



# City of San Marcos 2017 Employee Benefits Update



**Well Life!**

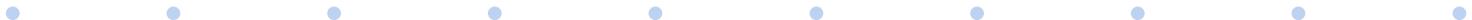
Making choices that count.

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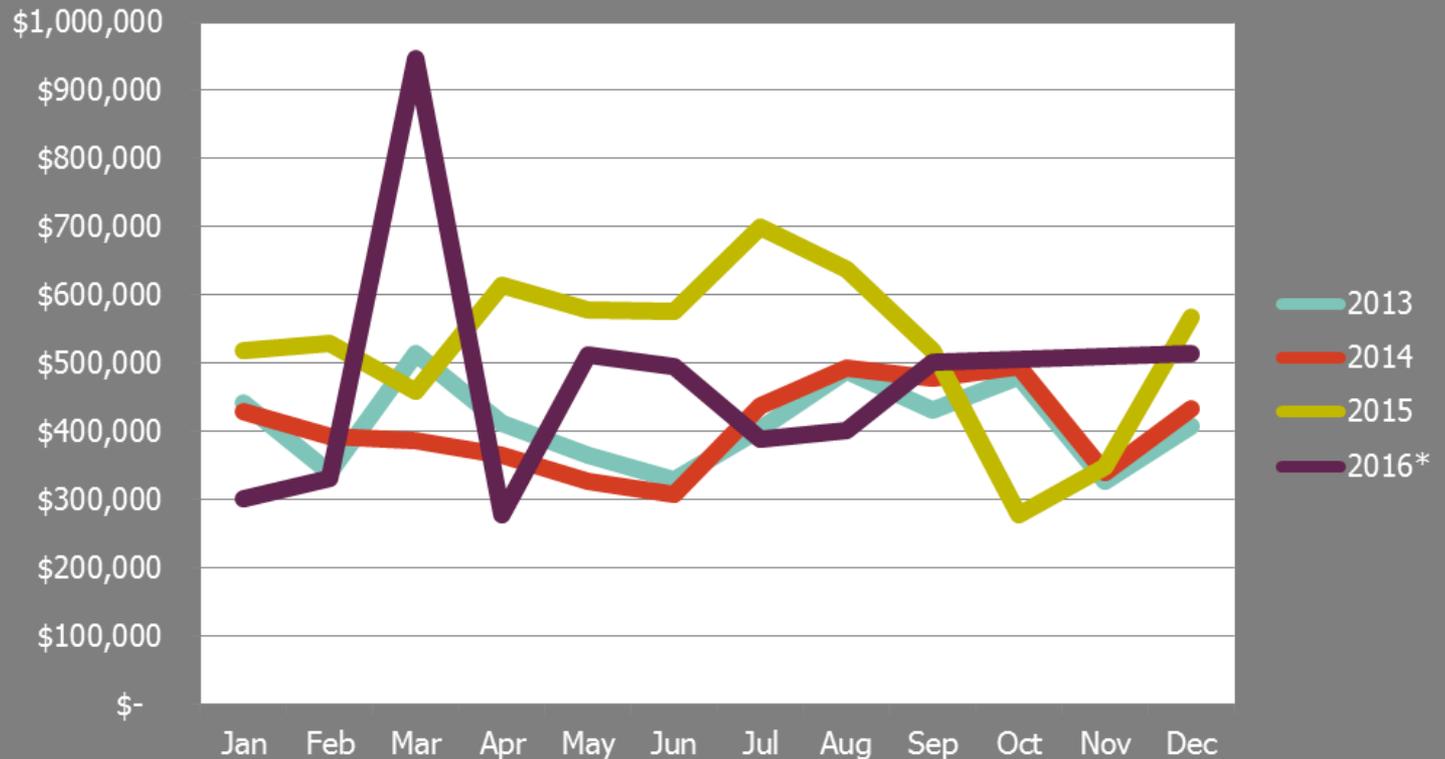
# Making Choices That Count

- **Thank YOU!!!**
  - Health Risk Assessments
  - “Getting Connected” with Compass
  - Dependent Eligibility Audit
  - Due diligence with best value options
- **What we know...**
  - Medical & Pharmacy Costs continue to rise nationally
  - Health Care Reform impacts
  - Need to Re-establish “Reserve Fund”





