



PAJARO VALLEY USD

SEPTEMBER 12, 2016

Special Enrollment Effective January 1, 2017

Presenters:

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Special Open Enrollment Effective January 1, 2017

7 Plans to choose from (3 are new)

1. Blue Shield PPO 100% \$3-15 Rx (current PPO plan)
2. New—Anthem Select PPO 100% \$3-15 Rx (for those members not using Palo Alto Medical Foundation (PAMF) and SUTTER)
3. Blue Shield HMO \$10 co-pay \$5-10 Rx
4. Blue Shield Save Net HMO \$10 co-pay \$5-10 Rx
5. New—Kaiser \$10 co-pay \$10 Rx (100 day supply)
6. M Plan (for those members who are double covered or don't use the district sponsored health plan)
7. Blue Shield H S A Qualified Plan 90% \$1500 deductible \$9-35 Rx (for members who are interested in saving pretax dollars that can be used for qualified health care expenses)

Why are we doing this?

- Looking for ways to save funds without reducing level of benefits:
 - Encouraging members who don't use PAMF and SUTTER to enroll in plans that exclude them from the network (either PPO or HMO)
 - Encouraging members from selecting unnecessary double coverage
- Kaiser is beginning services in Santa Cruz county in January
- H S A deductible is calendar year (so we didn't want members to have meet the deductible twice)
- Provide members the opportunity to share in these savings (see incentive hand out)
- Remind members about important other benefits

5 Plans with 100% coverage and a \$10 co-pay

- 2 PPO's with the same plan designs
 - Blue Shield
 - Anthem Blue Cross Select Network
- Both have 100% coverage, \$10 co-pay \$3-15 Rx (zero co-pay for generics at Costco), Pharmacy Benefits Management is still Navitus
 - **PAMF and SUTTER are not included in the Anthem Select Network**
- Prior to moving to SISC none of our members had access to PAMF and SUTTER
- During our first 15 months in SISC approximately 25% of our members used PAMF or SUTTER (3/4 of us never used PAMF or SUTTER)

2 PPO's

- Members who are not using PAMF and SUTTER can save money and receive incentives per month without reducing their level of benefits
 - Single \$ 53.25
 - 2 Party \$107.25
 - Family \$153.00
- You should confirm your physician(s) is/are contracted using
 - www.blueshieldca.com/sisc
 - www.anthem.com/ca/sisc
 - link to Find a Provider or Doctor
 - link to SELECT PPO for Anthem
 - link to PPO for Blue Shield
 - Search by name or location

Anthem Select PPO

- Except for Sutter all of the hospitals are in Network
 - St. Louise Regional Hospital
 - Natividad Medical Center
 - Salinas Valley Memorial
 - Good Samaritan
 - Dominican Santa Cruz
 - Watsonville Community
 - Stanford Medical Center
 - CHOMP
 - O'Conner Hospital

Anthem Select PPO

- A few coverage differences:
 - Elective knee and hip replacement surgery and inpatient spine surgery—Anthem requires Blue Distinction Plus Network for review and facility (pays for travel expenses if over 50 miles)
 - Knees and Hips
 - Good Samaritan, O’Conner, Stanford Medical Center
 - Inpatient Spine
 - Valley Care Medical Center, Pleasanton
 - Bariatric surgery requires Blue Distinction Network
 - Good Samaritan, Stanford Medical Center, CHOMP

Anthem Select PPO

- Chiro and PT—Anthem uses American Specialty Health to review after five visit, but provides unlimited coverage
- Out of Network X-ray, Lab, Durable Medical Equipment (DME) or Physical Medicine is not covered.
 - (Please don't select this plan if you are planning to go out of network)
- Questions to consider?
 - Do I need access to PAMF and SUTTER?
 - Are my providers in the network?
 - Do I need a PPO?

