



# Open Enrollment 2017

September 12 – October 7, 2016

# Agenda



- Types of plans available
- Preferred Provider Organization (PPO) Plans
- Health Maintenance Organizations (HMO) Plans
- Prescription Plans
- Health Plan Premium Costs
- Teamsters Local Union No. 856 Health & Welfare Fund
- Open Enrollment
- Questions and Answers



# Types of Plans Available

- Two classifications of plans

Preferred Provider Organization Plans	Health Maintenance Organization Plans
<ul style="list-style-type: none"><li>• PERS Care</li><li>• PERS Choice</li><li>• PERS Select</li><li>• PORAC (Police only)</li></ul> <p>All administered by Anthem Blue Cross</p>	<ul style="list-style-type: none"><li>• Anthem HMO Traditional</li><li>• Blue Shield Access +</li><li>• Health Net Smart Care</li><li>• Kaiser Permanente</li><li>• UnitedHealthCare</li></ul>



# Preferred Provider Organization (PPO) Plans

# PPO Plans Overview



- PERS Care
  - Longest Standing Plan Design
  - Full Anthem Blue Cross PPO network access
  - Highest Level of Coverage
- PERS Choice
  - Most Popular PPO Plan by Enrollment
  - Full Anthem Blue Cross PPO network access
  - Competitive coverage, competitive premium
- PERS Select
  - New plan introduced in 2008
  - Subset of Anthem Blue Cross PPO network and hospital network
  - Same coverage as PERS Choice available, lower premium



# PPO Plan Comparison

- Similarities between PPO Plans
  - \$500 Calendar Year Deductible per individual
  - \$20 Office Visit Co-Pay
  - Routine Preventive Care is covered
    - Periodic health exams
    - Well-child visits
    - Vaccines
  - \$50 Emergency Room Deductible (applies to hospital emergency room charge only, not physician services, labs, x-ray, etc.)
  - Acupuncture/Chiropractic
    - 20 combined visits



# PPO Plan Comparison (continued)

- Differences between PPO Plans
  - 90% coverage on PERS Care; 80% coverage on PERS Choice and PERS Select
  - Maximum Calendar Year Co-Pay (excluding pharmacy)
    - \$2000 for PERS Care
    - \$3000 for PERS Choice and PERS Select
    - 15 combined visits PERS Choice and PERS Select
  - Narrow hospital and physician network for PERS Select
    - Tier one hospitals provide higher coverage
- Non-Participating Provider = 60% coverage

# How do PPO Plans Work



- Like auto or home insurance, deductible needs to be met before share of cost begins.
  - Services that do NOT apply to the \$500 calendar year deductible
    - Physician Office Visits
    - Routine/Preventive visits
    - Prescriptions
- For other services, your deductible does apply. After the deductible is met, the percentage based benefit begins (90% or 80%)
- The Coinsurance (10% or 20%) will apply towards the Calendar Year Maximum Out of Pocket.
- Services for Non-Participating Providers are reimbursed at 60%. The 40% coinsurance does not apply towards a Maximum Out of Pocket.





# PPO Cost Comparisons

	<b>PERS Care (Participating/Non-Participating)</b>	<b>PERS Choice/ PERS Select (Participating/Non-Participating)</b>
Preventive care	\$0	\$0
Physician Office Visits	\$20	\$20
Acupuncture	\$15 per visit/ 40%	\$15 per visit / 40%
Diagnostic X-ray/lab	10% / 40%	20% / 40%
Surgery/Anesthesia	10% / 40%	20% / 40%
Urgent Care Visits	\$20 / 40%	\$20 / 40%
Emergency Room Care	\$50 deductible plus 10% for other services	\$50 deductible plus 20% for other services



# Health Maintenance Organization (HMO) Plans

# HMO Plans Overview



- Anthem Blue Cross Select HMO
  - Robust network of providers in California
  - Predictable and cost-effective plan with flexibility
- Blue Shield Access+ HMO
  - Premium, fully loaded HMO
  - Predictable and cost-effective plan with flexibility
- Health Net Smart Care
  - Expanded their SmartCare HMO service area to include Marin County
  - Predictable and cost-effective plan with flexibility

# HMO Plans Overview (continued)



- Kaiser Permanente HMO
  - Services provided directly to members through an integrated health care delivery system
  - Health plan, plan hospitals and medical group are networked to provide convenient access
- United HealthCare
  - One of the largest health care companies in the United States
  - Higher premium rates compared to other HMO plans

# How do HMOs Work



- Physicians, hospitals and specialists are provided via independent medical groups and physicians (Blue Shield) or an integrated medical network (Kaiser)
- Your health care is administered partnership with your Primary Care Physician (PCP) or personal Plan Physician (PP)
- Referrals are administered through your PCP or PP
  - Blue Shield Access+ allows self referrals to a network specialist at a higher co-pay of \$30
- Preventive / wellness visits and immunizations are covered at no cost.
- No deductible



# HMO Plan Comparisons

	Kaiser / Anthem HMO Traditional / Blue Shield Access+ / Health Net / UnitedHealthCare
Preventive care	\$0
Physician Office Visits	\$15
Acupuncture/ Chiropractic	\$15 – combined 20 visits per calendar year
Diagnostic X-ray/lab	No Charge
Surgery	\$15
Urgent Care Visits	\$15
Emergency Room Care	\$50



# Prescription Plans



# Prescription Plan

	Retail (30-day supply)	Retail Maintenance (30-day supply)	Mail Order Pharmacy (up to 90-day supply)
Generic	\$5	\$10	\$10
Brand/Preferred	\$20	\$40	\$40
Non-formulary	\$50	\$100	\$100

- OptumRx will administer the prescription drug benefits for CalPERS members and their dependents enrolled in PERS Select, PERS Choice, and PERSCare, as well as those in Anthem Blue Cross, Health Net, Sharp, and UnitedHealthcare Health Maintenance Organization (HMO) plans.
- Kaiser and Blue Shield will continue to administer their own prescription drug benefits.
- If a FDA approved generic is available and patient selects the brand name drug, patient will pay the generic copay PLUS the difference in cost between the generic and brand name drug. Authorization to obtain brand name drug due to medical necessity can be requested.



