

Town of East Hartford High Deductible Health Plans Informational Meeting

April 2011







Agenda

- Town's Financial and Medical Overview
- Section 1: Medical Plans Offered for 7/1/2011
- Section 2: What is a High Deductible Health (HDHP) Plan?
 - How does a HDHP work?
 - HDHP Medical Plan
 - Medical Payment Process: What happens when I go to my doctor or facility?
 - Pharmacy Payment Process: What happens when I go to the Pharmacy?
 - ❖ What is the difference between a HDHP and a Health Savings Account (H.S.A)?
- Section 3: Which Plan is Best for You?
 - Family Century Preferred Plan vs. HDHP comparison
 - Single Century Preferred Plan vs. HDHP comparison
- Section 3: What is a Health Savings Account (H.S.A)?
 - Advantages of an H.S.A
 - What is covered under an H.S.A?
 - Am I Eligible to Open an H.S.A?
 - H.S.A. Contributions
 - Additional H.S.A Contributions to Your Account
 - Town contribution
 - Wellness/Biometric Screening
- Section 4: H.S.A Bank, a division of Webster Bank
- Section 6: How to Make the Most of Your Money.
- Section 7: H.S.A Withdrawals
- Section 8: Websites





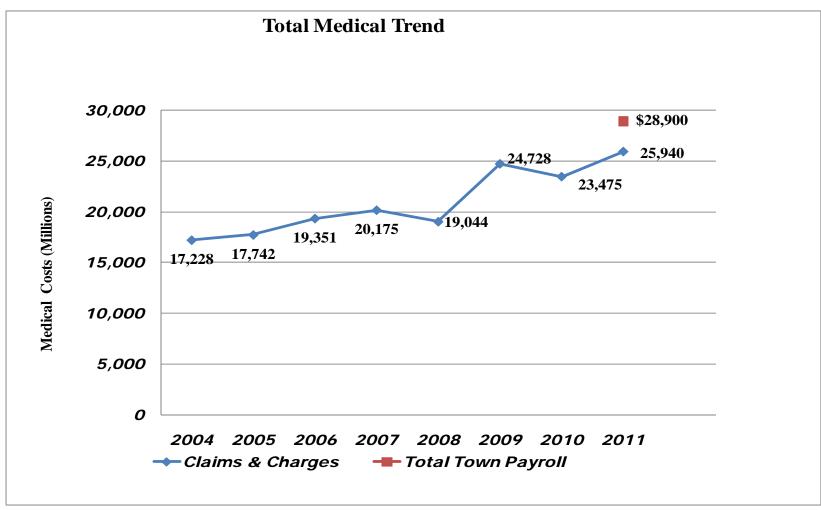
Mayor Leclerc's Budget Message

"...health benefit and pension costs are the fastest rising component of the budget."





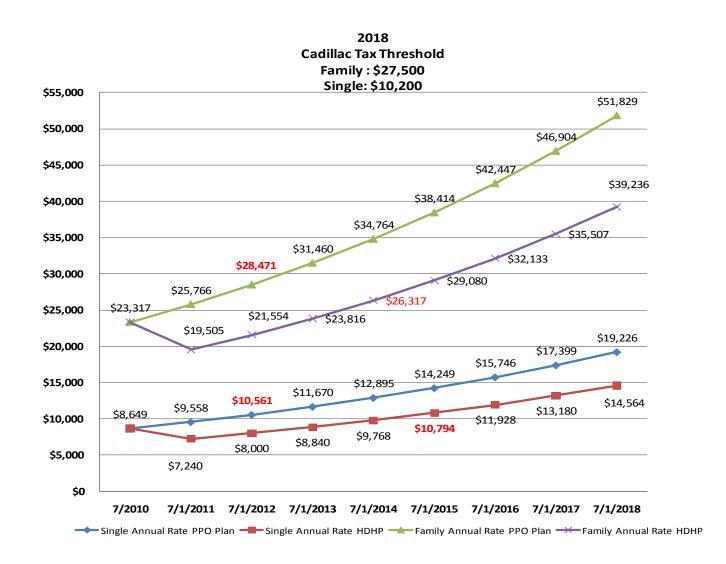
Total Medical Claim Experience (Town, BOE, Retirees) For the Fiscal Years 2004-2011 (2011 is Projected)







Town PPO Plan & HDHP Plan Comparison (PEPY) @ 10.5% Annual Trend







" In the past, the town has tackled these types of rising costs topically..."