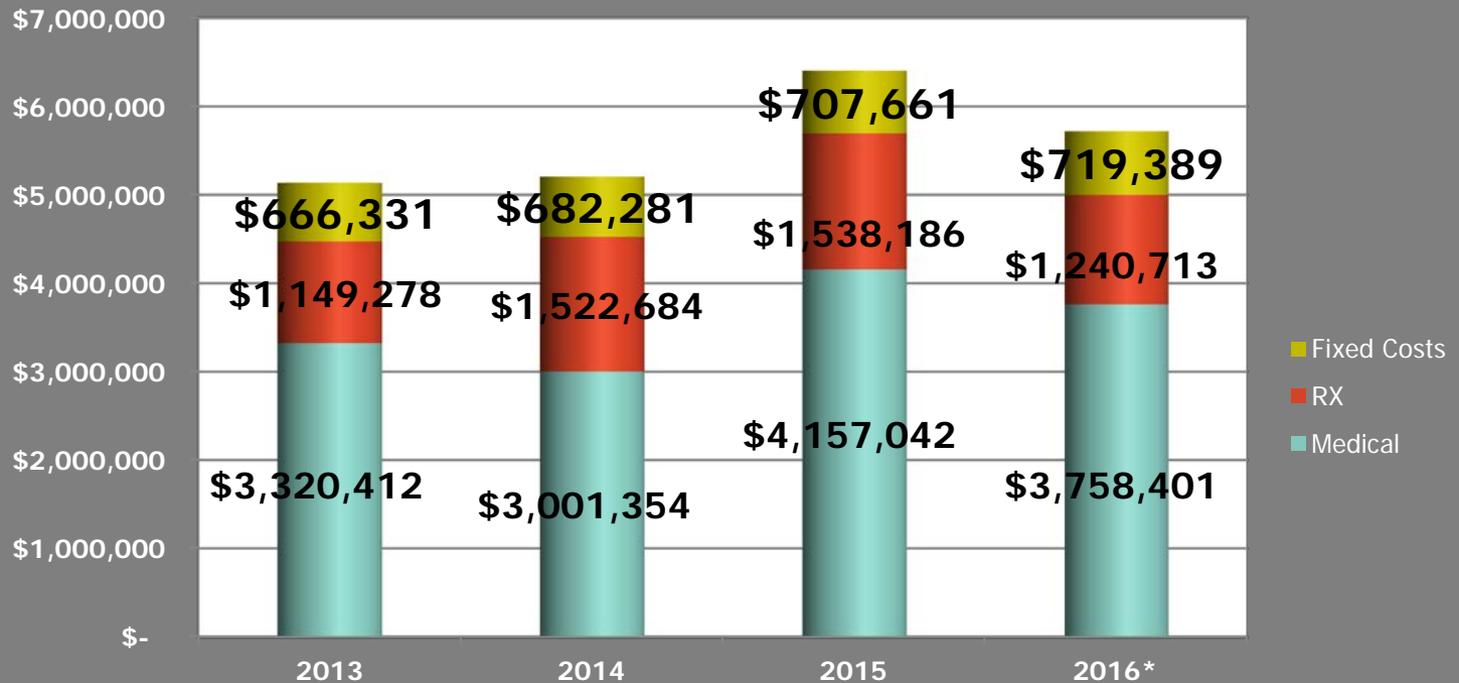
## Total Cost - City of San Marcos





# Annual Claims History

## 2013-2016 Total Costs



\*2016 is estimated based on current Medical & RX trend



# Introducing our New Partner

- Third Party Administrator:  UnitedHealthcare®
- Why UHC?
  - Network remains the same: ***Choice Plus Network***
  - Stay with OptumRx
  - Performance guarantees for customer service
  - Tools and resource available for our members





# Manage your benefits and health care at [myuhc.com](https://myuhc.com).<sup>®</sup>

- ✓ Track claims and expenses.
- ✓ Pay health care bills.
- ✓ Find network providers, care centers and pharmacies.
- ✓ Find and compare medications.
- ✓ Refill prescriptions.



Download the Health4Me app.



Access your benefits and get help anytime, anywhere with the UnitedHealthcare HEALTH4ME<sup>™</sup> app





