

**City of Hamilton**  
BUTLER COUNTY OHIO



# 2018 Employee Benefit Meetings

*November 6th – November 10<sup>th</sup> 2017*

# Why Are We Here Today?



Medical Benefits



What's The Cost



Living Well Program



Other Benefits



What To Do,  
How To Do It,  
And By When

# What Is Changing?



## ✓ Annual Deductible

	2017	2018	Change
In-Network	\$2,700 / \$4,800	\$2,850 / \$5,000	+\$150 / +\$200
Non-Network	\$4,200 / \$8,500	\$4,400 / \$8,800	+\$200 / +\$300

## ✓ Out-of-Pocket Maximum

	2017	2018	Change
In-Network	\$4,850 / \$9,300	\$4,850 / \$9,300	\$0 / \$0
Non-Network	\$8,800 / \$17,700	\$8,800 / \$17,700	\$0 / \$0

## ✓ Pharmacy Changes

	2017	2018	Change
Copay (after Deductible)	\$10 / \$35 / \$70	\$10 / \$35 / \$70	\$0 / \$0 / \$0

NOTE: Plan design cost sharing presented with two tiers of coverage: Employee only / Employee Plus One or More Covered Dependents

# 2018 Medical Plan Design Changes



Plan Provision	2017 Coverage	2018 Coverage (Changes in Red)
Preventive Services	100% (No deductible)*	100% (No deductible)*
Deductible	\$2,700 Individual \$4,800 Family Maximum	<b>\$2,850</b> Individual <b>\$5,000</b> Family Maximum
Coinsurance	100% After Deductible / Copays	100% After Deductible / Copays
Office Visit Copay	\$15 for PCP / \$30 for SCP (Copays apply after deductible)	\$15 for PCP / \$30 for SCP (Copays apply after deductible)
ER Copay	\$250 (Copay applies after deductible)	\$250 (Copay applies after deductible)
Urgent Care Copay	\$50 (Copay applies after deductible)	\$50 (Copay applies after deductible)
RX Copays	\$10/\$35/\$70 Copay applies after deductible	\$10/\$35/\$70 Copay applies after deductible
Out of Pocket Max (Includes Deductible / Copays)	\$4,850 Employee Coverage \$9,300 Family Coverage	\$4,850 Employee Coverage \$9,300 Family Coverage

\*For additional information regarding Preventive Services go to [www.uhpreventivecare.com](http://www.uhpreventivecare.com)

NOTE: Details above reflect In-Network coverage

# 2017 Medical Program Facts



- United Healthcare (UHC) will continue to be the health care provider
- The Real Appeal program through UHC continues to be available. Related services under the program are covered expenses under the plan. This program is open to members 18+.
- Tobacco Cessation tools continue to be available through UHC
- To support the City's efforts in creating a tobacco-free environment, the City is looking into implementing a tobacco surcharge in 2019.
- City account contribution will remain \$800 / \$1,525. To receive the City contribution, employees will need to be in compliance with the 2018 Living Well requirements. There is an update this year!
- The prescription drug coverage is Creditable when compared to Medicare D

# What's The Cost?



Coverage Tier	2018 Medical Contributions	Living Well Program 2018 Account Funding*
Employee	\$44.31	\$800
Employee + 1	\$81.09	\$1,525
Family	\$126.72	\$1,525

Coverage Tier	2018 Medical, Dental and Vision Contributions	Increase over 2017 (per pay)
Employee	\$46.19	\$1.30
Employee + 1	\$85.64	\$2.43
Family	\$134.26	\$3.81

\*Entire account funding is contingent on satisfying the requirement of the Living Well Program

NOTE: Employee contributions above represent per pay costs. Account Funding represents an annual contribution.

# Spousal Surcharge



- If you have elected City of Hamilton medical coverage for your spouse and your spouse is eligible for **qualified group based coverage** through his/her employer, a \$50 monthly spousal surcharge will be added to your premium.
  
