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Changes are Coming to Your Health Benefits Next Year!

The Public Employees' Benefits Program (PEBP) Board met on Thursday, November 30, 2017 to discuss and approve plan benefit design changes for Plan Year 2019 (July 1, 2018 – June 30, 2019). A major policy decision was made regarding the northern Nevada Health Maintenance Organization (HMO) plan provided for employees, pre-Medicare retirees and their dependents (see below for details). Additionally, the majority of the benefits for the Consumer Driven Health Plan (CDHP) remained the same, with a couple of changes and opportunities also described below.

Hometown Health Plan – HMO

The PEBP Board approved eliminating the Hometown Health HMO plan at the end of this plan year (June 30, 2018). With Hometown Health's proposed significant employee/retiree rate increases (projected to be \$40 - \$200 more per month depending on tier of coverage), the PEBP Board approved the creation of a replacement plan for the Hometown Health HMO, which will provide similar benefits to the current HMO plan available today. It is important to note Health Plan of Nevada will continue to be offered in southern Nevada and members in that region will not be affected by this change.

What does this mean for HMO members in northern and rural Nevada?

- Almost all of the members on the Hometown Health HMO plan will see no significant change to their benefits. PEBP will develop the replacement plan utilizing the CDHP network of providers. The doctors, specialists, and hospitals are almost exactly the same for the Hometown Health HMO as they will be for the replacement plan.
- Unfortunately, Banner Churchill Community Hospital in Fallon, Nevada will not be included as a provider. Banner Churchill Community Hospital was removed from PEBP's CDHP network years ago because of their unwillingness to provide fair and competitive costs to PEBP's members. On average, the pricing structure for Banner Churchill is approximately 40% higher for most services than Carson Tahoe Hospital in Carson City, Nevada and Renown in Reno, Nevada – both just over an hour of travel time from Fallon, Nevada.
- PEBP members on the Hometown Health HMO rely on the no deductible, copay model of benefits, and PEBP will be mirroring this model to be as close as possible to the current plan design today.
- An additional benefit will be provided to members by lowering the coinsurance on specialty tier drugs from 40% (Hometown Health today) to 30% (replacement plan next year) to help make specialty drugs more affordable. This affordable specialty drug benefit will also be provided to members on Health Plan of Nevada's HMO plan in southern Nevada starting next year.

All members currently enrolled in the Hometown Health HMO plan who wish to change plans will have the option of selecting the CDHP during open enrollment next year (May 1 -31, 2018). For those members who wish to enroll in the replacement plan, PEBP will automatically enroll you with no action needed by the member. PEBP is developing the documentation for this plan now and we will provide it in April 2018 to review for open enrollment starting May 2018. We will also send out more notices and communication on this change each month leading up to and through open enrollment.

Consumer Driven Health Plan – New Benefits

The benefits approved by the Board in March 2017 for this current plan year (July 1, 2017 – June 30, 2018) were again approved for next plan year (July 1, 2018 – June 30, 2019) for the CDHP. These include maintaining program wide enhanced life insurance amounts (\$25,000 for employees / \$12,500 for retirees for all eligible members) and CDHP enhanced Health Savings Account (HSA) / Health Reimbursement Arrangement (HRA) amounts of \$200 per primary participant tied to specific activities. In addition, four new benefits were approved for next plan year.

1. Healthcare Bluebook

PEBP is adding Healthcare Bluebook starting next July to help you compare the quality and costs of medical services, and provide an incentive if you select certain high quality low cost in-network providers. For those of you who like using your smartphone, tablet or computer, Healthcare Bluebook has an application to show you savings opportunities and associated incentives. For those of you who would rather speak to a live person, Healthcare Bluebook also has a dedicated call center where customer service representatives will be available to answer questions and help you choose the services and incentives you want. More information will be coming out from PEBP and Healthcare Bluebook soon.

2. Smart 90 Pharmacy Network

PEBP's Pharmacy Benefits Manager, Express Scripts, has negotiated deeper discounts with select pharmacies who provide 90-day supplies of medications. PEBP is implementing a voluntary network (Smart 90) starting July next year. If you take a 90-day medication, you could save significant money if you order it through mail order or switch to a Smart 90 participating pharmacy. There is no requirement to do so, and this program is purely voluntary, but if you do switch, you could save money!

3. 3D Mammograms

PEBP currently covers one standard mammogram per plan year on the preventive/wellness benefit paid by the plan at 100%. Per the United States Preventive Services Task Force (USPSTF), 3D mammograms are not recommended as there is “not enough evidence to determine effectiveness of 3D mammography.” However, PEBP has received additional information from National Comprehensive Cancer Network (NCCN) stating 3D mammography identifies cancers with greater accuracy than standard mammography. Therefore, the PEBP Board approved 3D mammograms to be paid by the plan at 100% for preventive/wellness services for members on the CDHP starting July 2018.

4. Voluntary Vision Plan

The PEBP Board has approved the procurement of a comprehensive voluntary vision plan covering vision exams, lenses, frames, contact lenses, and laser surgery discounts. This plan will be an option to all CDHP members in addition to the vision benefit provided by PEBP today. Once a contract is signed, PEBP will send out a notice to the membership of availability. Unfortunately due to timing, PEBP will not have this benefit available July 1, 2018, however once available will be offered later next year.

CDHP Enhanced HSA/HRA Funds – New Requirements

Currently, PEBP provides \$200 of enhanced HSA/HRA funding for the primary participant (employee/retiree) on the CDHP tied to the completion of four preventive activities:

1. Annual Preventive Medical Exam
2. Annual Preventive Medical Exam Ordered Lab Work
3. Annual Preventive Dental Exam
4. At Least One Dental Cleaning This Year

Next plan year, PEBP will be assigning those four activities above to a \$100 enhanced HSA/HRA funding benefit. Another \$100 to the primary participant (employee/retiree) will be available (for a total of \$200) for the completion of two additional activities:

1. Sign-up and Enroll with Doctor on Demand
2. Sign-up and Enroll with Healthcare Bluebook

Signing up with both programs only takes a few minutes and are completed electronically providing all members access to these programs 24 hours a day, 7 days a week, 365 days a year. There are no requirements to utilize these programs to receive funding – only to sign-up with them. More information on these programs will be provided soon.

Conclusion

PEBP's mission is to provide employees, retirees, and their families with access to high quality benefits at affordable prices. Our vision is to be a member focused, nationally recognized, affordable program of employer sponsored benefits serving employees, retirees, their families and the Nevada taxpayer. All of the decisions made by the PEBP Board for next plan year support the mission and vision of the program. PEBP looks forward to providing excellent service to our members as we implement these changes and new benefits next year!