# YOUR UC MEDICAL PLANS

AN OVERVIEW FOR ACTIVE EMPLOYEES

#### **UCDAVIS**

Health Care Facilitator Program Presented by Guerren Solbach

## Agenda

- Your options
  - Changes for next year to be noted
- Pre-paid medical plans
  - Medical/R<sub>x</sub>/behavioral health
- PPO insurance plans
  - Medical/R<sub>x</sub>/behavioral health
- Conclusion

**UC Medical Plan Overview** 



## Your options

- UC offers:
  - **HMO** plans (2)
  - PPO plans (3)
- HMO availability determined by county/zip code
  - UC's HMOs in urban CA only
  - See Medical Plan Availability Tool [Excel] on HCF site



## Pre-paid medical plans

- Health Maintenance Organizations
  - UC Blue & Gold HMO (Health Net)
  - Kaiser Permanente
  - **\*** Western Health Advantage
    - WHA members who do nothing will be automatically transferred to UC Blue & Gold HMO
      - Including most open prescriptions with remaining refills
    - UC Davis Health will subsidize UC Blue & Gold HMO rates for anyone in the plan (rates in Open Enrollment booklet and on UCnet will be misleading)

### Medical insurance plans

- Preferred Provider Organizations
  - CORE (Anthem Blue Cross)
    - Coverage worldwide
  - UC Care (Anthem Blue Cross)
    - Coverage worldwide
  - UC Health Savings Plan (Anthem Blue Cross)
    - U.S.A. only

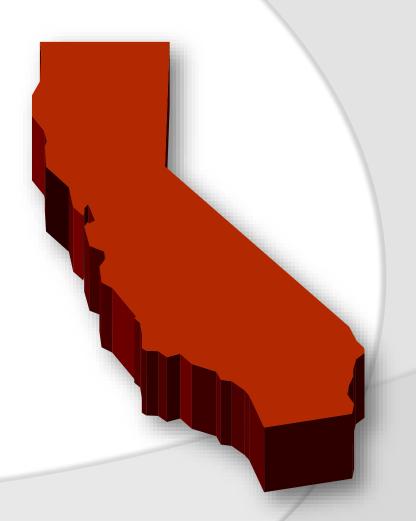
## Changing plans



Changes effective January 1, 2020

## Changing plans

- Move outside plan service area
- Acquire a newly eligible family member
- Involuntary loss of other coverage



## About UC plans

- No pre-existing conditions exclusions
- No UC-sponsored double coverage
- Primary vs. secondary insurance
  - Employees' plans are primary for themselves
  - Birthday rule
- Family member verification:



## About UC plans

- Preventive care generally provided at no cost
- Medical benefits may be separate from Mental Health and Pharmacy benefits
- For details, see Plan Booklets (Evidence of Coverage)
  - ucal.us/oe

**UC Medical Plan Overview** 

## PRE-PAID MEDICAL PLANS

#### **About HMOs**

- The insurance company pre-pays a monthly per capita rate (called capitation) to each Medical Group
- Your Primary Medical Group is responsible for your care for that month
- You choose a Primary Care Physician (PCP) who acts as your gatekeeper to care through the Medical Group (to change PCPs, contact plan directly)
  - Exception: Emergencies call 911 & let PCP know ASAP
  - PCP must be within 30 miles of home/work/school
  - Each family member can have a different PCP/group

## **Advantages of HMOs** ©

- Premiums generally lower
- Low, predictable copayments
- No deductibles/coinsurance
- Significantly lower financial liability
- Encourages relationship with PCP

#### Limits of HMOs

- Service area limited to certain urban CA zip codes
- Must select PCP from the network of medical groups
- Most specialty care must be referred by PCP
  - Preauthorization process required
- Must use your Medical Group's network of specialists/hospitals/labs
- May need to get permission from PCP's office before using Urgent Care Center

## HMO cost sharing: Copayments

- Physician office visit: \$20
- ER: **\$75**
- Outpatient surgery: \$100
- Inpatient hospitalization:\$250



## $HMOR_{x}$

- Generic: \$5/30-day supply
- Brand name: \$25/30-day supply
- Non-formulary: \$40/30-day supply
  - Does not apply to Kaiser
- Some meds require prior authorization
- Copayments waived for low- to moderate-dose statins



