

HealthFlex Summit—October 2019



HealthFlex Operational Updates



- HealthFlex Roadmap—Implementation Updates
- 2021-2022 Plan Design Strategy Conversation
- Enhancements for 2020 and Annual Election Updates
- OptumRx Improvements



Roadmap

HealthFlex Roadmap Review

3 to 5-Year Plan to Enhance Wespath's Health Benefit Offering

5 Areas for Development

- Cost efficiency and market competitiveness
- Participant experience and engagement
- Population health
- Balancing flexibility with operational efficiency
- Growth opportunities

Market Competitiveness

Complete

- Vendor fee renegotiations— \$325,000 saved in 2019
- Pharmacy audits, market check— \$1.59M reduction for 2020
- Low cost dental plan
- Improved hearing aid coverage
- HRA plan design improvement
- Behavioral health carve in
- Plan sponsor reporting—Part 1

On Deck

- Explore Kaiser partnership
- Implement Point of Sale rebates
- Enhanced health analytics strategy
- Optimize health plan design
- Plan sponsor reporting—Part 2
- Pharmacy Benefits RFP

Market Competitiveness

Future Considerations

- Networks
- Cost transparency
- Cost optimization
 - Centers of Excellence
- Expanded programming
 - Second opinion
 - Musculoskeletal



Engagement

Complete

- Streamlined language for HealthFlex Exchange
- Improve access to behavioral health (HRA benefits)
- Improve health education through events and webinars
- OptumRx improvements

On Deck

- Digital Gateway
- Evaluation of expert consultation services
- Improve participant onboarding

Engagement

Future Considerations

- Integration of health accounts and incentives
- Improve access to cost transparency tools
- Optimize participant ID cards
- Enhance decision support (ALEX improvements)



Population Health

Complete

- Implementation of Diabetes Prevention Program
- More affordable access to behavioral health care
- Expanded health education (webinars and events)

Future Considerations

- Expanded well-being offerings
- Integration of well-being incentives and health accounts
- Second opinion
- Musculoskeletal offerings
- Case management

Growth, Efficiency, and Flexibility

Complete

- Reporting and training
- Decrease minimum size requirements for HealthFlex

On Deck

- Redesign plan offerings
- Enhanced Health Analytics strategy
- HealthFlex
 Exchange-only

Future Considerations

Online administration participants and plan sponsors



Plan Design

Plan Design Change—A Conversation

- Conference Advisory Board
- Table Top Conversations at Spring HealthFlex Mini-Summit
- Best Practice and industry analysis with Willis Towers Watson
- Conversations with prospective plan sponsors



HealthFlex Plan Design Strategy for 2021–2022

Objectives

- Plans with meaningful difference in price, value, benefits
- Reduce fear, barriers to adoption of lower cost plans
- Ensure changes are easily communicated and understood
- Smooth HealthFlex Exchange transition for remaining groups



Current Health Flex Medical/Rx Plans

	HSA Plans		HRA Plans		B1000	
	H1500	H2000	H3000	C2000	C3000	B1000
Health Account Contributions	\$750/\$1,500	\$500/\$1,000	None	\$1,000/\$2,000	\$250/\$500	None
Deductible	\$1,500/\$3,000	\$2,000/\$4,000	\$3,000/\$6,000	\$2,000/\$4,000	\$3,000/\$6,000	\$1,000/\$2,000
	If > 1 person is cov	vered the family deducti	ble always applies			
Co-insurance	80% 20%	70% 30%	40% 60%	80% 20%	50% 50%	80% 20%
Out-of-Pocket Max (OOP)	\$6,000/ \$12,000	\$6,500/ \$13,000	\$6,500/ \$13,000	\$6,000/ \$12,000	\$6,500/ \$13,000	\$5,000/ \$10,000
Pharmacy Highlights	Generics: \$15-\$35 after deductible		60% after deductible	Generics: \$15-\$35 Preferred brand: 25%		Generics: \$15-\$35
	Preferred brand deductible	25% after				Preferred brand: 20%

Areas for Consideration

- Out-of-pocket maximums
- Pharmacy cost-share transparency
- Long-term viability of B1000
- Separation of value: B1000 and C2000
- Total number of HRA and HSA plans
- "Catastrophic" plan design



