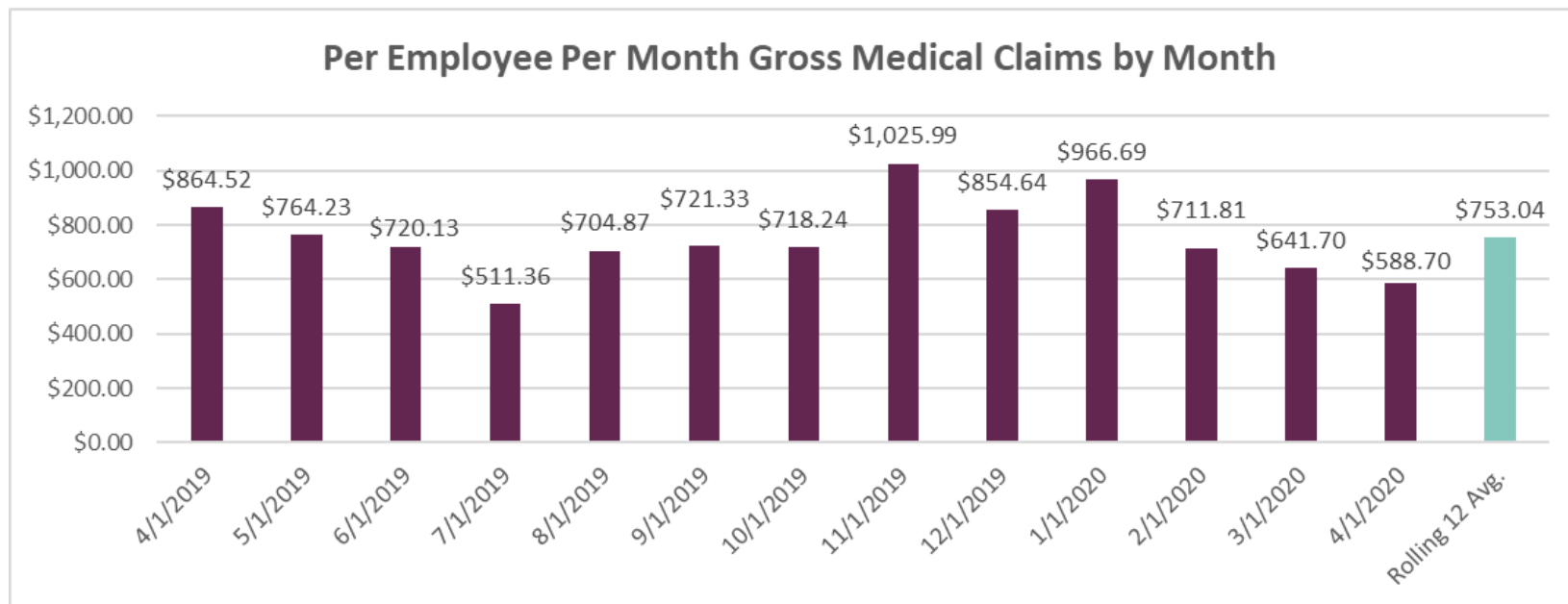