## $HMOR_x - 90 day supplies$

- 2 times the applicable copayment saves you 1/3
- UC Blue & Gold HMO:
  - UC pharmacies
  - Local CVS pharmacies
  - Mail order
- Kaiser:
  - Mail order (100-day supplies for 2 copays)



#### HMO behavioral health

НМО	Provider Network
UC Blue & Gold HMO (Health Net)	MHN (Managed Health Network)
Kaiser	Kaiser and/or Optum (UnitedHealthcare)

WHA members using Optum providers should check to make sure their providers are part of the new plan

#### HMO behavioral health

Behavioral Health Plan	Website	
MHN	healthnet.com/uc	
Kaiser	my.kp.org/universityofcalifornia	
Optum	liveandworkwell.com (access code 11280)	

#### HMO behavioral health benefits

- Outpatient mental health benefits:
  - First 3 visits free (exception: Kaiser providers)
  - Visits 4+: **\$20**
- Inpatient mental health benefits:
  - **\$250** per admission

## HMOs: Limit on copayments

#### **Out-of-pocket maximum**

Includes medical, mental health, R<sub>x</sub>

UC Blue & Gold HMO (Health Net)	Kaiser Permanente*
<b>\$1,000</b> /person	<b>\$1,500</b> /person
\$3,000/family	\$3,000/family

<sup>\*</sup> Kaiser maximum does not include Optum copayments

#### UC Blue & Gold HMO



- Large provider network, available across urban CA
- Openion Power
  - Track your health issues/knowledge base; CareAlerts
  - Health coach (nurse, respiratory therapist, dietician)
  - 24-hour nurse line, case managers
  - In-home biometric monitoring for those with heart disease/COPD
- CVS MinuteClinics: \$20/visit
- UC-dedicated customer service

#### UC Blue & Gold HMO



- Omada Health weight loss and management program (for those with diabetes and heart risks) includes scale
  - New: 2 year limit
- Disease Management programs
- Discount programs
  - Massage therapy, fitness centers, vitamins, books, videos, etc.
- Quit for Life program: Smoking cessation program
- Telehealth no copay consults 24/7 through Teladoc

#### UC Blue & Gold HMO



- New: Smart Start for Your Baby
- Chiropractic/acupuncture
  - 24 visits/person/year combined for \$20 copayment; self-refer to **American Specialty** providers
- Online tools include a mobile app
- Pharmacy Benefit Manager: CVS/Caremark
- Be sure to specify a PCP when choosing this plan

#### UC Blue & Gold HMO vs. WHA

	UC Blue & Gold HMO	WHA
Provider network:	Does not include NorthBay Healthcare	Owned in part by NorthBay Healthcare
Behavioral health network:	MHN (Managed Health Network)	Optum
Acupuncture/Chiropractic network:	American Specialty	Landmark
Service area:	Most of urban California	Certain NorCal counties
Allergy Shots:	\$20	\$5
Pharmacy benefit manager:	CVS/Caremark	Express Scripts
Telemedicine:	Teladoc	N/A
Retail clinic:	CVS MinuteClinic	N/A
Travel insurance:	N/A	Assist America



- Kaiser Foundation Health Plan contracts with one large group, the Permanente Medical Group
- Clinics tend to offer pharmacies, imaging, laboratories, urgent care all at one location
- Classes, pamphlets, and videos on a wide variety of health topics; online weight, stress management & nutrition programs
- No cost access to wellness coaches by phone



- Advanced electronic medical records, online tools
  - My Health Manager mobile app
- Discount programs
  - Massage therapy, fitness club, vitamins, books & videos, etc.
- Disease management programs

KAISER PERMANENTE®

- Mental health: two choices
  - Go through PCP: \$10 for group therapy



- And/or use Optum
  - Use Kaiser pharmacies for meds prescribed by Optum psychiatrists
- $\bullet$  R<sub>x</sub>: 30-/60-/100-day supplies at 1x/2x/3x copays
  - Use Kaiser pharmacies
  - Mail order: 100-day supply for 2x copays