# Benefits worthy of your favorites bar

## Estimate health care costs.

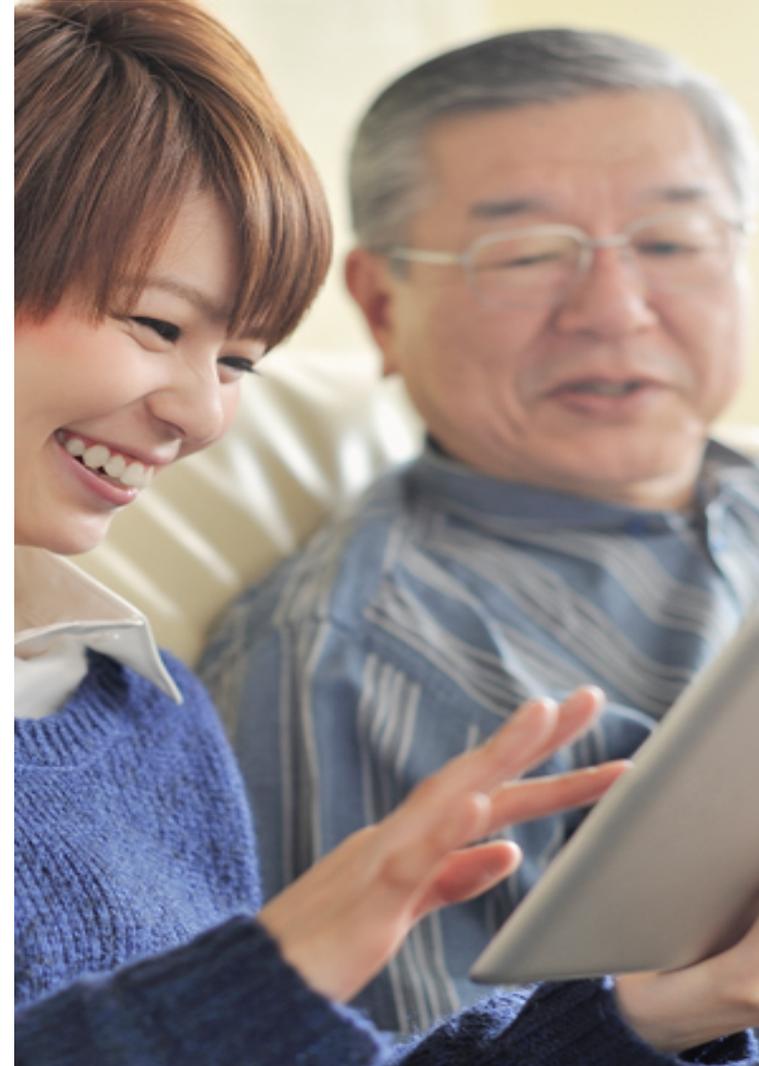


You have easy-to-use tools so you can see what a treatment or procedure typically costs, [estimate costs of prescriptions,] and see what your share of expenses may be.

## Get help finding quality care.



The UnitedHealth Premium<sup>®</sup> Designation Program shows you doctors who meet quality and cost-efficiency guidelines.





# Help living with illnesses and conditions



## Breathe easier

Get help managing your asthma and avoiding your triggers to reduce missed days at work or school.



## You don't have to face cancer alone.

You and your family will get personal support from an experienced cancer nurse.



## Manage diabetes

Be connected with nurses who can give you information to help you manage your diabetes, medications and more.





# Support to reach your wellness goals.

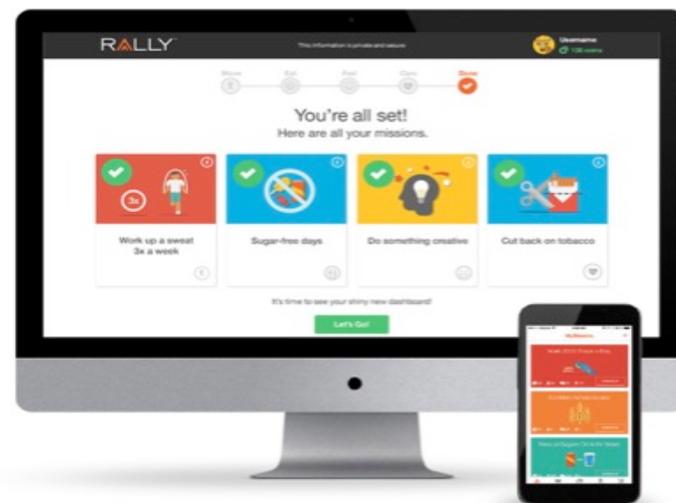
Get your Rally<sup>SM</sup> Age.

Take the Health Survey and instantly get your Rally Age — a number that gives you a measure of your “health age.”

- ✓ Pick missions to help you get your health on track  
Self-help programs
- ✓ Store your health history
- ✓ Connect with online communities
- ✓ Join fun challenges sharing health topics
- ✓ Earn coins as you track & accomplish each mission.