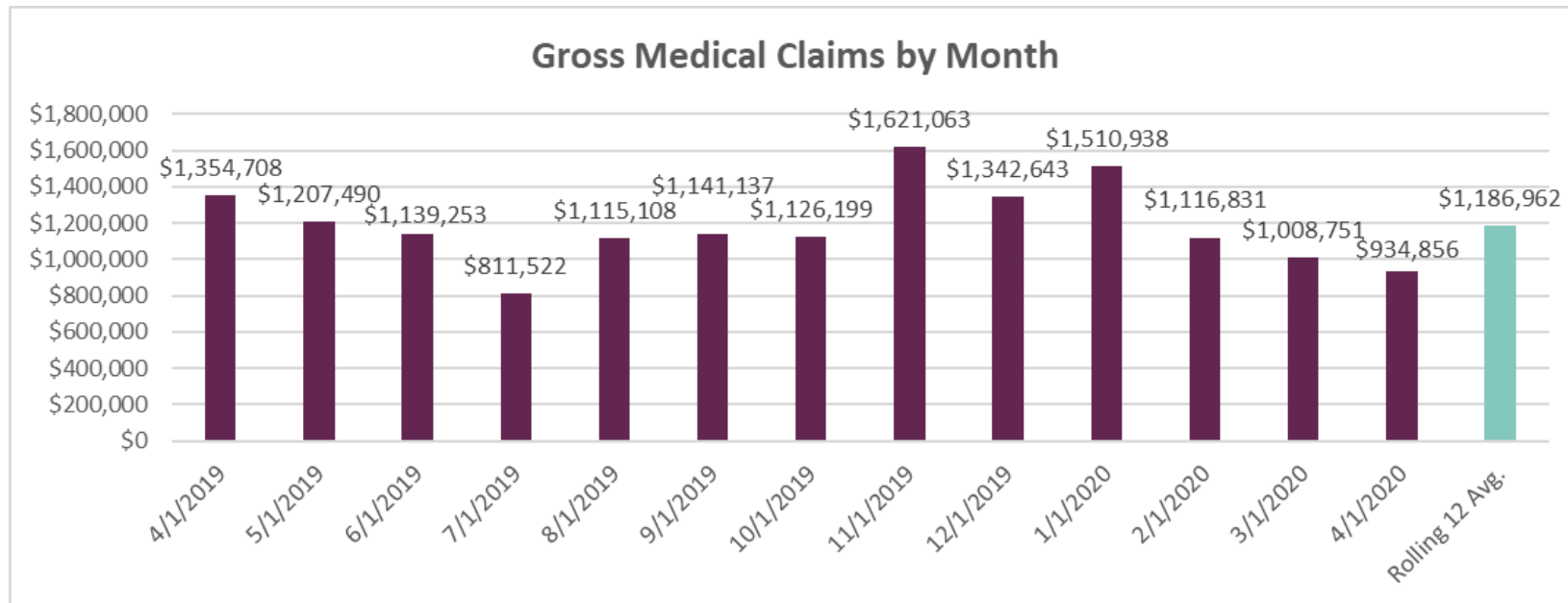