- Chiropractic/acupuncture
  - 24 visits/person/year combined for \$15 copayment; self-refer to American Specialty providers
  - \$20 for Permanente acupuncturists
- Allergy shots: \$5
- No DME outside service area

**UC Medical Plan Overview** 

## PPO PLANS

#### **About PPOs**

- Insurance; no providers are pre-paid
- Members self-refer to medical providers
- Coverage for contracting providers is greater than for those with no contract
  - Contracting providers are Preferred Providers
  - When hospitalized make sure surgeon, anesthesiologist, radiologist, etc. are preferred
- Coverage is generally world-wide

## **Advantages of PPOs** ©

- No need to designate a PCP or stay within a medical group
- Care can be received anywhere, mostly without referrals or authorizations
- Preferred providers cannot charge above contract rates (no balance billing)
- Provider network is large in CA and nationally
- Out-of-network coverage

#### Limits of PPOs

- Other than preventive care, no coverage until deductible is met
- Patients don't know their out of pocket costs in advance
- More expensive to use than HMOs; members must keep track of medical bills



- Out-of-network providers very expensive to use
- Prior Authorization required for imaging, inpatient services, durable medical equipment, transplants, etc.



- Large Preferred Provider network:
  - In California: 60,000+ <u>Blue Cross</u> network **Anthem** Preferred providers (87% of doctors) including 400+ network hospitals (90% of facilities)
  - More than 96% of hospitals and 92% of physicians across the country are <u>Blue Cross/Blue Shield</u> (BlueCard) providers
  - Preferred providers in 200+ foreign countries
- ucppoplans.com/nh/find-a-provider



- UC-dedicated customer service
- 24/7 nurse line & behavioral health resource center
- Variety of online tools & Engage mobile app
  - Castlight personalized cost estimator
  - LiveHealth Online medical and psychology care
  - myStrength behavioral health site



- Discount access to health & wellness
- Disease Management programs
- Pharmacy Benefit Manager: IngenioRx
  - New: Anthem Essential drug list
- Copayments waived for low- to moderatedose statins

## **CORE Medical**



- No premium, high deductible PPO
- No cost preventive care, but for everything else:

"Catastrophic coverage"

## CORE coverage





#### Anthem Preferred

- Self-refer to preferred providers
- 1. \$3,000 deductible
  - Per person per year
- 2. 20% coinsurance
- 3. \$6,350 Out-of-pocket limit (\$12,700 per family)
  - Per person, per year

#### Out-of-network

- Self-refer to non-contracting providers
- 1. Same \$3,000 deductible
  - Per person, per year
- 2. 20% coinsurance
- 3. Same \$6,350 Out-of-pocket limit (\$12,700 per family)
  - Per person, per year
- + Balance billing

CORE coverage





Anthem.	
BlueCross	®

Example: Single employee	Anthem Preferred	Out-of-Network Providers
1: Deductible	\$3,000	\$3,000
2: Coinsurance	20%	20% + balance
3: Out-of-Pocket Limit	\$6,350	\$6,350 + balance

## CORE R<sub>x</sub>

- No flat copays; covered like medical
- Drug expenses apply toward your deductible/out-ofpocket limit





## CORE mental health



- Behavioral health covered the same way medical and pharmacy are covered
  - Coverage not "carved out"
- Use Anthem Preferred providers

## **Advantages of CORE** ©



- No monthly premium
- One deductible, out-of-pocket limit whether in-or out-of-network
- No PCP, self-refer to specialists
- Large, national preferred provider network
- Out-of-network/world-wide coverage
- LiveHealth Online 24/7 telemedicine
  - \$49/visit until deductible is met

## Limits of CORE ®





- High deductible per person & per family
- High out-of-pocket limit per person & per family
- Out-of-network coverage severely limited
  - Outpatient surgery @ surgery center: 80% of \$350
  - Hospital: 80% of \$600/day
- No coverage for hearing aids
- Chiropractic/acupuncture 24 visit limit

## UC Care PPO



- High premium, low deductible PPO
- Like a standard PPO, but with two levels of innetwork providers
  - Choose regular Anthem Preferred providers and pay 20%
  - Or, access a special UC Select provider network for low copayments

