2019 Health Care Plan Design Changes

(for Full-time Active Employees and Pre-65 Full Benefit Retirees)

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In Network	2018	2019	
Individual deductible	\$200	No change	
Family deductible	\$400	\$600	
Out of pocket maximum			
Individual	\$2250	\$2500	
Family	\$4500	\$4750	
Primary care physician	\$20	No change	
Virtual visits	\$20	0	
Specialists	\$35	\$40	
Urgent care	\$35	No change	
ER	\$150	No change	
Inpatient	10%	No change	
Physicians charges in hospital	0	Subject to deductible and	
		coinsurance of 5%	
Major Diagnostic tests (ex. MRI)	0	Subject to	
		deductible/coinsurance	

Out of Network	2018	2019	
Individual deductible	\$500	\$600	
Family deductible	\$1000	\$1200	
Out of pocket			
Individual	\$3000	\$3500	
Family	\$6000	\$7000	
Primary care physician	\$30	\$40	
Virtual visits	Not covered out of network	No change	
Specialists	30%	40%	
Urgent care 30% 40		40%	
ER	\$150	No change	
Inpatient	npatient 30% 40%		
Major Diagnostic tests (ex. MRI)	0	Subject to	
		deductible/coinsurance	

Prescriptions	2018	2019
Tier 1 (Generic)	\$7	No change
Tier 2 (preferred brand)	\$35	\$45
Tier 3 (not preferred)	\$50	\$60
Tier 4 (specialty) \$65		\$75 (now includes specialty
		drug)
Overall Rx deductible (does not	0	\$25
apply to generics)		

2019 Health Plan Premium Changes

(for Full-time Active Employees and Pre-65 Full Benefit Retirees)

Health Plan (biweekly)	2018	2019
Employee only	\$15.97	No change
Employee +spouse	\$97.71	\$112.71
Employee + children	\$67.08	\$77.08
Family	\$149.44	\$169.44

2019 Dental Plan Premium Changes

Dental Plan Basic (biweekly)	2018	2019
Employee only	\$1.73	\$2.13
Employee + spouse	\$14.39	\$15.58
Employee + children	\$16.34	\$17.66
Family	\$31.36	\$37.07

Dental Plan Enhanced	2018	2019
Employee only	\$12.31	\$12.57
Employee + spouse	\$34.55	\$34.55
Employee + children	\$35.60	\$37.01
Family	\$59.97	\$67.80

2019 Medicare Advantage Rates (with history included)

Year	Total Premium	30-year Retiree Contribution	30-year County Contribution	% Increase Total Premium	\$ Increase/ <mark>Decrease</mark> Total Premium	% Increase/ Decrease to Retiree
2014	\$193.61	\$0.00	\$193.61	N/A		
2015	\$203.12	\$0.00	\$203.12	4.91%		
2016	\$225.46	\$22.34	\$203.12	11.00%	\$22.34	
2017	\$236.73	\$33.61	\$203.12	5.00%	\$11.27	50.45%
2018	\$256.85	\$53.73	\$203.12	8.50%	\$20.12	59.86%
2019	\$245.29	\$42.17	\$203.12	-4.50%	\$11.56	-21.51%

2019 Vision Benefit Changes

Vendor change from Envolve to Superior Vision. This plan offers no disruption in network with essentially the same benefits and decreased premiums as listed below:

Vision Plan	2018	2019
Employee only	\$3.42	\$2.44
Employee + spouse	\$5.55	\$3.96
Employee + children	\$5.73	\$4.09

Employee Assistance Program

For many years, the Employee Assistance Program (Care24) has been included in the United HealthCare contract. Because the complexity of workplace and personal issues that County employees face have not been able to be addressed in a holistic fashion by the current arrangement, the reporting and follow-up of these services has been lacking, and employees who were not enrolled in the UHC plan were not covered under the program, gaps in service have become more apparent. Guilford County recently had our consultants bid the Employee Assistance Program. Based on the results, it is proposed that McLaughlin Young be named the County's EAP provided, effective 1/1/19.

To fund this benefit for all employees, the \$32.53 fee billed by UHC per enrolled employee each month will decrease by \$1.25, and a fee of \$.98 per full or part time employee will be paid to McLaughlin Young for their services, which will result in an approximate savings of \$2,000 per year.