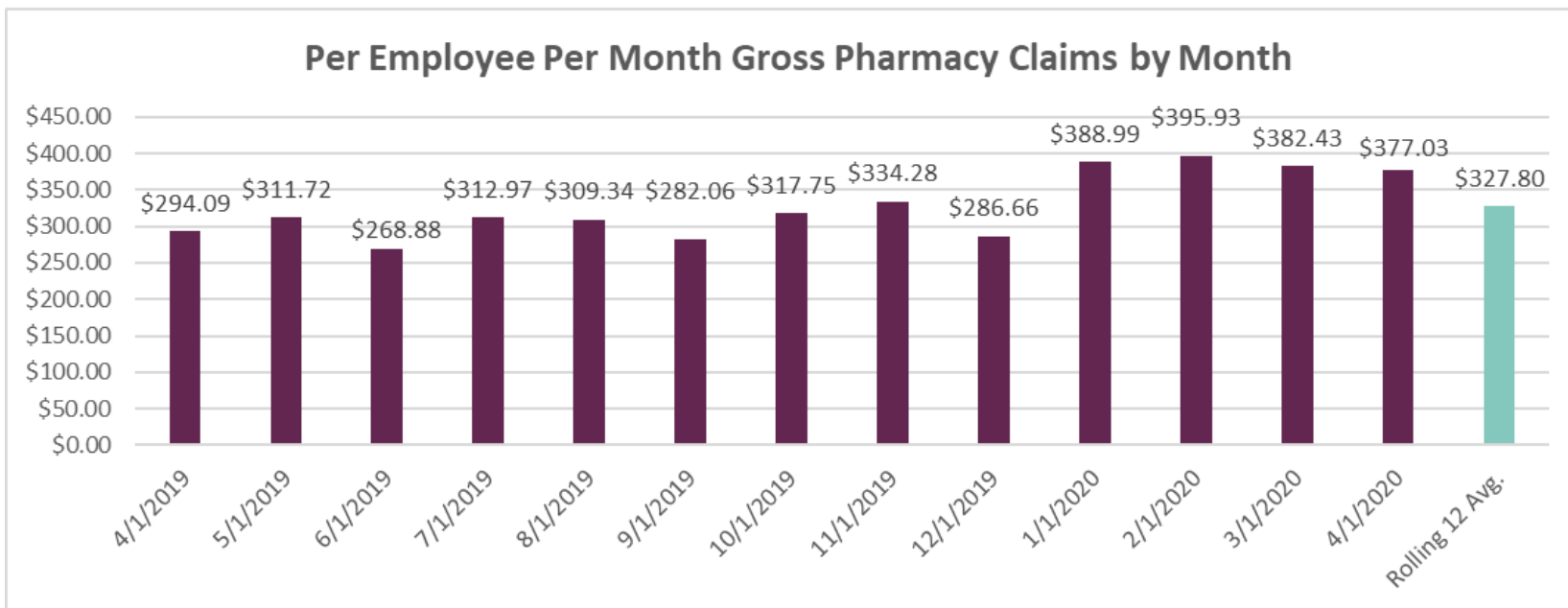
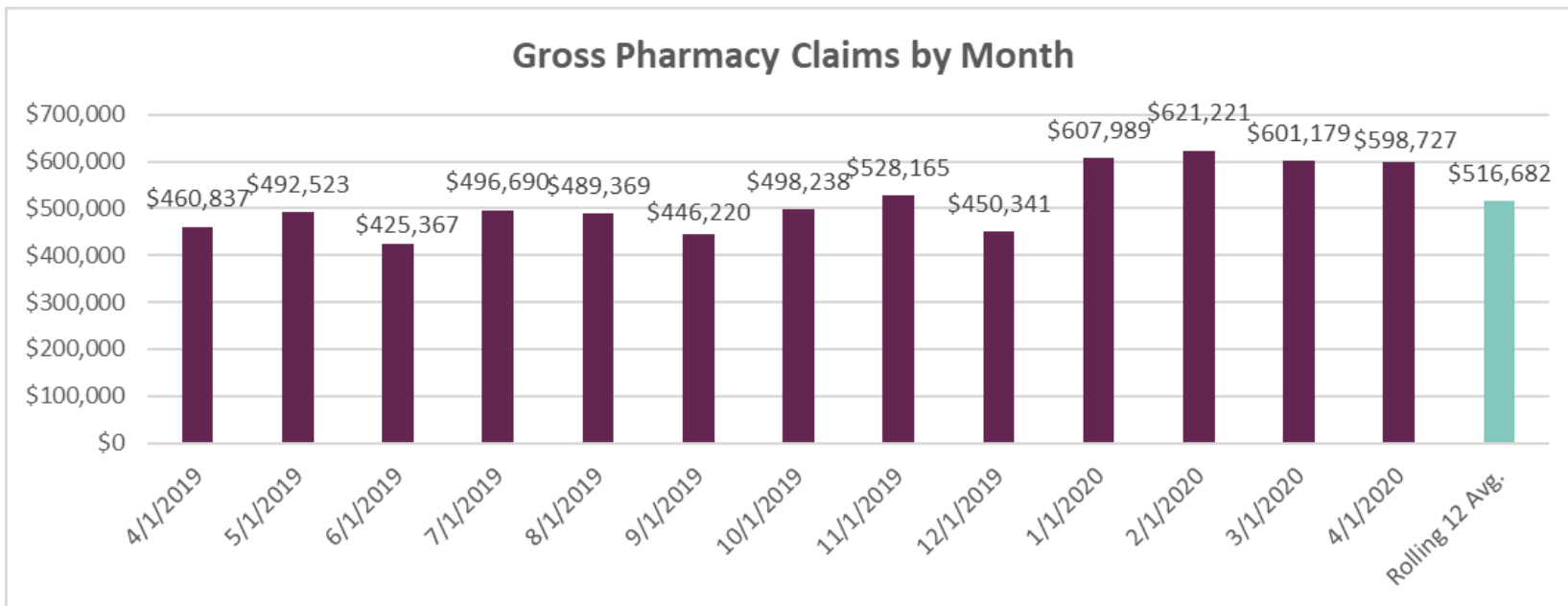


