

Open Enrollment

October 19th – November 6th

Plan Year: 2021



Important Reminders

- Open enrollment paperwork is due to Human Resources by November 30th IF you want to make changes
- If you like your elections from 2020 for all plans, they will rollover into 2021
- **This is your one time a year to make a change unless you have a qualifying event, in which you have 60 days to make a change from that qualifying event, please contact HR**
- If you elect Vision coverage **and** Medical coverage, they must be on the **SAME** tier level

Why is there a rate change?

- **Background: Hanover County is self insured**
 - This means we use the premiums collected to pay for claims that are received and processed from Cigna
- Over the last several years, the amount of money paid out in claims grossly exceeded the money collected for premiums. This normally results in rate increases and plan design changes.
- Would being fully-insured help decrease rate? No, also we would be less in control of rate and plan changes
- Unfortunately, health care costs in general are increasing

Rising Health Care Costs: A National Trend

- Why are health care costs increasing?
 - Aging population
 - Chronic disease
 - Increased utilization and consumer demand
 - Increase in prescription drug costs
 - Consolidation of managed care companies
 - New medical technology

Hanover's Utilization

- 7,010 total enrolled (family, children, & spouses)
- Claim spend of Hanover every month: \$2.7 million
 - This is paid out of the self insurance fund
- Top three expenses:
 - * Musculoskeletal
 - * Neoplasms
 - * Circulatory



Claims Causing Rate Increases

Claim	Cost
Musculoskeletal	\$7,193,435
Neoplasms	\$4,243,738
Circulatory	\$3,353,929
Gastrointestinal	\$3,091,996
Gen Med Diagnosis	\$2,896,445

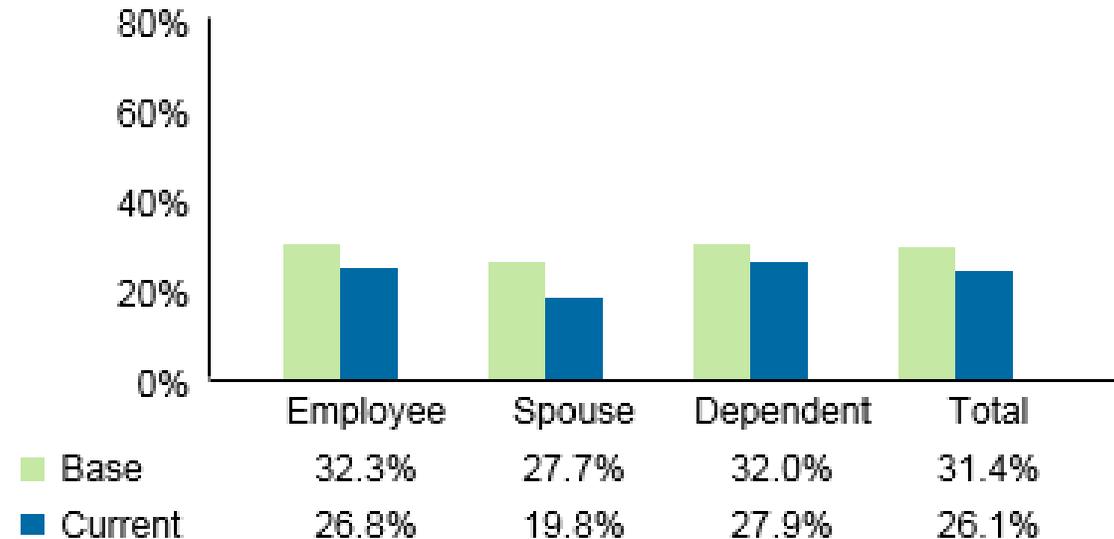
Handling Rising Health Care Costs

- Continue cost sharing for highly utilized services
- Utilize wellness programs and making sure preventative care is being performed yearly
- Utilize network providers to limit your out-of-pocket expenses
- If appropriate, use an urgent care vs the emergency room
- When Cigna calls, answer! Cigna offers many programs for chronic conditions that can help you
- If you have muscular/skeletal medical issues, considering reaching out to Airrosti to see if they can help your condition first before electing surgery
- Use mail order pharmacy benefit to lower costs, use generic medications when possible and follow prescription dosage instructions carefully

Preventive Service Utilization

- Overall the use of preventive care services is down

Preventative Care Service – All Services



Example of Network Savings

- In Network vs Out of Network Savings Examples:

Lab Costs	
Location	Cost
Average Labcorp or Quest Cost	\$10.37
Average Other Lab Cost (in Doctors Office)	\$23.71
Average Outpatient Hospital Labs	\$53.99

Difference:
 $\$53.99 - \$10.37 = \$43.62$
 $\$43.62 \times 3000 \text{ insured} =$
\$130,860 in savings