**[As you complete certain Rally activities, you may earn coins for your efforts, which can be used to enter sweepstakes for chances to WIN GREAT PRIZES.]**





# Have a health plan question? Just ask.



## Advocate4Me

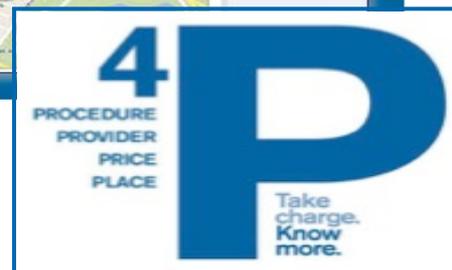
- ✓ We are here to help you find information and resources — plain and simple. You can also talk to a registered nurse 24/7.
- ✓ Have questions about your health care benefits?
- ✓ Need help resolving a claim?
- ✓ Not sure where to go for care?
- ✓ Have questions about a recent screening or test?
- ✓ Can't find a doctor or need to schedule an appointment?



# Know the 4 P's when shopping for health care

1 Care Estimate: Knee MRI  
2 Your search returned (4) facilities ranging from: \$465 - \$1,072  
3 Cost Estimate: \$290  
4 Central Hospital

- ✓ **PROCEDURE**  
Learn more about a procedure and compare treatment options.
- ✓ **PROVIDER**  
Select a quality provider for a procedure.
- ✓ **PRICE**  
Quickly estimate out-of-pocket costs for specific procedures.
- ✓ **PLACE**  
Locate providers based on geographic search criteria, view maps and print directions





# Compass

Will continue to be available

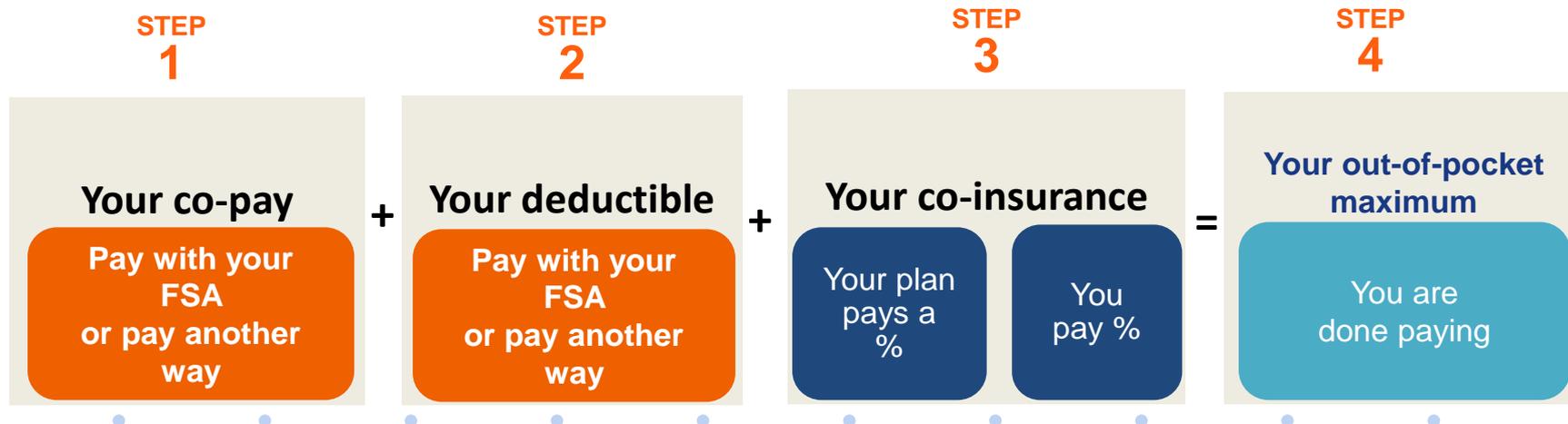
- Physician provider locator
- Healthcare Concierge
- Appeals
- Bill Review
- Our HealthPro is: **Megan Anderson**





# Understanding Your Costs

- STEP 1** **Co-pay:** You pay a fixed amount for each covered network doctor visit.
- STEP 2** **Deductible:** The amount you will pay before the plan starts to pay for covered services.
- STEP 3** **Co-insurance:** After you reach the deductible, you share the costs with the plan.
- STEP 4** **Out-of-pocket maximum:** When you reach the limit, you are done paying. The plan pays 100% of covered services.





# 2017 Overview of Benefit Changes

- **Rate Increase**
  - Medical
  - Dental
- **Co-pays**
  - Tier 1
  - Non-Tier 1
  - Emergency Room
- **In-Network Coverage Only**
  - Preventive Care
  - Dialysis
- **Physical, Occupational, Speech and Aquatic Therapy Visits**
- **Virtual Visits**
- **OptumRx**
  - Formulary Changes
  - Tier 1 Retail Co-pay
  - Prior Authorization





# Medical Plan Changes...

- **Co-Pays**

- Primary Care Office Visit

- Tier 1 -- \$25 co-pay (from \$30)
- Non-Tier 1 -- \$35 co-pay (from \$30)

- Specialist Office Visit

- Tier 1 -- \$40 co-pay (from \$50)
- Non-Tier 1 -- \$60 co-pay (from \$50)





# Choice Plus Plan

You can receive care and services from anyone in or out of our network, but you save money when you use the network.

