



# DeKalb County Government

Manuel J. Maloof Center  
1300 Commerce Drive  
Decatur, Georgia 30030

## Agenda Item

File ID: 2019-3260

Substitute

3/26/2019

Public Hearing: YES  NO

Department: Finance - Risk Management

### SUBJECT:

Commission District(s): All Commission Districts

Enter Title In Title Case Or Capitalize Each Word to Include Costs to the County

Information Contact: Larry Jacobs

Phone Number: 404/371-2050

### PURPOSE:

To approve group health benefits and rates for new plan year commencing July 1, 2019.

### NEED/IMPACT:

To ensure the County is offering an affordable and valuable health plan for employees and retirees. The plan year for County employees and pre-65 retirees expires June 30, 2019. The proposed healthcare costs and plan designs have been reviewed by the ERCS Committee

### FISCAL IMPACT:

See Attachment.

### RECOMMENDATION:

1. Choose an item and add the information stated in the Purpose above. Recommend approval of Request for Proposal results:
  - a. Medical – Anthem (incumbent)
  - b. Pharmacy – CVS through Employers Health (incumbent)
  - c. Stop Loss – Anthem (incumbent)
  - d. Wellness – Virgin Pulse aka Viverae / SimplyWell (incumbent)
  - e. Vision – EyeMed (incumbent)
2. Recommend approval of Anthem’s proposed composite rate (PPO Admin Fee + Stop Loss) of \$86.85 PEPM which is a decrease of 3.4% from the current rate.
3. No proposed increase in contributions for active employees and early retirees.
4. Recommend overall healthcare budget increase of 7.3% (5.8% self-funded and 9.6% fully-insured w/ Kaiser).
5. Accept the proposed Dental rates with a 0.0% increase over current rates.

Authorize the Chief Executive Officer to execute all necessary documents.

**DEKALB COUNTY PY 2019/20 MEDICAL RENEWAL FACTORS FOR SELF-FUNDED AND FULLY INSURED HEALTH BENEFITS AND FULLY INSURED DENTAL BENEFITS**

Monthly rates per Enrolled Employee or Retiree

**BCBSGA Active and Pre-65 Retirees**

		<u>PY 2018/19</u>	<u>PY 2019/20</u>	<u>% Increase</u>
PPO Administration Fee	PEPM*	\$41.99	\$38.95	-7.2%
Nurseline/DM/Maternity/Coaching Fee	PEPM*	\$8.01	\$8.01	0.0%
HSA Fee (only applicable to HSA enrollees)	PEPM*	\$2.50	\$2.25	-10.0%
Total Administration Fee	PEPM*	\$50.00	\$46.96	-6.1%
Stop Loss Fee (\$250,000 ISL)**	PEPM*	\$39.89	\$39.89	0.0%
Composite Rate (PPO Admin Fee + Stop Loss)	PEPM*	\$89.89	\$86.85	-3.4%

**Active Employee Contributions (Per Month)**

	<u>PY 2018/19</u>				
	<u>Blue Open Access HMO</u>	<u>Blue Open Access POS</u>	<u>Blue Open Access HSA</u>	<u>Kaiser HMO</u>	<u>Kaiser HSA</u>
Employee Only	\$187.50	\$154.40	\$57.64	\$122.52	\$48.34
Employee + 1	\$485.64	\$399.92	\$149.28	\$317.44	\$125.04
Family	\$581.26	\$478.68	\$178.66	\$379.28	\$149.39

**Active Employee Contributions (Per Month)**

	<u>PY 2019/20</u>					<u>% Increase</u>
	<u>Blue Open Access HMO</u>	<u>Blue Open Access POS</u>	<u>Blue Open Access HSA</u>	<u>Kaiser HMO</u>	<u>Kaiser HSA</u>	
Employee Only	\$187.50	\$154.40	\$57.64	\$122.52	\$48.34	0.0%
Employee + 1	\$485.64	\$399.92	\$149.28	\$317.44	\$125.04	0.0%
Family	\$581.26	\$478.68	\$178.66	\$379.28	\$149.39	0.0%

**Active Employee Contributions with/without Surcharges and Wellness Incentive (Per Month)**

When an employee has certified as being a non-Tobacco user or has completed the "Break Free from Tobacco" program, AND their spouse is not eligible for other employer sponsored healthcare, AND they complete the wellness requirements, they will pay the monthly contributions shown above. If an employee is subject to any/all of the County's surcharges, they will be subject to the increased cost on top of the monthly contributions shown above.

**Pre-65 Retiree Contributions (Per Month)**

	<u>PY 2018/19</u>				
	<u>Blue Open Access HMO</u>	<u>Blue Open Access POS</u>	<u>Blue Open Access HSA</u>	<u>Kaiser HMO</u>	<u>Kaiser HSA</u>
Retiree Only	\$520.34	\$356.20	\$133.52	\$214.61	\$182.63
Retiree + 1	\$1,347.67	\$922.55	\$345.82	\$556.63	\$473.69
Family	\$1,613.05	\$1,104.22	\$413.92	\$665.09	\$565.99

**Pre-65 Retiree Contributions (Per Month)**

	<u>PY 2019/20</u>					<u>BCBS % Increase</u>	<u>Kaiser HMO % Increase</u>	<u>Kaiser HSA % Increase</u>
	<u>Blue Open Access HMO</u>	<u>Blue Open Access POS</u>	<u>Blue Open Access HSA</u>	<u>Kaiser HMO</u>	<u>Kaiser HSA</u>			
Retiree Only	\$520.34	\$356.20	\$133.52	\$214.61	\$182.63	0.0%	0.0%	0.0%
Retiree + 1	\$1,347.67	\$922.55	\$345.82	\$556.63	\$473.69	0.0%	0.0%	0.0%
Family	\$1,613.05	\$1,104.22	\$413.92	\$665.09	\$565.99	0.0%	0.0%	0.0%

**United Concordia**

Active Employee Dental Contributions (Per Month)	<u>PY 2018/19</u>		<u>PY 2019/20</u>		<u>% Increase</u>	
	<u>Low Plan</u>	<u>High Plan</u>	<u>Low Plan</u>	<u>High Plan</u>	<u>Low Plan</u>	<u>High Plan</u>
Employee Only	\$7.00	\$9.80	\$7.00	\$9.80	0.0%	0.0%
Employee + 1	\$13.64	\$19.58	\$13.64	\$19.58	0.0%	0.0%
Family	\$17.50	\$29.36	\$17.50	\$29.36	0.0%	0.0%

**United Concordia**

Retiree Dental Contributions (Per Month)	<u>PY 2018/19</u>		<u>PY 2019/20</u>		<u>% Increase</u>	
	<u>Low Plan</u>	<u>High Plan</u>	<u>Low Plan</u>	<u>High Plan</u>	<u>Low Plan</u>	<u>High Plan</u>
Retiree Only	\$7.04	\$10.52	\$7.04	\$10.52	0.0%	0.0%
Retiree + 1	\$14.07	\$21.04	\$14.07	\$21.04	0.0%	0.0%
Family	\$17.59	\$31.57	\$17.59	\$31.57	0.0%	0.0%

\* Per Employee Per Month

\*\* Stop Loss Insurance limits the County's liability for individual claims to the amount shown