WILLIAMSON COUNTY
2021 BENEFITS FUND BUDGET –
BENEFIT COMMITTEE RECOMMENDATIONS
JUNE 16,2020

MEDICAL CLAIMS BY MONTH



PHARMACY CLAIMS BY MONTH



FIXED COST ASSUMPTIONS

2020 Plan Year		
Medical Admin	PEPM	Annual
Nexus Plan	\$53.65	\$809,257
Choice +	\$51.03	\$193,506
Other	\$0.00	\$0
Other	\$0.00	\$0
Total	\$52.79	\$1,002,762

Increase

3%

3%

N/A

N/A

2021 Plan Year		
Medical Admin	PEPM	Annual
Nexus Plan	\$55.26	\$729,226
Choice +	\$52.56	\$199,311
Choice+ OON	\$2.46	\$46,738
HSA Plan	\$61.22	\$115,568
Total	\$57.42	\$1,090,844

Increase: \$88,081

Stop-Loss Admin	PEPM	Annual
SL Family	\$65.81	\$1,250,127
Agg SL	\$4.90	\$93,080
Total	\$70.71	\$1,343,207

Increase

8%

0%

Stop-Loss Admin	PEPM	Annual
SL Family	\$71.07	\$1,350,137
Agg SL	\$4.90	\$93,080
Total	\$75.97	\$1,443,217

Increase: \$100,010

Other Costs	PEPM	Annual
Shared Savings (R12)	\$15.05	\$285,942
Legislative	\$0.44	\$8,292
Total	\$15.49	\$294,233

Increase

N/A

5%

Other Costs	PEPM	Annual
Shared Savings (R12)	\$15.05	\$285,942
Legislative	\$0.46	\$8,685
Total	\$15.51	\$294,627

Increase: \$393

Rebates	PEPM	Annual
Rx Rebates	-\$85.00	-\$1,614,660

Increase

4.3%

Rebates	PEPM	Annual
Rx Rebates	-\$88.69	-\$1,684,837

Increase: -\$70,177



COVID-19 ESTIMATED COST

Estimated Cost of Hospitalization			
	1.0%	5.0%	10.0%
Symptomatic Infection Rate			
Number of Members	3,472	3,472	3,472
Members Infected	34.7	173.6	347.2
Members Requiring Hospitalization	1.3	6.4	12.7
Total Cost per Hospitalization	\$34,339	\$34,339	\$34,339
Members Requiring ICU	0.2	1.1	2.2
Total Cost per ICU Admission	\$86,995	\$86,995	\$86,995
Members with Mild Cases	33.23	166.13	332.27
Total Cost for Mild Cases	\$400	\$400	\$400
Geographic Modifier to Cost	1.05	1.05	1.05
COVID-19 Total Cost	\$78,686	\$393,429	\$786,857
Member Cost Share	-\$11,023	-\$55,117	-\$110,233
COVID-19 Plan Paid	\$67,662	\$338,312	\$676,624
Per Employee Per Month	\$3.59	\$17.95	\$35.89

Deferral of Elective Procedures		
Fiscal Year Impact	2019-2020	2020-2021
Projected PEPM Claims	\$948.97	\$1,046.00
Deferred Elective Factor	0.9470	1.0265
Adjusted PEPM Claims	\$898.72	\$1,073.69
PEPM Impact	(\$50.25)	\$27.69
\$ Impact	(\$952,127)	\$524,738

- Deferred services are estimated to save 25% for May and slowly ramping back to normal in October. Then it is estimated that 50% of the pent-up demand of services will return at the end of the year and into next year
- Testing is estimated at \$75 per participant
- Estimated a 20% increase in mental health claims



2021 BUDGET PROJECTION

INCLUDING PLAN DESIGN & CONTRIBUTION CHANGES

	2020		2021	
	Budget	HMA Reforecast	No Changes	HMA Projection
Total Operating Expenses	\$24,626,094	\$21,832,857	\$24,768,681	\$24,473,670
Total Revenue Accounts	\$23,592,328	\$23,407,662	\$24,768,681	\$24,473,670
(Surplus)/Deficit	\$1,033,766	-\$1,574,805	\$0	\$0

