

2023

BENEFITS CHANGES

PARTNERS
FOR HEALTH



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PREMIUM CHANGES

DOLLAR INCREASE PER MONTH

ACTIVE EMPLOYEES

- Increase ranges from \$0 to \$26 per month
- Depending on plan type and Tier

RETIREEES

- Increase ranges from \$1.20 to \$36 per month
- Depending on years of service, plan type and tier

ACTIVE EMPLOYEES

6.2% increase

RETIREEES

3.6% increase

DEDUCTIBLE INCREASES

- Increase in deductibles for Premier PPO and Standard PPO and State CDHP
- Affects all plan types and tiers
- For the Premier & Standard PPOs:
 - Co-pays for office visits, non-specialty pharmacy, telehealth, convenience clinics and urgent care remain unchanged – the deductible still does not apply to these services

Example: Single EE Increases to In-Network and Out-of-Network Deductibles

Single EE	Premier Current	Premier 2023	Standard Current	Standard 2023	CDHP Current	CDHP 2023
In-network/ out-of-network	\$500/\$1,000	\$750/\$1,500	\$1,000/\$2,000	\$1,300/\$2,600	\$1,500/\$3,000	\$1,700/\$3,400

MAXIMUM OUT-OF-POCKET INCREASES

- Increase MOOP for Standard PPO and State CDHP for all tiers
- Premier PPO MOOP is not changing
- Typically, fewer than 5% of members reach their annual MOOP

Example: Single EE Increases to In-Network and Out-of-Network MOOP

Single EE	Standard Current	Standard 2023	CDHP Current	CDHP Proposed
In-network/out-of-network	\$4,000/\$8,000	\$4,400/\$8,800	\$2,500/\$5,000	\$2,800/\$5,600