- ✓ **Pay less by using UnitedHealth Premium® Tier 1 providers.** They have been recognized for providing value.
- ✓ **There's coverage if you need to go out-of-network.** Choose what's best for you.
- ✓ **There's no need to choose a primary care provider (PCP) or get referrals to see a specialist.** Consider a PCP; they can be helpful in managing your care.
- ✓ **Preventive care is covered 100% in our network.**



**If you go out-of-network, your costs may be higher. Out-of-network providers can even bill you for amounts higher than what your plan will cover. For COVERAGE DETAILS, see your official health plan documents.**

**Look for Tier 1 network care first.**

**TIER  
1**

To help you save money, we make it easy for you to find Premium Tier 1 providers. They have been recognized for providing value.

Look for the Tier 1 symbol when doing a NETWORK search.





# Choice Plus Plan, cont'd

## Pay less using Premium Tier 1 providers.

- Where you go for care can make a big difference in cost. You'll pay a lower co-pay when you use Premium Tier 1 providers.
- **Premium Tier 1 providers** are physicians in 27 different medical specialties who are recognized for meeting national standards for quality and local market benchmarks for cost-efficiency.

**TIER  
1**

Look for the Tier 1 symbol when doing a NETWORK search.

**Also save with free-standing facilities in the network.**

These are medical facilities in the network that are not connected to hospitals or another medical facility so they usually charge less.

They may include radiology centers, surgery centers, and more.



# Medical Plan Changes...

- **Emergency Room**
  - Co-pay – \$250 (from Access Fee)
  - If non-emergent, co-pay, deductible and co-insurance will apply
- **Preventive Care**
  - In-network – 100% coverage
  - Out of network – No Coverage
- **Dialysis**
  - In-network Coverage only
- **PT/OT/ST/AT**
  - Combined 75 visit limit per calendar year
- **Virtual Visits**
  - Doc on Demand – replacing Teladoc
  - \$15 co-pay



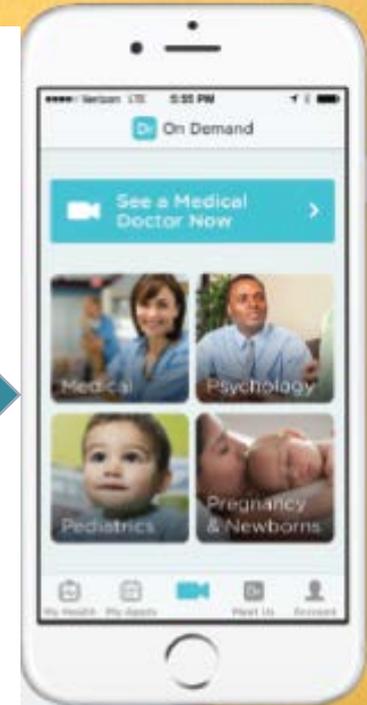
# Virtual Visits

Stay in bed and get rid of your cold, flu or many common medical issues with Doctor On Demand.



- **\$15 Video Visits with a board certified physician**
- **Top Treatment Issues**
  - Cold & Flu
  - Sinus & Allergies
  - Skin & Eye Issues
  - Urinary Tract Infections
  - Pediatric Issues
- **Include your insurance information**
- **DoctorOnDemand.com**
  - Log in to myuhc.com or the Health4Me app to learn more

**Set up your account beginning January 1!**



Download the App:





# Staying the same.....

No  
changes

- **Deductibles**

- In-Network

- \$1,000 – Individual
- \$2,000 – Family

- Out of Network

- \$2,000 – Individual
- \$4,000 – Family

- **Maximum Out of Pocket**

- In-Network

- \$3,000 – Individual
- \$6,000 – Family

- Out of Network

- \$4,500 – Individual
- \$9,000 – Family

**Remember LabCorp and Clinical Pathology Laboratories are our network facilities and will be covered at 100%!**



# The choice is yours.....

| Paying for care            | Lowest cost option      |                | Highest cost option  |  |
|----------------------------|-------------------------|----------------|----------------------|--|
|                            | PREMIUM TIER 1 PROVIDER | IN THE NETWORK | OUT OF NETWORK       |  |
| <b>CO-PAYMENT*</b>         |                         |                |                      |  |
| PCP                        | \$25                    | \$35           | 50% after deductible |  |
| Specialist                 | \$40                    | \$60           | 50% after deductible |  |
| <b>DEDUCTIBLE*</b>         |                         |                |                      |  |
| Self                       | \$1,000                 | \$1,000        | \$2,000              |  |
| Family                     | \$2,000                 | \$2,000        | \$4,000              |  |
| <b>CO-INSURANCE*</b>       | 20%                     | 20%            | 50%                  |  |
| <b>OUT-OF-POCKET LIMIT</b> |                         |                |                      |  |
| Self                       | \$3,000                 | \$3,000        | \$4,500              |  |
| Family                     | \$6,000                 | \$6,000        | \$9,000              |  |