Areas for Consideration

	HSA Plans		HRA Plans		B1000	
	H1500	H2000	H3000	C2000	C3000	B1000
Health Account Contributions	\$750/\$1,500	\$500/\$1,000	None	\$1,000/\$2,000	\$250/\$500	None
Deductible	\$1,500/\$3,000	\$2,000/\$4,000	\$3,000/\$6,000	\$2,000/\$4,000	\$3,000/\$6,000	\$1,000/\$2,000
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Co-insurance	80% 20%	70% 30%	40% 60%	80% 20%	50% 50%	80% 20%
Out-of-Pocket Max	\$6,000/	\$6,500/ \$12,000	\$6,500/ \$12,000	\$6,000/ \$12,000	\$6,500/ \$12,000	\$5,000/ \$10,000
(OOP)	\$12,000	\$13,000	\$13,000	\$12,000	\$13,000	\$10,000
Pharmacy Highlights	Generics: \$15-\$35 after deductible		60% after deductible	Generics: \$15-\$35		Generics: \$15-\$35
пынкніз	Preferred brand 25% after			Preferred brand: 25%		
	deductible					Preferred brand: 20%

On Deck—Changes for 2021

	HSA Plans		HRA Plans		B1000	
	H1500	H2000	H3000	C2000	C3000	B1000
Health Account Contributions	\$750/\$1,500	\$500/\$1,000	None	\$1,000/\$2,000	\$250/\$500	None
Deductible	\$1,500/\$3,000	\$2,000/\$4,000	\$3,000/\$6,000	\$2,000/\$4,000	\$3,000/\$6,000	\$1,000/\$2,000
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2021—Maximum Out-of-Pocket Cost

Reduce and Simplify Out-of-Pocket Maximums

- \$5,000/\$10,000 for all plans except H3000
- \$6,000/\$12,000 for H3000

Rationale Net increase to overall costs: Small Participant disruption: Zero to positive



2021—Refined Pharmacy Cost-Share

Streamlined • **Transparent**

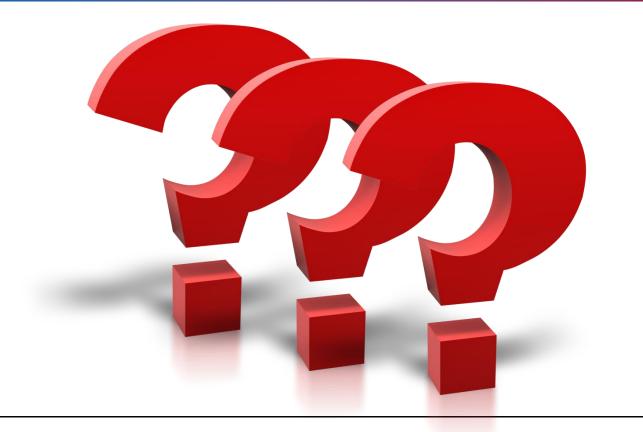
- \$10/\$25 for 30/90 day generics
- 30% coinsurance for formulary brand Rx (\$30/\$75 minimum – \$65/165 max)
- 40% coinsurance for non-formulary brand Rx (\$50/\$125 minimum – \$120/\$300 max)
- HSA plans require deductible first (except preventive list)
- H3000 = 60% coinsurance with no min/max (except OOP)
- Implement point of sale rebates (if possible)



What Could 2021 Look Like?

	HSA Plans		HRA Plans		B1000	
	H1500	H2000	H3000	C2000	C3000	B1000
Health Account Contributions	\$750/\$1,500	\$500/\$1,000	None	\$1,000/\$2,000	\$250/\$500	None
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Co-insurance	80% 20%	70% 30%	40% 60%	80% 20%	50% 50%	80% 20%
Out-of-Pocket Max (OOP)	\$5,000/ \$10,000	\$5,000/ \$10,000	\$6,000/ \$12,000	\$5,000/ \$10,000	\$5,000/ \$10,000	\$5,000/ \$10,000
Pharmacy Highlights	Generics: \$10-\$25 after deductible		60% after deductible	Generics: \$10-\$25 Preferred brand: 30%		Generics: \$10-\$25
	Preferred brand after deductible	30%				Preferred brand: 30%