2 Blue Shield HMOs

1. Blue Shield HMO \$10 co-pay \$5-10 Rx
2. Blue Shield Save Net HMO \$10 co-pay \$5-10 Rx
 - Exact Same Plan Design (no difference)
 - Save Net HMO is narrower network (eliminates PAMF and SUTTER)
 - Many of our providers are contracted with the HMOs
 - We can receive the same benefits from the same doctors and receive an incentive per month

	HMO	Save Net HMO
Single	\$ 63.00	\$128.25
2 Party	\$137.25	\$267.75
Family	\$204.75	\$390.75

Kaiser is coming to Santa Cruz on January 1, 2017

- \$10 co-pay plan \$10 Rx (100 day supply)
 - Kaiser Pharmacy only
- Integrated care model
- Three (3) facilities in Santa Cruz County to start
- Only plan that covers artificial insemination at 100% (\$10 office visit co-pay)
- Costs less than PPO
 - Savings are shared with us as incentive per month
 - Single \$ 92.25
 - 2 Party \$177.00
 - Family \$242.25

Members with “Unnecessary” Double Coverage

- We have 97 subscribers on 100% plans who are also dependents on 100% plans
- We are paying approximately \$700,000 a year in premiums for these extra coverages
- Since members don't get any additional benefit other than the elimination of the \$10 co-pay (No Rx coordination), we're asking members to consider switching one subscriber to the M Plan.

M Plan—for those with “double” or other coverage

- SISC requires that all FTE enroll in one of the medical plans
- Plan M is the least expensive PPO plan that coordinates with our Blue Shield PPO plan
 - A member who is on both the PPO and plan M will have the same benefit as though they were only enrolled in the PPO plan
- Especially good for families of 4 or more where both parents work full time for the district or those who don't use the district's coverage
- Incentive is \$201.75 per month

	Shield PPO	Plan M
Deductible	\$0	\$3,000/\$6,000
OOPMax	\$1000/\$3000	\$4,000/\$8,000
Co-insurance	100%	80%
Office Co-pay	\$10	\$40
RX	\$3-15	\$3-15

Ancillary Added Value Benefits for All Members

(Please see hand out)

- Employee Assistance Plan (EAP) at no cost
- Grand Rounds—Expert Medical Second Opinion at no cost
- MDLIVE—24/7 Telemedicine \$5 co-pay
 - Not available to Kaiser Members
- On site Flu Shots
- On site Bio metric screenings (with incentive)

Health Savings Account Qualified Plan

- \$1500 individual deductible also applies to Rx \$3000 Out Of Pocket (OOP) Max
 - 90% coinsurance and \$9-\$35 Rx co-pay only starts once \$1500 deductible has been met
- \$2600 **combined** 2 party deductible also applies to Rx, \$3000 individual OOPMax
 - 90% coinsurance and \$9-\$35 Rx co-pay only starts once \$2600 deductible has been met
- \$3000 **combined** family deductible also applies to Rx, \$3000 individual OOPMax, \$6000 Family OOPMax
- Funds are not available until deposited (not like FSA where the entire election is available on the first day)

Health Savings Account Qualified Plan

90% \$9-\$35 Rx Blue Shield PPO

- Federally regulated plan
- H S A Contribution limits \$3,350-\$6,750
 - Members over 55 and catch-up an additional \$1,000
 - \$4,350-\$7,750
- *Recommended for members who are healthier, use medical coverage the least and want to save pretax money*
- Savings Account will be managed by American Fidelity
 - Debit card to pay your qualified, medical, dental and vision costs
 - Must meet with American Fidelity to set up the Savings account
- Funds remain yours even if you leave PVUSD and/or the plan
- Can be used to pay for you Medicare premiums and any qualified medical expense including dental and vision

Health Savings Account Qualified Plan

- Members may want to consider prefunding the account to pay for the deductible
- Members can deposit funds into their accounts directly—without a payroll deduction
 - These amounts are tax deductible for members who itemize their taxes
- Incentive per month is:
 - Single \$195.75
 - 2-Party \$356.25
 - Family \$474.75
- 8 months of the incentive amount you receive will equal the deductible for an individual



Enrollment dates are from

October 1, 2016 through October 31, 2016
with all supporting documents
required to be in the Benefits office **NO LATER**
than November 4, 2016.

Questions/Comments?

Thank you