BENEFITS CHANGES

Coinsurance

Increase in-network coinsurance for Premier PPO from 10% to 15%

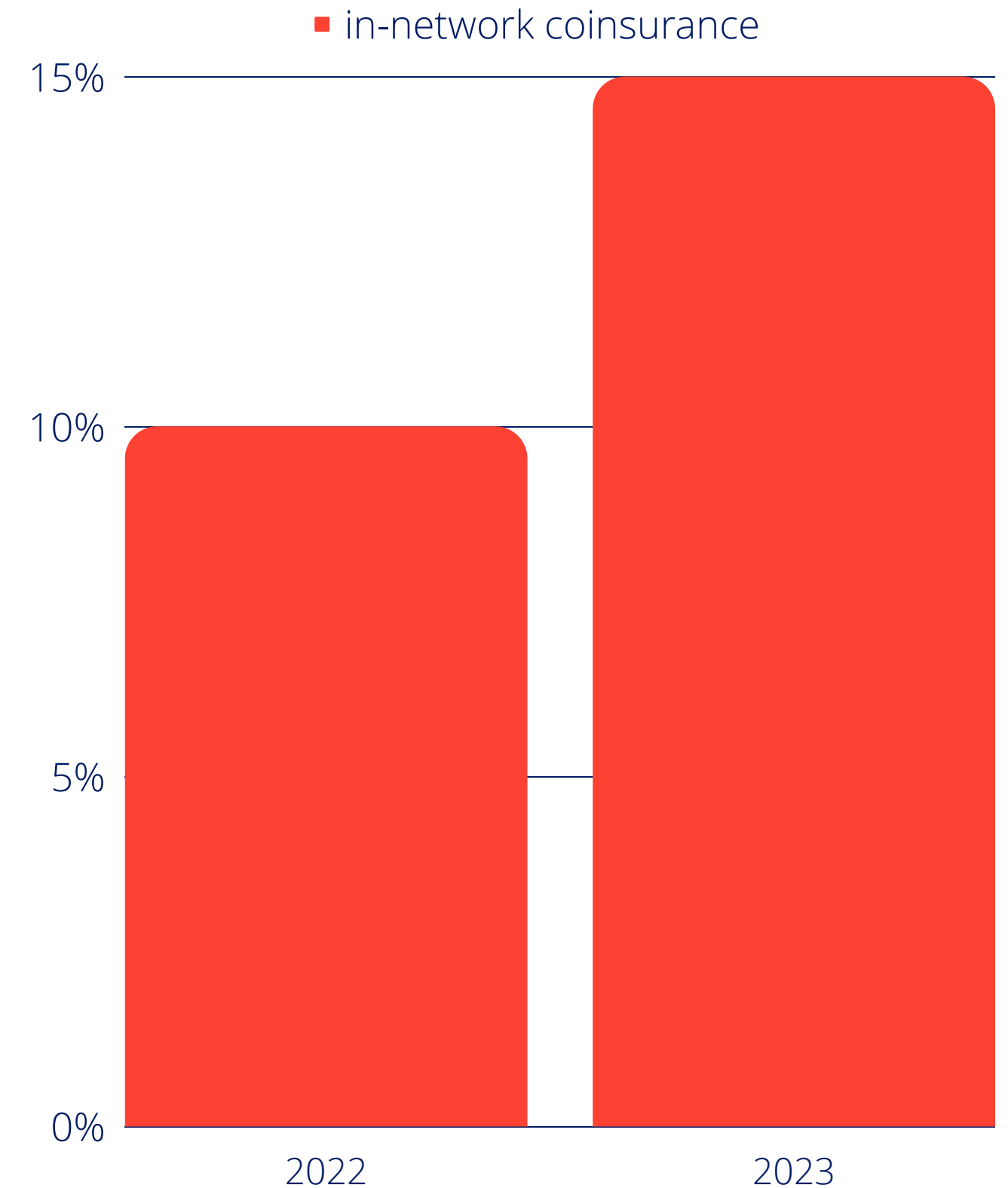
ER Services

Change emergency room services from a Copay model to Deductible/Coinsurance for the Premier PPO and Standard PPO

Allergy Serum

Change allergy serum costs from no member cost share to deductible/coinsurance for the Premier PPO and Standard PPO

- Plan will continue to pay for 100% of the injection administration - unless with an office visit, where the office visit copay would apply



Enhanced Pre-Deductible & Preventive Services

CDHP – Coinsurance only, no deductible for the following:

- A1c (average blood sugar) testing with a diabetes diagnosis
- LDL (cholesterol) testing with a heart disease diagnosis
- INR (blood clotting) testing for certain liver disease and bleeding disorder diagnosis

Retinopathy (diabetic eye screening) testing for a diabetes diagnosis covered at no member cost share for all PPOs and CDHP

- Applies when administered by an in-network optometrist or ophthalmologist (including provider specialty of Therapeutic Optometry) AND when filed with an appropriate diagnosis



BENEFIT CHANGES

APPLIED BEHAVIOR ANALYSIS

ABA is a therapy based on the science of learning and behavior; typically for children with autism.

ABA will shift from an office visit copay to coinsurance to comply with Mental Health parity requirements.

- Waive deductible for PPOs if in-network
- Deductible still applies for PPOs if out-of-network
- CDHP – no change

Aligns benefit with other therapies (ST, PT, OT)