	2020	2021	
	Budget	No Changes	HMA Projection
FTE Positions	1,922	1,932	1,932
FTE Funding	\$799	\$849	\$825



2021 PLAN CHANGES

- Introduce a new HSA plan
 - Assume 10% enrollment in the plan
 - \$500 HSA Deposit for Single/Family
- Increase deductible on both current plans to \$2,000
- Increase the emergency room copay to \$400
- Employee contribution changes
 - Employee/County Cost Share
- Deferred services future potential claims removed
 - Consider future claims paid out from reserve
- Choice+ out of network strategy
 - Additional admin of \$2.46 PEPM Naviguard
 - (Reduces Shared Savings Expenses for OON claims)
- **Discuss limiting Retiree Enrollment (5 years to 10 years)**



2021 PROPOSED PLAN DESIGNS

Medical Plan Design

Coinsurance
Annual Deductible (Individual)
Out of Pocket Max (Individual)

Physician Office Visit
Specialist Office Visit

Inpatient Hospital
Emergency Room
Urgent Care

Pharmacy

Rx Deductible
Generic
Preferred Brand
Non-preferred Brand
Specialty Pharmacy

HSA Deposit (Individual/Family)

Active Enrollment %

Current (2020)	2021 Plan Year	
In-Network Benefits		
Nexus / Choice+ Plan	Nexus / Choice+ Plan	New HSA Plan
80%	80%	80%
\$1,750	\$2,000	\$3,000
\$5,500	\$5,500	\$5,500
\$30	\$30	Deductible / Coinsurance
\$55	\$55	Deductible / Coinsurance
80%	80%	Deductible / Coinsurance
\$300	\$400	Deductible / Coinsurance
\$45	\$45	Deductible / Coinsurance
<u>Retail</u>	<u>Retail</u>	<u>Retail</u>
\$0	\$0	Deductible / Coinsurance
35% (\$10 Min/\$100 Max)	35% (\$10 Min/\$100 Max)	Deductible / Coinsurance
35% (\$40 Min/\$100 Max)	35% (\$40 Min/\$100 Max)	Deductible / Coinsurance
35% (\$75 Min/\$100 Max)	35% (\$75 Min/\$100 Max)	Deductible / Coinsurance
\$125	\$125	Deductible / Coinsurance
N/A	N/A	\$500/\$500
80% / 20%	70% / 20%	10%



2021 CONTRIBUTIONS CHANGES - EMPLOYEE

2020 Monthly Contributions				
	<u>Employee</u>	<u>EE + Spouse</u>	<u>EE + Child</u>	<u>Family</u>
Nexus Plan	\$54.08	\$216.32	\$113.36	\$226.72
Choice +	\$211.12	\$350.48	\$269.36	\$404.56
2021 Monthly Contributions				
	<u>Employee</u>	<u>EE + Spouse</u>	<u>EE + Child</u>	<u>Family</u>
Nexus Plan	\$59.49	\$237.95	\$124.70	\$276.60
Choice +	\$232.23	\$385.53	\$296.30	\$475.36
New HSA Plan	\$44.00	\$176.00	\$92.23	\$204.58
Monthly \$ Increase				
	<u>Employee</u>	<u>EE + Spouse</u>	<u>EE + Child</u>	<u>Family</u>
Nexus Plan	\$5.41	\$21.63	\$11.34	\$49.88
Choice +	\$21.11	\$35.05	\$26.94	\$70.80
New HSA Plan	N/A	N/A	N/A	N/A

\$ Per Paycheck Increase				
	<u>Employee</u>	<u>EE + Spouse</u>	<u>EE + Child</u>	<u>Family</u>
Nexus Plan	\$2.70	\$10.82	\$5.67	\$24.94
Choice +	\$10.56	\$17.52	\$13.47	\$35.40
New HSA Plan	N/A	N/A	N/A	N/A