- Premium sharing for active employees and retirees
- Tiering of dental benefits
- Competitive bidding of the medical delivery network
- * HMO like utilization controls or POS medical delivery to control costs
- Carve out RX benefits
 - Narrowed Formularies, Instituted Pharmacist call back
- Self-insure where it makes sense
- Completed claims audits
- Adjusted stop loss levels
 - Added benefit opt-out programs
- Increased co pays
- Created a 125 plan (pre-tax) and Flexible Spending Account
- Modest Voluntary wellness program
 - Chantix prescription
 - Weight Management reimbursement
 - No co pays for diabetes visits/equipment
 - Generic maintenance drugs via Wal Mart, Target
 - Walking clubs





Why do we need to do anything more?





7/1/2010 Valuation

Allocation of Contributions for Fiscal Year Ending June 30.2012 at 8.25%

		Town and					
		Board of			Para-		
		Education	Police	Fire	professionals	Dispatchers	Total
,		# 0.040.555	# 4 000 500	40.004.070	# 400.000	* 407.007	0750700
	Total normal cost	\$2,316,555	\$1,882,536	\$2,001,979	\$429,866	\$127,827	6758763
b)	.,	<u>\$1,258,495</u>	\$683,887	\$804,199	<u>\$222,491</u>	<u>\$87,741</u>	<u>3056813</u>
c)	Town normal cost: (a-b) Accrued Liability	\$1,058,060	\$1,198,649	\$1,197,780	\$207,375	\$40,086	3701950
a)	Active	\$39,271,770	\$28,150,894	\$33,137,957	\$3,272,146	\$2,357,979	\$106,190,746
b)	Inactive Vesteds	\$1,497,091	\$360,617	\$66,843	\$55,007	\$73,603	\$2,053,161
c)	Retirees, Beneficiaries, & Disabled	\$50,536,357	\$50,259,120	\$51,867,638	\$296,478	<u>\$0</u>	\$152,959,593
d)	Total AL (a)+(b)+(c)	\$91,305,218	\$78,770,631	\$85,072,438	\$3,623,631	\$2,431,582	\$261,203,500
	Assets at modified value*	\$60,740,398	\$52,401,819	\$56,594,070	\$2,410,605	\$1,617,599	\$173,764,491
	Unfunded Accrued Liability:(2d-3) Payment on Unfunded Accrued Liability (29 year amortization,4.09%	\$30,564,820	\$26,368,812	\$28,478,368	\$1,213,026	\$813,983	\$87,439,009
	effective interest rate)	\$1,746,755	\$1,506,957	\$1,627,517	\$69,324	\$46,518	\$4,997,071
	Projected Administrative Expenses	\$77,600	\$26,400	\$29,200	\$24,100	\$2,700	\$160,000
	Annual Town Cost (1c) +5+6	\$2,882,415	\$2,732,006	\$2,854,497	\$300,799	\$89,304	\$8,859,021
	Payroll	\$17,226,862	\$8,620,531	\$10,751,703	\$3,708,178	\$1,096,766	\$41,404,040
a)	Cost as % of payroll Annual Required Contribution for fiscal year ending June 30, 2012	16.73%	31.69%	26.55%	8.11%	8.14%	21.40%
a)	Normal Cost:(1c) x 1.04	\$1,100,382	\$1,246,596	\$1,245,691	\$215,670	\$41,689	\$3,850,028
b)	Amortization: (5) x 1.04	\$1,816,625	\$1,567,235	\$1,692,618	\$72,097	\$48,379	\$5,196,954
c) d)	F (-)	\$77,600	\$26,400	\$29,200	\$24,100	\$2,700	\$160,000
<i>-</i> ,	Payable July 1, 2011	\$2,994,607	\$2,840,231	\$2,967,509	\$311,768	\$92,768	\$9,206,883

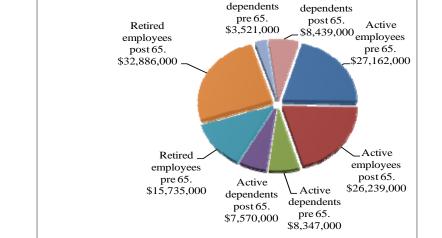
^{*} Allocated based on Accrued Liability