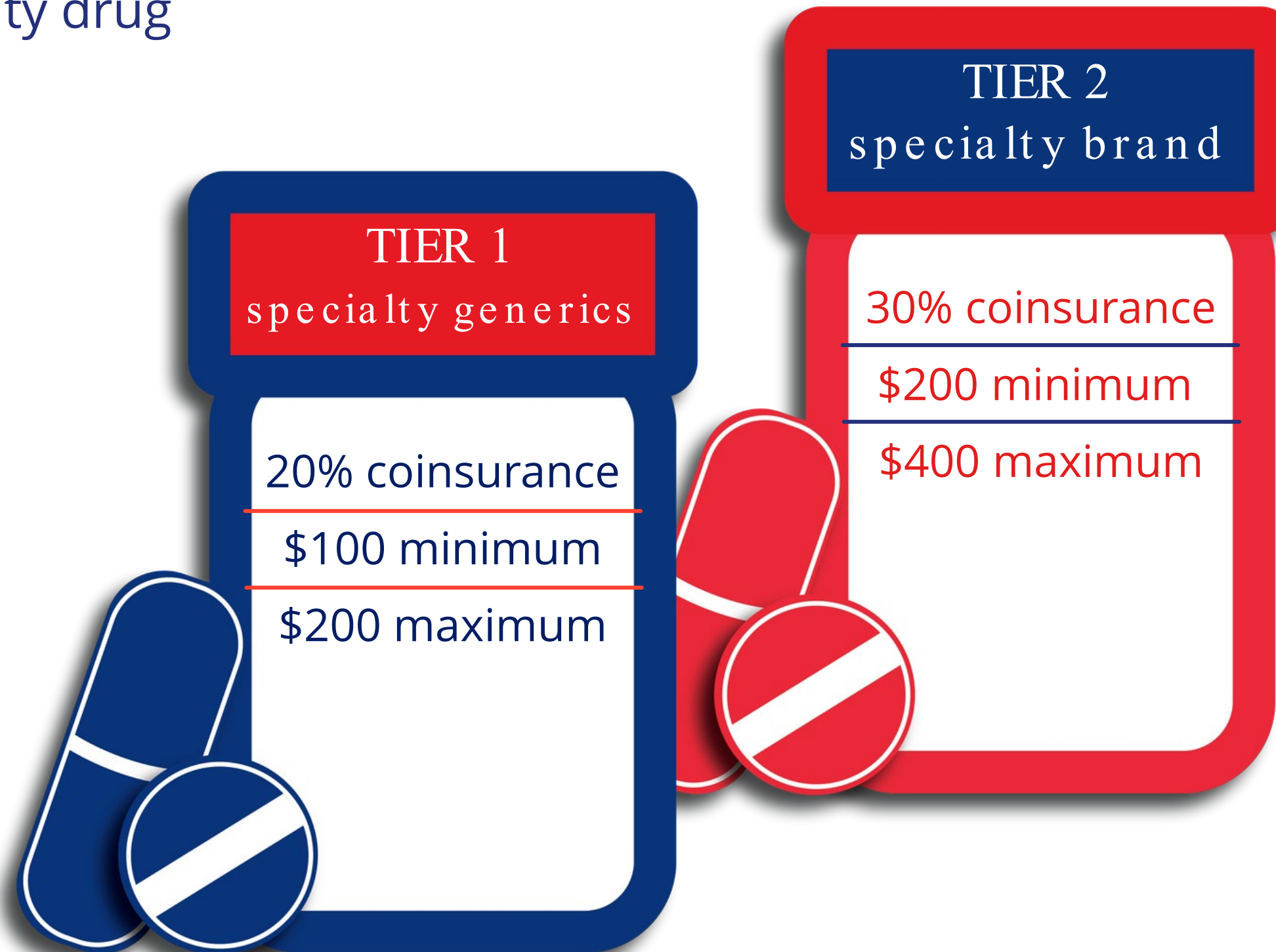
PRESCRIPTION VITAMIN & SUPPLEMENT PER CLAIM MAXIMUM

- There is a claim maximum of \$300 per 30-day supply or \$900 per 90-day supply for multivitamins, nutritional supplements, prenatal and pediatric vitamins.
- Rejected claims can be reviewed by a clinician for potential override.

Impacts just over 100 members

COST TIERS FOR SPECIALTY MEDICATIONS

PPOs – new specialty drug coinsurance:



Today all PPO specialty medications have some cost sharing.

Drug tiering placement is driven by overall cost & treated like regular pharmacy tiers (e.g. generic vs preferred).

Maintenance Medications



01

The CDHP maintenance medication list provides lower cost sharing for a 90-day supply of certain medications and the deductible does not apply

02

The CDHP maintenance medication list will change to comply with IRS rules

03

Some drugs will be removed but others will be added

04

The maintenance medication list for the PPOs will not change

Non-Discrimination Testing



01

Required

Non-discrimination testing is required on the state's dependent care FSA

02

Why?

The test is to ensure that non-highly compensated employees (those with a 2022 salary below \$135,000) are not discriminated against on the DC-FSA

03

Who?