# Other Plan Notes



- Blue Shield has some local hospitals that are excluded from the plan. For example, California Pacific Medical Center (California, Pacific and St. Luke's Campus) are not participating hospitals.
- Some procedures under the PPOs are under a Value Based Site of Care program to control variety of costs. This includes hip and knee replacement, arthroscopy, cataract surgery and colonoscopy.
- Make sure to see Evidence of Coverage for details of all plan benefits

# Employee HMO Health Care Premium Costs



Plan and Coverage Level	Bay Area Region	City Contribution	Employee Out of Pocket Monthly Expense
<b>Anthem HMO Select</b>			
Employee Only	783.46	787.69	0
Employee + 1 Dependent	1,566.92	1,526.53	40.39
Employee + Family	2,037.00	1,984.50	52.50
<b>Anthem HMO Traditional</b>			
Employee Only	990.05	787.69	202.36
Employee + 1 Dependent	1,980.10	1,526.53	453.57
Employee + Family	2,574.13	1,984.50	589.63
<b>Blue Shield Access+ HMO</b>			
Employee Only	1,024.85	787.69	237.16
Employee + 1 Dependent	2,049.70	1,526.53	523.17
Employee + Family	2,664.61	1,984.50	680.11
<b>Health Net SmartCare</b>			
Employee Only	733.29	787.69	0
Employee + 1 Dependent	1,466.58	1,526.53	0
Employee + Family	1,906.55	1,984.50	0
<b>Kaiser Permanente HMO</b>			
Employee Only	733.39	787.69	0
Employee + 1 Dependent	1,466.78	1,526.53	0
Employee + Family	1,906.81	1,984.50	0

# Employee PPO Health Care Premium Costs



Plan and Coverage Level	Bay Area Region	City Contribution	Employee Out of Pocket Monthly Expense
<b>PERS Choice PPO</b>			
Employee Only	830.30	787.69	42.61
Employee + 1 Dependent	1,660.60	1,526.53	134.07
Employee + Family	2,158.78	1,984.50	174.28
<b>PERS Select PPO</b>			
Employee Only	736.27	787.69	0
Employee + 1 Dependent	1,472.54	1,526.53	0
Employee + Family	1,914.30	1,984.50	0
<b>PERSCare PPO</b>			
Employee Only	932.39	787.69	144.70
Employee + 1 Dependent	1,864.78	1,526.53	338.25
Employee + Family	2,424.21	1,984.50	439.71
<b>PORAC – PPO (Open to PORAC members only)</b>			
Employee Only	699.00	787.69	0
Employee + 1 Dependent	1,467.00	1,526.53	0
Employee + Family	1,876.00	1,984.50	0



**Teamsters Local Union No. 856  
Health and Welfare Fund**

# Schedule of Benefits



Benefits & Coverage	Kaiser Traditional Plan
Plan Out-of-Pocket Maximum	\$1500 individual / \$3,000 Family
Annual Deductible	None
Primary Care Visits / Specialists	\$15 per visit
Emergency Room	\$35 per visit
Lab/x-ray	\$0
Well Body Exams	\$0
Prescription Copay (up to 100-day supply)	\$10 generic / \$20 brand name
Outpatient and Inpatient Services	\$15 per procedure

For those employees eligible to enroll in Teamsters Local Union No. 856 Health and Welfare Fund, please contact

Northwest Administrators, Inc. (NWA)  
Customer Service 1-800-297-4595

# Employee Premium Costs

## Teamsters Health & Welfare



	Monthly Premium	City Contribution/Health	City Contribution/Dental, Ortho & Vision	Total City Contribution	Employee Out of Pocket Monthly Expense
Single Rate	1139.00	787.69	163.00	950.69	188.31
2-Party Rate	1730.00	1,526.53	163.00	1,689.53	40.47
Family Rate	2220.00	1,984.50	163.00	2,147.50	72.50

# Open Enrollment



- Open enrollment is September 12 to October 7, 2016. All changes are effective January 1, 2017.
- More information about CalPERS Health is available on-line
  - Anthem Blue Cross: [www.anthem.com/ca/calpershmo](http://www.anthem.com/ca/calpershmo)
  - Blue Shield of California: [www.blueshieldca.com/calpers](http://www.blueshieldca.com/calpers)
  - Health Net of California: [www.healthnet.com/calpers](http://www.healthnet.com/calpers)
  - PERS Select/PERS Choice/PERS Care: [www.anthem.com/ca/calpers](http://www.anthem.com/ca/calpers)
  - UnitedHealthcare: [www.uhc.com/calpers](http://www.uhc.com/calpers)
  - Kaiser Permanente: [www.kp.org/calpers](http://www.kp.org/calpers)
  - CVS Caremark: [www.caremark.com/calpers](http://www.caremark.com/calpers)



**Questions?**

Thank you!