- Up to 6 face to face counseling sessions available at no cost to the employee and their family members
- Confidential services
- Counselors can assist with resolving stress, grief, marital issues, emotional problems, substance/alcohol abuse, etc.
- Up to 3 phone or face-to-face consultations per financial issue and a discount of up to 25% on continued consultations
- Legal consultations and advice are also available on a telephonic basis to assist employee with wills, personal/family law as well as additional consumer and civil issues



## Telehealth:

A Telehealth service will be available to employees and their families beginning 1/1/15 –

- Members can call a board certified physician 24 hours a day, 7 days a week to seek care and treatment for issues such as cold & flu, sinus infections, children's ear pain and general non-emergent conditions
- A Telehealth doctor can recommend appropriate treatment and in many cases call in a prescription directly to your local pharmacy
- Member pays only a \$40 copay per telephonic consultation, typically avoiding costly and time consuming urgent care and emergency room visits



## Medical Plan Name Changes for 2015:

Current Plans with Cigna	2015 Plans with UHC
Open Access Plus	Choice Plus
Choice HRA	Choice Plus HRA

The current plans listed above will have no benefit changes in 2015. The current plan listed below will have benefit changes in 2015, please see next slide for details.

LocalPlus IN	Choice Premium Tier
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## Medical Plan Benefit Changes for 2015:

**(the only plan experiencing benefit changes is the current LocalPlus IN plan)**

The Choice Premium Tier plan is an open-access **In-Network Only** plan that encourages members to seek care from certain providers and facilities to obtain the highest level of coverage. Better choices can have a direct affect on healthcare costs. Under the Choice Premium Tier plan, there are two level of coverage available:

### Tier 1:

- Methodist Hospital System
- United Healthcare Premium Tier 1 Providers (including those specialties not currently evaluated for Tier 1 status)

### Tier 2:

- All other United Healthcare Choice Network Providers

Since the Choice Premium Tier plan is an open-access plan, members can seek care from any **in-network** provider within the Choice Network, but they will pay more out-of-pocket expenses when they do not seek care from a Tier 1 provider.

	Tier 1	Tier 2
PCP Copay	\$25	\$45
Specialist Copay	\$35	\$55
Coinsurance	80%	60%
Deductible (Individual)	\$750	\$1,500
Deductible (Family)	\$1,500	\$3,000
Out-of-Pocket (Individual)	\$3,750	\$6,600
Out-of-Pocket (Family)	\$7,500	\$13,200
Preventive Care	100%	100%
Emergency Room	\$250 copay, plus deductible & coinsurance	\$250 copay, plus deductible & coinsurance
Inpatient Copay	\$0	\$250 per admission
Urgent Care	\$75	\$75

## Choice Premium Tier 1 Specialties:

### **Why choose a Methodist Hospital System or Premium Tier 1 provider?**

You pay lower copays, lower deductibles and lower coinsurance, and you receive a higher quality of care.

Look for the UnitedHealth Premium Tier 1 symbol on ***myuhc.com*** to quickly and easily find doctors who have been recognized for providing value. These specialties are listed below:

- Allergy
- Cardiology
- Cardiology – Electrophysiology
- Cardiology – Interventional
- Endocrinology
- Family Practice
- General Surgery
- General Surgery – Colon/Rectal
- Internal Medicine
- Nephrology
- Neurology
- Neurosurgery – Spine
- OB-GYN
- Ophthalmology
- Orthopaedics – General
- Orthopaedics – Foot/Ankle
- Orthopaedics – Hand
- Orthopaedics – Hip/Knee
- Orthopaedics – Shoulder/Elbow
- Orthopaedics – Spine
- Orthopaedics – Sports Medicine
- Pediatrics
- Pulmonology
- Rheumatology
- Urology

## Choice Premium Tier Participants:

(must choose a provider in the Choice network – there is no out of network coverage)

The Methodist Hospital arrangement at the Tier 1 level is in the Houston area **ONLY**.