Optum will conduct this test in early 2023

04

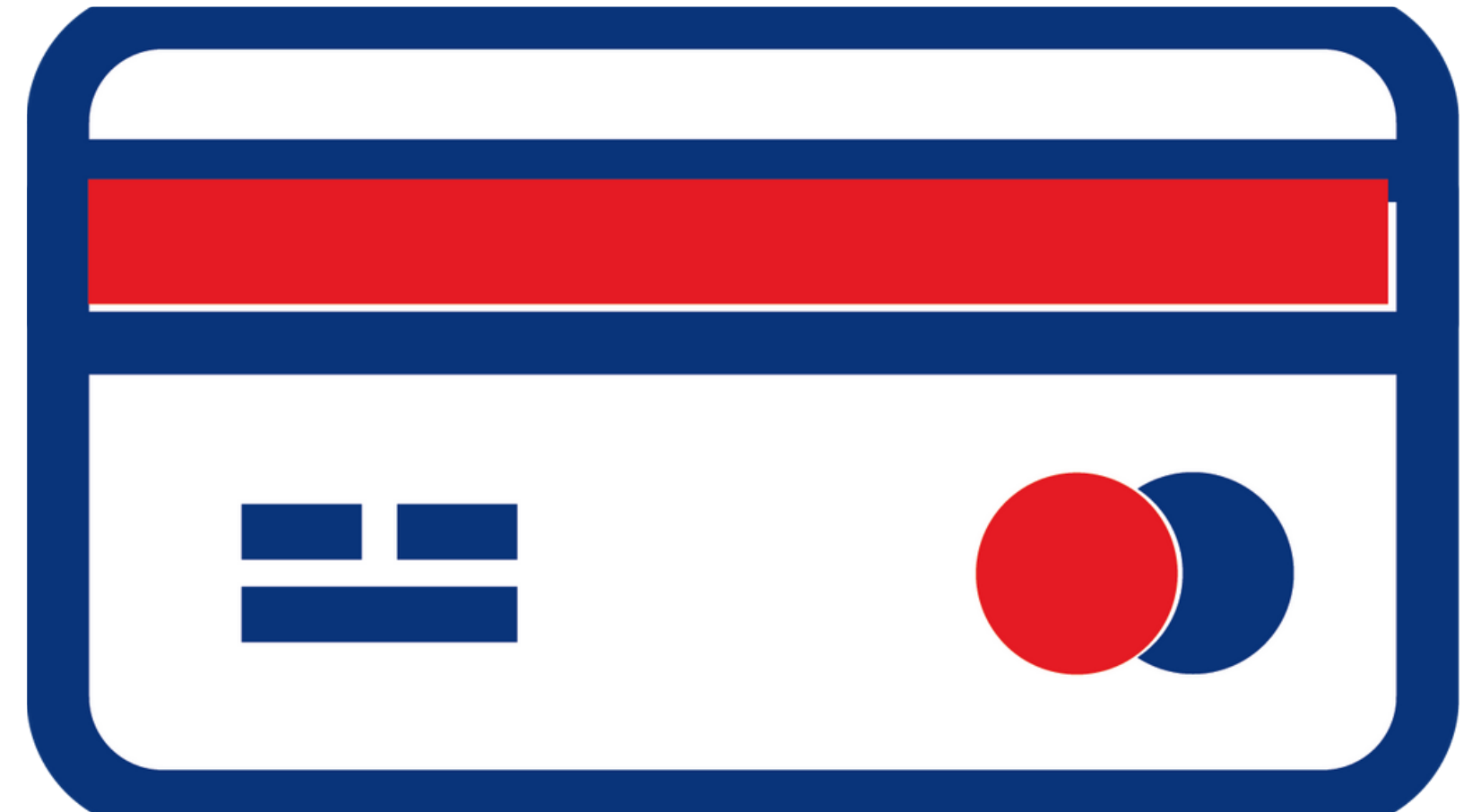
Consequences

If the state's DC-FSA program is found to be discriminatory, in order to comply with federal law, the plan may adjust the contributions for highly compensated employees

HSA MAXIMUM AMOUNTS

The maximum amounts that members may contribute to their HSA during 2023 have been increased by the IRS.

The catch-up contribution remains at \$1,000 for those who are 55 or older.