Mentimeter Questions



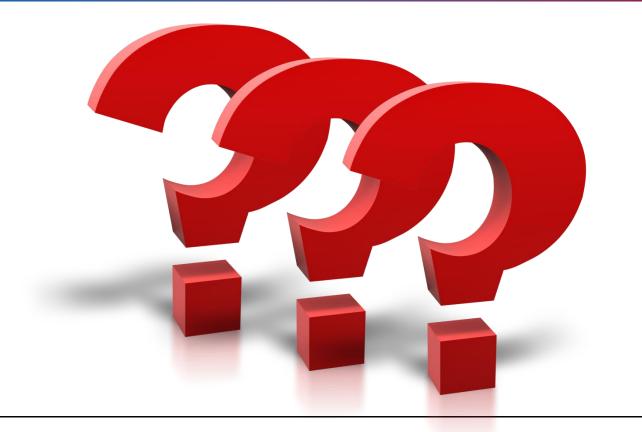
Considerations for 2022

- Replace B1000
- Reduce value of C2000
- Replace H3000 with a deductible-only plan
 - (H4000 or H5000)
- Reduce offerings from 6 to 5 plans

What Could 2022 Look Like?

	H1500	H2000	H5000?	C2000	C3000	B1500
Health Account Contributions	\$750/\$1,500	\$500/\$1,000	None	\$500/\$1,000	\$250/\$500	None
Deductible	\$1,500/\$3,000	\$2,000/\$4,000	\$5,000/ \$10,000	\$2,000/\$4,000	\$3,000/\$6,000	\$1,500/ \$3,000
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Pharmacy Highlights	Generics: \$10-\$25 after deductible Preferred brand 30%		60% Generics: \$10-\$ after deductible Preferred brand			Generics: \$10-\$25 Preferred
	after deductible					brand: 30%

Mentimeter Questions



Considerations for 2022—Why Wait?

- Final groups transitioning to HealthFlex Exchange in 2021
- General Conference 2020 and overall change in greater church



Considerations for 2022—Why Not Wait Longer?

- Never a perfect time for change
- Long-term stewardship and sustainability our continued focus



Enhancements for 2020 Annual Election

Stepping Forward—2020 Plan Enhancements

- Addition of Dental HMO for HealthFlex Exchange
 - Elimination of Passive PPO 1000
- Behavioral Health serviced by Medical Vendor (all plans)
- Preventive Drug List bypasses deductible (HSA plans)
- Limit health care FSA carry over to 1 year



Addition of Dental HMO

Passive PPO 2000	РРО	DHMO
PPO Advanta	Dental Care Access Plus	
 \$2,000 maximum annual benefit Same coinsurance in-network/ out-of-network* 	 \$2,000 maximum annual benefit (in-network) \$1,000 maximum annual benefit (out-of-network) 	 No maximum benefit Cost share follows patient charge schedule: www.wespath.org/ assets/1/7/5433.pdf In-network only
Wellness benefit: increases maximum l (up to	HMO not available in all ZIP codes	

Participants can find an in-network dentist: cigna.com

* Out-of-network subject to reasonable/customary limitations

29 | Wespath

Addition of Dental HMO

	РРО	Passive PPO 2000	Dental HMO Sample Participant Costs*
Deductible	\$50 per person \$150 per family	\$50 per person \$150 per family	None
Preventive / Diagnostic Care	Plan pays 100%	Plan pays 100%	 Periodic/Comprehensive oral evaluation; prophylaxis (cleaning): \$0 X-rays panoramic (every 3 yrs) or bitewings: \$0
Basic Restorative (Fillings, root canal, extractions)	Plan pays 90% in-network Plan pays 70% out-of-network	Plan pays 80%	 All amalgam filling, anterior composite filling: \$0 Posterior composite filling: \$47 - \$115 Molar Root canal: \$335 Periodontal scaling/root plane: \$42 - \$83/quad
Major Restorative (Crowns, dentures, implants)	Plan pays 60% in-network Plan pays 50% out-of-network	Plan pays 50%	 Crown: \$88 - \$150 + \$410 - \$460 for materials Partial dentures: \$525 - \$715
Orthodontia (Up to age 19)	50% up to \$2,000 in-network 50% up to \$1,000 out-of-network	50% up to \$2,000	 Child orthodontics: \$2,040 Adult orthodontics: \$2,376