Other Post-Employment Benefits Program Summary of Liabilities as of July 1, 2009

	Town	BOE	Total
Current active members			
Employees under age 65	\$21,115,000	\$6,047,000	\$27,162,000
Employees over age 65	\$12,875,000	\$13,364,000	\$26,239,000
Dependents under age 65	\$7,047,000	\$1,300,000	\$8,347,000
Dependents over age 65	\$6,897,000	\$673,000	\$7,570,000
Total	\$47,934,000	\$21,384,000	\$69,318,000
Current retired members			
Employees under age 65	\$11,721,000	\$4,014,000	\$15,735,000
Employees over age 65	\$17,354,000	\$15,532,000	\$32,886,000
Dependents under age 65	\$2,969,000	\$552,000	\$3,521,000
Dependents over age 65	\$7,545,000	\$894,000	\$8,439,000
Total	\$39,589,000	\$20,992,000	\$60,581,000
Total Accrued Liability	\$87,523,000	\$42,376,000	\$129,899,000



Retired

Retired





InfoLock® Report Summary Disease Prevalence

Condition	Prevalence compared to Norm	Current Results
Diabetes		5.4% vs. norm (4.9%); Cost is 47.8% over norm (\$6,432)
Hypertension		Slightly over norm 12.8% vs. 11.4%; Cost is 31.2% over norm (\$5,052 PMPY)
Hyperlipidemia		15.3% vs. norm (9.7%)
Back Pain		16.0% vs. norm (11.8%); Cost is 17% over norm (\$5,178 PMPY)
CAD		3.0% vs. 2.4%; Cost is 26.6% over norm (\$8,230 PMPY)
Neck Pain		7.6% vs. norm (5.1%)
Depression		9.1% vs. norm (3.5%); Cost is 26.1% over norm (\$5,471 PMPY)
Asthma		5.0% vs. norm (2.7%): 41% Employees;14% Spouses;45% dependents
Osteoarthritis		5.1% vs. norm (3.3%)
COPD		Low claim prevalence (22 members)





Analysis of the Proposed HDHP

Box 1: Where we are now					
	Blended	Blended	Blended		
Today's PPO	Town Cost	EE Cost	Total Cost		
Single (14)	112,156	21,363	133,519		
Single plus 1 (21)	340,943	64,941	405,884		
Family (39)	881,513	167,908	1,049,421		
Total (74)	1,334,611	254,212	1,588,824		
Cost Share	84%	16%	100%		
Single	8,011	1,526	9,537		
Single plus 1	16,235	3,092	19,328		
Family	22,603	4,305	26,908		

Box 2: Where we need to be					
HDHP	Blended	Blended	Blended		
Proposed:	Town Cost	own Cost EE Cost			
Single	85,868	16,355	102,222		
Single plus 1	257,603	49,069	306,672		
Family	627,595	119,540	747,135		
Total	971,065	184,964	1,156,029		
-					
Cost Share	84%	16%	100%		
Single	6,133	1,168	7,302		
Single plus 1	12,267	2,337	14,603		
Family	16,092	3,065	19,157		

Box 3: the savings				
HDHP	Blended	Blended	Blended	0/0
Savings:	Town Cost	EE Cost	Total Cost	Savings
Single	26,288	5,009	31,297	23%
Single plus 1	83,340	15,872	99,212	24%
Family	253,918	48,367	302,285	29%
Total	363,546	69,248	432,794	27%
Cost Share	84%	16%	100%	
Single	1,878	358	2,235	
Single plus 1	3,969	756	4,724	
Family	6,511	1,240	7,751	

Box 4: The	Box 4: The Buy-Up Option					
	Blended	Blended	Blended			
Same PPC	Town Cost	EE Cost	Total Cost			
Single	80,111	53,408	133,519			
Single plus	243,530	162,354	405,884			
Family	629,653	419,768	1,049,421			
Total	953,294	635,529	1,588,824			
-						
Cost Share	60%	40%	100%			
Single	5,722	3,815	9,537			
Single plus	11,597	7,731	19,328			
Family	16,145	10,763	26,908			
Same physi	ician, ER, R	X co-pays				
		•				





Analysis of the Proposed HDHP

Box 5: The steps to the	process				Total Dolombal	EE HDHD OOD MAY
HDHP Deductible:	EE OOP Max	EE Cost share savings	Town H.S.A Funding @50%	Wellness Incentive	Total Potential Contribution toward EE OOP Max	EE HDHP OOP MAX after H.S.A seed & Wellness
Single	1500	358	750	250	1,358	142
Single plus 1	3,000	756	1,500	250	2,506	494
Family	3,000	1,240	1,500	250	2,990	10