\$3,850

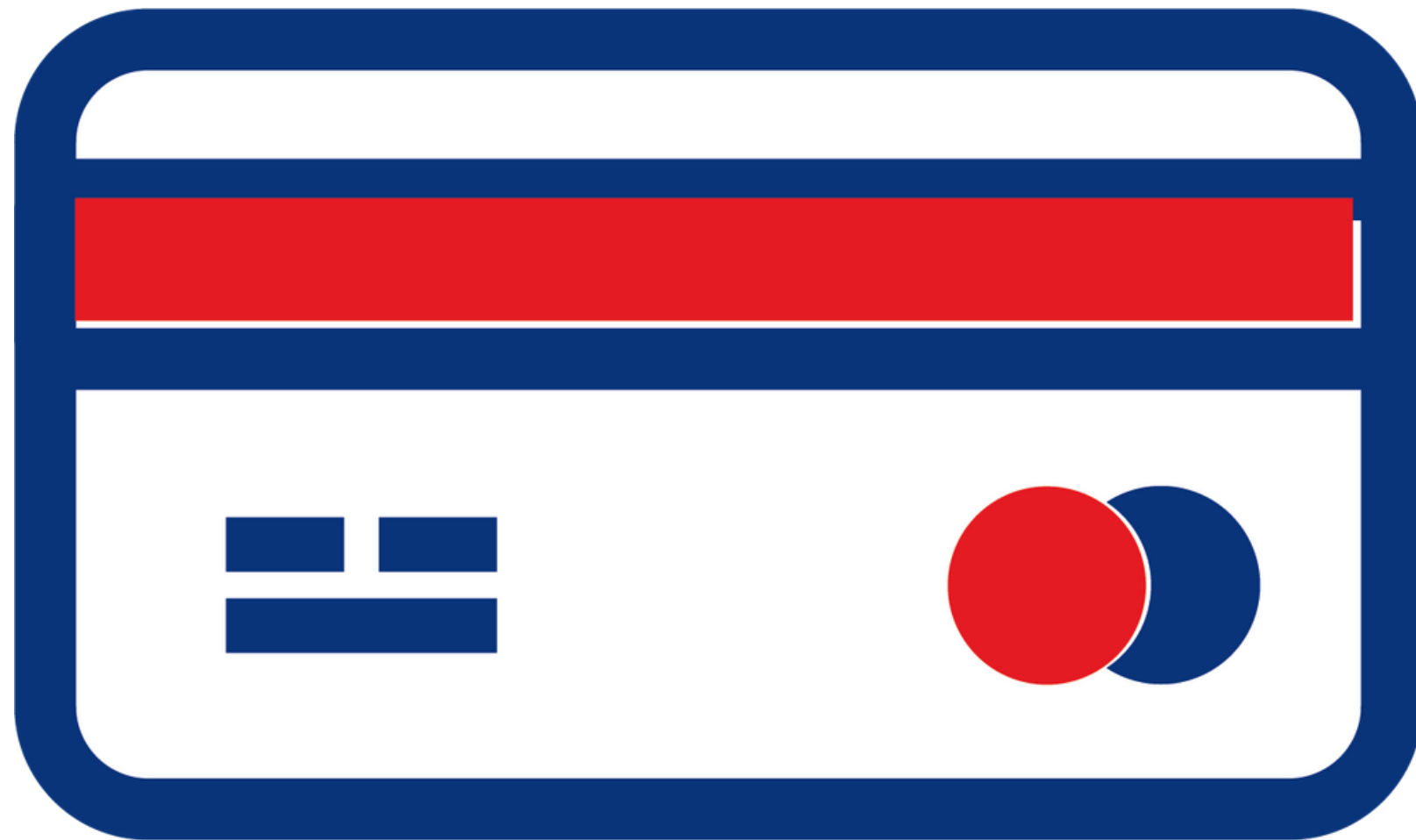
for single coverage

\$7,750

for family coverage

HSA EMPLOYER CONTRIBUTIONS

State and Higher Education will increase the employer contribution (“seed funds”) for CDHP/HSA participants in 2023.



~~\$250~~ \$500

for those with single coverage

~~\$500~~ \$1,000

for those with family coverage

FSA MAXIMUM AMOUNTS

The maximum amounts members may contribute to their medical FSA or limited purpose FSA during 2023 have been increased by the IRS.