* HMO dentists not available in all areas. See full Patient Charge Schedule (PCS) online for member cost share for a list of detailed services: https://www.wespath.org/assets/1/7/5433.pdf

Important Notes About Dental HMO

- ZIP code driven
- Must select a primary care dentist
 - Primary care dentist's name will appear on the ID card
 - Each individual in the household can select a different primary care dentist
- No out of network benefits

2020: Behavioral Health With Medical Carrier

- Reduction in member complexity
 - No separate ID card or phone number
 - Same Explanation of Benefits for medical and behavioral health
 - Improves in-network referral process
 - One less vendor to "know"
- Higher outpatient out of network benefits remain
- Transition of care for those seeking inpatient or intensive outpatient services

HSA Plans: Preventive Drug List Bypasses Deductible



Co-payment and co-insurance apply before the deductible for certain preventive drugs in the following categories:

Antipsychotics and SSRI Anti-depressants	Estrogens
Asthma and COPD, including peak flow meters	GI/Ulcer
Certain breast cancer Rx	HIV/AIDS
Cardiovascular (antianginal, anticoagulants, blood pressure Rx and monitors, cholesterol)	Osteoporosis
Contraceptives	Transplant
Diabetes, including glucometers	Smoking cessation

Final list may change—subject to OptumRx Preventive Premium drug list: www.wespath.org/assets/1/7/5434.pdf

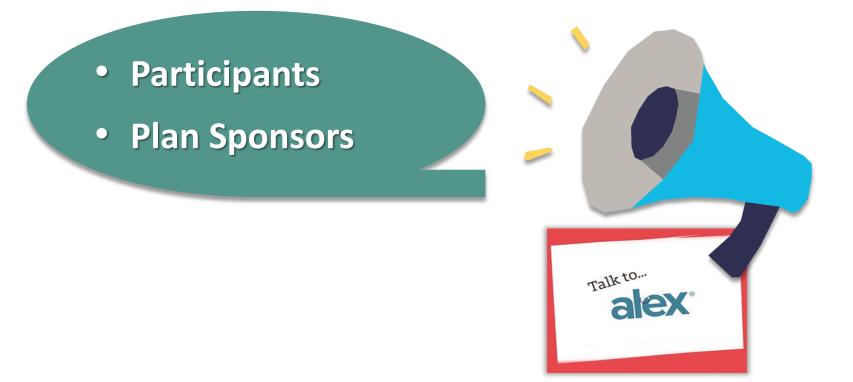


Other Enhancements for AE

- Plan Funded amount appears on HSA page (HSA plans only)
- Enhanced Plan Selection Support from OptumRx

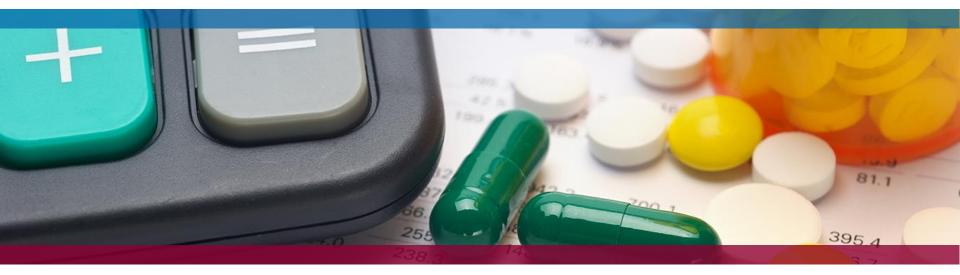


Promoting Self-Service for AE 2020



HealthFlex Annual Election 2020: Key Dates





Optum Rx Enhancements

Stepping Forward—Pharmacy Benefits

Complete

- Preventive Drug List for HSA plans
- Market check and audits
- Pre-check my script

On Deck

- Point of sale rebates
- Vigilant drug list
- Pharmacy Benefits RFP

Ongoing

Recognizing opportunities for higher level of individual service