Section 1: 7/2011 Medical Plans Offered

- ❖ Anthem Century Preferred Provider Organization (PPO) Plan
- Connecticare HMO Plan
- Anthem's Lumenos High Deductible Health Plan with a Health Savings Account (HSA)

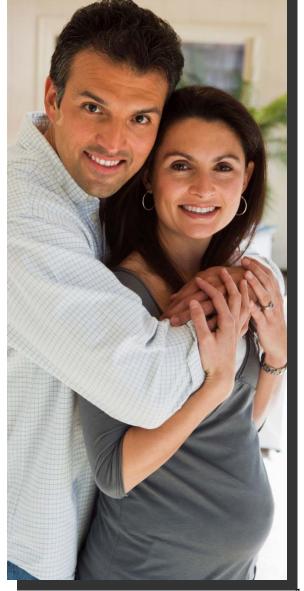




Section 2: How Does the High Deductible Health Plan Work?

- You pay first-dollar "up front" costs for all services, and prescriptions until you meet your annual deductible
- Preventive care is covered at 100% innetwork, deductible waived
- Utilizes the same PPO Network you have under your Century Preferred Plan.
- In-Network Providers = Greater Savings!
- If you stay in-network, the most you will pay in claims per year is the annual Out of Pocket Maximum
- Employees enrolled in this plan are eligible to participate in a Health Savings Account (HSA)*

*If you are enrolled in the HSA, you are not eligible to participate in the Medical FSA







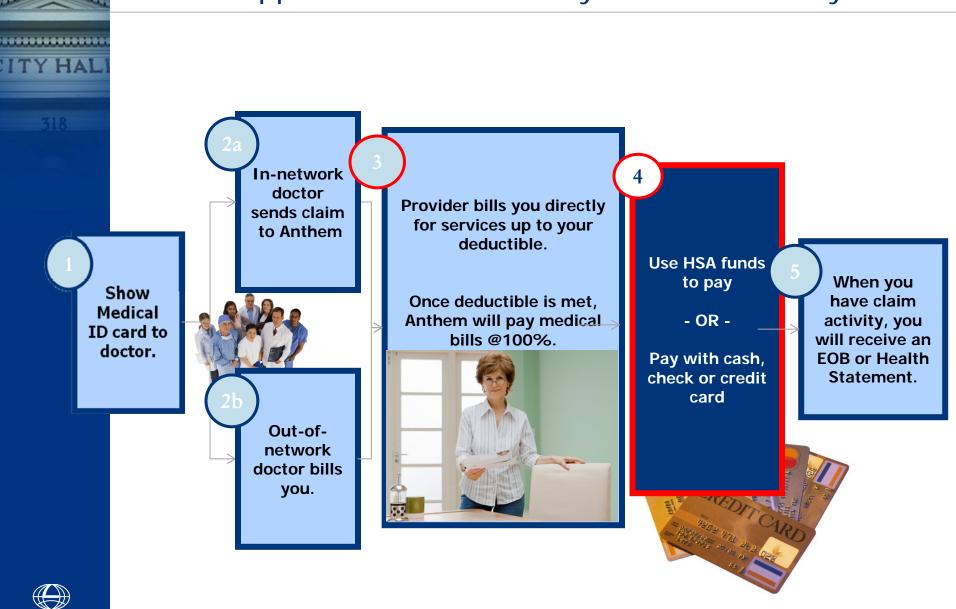
Section 2: High Deductible Health Plan

Plan Benefit	In-Network You Pay	Out-of-Network You Pay	
Annual Deductible (Combined Medical & Prescription Drug)	\$1,500 per person \$3,000 per family		
Annual Out-of-Pocket Max	\$1,500 per person \$3,000 per family	\$4,000 per person \$8,000 per family	
Preventive Care	No Cost to You: Covered 100%	Deductible, then 20% coinsurance	
All other Office Visits (Physician, Specialist, etc.)	Deductible, then 100% Covered	Deductible, then 20% coinsurance	
Inpatient Hospital	Deductible, then 100% Covered	Deductible, then 20% coinsurance	
Outpatient Hospital	Deductible, then 100% Covered	Deductible, then 20% coinsurance	
Emergency Room	Deductible, then 100% Covered	Deductible, then 20% coinsurance	
Lab, X-ray	Deductible, then 100% Covered	Deductible, then 20% coinsurance	
Retail Prescription Drugs	Deductible, the	n \$10 / \$25 / \$40	
Mail Order Prescription Drugs	Deductible, then \$10 / \$50 / \$80		



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Section 2: What Happens When I Go to my Doctor or Facility?