CT and MRI Scan		
Location	CT Cost	MRI Cost
Average Radiology Center Cost	\$457	\$706
Average Outpatient Hospital	\$1,379	\$1,676

Difference:
 $\$1,379 - \$457 = \$922$
 $\$922 \times 500 \text{ insured} =$
\$461,000 in savings

What is new in 2021 for Medical

- CCD Network – OR – Tier 1 Provider = Lower Co-Pay on Premium and Standard

Robert Smith , MD

Doctors Group Health Partners | 123 Main St, Anytown, CT 12345 | (555) 123-1111

Specialties (2): Family Practice, Geriatric Medicine | **Hospitals** (3): ...see all

Years in Practice: ~~not available~~

Cigna Care Designation 

Cost Efficiency Rating: ★★ ★

Quality Ratings: [see all](#)

New Patient Office Visit

\$164 ESTIMATED OUT-OF-POCKET COST

[Show Math](#)

- Tier 1 Provider
- In-Network
- Accepting new patients

[Select PCP](#)

Medical Plan Design Summary

Cost of Coverage

BENEFIT	CDHP		STANDARD OAP			PREMIUM OAP		
	IN-NETWORK	OUT-OF-NETWORK	CCD/TIER 1	IN-NETWORK	OUT-OF-NETWORK	CCD/TIER 1	IN-NETWORK	OUT-OF-NETWORK
Annual/Calendar Year Deductible (Individual/Family)	\$2,800 / \$5,600	\$4,200 / \$8,400	\$1,000 / \$2,000	\$1,000 / \$2,000	\$2,000 / \$4,000	\$500 / \$1,000	\$500 / \$1,000	\$1,500 / \$3,000
Out-of-Pocket Maximum (Individual/Family)	\$4,000 / \$8,000	\$8,000 / \$16,000	\$4,000 / \$8,000		\$8,000 / \$16,000	\$3,000 / \$6,000		\$6,000 / \$12,000
Coinsurance	10%	40%	20%		40%	20%		40%
Annual HSA Contributions (Individual/Family)			None			None		
Physician Services								
Doctor's Office Visit/ Specialist Office Visit	Ded, then 10%	Ded, then 40%	\$35 Copay / \$75 Copay	\$45 Copay / \$85 Copay	Ded, then 40%	\$25 Copay / \$50 Copay	\$35 Copay / \$60 Copay	Ded, then 40%
Cigna Telehealth Connection Services	Ded, then 10%	N/A	\$10 Copay		N/A	\$10 Copay		N/A
Preventive Care	0%	Ded, then 30%	0%		Ded, then 30%	0%		Ded, then 30%
Lab / X-ray Services / Advanced Imaging	Ded, then 10%	Ded, then 40%	Ded, then 20%		Ded, then 40%	Ded, then 20%		Ded, then 40%
Hospital Services (Inpatient/Outpatient)	Ded, then 10%	Ded, then 40%	Ded, then 20%		Ded, then 40%	Ded, then 20%		Ded, then 40%
Hospital Emergency Room	Ded, then 10%		Ded, then 20%			Ded, then 20%		
Urgent Care	Ded, then 10%	Ded, then 40%	\$75, then 20%		Ded, then 40%	\$50, then 20%		Ded, then 40%
Pregnancy & Maternity Care (Prenatal)	Ded, then 10%	Ded, then 40%	Ded, then 20%		Ded, then 40%	Ded, then 20%		Ded, then 40%
Mental Health Outpatient Office Visit	Ded, then 10%	Ded, then 40%	\$45		Ded, then 40%	\$35		Ded, then 40%

Telehealth - Cigna

- **Convenient, not costly.** Medical virtual care for minor conditions costs less than ER or urgent care center visits, and maybe even less than an in-office primary care provider visit.
- Virtual care options
 - Cigna partners with MDLIVE® for minor medical and behavioral/mental health virtual care.*
 - This can be accessed via myCigna.com.
 - Cigna's in-network medical and behavioral providers also provide access to virtual medical and behavior care, including virtual counseling
- More information on drives (see page 3 of presentation)

CVS/Caremark Pharmacy

- No Plan Design Changes
- Don't forget CVS has a mobile app, mail order options and programs for your benefit. More information can be found on department drives (see page 3 of presentation)

PRESCRIPTION DRUGS	CDHP	Standard	Premium
Deductible (Individual/Family)	\$2,800 / \$5,600	\$50 / \$100	\$50 / \$100
Out of Pocket Max	\$4,000 / \$8,000**	\$3,000 / \$6,000	\$3,000 / \$6,000
Retail (30-day Supply)			
Generic	\$10	\$10	\$10
Preferred Brand	\$30	\$30	\$30
Non-preferred Brand	\$50	\$50	\$50
Specialty	20%, \$200 max	20%, \$100 max	20%, \$100 max
Mail Order (90-day Supply)			
Generic	\$25	\$25	\$25
Preferred Brand	\$75	\$75	\$75
Non-preferred Brand	\$100	\$100	\$100
Specialty	N/A	N/A	N/A

NOTE: Deductibles, copays and coinsurance accumulate toward the out-of-pocket maximums. Usual, Customary and Reasonable charges apply for all out-of-network benefits.