\$2,850

MEDICAL FSA

\$2,850

LIMITED PURPOSE FSA

\$5,000

DEPENDENT CARE FSA (FOR SINGLE PERSONS AND MARRIED COUPLES FILING JOINTLY)

\$2,500

FOR A MARRIED PERSON FILING SEPARATELY

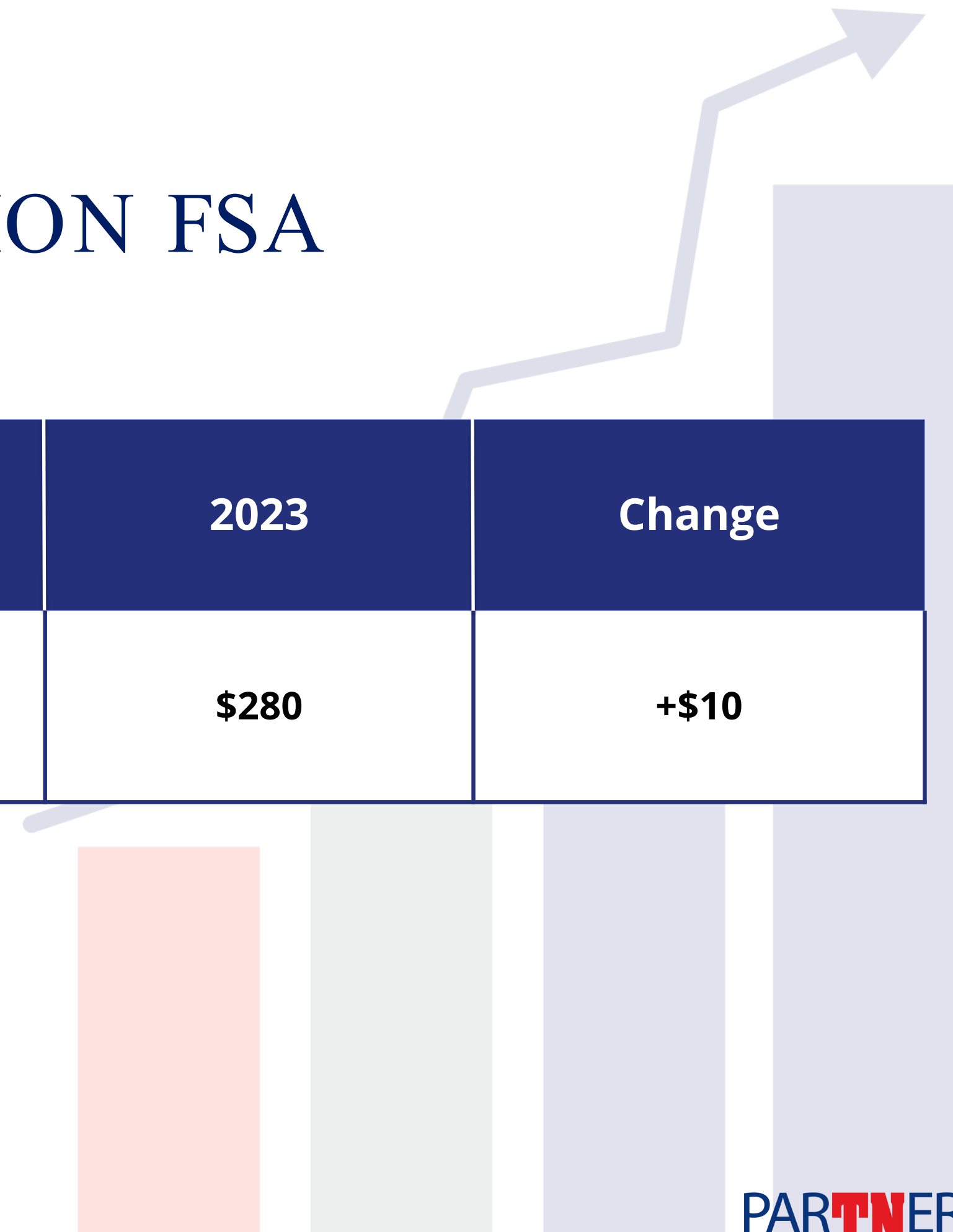
FSA CARRY OVER AND CLAIMS DEADLINE

In 2023, we will return to former rules below that applied before the IRS permitted certain limited plan changes during COVID:

FSA & LFSA	From 2022 Into 2023	From 2023 Into 2024
Carry over amount allowed	Up to \$500	Up to \$570

April 30, 2024 deadline to file any 2023 claims for Medical FSA, Limited FSA, DC-FSA

PARKING AND TRANSPORTATION FSA



Transportation FSA &/or Parking FSA	2022	2023	Change
Monthly Maximum Contribution	\$270	\$280	+\$10

Questions?

PAR**T****N****ERS**
FOR HEALTH