\*In-network Preventive care is covered 100 percent so you won't need to worry about these costs and payments.





# Pharmacy Plan Updates...

- **Maximum Out of Pocket**
  - \$3,000 individual
  - \$6,000 family
- **\$100 per individual deductible**
  - Applies to Tier 2 and Tier 3 prescription meds
    - **Tier 1 -\$5**
      - Generics & some brand name drugs
    - Tier 2 -\$30 (no change)
      - Mainly preferred brand drugs
    - Tier 3 -\$75 (no change)
      - Mostly non-preferred higher-cost brand drugs





# Example

- 1<sup>st</sup> Prescription in January \$200 (Tier 2 or 3)
- You pay 1<sup>st</sup> \$100
- Then pay Co-Pay amount
  
- Once deductible is met - Co-pays apply
- Once maximum out of pocket is met – Prescriptions covered at 100%





# Formulary

- Some drugs have changed in tier levels
- Prior Authorization will Transfer through new plan year
- Over the counter drugs are still covered at no cost

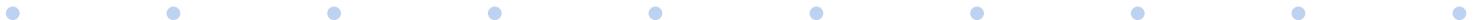




**Well Life!**

Making choices that count.

| 2017 Medical Monthly Contribution Rates |            | Well Life Rate<br>(Effective January 1, 2017) |          | Non-Participation Rate |
|---|------------|---|----------|------------------------|
| Rate Tier                               | Total Rate | Employer                                      | Employee | Employee               |
| <b>Employee Only</b>                    | \$583.50   | \$530.00                                      | \$53.50  | \$103.50               |
| Monthly Increase                        | \$38.50    | \$35.00                                       | \$3.50   | \$3.50                 |
| Per Pay Period Increase                 |            |   | \$1.75   | \$1.75                 |
| <b>Employee-Spouse</b>                  | \$1,230.50 | \$968.50                                      | \$262.00 | \$312.00               |
| Monthly Increase                        | \$80.50    | \$63.50                                       | \$17.00  | \$17.00                |
| Per Pay Period Increase                 |            |   | \$8.50   | \$8.50                 |
| <b>Employee-Child</b>                   | \$1,198.00 | \$947.00                                      | \$251.50 | \$301.50               |
| Monthly Increase                        | \$78.50    | \$62.00                                       | \$16.50  | \$16.50                |
| Per Pay Period Increase                 |            |   | \$8.25   | \$8.25                 |
| <b>Employee-Family</b>                  | \$1,840.50 | \$1,359.00                                    | \$481.50 | \$531.50               |
| Monthly Increase                        | \$120.50   | \$89.00                                       | \$31.50  | \$31.50                |
| Per Pay Period Increase                 |            |   | \$15.75  | \$15.75                |

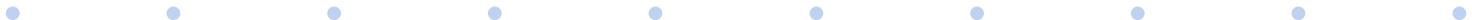




# Dental Plan

- 5% Rate increase
- No Plan Changes:
  - Annual Limit \$1,500
  - Any dentist. UHC network dentist may reduce your out of pocket expense due to negotiated discounts.
  - Deductible \$50 individual/ \$150 family
  - Preventive 100%, no deductible
  - Basic 80%
  - Major 50%

Dental ID cards will only list the subscriber (YOUR) name. All enrolled dependents use the same ID card even though their names are not listed on the card. Duplicate cards can be requested.