## UC Care PPO coverage





- Tier 2: Anthem Preferred providers
  - 1. \$250 deductible
    - Per person per year
    - \$750 for 3 or more
  - 2. 20% coinsurance
  - **\$6,600** Out-of-pocket limit (includes  $R_x$ )
    - Per person, per year
    - **\$13,200** per family

- Tier 3: Out-of-network providers
  - 1. \$500 deductible
    - Per person, per year
    - \$1,500 for 3 or more
  - 2. 50% coinsurance
  - 3. \$8,600 Out-of-pocket limit (includes  $R_x$ )
    - Per person, per year
    - **\$19,200** per family
  - + Balance billing

### UC Care: Tier 1 – UC Select

**Anthem**<sub>®</sub>

- All UC medical centers and select other providers located near UC campuses (CA only)
- Certain services for <u>flat copayments</u>:
  - Physician office visit: \$20
  - Urgent Care \$30 (not just UC Select)
  - ER (not just UC Select), ambulance: \$200
  - Outpatient surgery: \$100
  - Inpatient hospitalization: \$250
  - LiveHealth Online 24/7 telemedicine: \$20

Multiple copays can apply per service

## Tier 1 – UC Select providers



- Local UC Select hospitals
  - UC Davis Medical Center
  - Marshall Medical Center
  - Lodi Memorial Hospital
  - Copayments for UC Select providers apply to the Anthem Preferred out-of-pocket limit

## **UC** Care coverage



Self only coverage	UC Select Providers	Preferred Providers	Out-of- Network
1: Deductible	None	\$250	\$500
2: Coinsurance	Flat copayments	20%	50% + <i>balance</i>
3: Out-of-Pocket Limit	\$5,100	\$6,600	\$8,600 + <b>balance</b>

## UC Care R<sub>x</sub>

- 1. **Generic: \$5**/30-day supply
- **2. Brand name: \$25**/30-day supply
- 3. Non-formulary: \$40/30-day supply
- 90-day supplies available for 2 copays:
  - UC pharmacies
  - Costco, CVS, Safeway/Vons, Walgreens
  - Mail order: IngenioRx





\$150/script (UC pharmacies or Accredo)

## UC Care behavioral health coverage



- Coverage not "carved out"
- Use Anthem Preferred providers
- Outpatient visits 1-3, no copay; additional visits \$20

## Advantages of UC Care ©



**\$** 

- Care from UC Select providers for low copays
- Lower deductibles than CORE, UC Health Savings Plan
- No PCP, self-refer to medical providers
- Large, national preferred provider network
- Out-of-network coverage
- World-wide coverage at Anthem Preferred level of benefit

## Limits of UC Care





- Many services not available at UC Select level of coverage
- Acupuncture/chiropractic visits limited to 24 visits combined
- Out-of-network coverage severely limited
  - Outpatient surgery @ surgery center: 50% of \$350
  - Hospital: 50% of \$600/day
- Specialty drugs have especially high copays

## UC Health Savings Plan



- Low premium, high deductible PPO with a HSA (Health Savings Account)
- HSA partially funded by UC
- Pay for medical expenses with HSA "smart card" or website
- HSA not "use it or lose it" like Health FSA (above \$500)

## UC Health Savings Plan: HSA



- UC contributes to the HSA every January 1: \$500 for self-only or \$1,000 for employee + dependents
- HSA has a triple Federal tax advantage:
  - Pay no taxes on contributions/earnings/withdrawals for health care expenses (CA taxes contributions & earnings)
- You can contribute pre-tax up to:
  - Single: \$3,550 (+\$1,000 if over age 55)
  - Family: \$7,100 (+\$1,000 if over age 55)

## UC Health Savings Plan: HSA (cont.)



- Balance above \$1,000? Money can be invested.
- Have a balance at age 65? Distributions taxed as normal income (unless used for eligible expenses).
- Single? Adding new family members mid-year does not get you an additional UC contribution until the following January.