2021 EMPLOYER/EMPLOYEE MEDICAL PLAN COST

2021 Employee/Employer Costs				
With All Incentives				
	Employee Per Pay Period	Monthly Employee	Monthly Employer	Total Cost
Nexus ACO OA Plan				
Employee Only	\$29.75	\$59.49	\$535.38	\$594.87
Employee/Spouse	\$118.98	\$237.95	\$1,377.40	\$1,615.35
Employee/Child	\$62.35	\$124.70	\$1,284.29	\$1,408.99
Employee/Family	\$138.30	\$276.60	\$2,152.17	\$2,428.77
With All Incentives				
	Employee Per Pay Period	Monthly Employee	Monthly Employer	Total Cost
Choice Plus Plan				
Employee Only	\$116.12	\$232.23	\$504.57	\$736.80
Employee/Spouse	\$192.77	\$385.53	\$1,543.02	\$1,928.55
Employee/Child	\$148.15	\$296.30	\$1,392.53	\$1,688.83
Employee/Family	\$237.68	\$475.36	\$2,406.39	\$2,881.75
With All Incentives				
	Employee Per Pay Period	Monthly Employee	Monthly Employer	Total Cost
HSA Plan				
Employee Only	\$22.00	\$44.00	\$491.38	\$535.38
Employee/Spouse	\$88.00	\$176.00	\$1,277.81	\$1,453.81
Employee/Child	\$46.12	\$92.23	\$1,175.86	\$1,268.09
Employee/Family	\$102.29	\$204.58	\$1,981.32	\$2,185.90



2021 CONTRIBUTIONS CHANGES - RETIREE

Retire Prior to 2/1/13

Nexus Plan

Choice +

Nexus Plan

Choice +

Nexus Plan

Choice +

PY 2020 Monthly Contributions			
<u>EE</u>	<u>ES</u>	<u>EC</u>	<u>EF</u>
\$54.08	\$216.32	\$113.36	\$226.72
\$211.12	\$350.48	\$269.36	\$404.56
PY 2021 Monthly Contributions			
<u>EE</u>	<u>ES</u>	<u>EC</u>	<u>EF</u>
\$59.49	\$237.95	\$124.70	\$276.60
\$232.23	\$385.53	\$296.30	\$475.36
Monthly \$ Increase			
<u>EE</u>	<u>ES</u>	<u>EC</u>	<u>EF</u>
\$5.41	\$21.63	\$11.34	\$49.88
\$21.11	\$35.05	\$26.94	\$70.80



2021 CONTRIBUTIONS CHANGES - RETIREE

8-15 yrs of service, Retire after 2/2013

Nexus Plan

Choice +

PY 2020 Monthly Contributions

<u>EE</u>	<u>ES</u>	<u>EC</u>	<u>EF</u>
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\$410.80	\$790.40	\$643.76	\$974.48
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\$580.32	\$1,024.40	\$833.04	\$1,217.84
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PY 2021 Monthly Contributions

<u>EE</u>	<u>ES</u>	<u>EC</u>	<u>EF</u>
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\$451.88	\$869.44	\$708.14	\$1,188.87
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\$638.35	\$1,126.84	\$916.34	\$1,430.97
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Monthly \$ Increase

<u>EE</u>	<u>ES</u>	<u>EC</u>	<u>EF</u>
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\$41.08	\$79.04	\$64.38	\$214.39
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Nexus Plan

Choice +

\$58.03	\$102.44	\$83.30	\$213.13
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2021 CONTRIBUTIONS CHANGES - RETIREE

16+ yrs of service after 2/2013

**Nexus Plan
Choice +**

**Nexus Plan
Choice +**

**Nexus Plan
Choice +**

PY 2020 Monthly Premiums			
<u>EE</u>	<u>ES</u>	<u>EC</u>	<u>EF</u>
\$225.68	\$455.52	\$353.60	\$535.60
\$377.52	\$755.04	\$512.72	\$755.04
PY 2021 Monthly Premiums			
<u>EE</u>	<u>ES</u>	<u>EC</u>	<u>EF</u>
\$248.25	\$501.07	\$388.96	\$653.44
\$415.27	\$830.54	\$563.99	\$887.18
Monthly \$ Increase			
<u>EE</u>	<u>ES</u>	<u>EC</u>	<u>EF</u>
\$22.57	\$45.55	\$35.36	\$117.84
\$37.75	\$75.50	\$51.27	\$132.14



Thank You!