- The surcharge will not apply if:
  - Your spouse is also an employee of The City of Hamilton
  - Your spouse is not eligible for qualified group based coverage through his/her employer, is not employed or is self-employed
  - Your spouse is no longer an active employee with his/her employer, and is eligible for retiree benefits only
  - Your spouse is only eligible for Medicare benefits, and no qualified group based coverage
  
- As needed, City of Hamilton employees may be asked to provide proof of eligibility for their spouse

# Healthy Hamilton

## “Living Well Program”



- What you and your covered spouse, if applicable, need to do:
  - Complete an annual preventive physical between 7/1/2017 and 6/30/2018
  - Complete a lab blood draw through your healthcare provider or participate in an onsite biometric screening event offered by Kettering Health Network
- In addition to the above requirements, employees must also:
  - Complete an Online Health Risk Assessment
  - Participate in an educational event (details TBA)
- New for 2018, based on biometric results, you (the employee) and your covered spouse (if applicable) must test free of Metabolic Syndrome OR complete a reasonable alternative
- Participating employees and their covered spouse must both complete and return the following forms to Kettering Health Network:
  - Registration Form
  - Wellness Exam Form
- By completing these requirements you will earn contributions into your account
  - Employee = \$800
  - EE+1/ Family = \$1,525

NEW





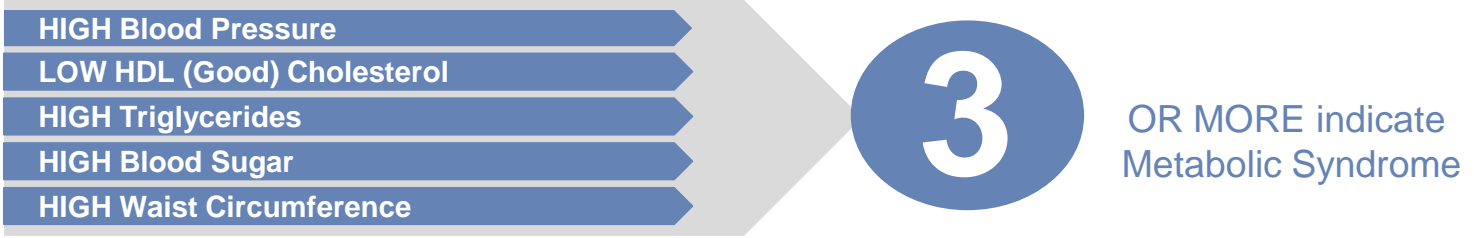
# Healthy Hamilton

## What is Metabolic Syndrome



PROPOSED MEASUREMENT STANDARDS*	
Measurement	Acceptable Range
Blood Pressure	< 130/85 mm/Hg
HDL (Good) Cholesterol	≥ 40 mg/dL (men) or ≥ 50 mg/dL (women)
Triglycerides	< 150 mg/dL
Blood Sugar (Glucose)	< 100 mg/dL
Waist Circumference	< 40 inches (men) or < 35 inches (women)

\* Measurement standards from Kettering Health Network



\* Please note Reasonable Alternatives must be completed June 30<sup>th</sup> 2018 in order to receive HSA funding.

# *Healthy Hamilton*

## *Reasonable Alternatives*



### 1. Complete NATURALLY SLIM, a 10 week online program

Naturally Slim is a clinically-proven solution to help employees and plan members reduce their Metabolic Syndrome risk through weight loss. The Naturally Slim program has helped over 650 employers reduce their health care spending and achieve measurable improvement in the health of their employee populations.

Individuals who choose this option will submit a certificate of completion to Kettering Health Network upon completion of the program.

OR

### 2. Engage with Primary Care Physician on personal health plan

Individuals who choose this option will submit the Physician Release Form to Kettering Health Network with a signature from their primary care physician.

\* Please note Reasonable Alternatives must be completed June 30<sup>th</sup> 2018 in order to receive HSA funding.