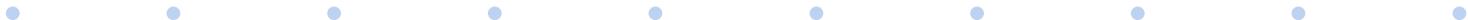


# 2017 Dental Rates

## 2017 Dental Monthly Contribution Rates

(Effective January 1, 2017)

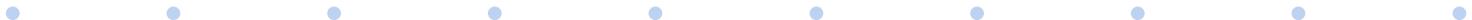
| Rate Tier               | Total Rate | Employer | Employee      |
|-------------------------|------------|----------|---------------|
| <b>Employee Only</b>    | \$30.00    | \$30.00  | \$0           |
| Monthly Increase        | \$1.78     | \$1.78   | \$0           |
| <b>Employee-Spouse</b>  | \$71.50    | \$50.50  | \$21.00       |
| Monthly Increase        | \$3.54     | \$2.48   | \$1.06        |
| Per Pay Period Increase |            |          | <b>\$0.53</b> |
| <b>Employee-Child</b>   | \$62.50    | \$46.00  | \$16.50       |
| Monthly Increase        | \$3.34     | \$2.30   | \$1.04        |
| Per Pay Period Increase |            |          | <b>\$0.52</b> |
| <b>Employee-Family</b>  | \$90.50    | \$60.00  | \$30.50       |
| Monthly Increase        | \$4.50     | \$2.88   | \$1.62        |
| Per Pay Period Increase |            |          | <b>\$0.81</b> |





# Davis Vision

- No Changes
- Network and non-network benefits
- To locate providers:
  - Call 1.877.923.2847
    - Client Codes
      - 3862 Basic
      - 3865 Premium
    - Davisvision.com





# Vision Plans

## Basic Plan (1 pair benefit)

- Eye Exam - \$0 co-pay
- Contact Lens Fitting & Evaluation - \$25 co-pay
- Spectacle Lenses - \$25 co-pay
- Frame Allowance
  - \$130 + 20% off balance
  - \$180 + 20% off balance at Visionworks
- Premier Frames - \$25 co-pay
- Contact Lens
  - Standard – covered in full
  - Specialty - \$60 allowance + 15% discount
  - Non-collection - \$130 allowance + 15% discount
  - Davis Collection - \$0 co-pay (8 boxes)

## Premium Plan (2 pair benefit)

- Eye Exam - \$0 co-pay
- Contact Lens Fitting & Evaluation - \$10 co-pay
- Spectacle Lenses - \$10 co-pay
- Frame Allowance
  - \$130 + 20% off balance
  - \$180 + 20% off balance at Visionworks
- Premier Frames - \$25 co-pay
- Contact Lens
  - Standard – covered in full
  - Specialty - \$60 allowance + 15% discount
  - Non-collection - \$130 allowance + 15% discount
  - Davis Collection - \$0 co-pay (8 boxes)



# Vision Rates

| Monthly Contributions |                | Basic Plan | Premium Plan |
|-----------------------|----------------|------------|--------------|
| Employee Only         | Monthly        | \$6.52     | \$14.22      |
|                       | Per Pay Period | \$3.26     | \$7.11       |
| Employee-Spouse       | Monthly        | \$9.06     | \$19.92      |
|                       | Per Pay Period | \$4.53     | \$9.96       |
| Employee-Child        | Monthly        | \$9.38     | \$20.62      |
|                       | Per Pay Period | \$4.69     | \$10.31      |
| Employee-Family       | Monthly        | \$12.94    | \$28.44      |
|                       | Per Pay Period | \$6.47     | \$14.22      |





# Reasons to have an FSA

- **All health care FSA dollars available the first day**

Dependent care FSAs work differently. You can only use as money becomes available in the account.

- **Health care FSA can help pay for hundreds of expenses**

Some may surprise you such as laser eye surgery, stop-smoking programs and acupuncture

- **Claims can be paid automatically.**

If expense is eligible, we automatically pay the cost from FSA.

- **You can submit and pay bills online at [myuhc.com](http://myuhc.com).**

Use our online claim submission form to easily submit claims and use myClaims Manager to easily manage claims and pay bills.

- **You can get your money faster with direct deposit.**



# Healthcare Reimbursement Account

- Current accounts end 12/31/16
- Grace period will extend to March 15, 2017 with TML
- Elect up to \$2,550 of pre-tax dollars from your paycheck to use on reimbursable healthcare expenses
- January 1 – December 31, 2017 – Administered by UHC
- Benefit is fully funded and available to use beginning January 1, 2017.

Cards will be issued by UHC and should be received in December.  
Remember these cards arrive in discrete envelopes!



# Dependent Care Reimbursement Account

- Current accounts end 12/31/16
- Grace period will extend to March 15, 2017 with TML
- Elect up to \$5,000 of pre-tax dollars from your paycheck to use on reimbursable dependent care expenses
- January 1 – December 31, 2017
- Funded each pay day

The same Flex credit card can be used for both your medical and dependent care accounts.