Section 2: What Happens When I Go to the Pharmacy?







Section 2:

What is the Difference Between a HDHP and a Health Savings Account (H.S.A)?

High Deductible Health Plan (HDHP)

A medical plan with an up-front deductible that is applicable to all medical and pharmacy benefits.

Health Savings Account (HSA)

A way to pay for medical plan expenses (like a plan deductible!) using pre-tax dollars from an individual bank account.





First, let's talk about the HDHP...



Section 3: Which Plan Is Best For You?

- Consider your total cost
 - Cost of coverage compare the cost of what you pay in premiums between the plans being offered.
 - Cost of care –what you pay when you use health care services.
 - ❖ For example: does your current out of pocket costs (deductibles, co-insurance, co-payments) exceed the proposed HDHP deductible? \$1,500 Single/\$3,000 Family
- Consider your use of health care services
 - Consider past use
 - ✓ Log on to <u>www.myanthem.com</u> and <u>www.medcohealth.com</u> website to access your current medical & pharmacy utilization and use this as a guide for 2011 expenditures.
 - Obtain a year to date listing of pharmacy utilization for you and your family at local pharmacy chains.
 - Expected use estimate what you and your family expect to spend in 2011 (planned elective surgery, a child, routine care)

Consider your medical plan options and choose wisely!





Section 3: Cheryl And Her Family

- Cheryl put \$2,500 into her HSA
- The Town contributed \$1,500 to the H.S.A.
 - Plus, Cheryl completed her biometric screening test and was awarded an additional \$250 towards her H.S.A
- Total HSA funding is \$4,250*
- Her typical use of the health plan is as follows:
 - Three well care visits for her and her two children
 - Each of the children gets ill twice a year and Cheryl can count on a sinus infection each spring and fall
 - Her son has asthma and needs medication on a regular basis

Cheryl's out of pocket costs under the new Plan:

-	3 Preventive Care Visits	\$ 0
_	6 Physician Visits	\$ 750
_	6 prescriptions	\$ 300
_	Lab Work	\$ 250

- Asthma maintenance

medications \$ 800 - Total medical expenses \$ 1,800

Family Deductible: \$3,000

Rx Co pays after Ded:\$10/\$25/\$40

Applied to deductible \$ 1,800

Paid from HSA <u>\$ 1,800</u>

Balance in HSA to roll
 forward (\$4,250-\$1,800) \$ 2,450

*Cheryl could have chosen to fund her HSA to the maximum allowed of \$6,150 (family maximum) less any H.S.A contributions made by the Town.





Section 3:Illustration Family with low to average health problems and maintain a chronic condition with medication.

		Century Preferred	HDHP	
		PPO Plan	Year One	
	Frequency			
Preventive Care Visit	3	\$15	\$0	
Primary Care Office Visits	6	\$30	\$750	
Laboratory Services	3	\$0	\$250	
RX Filled	18	\$150	\$800	
Retail 6x \$5 tier 1 drugs				
12x \$10 tier 2 drugs Family Deductible (\$3,000)				
Your total cost sharing (deductible + co pay + coinsurance)	а	\$315	\$1,800	
Your annual payroll contributions	b	\$4,305	\$3,065	
Your HSA Contribution	С	N/A	<u>\$2,500</u>	
Town Contribution (H.S.A & Wellness Award)			\$1,750	
Total Amount in your H.S.A			\$4,250	
Est. Tax Savings at 28% Federal, 7.65% FICA, 5% State	(b+c) x .4065	\$1,749	\$2,262	
Total Plan Cost = contribution + cost share - Tax Savings		\$2,871	\$2,603	
Rollover balance in HSA account (Your Money)			\$2,450	

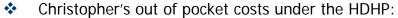




Section 3: Christopher

- Christopher funds his HSA with \$1,000 because he wants to cover his deductible and some pharmacy co pay if necessary
- The Town contributes \$750 to his H.S.A
 - Plus, he completed his biometric screening test and was awarded an additional \$250 towards her H.S.A
- Total HSA funding is \$2,000*
- His use of the health plan is as follows:
 - One well care visit
 - He breaks his ankle playing basketball
 - He needs physical therapy for the broken ankle