When a member is outside of the Houston area and they utilize a provider outside of the specialist's categories listed in the previous slide that are designated Tier 1, the benefit under this plan will pay at Tier 2.

When a member is within the Houston area and they utilize a specialist that is outside of the list of Tier 1 specialty groups, their claim will be paid at Tier 1.

## FSA Change for 2015:

- Moving the administration of the medical FSA and dependent care FSA to UHC.
- The debit card can now be swiped at daycares that have this capability.
- If you have the HRA, the FSA debit card can only be used for prescriptions, dental and vision expenses.

## Prescription Drug List: Tier Placement

Our standard Prescription Drug List (PDL) has 3 tiers and aligns tier placement and copay value with the overall health care value of the drug.

Tier 1



Lowest Cost

Tier 2



Midrange Cost

Tier 3



Highest Cost



Making the highest-value medications more affordable for your employees

**Medications can move to any tier so that the highest value drugs are always the most affordable.**

## Best Resource: Prescription Drug List



Electronic and printed Prescription Drug Lists show cost tier placements of the Top 750 medications and help answer frequently asked questions.

### For you:

- United Healthcare representative
- Posted online: **UHC.com/pharmacy**

### For your employees:

- Call number on the back of ID card
- Posted online: **myUHC.com**



## Clinical Programs Overview:

### Promoting safety and appropriate use

#### Step Therapy

- Most medical conditions have several medication options
- Although these medication options may work in a similar way, their cost may vary widely
- With this program you need to try a lower-cost medication first, before a higher-cost medication may be covered

#### Notification/ Prior Authorization

- Requires physicians to populate additional information to verify benefit coverage
- **Physician Prior Authorization Web Portal** allows real-time approvals and less member disruption
  - Physicians submit real-time, online PA requests, auto-population feature intuitively provides 95% of a member's information

#### Supply Limits

- A supply limit is the largest quantity of medication covered per copayment or in a time period
- Based on FDA guidelines for medication dosage, clinical guidelines or usage patterns
- Applied to approximately **500 medications**, supply limits help address safety concerns, reduce waste, remove excess costs, and provide opportunities for dose optimization

#### Select Designated Pharmacy

- Participants choose one of three options to continue receiving network benefits:
  1. Move to a lower-cost medication and save up to **\$480** per year
  2. Use mail service and save up to **\$96** per year
  3. Do both and save up to **\$500** per year
- On average, members save **\$360 annually**

## Step Therapy Program:

Directing members to less expensive yet equally effective medications



Member is prescribed Rx



Try a **Step 1** Rx first  
(a lower-cost medication)



Before **Step 2** Rx is covered  
(high-cost medication)



## Prior Authorization:

Requiring physicians to provide additional information to verify benefit coverage



Promoting safety and reducing costs

### Covered

#### Actiq for cancer pain

approved for treating cancer-related pain in members already taking a long-acting pain medication (opioid / narcotic)