## UC Health Savings Plan: Coverage





- Anthem Preferred
  - 1. \$1,400 deductible
    - \$2,800 for self + dependents
  - 2. 20% coinsurance
  - 3. \$4,000 Out-of-pocket limit
    - \$6,400 per family

#### Out-of-Network

- 1. \$2,500 deductible
  - \$5,000 for self + dependents
- 2. 40% coinsurance
- 3. \$8,000 Out-of-pocket limit
  - \$16,000 per family
- + Balance billing

## UC Health Savings Plan: Coverage



Self Only Coverage	Preferred Providers	Out-of-Network Providers
1: Deductible*	\$1,400	\$2,550
2: Coinsurance	20%	40% + balance
3: Out-of-Pocket Limit	\$4,000	\$8,000 + balance

\* UC contributes \$500 to the HSA

## UC Health Savings Plan: Coverage



Self + Dependents Coverage	Preferred Providers	Out-of-Network Providers
1: Shared Deductible*	\$2,800	\$5,100
2: Coinsurance	20%	40% + balance
3: Shared Out-of-Pocket Limit	\$6,400	\$16,000 + balance

\* UC contributes \$1,000 to the HSA

## UC Health Savings Plan: R<sub>x</sub> coverage



- No flat copays; covered like medical
- Drug expenses apply toward your deductible/out-of-pocket limit



## UC Health Savings Plan: Mental health coverage



- Behavioral health covered the same way medical and pharmacy are covered
  - Coverage not "carved out"
- Use Anthem Preferred providers

## Advantages of UC Health Savings Plan ©





- Low monthly premium, lower out-of-pocket limit (shared by family)
- Tax advantaged HSA funded by UC
  - Members can contribute additional pretax amounts
  - Unused HSA dollars roll to next year; can be used as retirement money at age 65
  - Use HSA pay for deductibles and other out-of-pocket costs
- Advantages of a PPO

## Limits of UC Health Savings Plan 😊





- Numerous disqualifying circumstances:
  - Incompatible with Health FSA (FSA balance must be zero by the end of the year; cannot roll over up to \$500)
  - Incompatible with Medicare Parts A
     & B and other coverage that is not also a qualified high deductible plan
  - Consult a financial advisor before choosing this plan
- High deductible/OOP limit per person & per family

- Acupuncture/chiropractic visits limited to 24 visits combined
- Out-of-network coverage severely limited with addl ddbl/OOP limit
  - Outpatient surgery @ surgery center: 60% of \$350
  - Hospital: 60% of \$600/day
- Emergency/urgent coverage only outside U.S.A.
- Save your receipts in case audited by I.R.S.

## Choosing a plan

- Every plan has a different drug formulary
- Match your priorities with the services available
- Do a cost/benefit analysis based on plan premiums and your expected medical, behavioral and pharmacy needs
- Review the Plan Booklets (Evidence of Coverage):
   ucal.us/oe

## Help is available

### **Health Care Facilitator Program**

- Guerren Solbach:
  - (530) 752-4264
- Erika Castillo:
  - (530) 752-7840

#### **UCDAVIS**

#### Health Care Facilitator Program

#### Guerren Solbach, Health Care Facilitator

(530) 752-4264 / (916) 734-8880 (phone)

(530) 752-4993 / (916) 734-5338 (fax) gpsolbach@ucdavis.edu Normal office hours: 7:00 a.m.-4:00 p.m.

#### Davis campus:

260 Cousteau Place, Suite 150 Davis, CA 95618-5497 Mondays, Wednesdays & Fridays

#### Sacramento campus:

Ticon III Building, 2<sup>rd</sup> Floor 2730 Stockton Boulevard Sacramento, CA 95817-2212 Tuesdays & Thursdays

#### Erika Castillo, Health Care Facilitator Assistant

(530) 752-7840 / (916) 734-4341 (phone)

(530) 752-1993 (fax) ecastillo@ucdavis.edu

Normal office hours: 7:30 a.m.-4:00 p.m.

#### Davis campus:

260 Cousteau Place, Suite 150 Davis, CA 95618-5497 Monday—Friday

2 Due to the complexity of health coverage, facilitators prefer to correspond by phone. 2

If you wish to visit the Health Care Facilitator or HCF Assistant in person, please call ahead to schedule an appointment. When you arrive, be sure to check in with the receptionist at the front desk of 260 Cousteau Place, Suite 150, or with UCDHS Benefits on the 2<sup>rd</sup> floor of the Ticon III Building.

http://hr.ucdavis.edu/hcf

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