# Health Care Spending Card

- Your FSA will come with the Debit MasterCard® to make paying easy
- No reimbursement forms to submit
- Substantiation –supporting documentation to verify eligible expenses
- Some expenses will require a receipt:
  - 30 day – first notice
  - 60 day – second notice
  - 90 day – card suspension



# Employee Life Insurance



## No Changes

### City

- City provides \$25,000 Life & AD&D
- One year salary through TMRS at no cost to employee

### Voluntary

- Increase coverage by \$10,000 up to \$300,000 (or maximum of 5x salary)
- Carrier approval required for any amounts over \$150,000 and increases of more than \$10,000
- Elect coverage for the first time (Evidence of Insurability/ health questionnaire required with carrier approval)

# Dependent Life Insurance



## Spouse

- Add by \$5,000 up to \$150,000
- Carrier approval required for any amount over \$25,000 and increases of more than \$5,000
- Elect coverage for the first time (EOI required with carrier approval)

## Child(ren)

- Unmarried up to age 26
- Flat rates for \$1,000, \$5,000 or \$10,000 coverage for all eligible children
- Elect coverage for all children
- Elect coverage for the first time (EOI and carrier approval required)





## Long-Term Disability

- Income Protection Coverage:
  - Can insure up to 60% of your salary for disabilities lasting longer than 90 days
  - Increase current coverage (**increase may be subject to pre-existing conditions**)
  - Elect coverage for the first time (**EOI and carrier approval required**)



# Benefit Providers

## United Healthcare

- Medical & Dental Plans
- Flexible Spending Accounts
- [welcometouhc.com/cityofsanmarcos](http://welcometouhc.com/cityofsanmarcos)
- Customer Service 844.269.5757
- Precertification
- Care Management
- Claim processing & payment

## Davis Vision

- Basic & Premium Plans
- [Davisvision.com](http://Davisvision.com)
- Customer Service  
877.923.2847
- Client Codes:  
Basic Plan – 3862  
Premium Plan – 3865





# Benefit Providers

## Alliance Work Partners

(Employee Assistance Program)

- Confidential counseling (up to 5 free sessions/per issue/per year)
- Legal & Financial advice
- Work/Life Resources
- [www.awpnow.com](http://www.awpnow.com)
- Registration Code:
  - AWP – CSM - 248





# Reminder.....

Benefit elections made during open enrollment are final,

*Unless...*

You have a documented qualifying event and make a change in the required 31-day timeframe.





## Qualifying Events

- Marriage
- Birth or adoption of a child
- Loss of eligibility under Medicaid or CHIP
- Termination of spouse's employment
- Spouse changes from full-time to part-time or takes unpaid leave
- Significant change (10% or more) in the benefit coverage of your spouse's plan

(See Plan Book for complete guidelines regarding qualifying events)





# Open Enrollment Requirements

- **EMPLOYEE PARTICIPATION:**
  - **Complete online open enrollment even if NOT making changes**
  - **Verify your coverage, address and eligible dependents, add dependents not listed, even if declining coverage**
  - **Complete and finish the online enrollment process**
  - **ENROLL or RE-ENROLL for the 2017 Flexible Spending Accounts**





# Dependents

- Eligible dependents:
  - Legal spouse or common law spouse with *Declaration of Informal Marriage* on file with county
  - Natural, adopted, step-children or other children under legal guardianship
  - Dependent grandchildren claimed on taxes

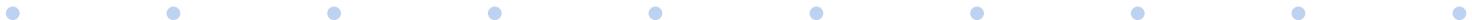
Any dependent added during open enrollment will not be finalized until their verification documents are received in Human Resources.





## Dates to Remember

- Open Enrollment Period ends 11/10/16.
- **Changes must be made ONLINE before midnight, Thursday, 11/10/16!**
- Benefit Changes effective 01/01/17.
- Deductions will occur 01/06/17.
- Pending Life or LTD increases will take effect upon carrier approval and notification.





# Sample Online Enrollment Screen

Member ID: 999999876  
Member: SUBSCRIBER, BROWN

## OnlineEnroll<sup>sm</sup>

Please logoff before you leave the system to protect yourself as well as others. This will prevent unauthorized entry by others.  
Thank you

COMPANY: City of San Marcos x

**LOGIN**

[Forgot Password?](#)

**Do not hit the Browser "Back" Button**



<https://uhc.workterra.net>  
(Online Enrollment)

- **User Name:** first initial, last name, last 4 of your social
- **Password:** First 5 numbers of your social (no dashes)

**Reset your password!**



- Complete required EOI forms
- Enrollment deadline – **November 10<sup>th</sup>!!**





# THANK YOU!

## Questions?



Visit with a UHC representative

- After each session
- Employee Expo



Pre-member website:

[www.welcometouhc.com/cityofsanmarcos](http://www.welcometouhc.com/cityofsanmarcos)



Toll-Free **(844)269-5757** Habla Español? Podemos ayudar.