**Combined medical and prescription drug.

Diabetics – did you know?

If you or a dependent are diabetic and enrolled under our medical plan:

CVS/Caremark has a program for a free meter

This value-added program is offered as part of your prescription benefit plan and provides eligible members with a blood glucose meter at no out-of-pocket cost.

Cigna also has a program for a free meter

With the OneTouch® brand, members get:

- Meters designed to make testing easy and help them manage their diabetes
- The member can call 800.238.4778 to initiate a request for a free meter

Please note, there are flyers on our drives (see page 3 of presentation) with more information about these plans to help you make informed decisions

What is new in Dental Benefits?

- Delta High has increased the yearly out of pocket max to \$1500 per year
- Dental Rates have increased this year
- Delta Dental Programs:
 - Prevention First (High and Low Only)
 - Healthy Smile, Healthy You (All Plans)

Dental Plan Highlights

BENEFIT	HIGH PLAN	LOW PLAN	PPO – EPO PLAN
Delta Network	Delta Dental Premier and Delta Dental PPO Network Providers can be utilized	Delta Dental Premier and Delta Dental PPO Network Providers can be utilized	Only Delta Dental PPO Providers
Annual/Calendar Year Maximum	\$1,500	\$1,000	\$2,000
Annual/Calendar Year Deductible (Individual/Family)	\$50 / \$150	\$50 / \$150	No Deductible
Preventive Services	100% coverage, exempt from Deductible and maximum	100% coverage, exempt from Deductible and maximum	Fixed Copayment
Basic Services	80% coverage, after the Deductible	80% coverage, after the Deductible	Fixed Copayment
Major Services	50% coverage, after the Deductible*	N/A	Fixed Copayment
Orthodontia Lifetime Maximum	50% coverage with a \$1,000 lifetime maximum per patient*	N/A	50% coverage with a \$2,000 lifetime maximum per patient

*6 month waiting period on new enrollments

Vision Benefits

BENEFIT	IN-NETWORK	OUT-OF-NETWORK
Routine Eye Exam (once every 12 months)	\$10 Copay	Not Covered
Material Copay	\$25 Copay	N/A
Eyeglass Lenses Allowances: (one pair per frequency period) Single Vision Lines Bifocal Lenticular	Covered at 100% after copay	\$32 up to \$80
Eyeglass Frames (once every 24 months)	Up to \$130	Up to \$71
Contact Lenses (instead of eyeglasses) (once every 12 months)	Up to \$130 (Elective) Covered at 100% (Therapeutic)	\$105 up to \$210

NOTE: ID Card not required for vision services.

Next Steps and Important Reminders

- Open enrollment deadline for changes into Human Resources by November 30th
- **What you have in 2020 will roll into 2021**
- This is your one chance to change your benefits unless you have a qualifying event, in which you will need to contact human resources within 60 days of that qualifying event*

*Qualifying events as defined by law

- Examples include: birth, adoption, marriage, divorce, loss of job, or loss of coverage due to a reduction in hours or death

Resources

- Make sure to register on the website and/or download vendor apps to stay informed and connected

Get More Information

BENEFIT	WHO TO CALL	WEBSITE	PHONE NUMBER
Human Resources	County: Amy Ash	https://www.hanovercounty.gov/320/Benefits https://sites.google.com/a/hcps.us/hcps-human-resources-intranet-site/home/benefits-information	804-365-6542
	Schools: Erin Gressett		804-365-4580
	Jail: Kim Stephens		804-537-6400 x3004
Medical	A One Guide Representative	www.cigna.com	800-244-6224
Prescription Drug	Customer Service	www.caremark.com	888-202-1654
Dental	Customer Service	www.deltadentalva.com	800-237-6060
Vision	A One Guide Representative	www.cigna.com	877-478-7557
Flexible Spending Accounts	Maestro	https://msave.maestrohealth.com/Page/Home	888-488-5054
Health Savings Account	Maestro	https://msave.maestrohealth.com/Page/Home	888-488-5054
Empower Retirement Plan	Empower	https://participant.empower-retirement.com/participant/#/login	800-701-8255