# Account Funding



- The City will make the account contribution for the 2018 benefit period in a single payment, depending on the date when all program requirements are completed.
- The HRA contribution is the same and applies only to those who are ineligible for the HSA
- In order to contribute into the HSA:
  - You must participate in a Qualified High Deductible Health Plan (QHDHP)
  - You cannot be enrolled in Medicare, Medicaid, Tri-Care, VA or Indian Health Services in the last 90 days
  - You cannot be enrolled in any other non-QHDHP health plan\*

\*Other non-QHDHP health plans include Traditional HMOs, PPOs, Health Care FSAs, etc.



# HSA Plan

- Employees may contribute to the HSA. Contributions will be distributed to the HSA as deducted from your pay. Remember, payroll contributions are “pre-tax.”
  
- Total contributions to the HSA are subject to the following 2018 annual limits:
  - \$3,450 for Single
  - \$6,900 for EE+1 or Family
  - \$1,000 “Catch-Up” for individuals age 55 or older
  
- First Financial Bank remains the custodian for the HSA bank account
  
- Employees electing coverage that do not have an existing HSA account must complete the necessary forms to establish an account
  - New account application can be found in the forms library; complete and return to Civil Service & Personnel



# *HRA Plan*

- Health Reimbursement Account (HRA) is only available to those employees who are not eligible to participate in the HSA
- The HRA plan will have the same benefit structure as the HDHP/HSA plan
- There is no rollover provision
- City will contribute into the HRA when all Living Well Program requirements are completed:
  - Single = \$800
  - EE+1 or Family = \$1,525
- Employee does not own the HRA account, and balances are not portable



# FSA Plan

- Healthcare Flexible Spending Account (FSA)
  - Beginning January 1, 2018 employees may contribute up to \$2,650
  - If you are enrolled in the HDHP/HSA you can elect a Limited Purpose Flexible Spending Account (LFSA). You are not eligible for the full FSA
  - The full FSA covers medical, dental and vision expenses. The LFSA covers dental and vision expenses only.
  - The same provider will be used for 2018.
  - New cards will be mailed to your home in mid-December. **Your current card will not work after December 31, 2017!**



# *FSA Plan – Part II*

- Dependent Care Account
  - Employees can contribute up to \$5,000; \$2,500 if married and filing separately
  - Section 125 rules: “change in status” and “use it or lose it” provisions apply
  
- Coming January 2018
  - New Employee Portal: [www.CustomDesignBenefits.com](http://www.CustomDesignBenefits.com)
  - New Mobile App: search “CustomFlex” from the App Store





# *Dental and Vision Plans*

- Dental plan is fully-insured with Dental Care Plus
  - No change in the dental benefit structure for 2018
  - Employees living in the 8 core counties are required to see In-Network providers:
    - Butler, Warren, Hamilton, and Clermont in Ohio
    - Pendleton, Campbell, Kenton, and Boone in Kentucky
  
- Vision Services are through EyeMed Vision Care
  - No change in the vision benefit structure for 2018
  - Vision employee contribution rates will remain the same.





# *Incentive to Waive Plan*

- Employees may elect to “waive” the medical benefit plans for 2018
- By choosing to waive, you are waiving coverage for Medical, Dental and Vision
- If you waive coverage, the City of Hamilton will pay you \$2,400, payable as \$100 per pay period
- Employee **must provide proof** of other health insurance coverage to Civil Service & Personnel by January 31, 2018
- Waiver payment may be forfeited if proof of coverage is not received by the deadline.



# *Other Elective Benefits*

- The City makes available the following voluntary benefits to you at group rates:
  - Hartford: Supplemental Employee/Dependent/Child Term Life/AD&D
  - Mutual of Omaha: Voluntary STD (Guarantee Issue Available) and LTD
  - Humana: Critical Illness, Voluntary Accident and Whole Life (Guarantee Issue Available)

**IMPORTANT:** If you elect a plan that requires evidence of insurability (EOI), you must submit this information within 30 days. It is your responsibility to submit the appropriate paperwork to the carrier by the applicable deadline.