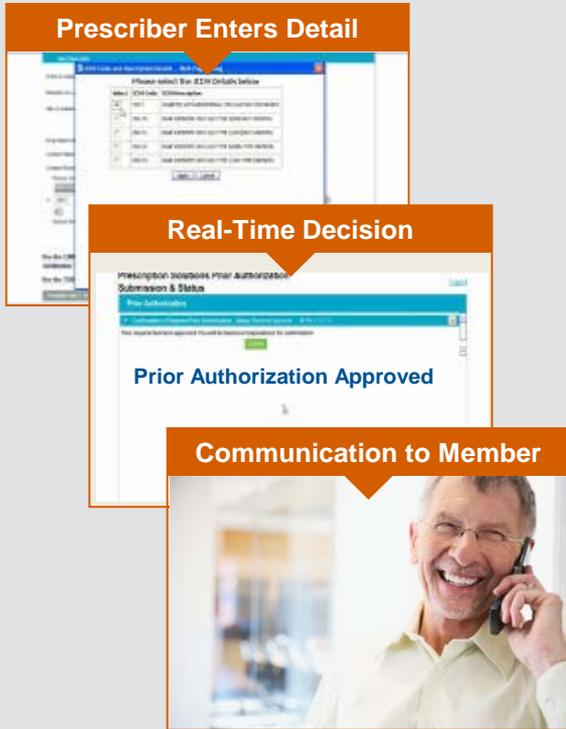
### Not Covered

#### Actiq for migraines

Not indicated or proven safe for patients that are not regularly taking a long-acting pain medication (opioid/narcotic) for cancer pain

## Physician Prior Authorization Web Portal:

Real-time approvals and less member disruption



**Accessible. Easy. Immediate.**

- Physicians submit real-time, online prior authorization (PA) requests
- Auto-population feature intuitively provides 95% of a member's information
- Majority of prior authorizations are approved real-time for no member disruption

## Specialty Pharmacy Program Overview:

Members using specialty drugs suffer from complex, rare or life debilitating diseases.



personal,  
**high-touch** support

Specialized clinical experts,  
not generalists



**synchronized**  
health care services

Uniquely able to navigate the  
complexity of both medical and  
pharmacy benefits



improved **outcomes**  
and high satisfaction

Client spend is lower for  
members who participate in  
the program

- Anemia
- Crohn's Disease
- Cystic Fibrosis
- Endocrine
- Growth Hormone Deficiency
- Hemophilia
- Hepatitis B
- Hepatitis C
- HIV/AIDS
- Inflammatory Bowel Disease
- Immunodeficiency
- Immune Modulator
- Infertility
- Iron Overload
- Multiple Sclerosis
- Neutropenia
- Oncology
- Osteoarthritis
- Parkinson's Disease
- Psoriasis
- Pulmonary Hypertension
- Respiratory Syncytial Virus
- Rheumatoid Arthritis
- Transplant

## Specialty Pharmacy Program: *Shipping and Delivery*

Medication Delivery  
OptumRx Specialty Pharmacy will ship medication(s) with the accompanying materials



**Tuesday through Friday**

Saturday delivery is available if needed

**Refrigerated Medications**

**1** business day

**Non-refrigerated Medications**

**1-3** business days

Can ship to alternative addresses

Cannot deliver to P.O. Boxes

Signatures are required for over a certain dollar amount and/or doctor office deliveries

### Free Supplies and Additional Information Included



- Welcome Letter
- Specialty Pharmacy Program Brochure
- Clinical Management Program Brochure
- Condition-Specific Information
- Refill Magnet



## United Healthcare National Pharmacy Network:

### Convenient Member Access



67,000 locations– leading chains, mass merchants and grocery stores

Pharmacies include: Walgreens, Rite Aid, Wal-Mart, Target, Duane Reade, Medicine Shoppe, Ralphs, Kroger, Meijer, Shopko, CVS, HEB

Includes a 30-day supply benefit and zero balance copayment logic

Our strong network ensures members get nationwide access to care when and where they need it.

## UnitedHealthcare's OptumRX Mail Service Pharmacy

Choose one of these ways to fill your first prescription using OptumRx® Mail Service Pharmacy:

### **By mail**

- Get a prescription from your doctor for up to a three-month supply, plus refills for up to one year (if needed).
- Go to **myuhc.com** and download an order form.
- Mail the new prescription and order form to the address provided on the form.

### **With your doctor**

- Get a prescription from your doctor for up to a three-month supply, plus refills for up to one year (if needed).
- Ask your doctor to fax your prescription to OptumRx Mail Service Pharmacy. Your doctor can call the number on the back of your plan ID card for instructions. (Faxed prescriptions must come from your doctor's office.)

Our strong network ensures members get nationwide access to care when and where they need it.

