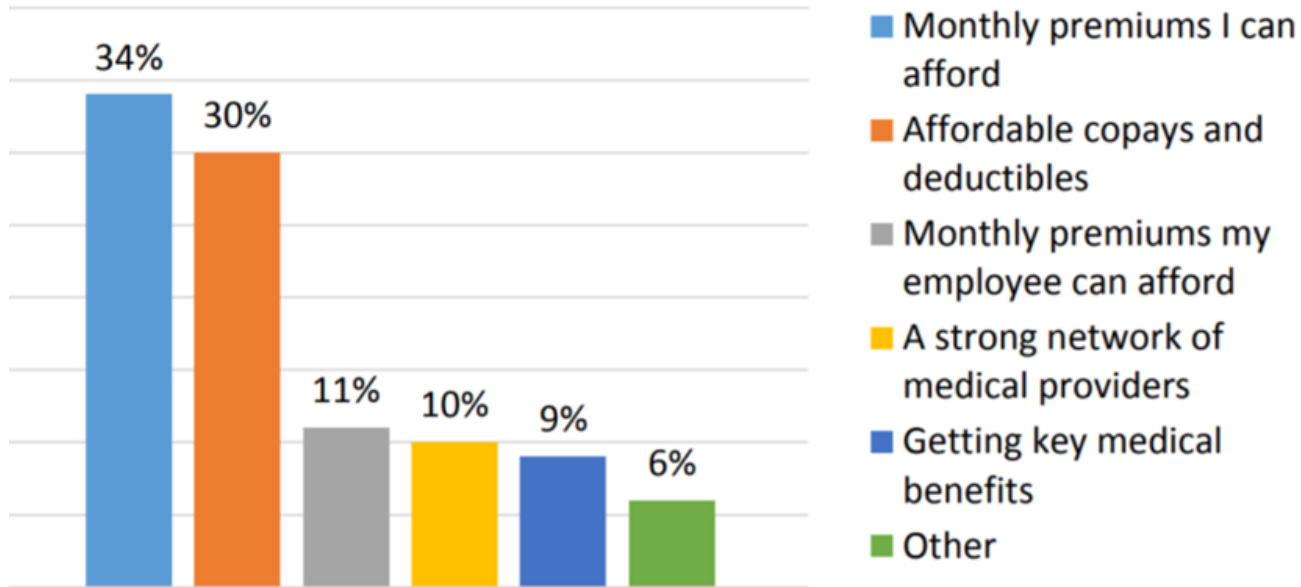


KEY CONSIDERATIONS WHEN REVIEWING THE DISTRICT'S EMPLOYEE BENEFITS



What is the most important factor you consider when picking a health plan?



Source: eHealth 2019 Small Business Health Insurance Report

BENEFIT OPTIONS TO REVIEW AT RENEWAL FOR COST CONTAINMENT SAVINGS

“Sample” Plan Options – Vary by Insurance

Company’s Plans

Change to HMO Model from PPO Model	(Benefit Plan(s) Options Elected by Districts currently) PPO - Preferred Provider Organization
Change to Narrow Network from Broad Network	HDHP - High Deductible Health Plan HMO - Health Maintenance Organization POS - Point of Service
Add a Health Reimbursement Account (HRA) to Your Plan	\$2000/4000; \$3000/6000 Deductible Options
Add a Health Savings Account (HSA) to Your Plan	HDHP (Qualified High Deductible Health Plan) This Plan can not include any copays, all medical and Rx expenses apply to deductible and out of pocket.
Change Deducible Increments	\$1000/2000; \$2000/4000; \$3000/6000; \$5000/10,000
Change Coinsurance Increments	100/80%; 90/70%, 80/60% Coinsurance Options
Add/or Update Copays in Your Plan	Copay Options:
Office Visit	\$20/ \$25/ \$30
Specialist Visit	\$40/ \$50/ \$60
Telemedicine	\$0
Urgent Care	\$30/ \$40/ \$50
Emergency Room	\$100/ \$150/ \$200/ \$250
MRI	\$100/ \$200
Prescription Drugs (Generic/Formulary/Brand/Specialty)	Three Tier or Four Tier Flat Copay or Percentage of Cost to a Max \$150

HRA VS. HSA PLANS COMPARISON

HRA

HSA

What kind of account?