# City of Hamilton *EXCLUSIVE* Guarantee Issue Plans



## No medical questions required to obtain a benefit for City of Hamilton employees

- **Whole Life Insurance** – Permanent, Portable and Affordable Protection for today, tomorrow and into your retirement with guarantees on your premium and benefits
- **Critical Illness/Cancer** – Protect Your Assets with a Lump Sum benefit payment directly to you when serious illness or conditions affect you or your family members (e.g., vascular, cancer, kidney, coma, etc.). Enrollees qualify for an annual \$150 Health Screening Benefit
- **Accident** – No one plans an accident. But you can plan how to cover those unexpected costs at the Hospital ER, Doctor's office, Ambulance, Hospital Indemnity, Bone fracture and dislocation benefits and even Accidental Loss of Life or Dismemberment. Four plans available to fit any budget!
- **Lifestyle Discount Program** – To make it easier and more affordable to take better care of yourself, Humana offers the Lifestyle Discount Program. This is not an insurance plan. It is a discount program to strengthen your personal well-being and enrich your life. As a Humana member, you have access to this valuable program



# *Important Reminder for Humana Critical Illness/Cancer Enrollees*

- Did you receive your **\$150** Health Screening Benefit for 2017?
- Current Critical Illness/Cancer policy holders now have the option of Telephonic Claim service
- To receive the \$150 Health Screening Benefit
  - Call 855-448-6982
  - Provide the type of service rendered, the physician's name, address and phone number of who provided the service for the qualifying health screening procedure

# *Annual Health Screening Benefit (one for each covered insured)*



- Bone Marrow Testing
- CA-125 (Blood test for Ovarian Cancer)
- Chest x-ray
- Flexible Sigmoidoscopy
- Mammography (including breast ultrasound)
- PSA (blood test for Prostate Cancer)
- Biopsy for Skin Cancer
- Electrocardiogram (EKG) including stress EKG
- Blood test for Triglycerides
- CA-15-3 (blood test for Breast Cancer)
- CEA (blood test for Colon Cancer)
- Colonoscopy
- Hemocult stool analysis
- Pap Smear (including Thin Prep Pap Test)
- Serum Protein Electrophoresis (test for myeloma)
- Stress test (bike or treadmill)
- Lipid Panel (total cholesterol count)
- Oral Cancer Screen using ViziLite, OraTest or other Current Dental Terminology© Code D0431



# What You Need To Do

*Enroll between*

*November 13<sup>th</sup> through November 21<sup>st</sup> 2017 by 7:00 pm*

All employees must complete the enrollment process using one of the three methods outlined below (also included in your 2018 Benefit Guide):

There are 3 easy ways to enroll:

1. Schedule meeting with a Benefit Specialist by visiting [www.ebcoh.com/appointment](http://www.ebcoh.com/appointment)
2. Call the Enrollment Benefits Call Center at 513-371-5557 or 800-463-7420
3. Online – [www.clickenrollonline.com](http://www.clickenrollonline.com)  
(PIN = last 4 digits of SSN + last 2 digits of your birth year)

Before you do any of these, make sure you review the 2018 Benefit Guide, discuss your options with your family and have your dependent's social security numbers and dates of birth.

**Reminder:**

For changes to your benefit elections during the plan year you must contact Civil Service and Personnel. Documentation must be submitted that shows the date of the qualifying event. **You MUST make these changes within 31 days of the qualifying event.** Failure to do so may affect your coverage.

# *Additional Resources*

Please visit the HR/Employee portal, found on the City's website to access any of the below items:

- Benefit summaries
- Medical Summary of Benefits & Coverage
- UHC brochures (Quit Power, Virtual Visits, etc.)
- Living Well Program Registration and Wellness Incentive Form
- Physician Release Form
- HSA new account application
- ...and more!

**IMPORTANT:** Final page of the 2018 Benefit Guide summarizes contact vendor information, including index page in the guide, provider, policy number, phone number and website

***QUESTIONS?***

***Thank you for attending!***