*Christopher could have chosen to fund his HSA to the maximum allowed of \$3,050 (single maximum) less any H.S.A contributions made by the Town



_	Preventive Care	\$ 0
_	Emergency Room	\$ 1,000
_	Pain meds (generic)	\$ 4
_	Total medical expenses	\$ 1,004

Single Deductible: \$1,500

Rx Co pays after Ded: \$10/\$25/\$40

_	Amount paid out of HSA	
	and applied to deductible	\$1,004

_	Total an	nount paid	I from HSA	\$1,0	04
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Balance in HSA to roll forward (\$2,000 - \$1,008)\$ 996





Section 3: Illustration Christopher is a single person that is healthy but had an accidental injury

		Century Preferred PPO Plan	HDHP Year One
	Frequency		
Preventive Care Visit Emergency Room (including X-	1	\$5	\$0
Ray)	1	\$25	\$1,000
RX Pain Medication (generic)	1	\$5	\$4
Single Deductible		N/A	\$1,500
Your total cost sharing (deductible + co pay + coinsurance)	а	\$40	\$1,004
Your annual payroll contributions	b	\$1,526	\$1,168
Your HSA Contribution Town Contribution (H.S.A & Wellness Award) Total Amount in your H.S.A	N/A	\$1,000 <u>\$1,000</u> \$ 2,000	
Est. Tax Savings at 28% Federal, 7.65% FICA, 5% State	(b+c) x .4065	\$620	\$881
Total Plan Cost = contribution + cost share - Tax Savings	\$946	\$1,295	
Rollover balance in HSA account (Your Money)			\$ 996





Section 4: What is a Health Savings Account?

- An HSA is a personal savings account that is funded with pre-tax contributions that you can use to pay for eligible medical expenses
- HSA Account Rollover
 - Both the contributions and earnings in an HSA carry over from year to year
- Portability TAKE YOUR HSA WITH YOU NO USE IT OR LOSE IT RULES even if you:
 - change jobs
 - move to another state
 - change your marital status
 - change your medical coverage
- Flexibility- you can use funds in your account to pay for current medical expenses or save the money in future needs, such as:
 - Health Insurance or medical expenses if unemployed
 - Medical expenses after retirement (before Medicare)
 - Out of pocket expenses when covered by Medicare
 - Long-term care expenses and insurance
- Can only contribute to an HSA if you are enrolled in a qualifying HDHP





Section 4: Am I Eligible to Open an HSA?

- You are eligible to open an HSA as long as:
 - You are not covered by other health insurance
 - Your spouse is not enrolled in a non-taxqualified medical plan, FSA or HRA
 - You are not enrolled in the FSA
 - You are not enrolled in Medicare
 - You cannot be claimed as a dependent on someone else's tax return
 - ❖ Important: If you open an HSA, you are NOT eligible to participate in the Medical Flexible Spending Account (FSA) program. (You can still be enrolled in the Flexible Dependent Care Account.)







Section 4: Health Savings Account Contributions

- 2011 Maximum contribution equal to:
 - \$3,050 individual/\$6,150 family*
- Catch-up contributions age 55+
 - \$1,000/year in 2011
 - No contributions permitted if Medicare enrolled
- Contributions are exempt from Federal, FICA, and most state taxes.
- Payroll deductions are pre-tax
- Contributions by personal check: After-tax, but deductible on federal tax return





Section 4: Additional H.S.A Contributions to Your Account

- Employees enrolled in the HDHP, the Town will contribute to your H.S.A
 - \$750 for a single, and
 - \$1,500 for Family (Family includes Employee +1 and Family)
- Interactive Health Solutions (I.H.S) a prevention and wellness third party administrator
 - Conducts Worksite Health Evaluations
 - Provides 34 diagnostic tests to detect a wide range of health issues
 - Information is confidential
 - IHI is HIPPA compliant
 - Each participant will receive a personal health report
 - Can be mailed to your primary care physician or specialist
 - Participants will receive a \$250 contribution to their H.S.A when they complete their Worksite Health Evaluation.





Section 4: What's Covered Under an HSA?