## Online Member Portal:

- Review benefit highlights and coverage
- Access to Mail Service Pharmacy prescriptions
- My Prescription Dashboard to refill, renew and manage prescriptions
- My Medicine Cabinet to manage and price prescription and OTC medications
- Locate a retail pharmacy
- Explore lower-cost alternatives and options
- Download order forms
- Access general health information

The screenshot shows the myuhc.com website interface. At the top, there's a navigation bar with 'Site Demo', 'Contact Us', 'Feedback', 'Login', and 'En Español'. The main content area is divided into several sections:

- Site Login:** A form with fields for 'Username' and 'Password', a 'Login' button, and a 'Register Now' button. It also includes links for 'Forgot your username or password?' and a note that users must be 13 or older to register.
- myClaims Manager:** A central section with the headline 'Managing your claims just got easier – now with online bill payment.' and a 'Learn More' button. A pie chart is divided into three segments: 'PLAN DISCOUNTS' (purple), 'YOUR RESPONSIBILITY' (blue), and 'YOUR PLAN PAID' (green). An arrow points from the 'MAKE ONLINE PAYMENTS' text to the 'YOUR RESPONSIBILITY' segment.
- Information Center:** A section with 'News' and 'Learn More About' sub-sections. News items include 'This month's tip from The Dr. Oz Show: Reducing Risk of Prostate Cancer', 'Connect with UnitedHealthcare on Twitter', 'There's an easier and faster way to get reimbursed from your FSA and/or HRA', and 'Required Notices'. The 'Learn More About' section lists 'UnitedHealth Premium® Designated Physicians', 'Health Insurance for those not covered by employer', 'Dental Plans for those not covered under an employer's plan', 'Short Term Health Insurance', and 'Health Savings Account'.
- Links and Tools:** A sidebar with links to 'Find Physician, Laboratory or Facility', 'Pharmacy Information', 'Find a Form', 'Find Mental Health Clinician', and 'Estimate Health Plan Costs'.
- Common Questions:** A sidebar with questions like 'What browsers are supported?', 'What are the benefits of registering and having a username and password?', 'How do I register?', 'Do I need to re-register if my group number changes?', 'What if I don't have my ID card?', 'Is this website secure?', and 'What accreditations and certifications has UnitedHealthcare received?'.

# 2014-2015 Benefits Committee



**COMING SOON!**



**HEALTH AND BENEFITS  
IN THE PALM OF YOUR HAND**

**ACCESS**  
health and benefit information personalized to you!

**MANAGE**  
all of your health and benefit information located in one easy to access place.

**RECEIVE**  
updates and reminders about programs and resources that benefit you.

**CONNECT**  
get the information you need anytime, anywhere on any device. iPhone, Android or desktop.

## Where do we go from here?

- Open enrollment this fall
- Other Benefits (Survey to be sent out)
  - ❖ Leave
  - ❖ Incentives
  - ❖ Other
- iNGAGED HEALTH

## How are we doing?

- Have we accomplished our goal for this meeting?
  - ❖ Financial update
  - ❖ Review of benefits for 2015
  - ❖ What's new for 2015?
  - ❖ Review of medical plan parameters
  - ❖ Overview of Pharmacy & Clinical Programs
- Questions? Concerns? Feedback?
- Next meeting:
  - ❖ **Benefits Committee – October 29, 2014**  
**4:00p.m. Annex**

## Benefits Committee Meetings:

<u>Date</u>	<u>Time</u>
August 20 <sup>th</sup>	4:00 – 6:00
September 24 <sup>th</sup>	4:30 – 6:00
October 29 <sup>th</sup>	4:00 – 6:00
November 19 <sup>th</sup>	4:00 – 6:00
January 21 <sup>st</sup>	4:00 – 6:00
February 25 <sup>th</sup>	4:00 – 6:00
March 25 <sup>th</sup>	4:00 – 6:00
April 22 <sup>nd</sup>	4:00 – 6:00
May 27 <sup>th</sup>	4:00 – 6:00