Funded by the District, used for eligible healthcare expenses.

Account set up by employee. Used for qualified healthcare expenses.

Who is eligible?

All employees who qualify and enroll in the District's Health Plan.

All employees who qualify and enroll in a High-Deductible Health Plan (HDHP)

Who owns the account?

The District

The Employee

Who can contribute to the account?

The District

The District and Employee

How much can be contributed?

The District determines contribution

IRS limits set each year

Plan designs

Standard Health Plan: Subject to Ded/Coinsurance/Copays

HDHP only. Subject to Ded/Coinsurance. No Copays

Can the balance carry over?

District determines roll overs and carry over limits.

Funds remain until spent. No limit applies

Is the account portable?

No

Yes

Can the account earn interest?

No

Yes

Can the account be used for other things?

No

Yes, when 65. Subject to income tax only. If withdrawn early, subject to income tax and tax penalty of 20%.

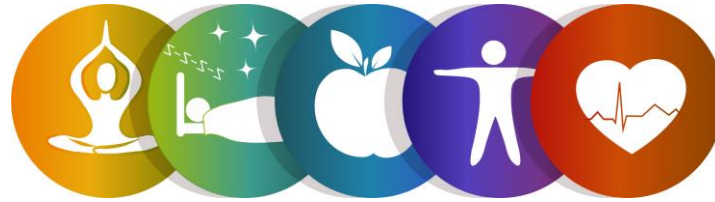
AFFORDABLE CARE ACT LIMITS 2021 AND 2022

The ACA limits out-of-pocket maximums, the maximum amount of costs for covered services the member will pay out-of-pocket in a policy period on their health plan:

ACA Out-of-Pocket Limits for Non-Grandfathered Health Plans				
	2019	2020	2021	2022
Self Only Coverage	\$7,900	\$8,150	\$8,550	\$8,700
Other than Self Only Coverage	\$15,800	\$16,300	\$17,100	\$17,400



PREVENTIVE WELLENSS OFFERINGS



Make sure that your District is offering wellness initiatives either through your health insurance carrier or implemented by the District.

These include:

- ✓ Promotion of annual exams
- ✓ Health Risk Assessments
- ✓ Biometric Screenings
- ✓ Online Wellness Programs
- ✓ Any initiatives put together and administered by the District

Participation in any option can help employees and family members identify and address their health risks. District offered financial incentives always help with participation.

MULTI-YEAR RATE GUARANTEES

- ❑ Requesting a multi-year rate guarantee from your insurance carrier eliminate surprises and helps with budgeting.
- ❑ Most rate guarantees are offered when bidding out your insurance. New carriers may offer multi-year rate guarantee to win your business.
- ❑ Rate guarantees are normally NOT offered upon renewals with your existing carrier.

MULTI-YEAR RATE GUARANTEE OPTIONS

- (1) Rate not to exceed flat % not connected to your plan's loss ratio
- (2) Rate based on % increments connected to your plan's loss ratio
- (3) Rate based on benefit changes mandated per plan year(s) of the rate guarantee
- (4) Rate based on including a premium penalty if District leaves their contract during the rate guarantee plan year(s)

BUDGETING FOR BENEFITS

- Know your policies renewal date
- Work with benefits consultant to estimate premium increases
- Review post employment benefits costs
- Estimate staffing changes
- Incorporate into budgeting program/software

QUESTIONS?

Cindy Van Asten

Partner, Director of Employee Benefits – Green Bay Market

M3 Insurance

1872 Mid Valley Dr

De Pere, WI 54115

O: 920.455.7111 C: 920.619.1899

F: 920.405.9169

www.m3ins.com

Sue Schnorr

Mentorship Coordinator

sue.schnorr@wasbo.com

(920) 340-0157