Remember, any money you take out for qualified medical expenses is INCOME-TAX FREE! Examples listed below:

Doctor's office visits and procedures (including physicians, surgeons, specialists or other medical practitioners)	*Over-the-counter medical expenses for items used solely to treat a medical condition (such as aspirin, pain relievers, etc.)	Dental treatment (X-rays, filings, braces, extractions)	Hearing aids (and batteries for use)	Psychologist
Operations/surgery (excluding unnecessary cosmetic surgery)	Diagnostic devices (such as blood sugar test kits for diabetics)	Contact lenses and solutions	Physical Therapy	Stop-smoking program (including nicotine gum or patches)
Hospital services	Ambulance	Eye surgery (such as laser eye surgery)	Psychiatric care	Weight-loss program (to treat a specific disease diagnosed)
Drugs, prescription	Artificial Teeth	Eyeglasses and exams (for medical reasons)	Chiropractor	Laboratory Fees



*As of January 1, 2011, Over-the-counter items will no longer be considered eligible expenses for reimbursement under a Health Savings Account <u>unless they are accompanied by a Doctor's prescription.</u>



Section 5: H S A Bank: Accountholder Information

- * HSA Bank, a division of Webster Bank
- * HSA Bank's secure member website, is an online resource for personalized benefits and health information.
- ❖ 24/7 access to account balances and activity via www.HSABANK.com
 - Monthly view for all transactions
 - Monthly and YTD view for contributions and interest
 - Online statements are printable
 - List of frequently asked questions
- Monthly paper statements available upon accountholder request





Section 5: H.S.A Bank, a division of Webster Bank

- * HSA Bank a division of Webster Bank provides:
 - Your VISA debit card (2) and PIN
 - Your HSA Checkbook
 - Your funds are FDIC insured
- Webster Bank HSA Fees
 - No set up fee
 - Monthly Maintenance fee \$2.25 (waived for balances of \$3,000 and above)
 - Unlimited check transactions
 - Contribution processing
 - Debit card point of sale purchase via signature
 - Tax reporting
 - Online account access
 - Bankline Balance, transactions inquiries
 - ATM Transaction fee \$2.00
 - ATM Replacement Card fee \$12.00
 - Fifty checks (including ten deposit checks)- \$7.95





Section 6: How Can I Make the Most of my Money?

- Stay within the local or national network to reduce out-of-pocket costs:
 - Take advantage of your health plan's pre-negotiated discounts by choosing providers who participate in your plan's network. When going to the pharmacy, choose a network pharmacy.



Get informed:

- Review your explanation of benefits (EOB)
- Research costs
- Look for less expensive care (i.e. CVS Minute Clinics, Walmart or Target drug discount programs)



& Buy generic:

- Many commonly prescribed medications have generic equivalents



Shop by mail:

 Save money by ordering your prescription through a mail-order program.



Consider over-the-counter (OTC) options:

 These medications may cost less than your out-of-pocket expenses for prescription medications, and are reimbursable from your health account.







Section 7: HSA Withdrawals

- Tax-free for qualified 213(d) expenses including:
 - Deductibles and co pays under your health insurance plan
 - Prescription drugs and limited over-the-counter items
 - Vision and dental expenses
 - COBRA premiums
 - Medicare premiums, deductibles and co pays
- Non-qualified withdrawals
 - Taxable, plus 20% penalty if under the age of 65
 - Taxable, no withdrawal penalty for Medicare eligible or upon disability or death
 - Taxable to beneficiary if the beneficiary is not the spouse
- Permitted even if not eligible to contribute
 - Medicare enrolled
 - No longer enrolled in the HDHP
- Tax-free transfer to spouse upon employee death
- Divided/disbursed in accordance with divorce decree
- Make sure you keep qualified medical receipts for all withdrawals.



NOTE: Individual is responsible for following contribution rules/limits and using HSA funds for qualified expenses.



Section 8: Websites

- Regarding your health plan contact:
 - Anthem at:
 - **1.800-482-0966**
 - www.myanthem.com
 - Medco at:
 - **1.800-251-7690**
 - www.medcohealth.com
- Regarding your HSA account and to order checks:
 - Contact HSA Bank toll free at:
 - 1.800-357-6246
 - ❖ Monday-Friday, 7:00 a.m. to 8:00 p.m. Central time
 - Or visit online at <u>www.hsabank.com</u>
- Regarding your Wellness/Prevention administrator
 - Contact Interactive Health Solutions at:
 - www.interactivehs.com
- Regarding eligible medical expenses:
 - Visit http://www.irs.gov/pub/irs-pdf/p502.pdf

