

#### PERSONNEL COMMITTEE MEETING

## 2022 EMPLOYEE BENEFITS UPDATE



September 9, 2021

Shawn Esslinger, VP, Employee Benefits Consultant

www.usi.com

## Agenda

- 2021 Employee Benefit Reminders/Recap
- 2021 Plan Year to Date Plan Performance
- 2022 City Medical Plan Cost Projections
- Clinic RFP Results: City Sponsored Employee Clinic Services 1/1/2022
- 2022 Plan Year Recommendations
- Time for Questions

## 2021 (current) City Benefit Plan Reminders

#### Medical Plan



- Year 2 of self-funded plan administration by Robin HealthPartners and focused provider network
- A HDHP/HSA medical plan design has been in effect since 1/1/2020
  - \$2000 single/\$4000 family deductibles
    - Deductible must be met before the plan reimburses anything (excluding routine care, certain preventive drugs)
  - City \$400/\$800 HSA contribution (wellness participation incentive)
    - Available to covered employee/spouse participating in Fall 2020 HRA biometric events
    - ½ contribution Jan. 2021 and ½ July 2021
- No change in employee contributions
- DPW employees transitioned to the City's medical plan effective 5/1/2021
- The Manty Clinic agreement with Aurora continues month-to-month
  - Access to no/low-cost care for covered employee's family members
  - Clinic RFP was initiated and results to be shared later in this presentation

## 2021 (current) City Benefit Plan Reminders

#### Dental Plan



- Year 2 of self-funded dental plan administration by Delta Dental of WI
- Employee contributions remained the same and no design changes
- Plan members continue to have two dental provider networks (PPO and Premier) as well as opportunity to go out-of-network if desired

#### Wellness Programming

- Go365 wellness platform and Bucks incentives continue
- Onsite HRA/biometrics will again take place Oct/Nov/Dec 2021
- As discussed at last year's open enrollment, covered employees and spouses have been working toward Go365 wellness goals -that if reached, a City HSA contribution (if approved) will apply for plan year 2022

#### Voluntary Vision Insurance

Insured through NVA

#### Disability Insurances

Voluntary STD and LTD insured through Mutual of Omaha

### Employee Assistance Program (EAP)

Provided by Aurora; due diligence marketing undertaken in conjunction with the clinic RAP

#### Cafeteria Plan and COBRA administration

 FSA (general medical and limited purpose) as well as COBRA administration, provided by Wex



### Plan Year 2021 Medical Plan Performance

#### City of Manitowoc - Medical Funding Analysis Report

Plan Name:

Medical Plan

Prepared By: Date Prepared: Plan Year: USI Insurance Services 08/16/21 01/01/21 - 12/31/21

Medical & Rx Carriers:

YTD Average Monthly Cost

Per Employee

Health Partners & Health Partners

Total Monthly Funding					
Single	Family				
\$620.36	\$1,572.20				

\$1,269.27

\$1,244.72

\$1,393.02

**Total Monthly Fixed Costs** Family \$9.25 Administration Fee \$25.12 Specific Stop Loss (\$100,000) \$62.03 \$173.68 Aggregate Stop Loss \$3.38 \$9.46 Wellness Platform / Incentives \$11.04 \$11.04 \$0.66 COBRA Fee \$0.66 \$1.85 \$88.21 Sum of Total Monthly Fixed Costs \$221.81

Monthly Enrollment	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Total
Single	55	56	56	55	57	57	59						395
Family	137	137	138	138	148	148	143						989
Total	192	193	194	193	205	205	202						1,384
Total Funding													
Single	34,119.80	34,740.16	34,740.16	34,119.80	35,360.52	35,360.52	36,601.24						\$245,042.20
Family	215,391.40	215,391.40	216,963.60	216,963.60	232,685.60	232,685.60	224,824.60						\$1,554,905.80
Sum of Total Funding	\$249,511.20	\$250,131.56	\$251,703.76	\$251,083.40	\$268,046.12	\$268,046.12	\$261,425.84						\$1,799,948.00
Fixed Costs													
Single	4.851.55	4.939.76	4.939.76	4.851.55	5.027.97	5.027.97	5.204.39						\$34.842.95
Family	30.387.97	30.387.97	30,609,78	30,609,78	32.827.88	32.827.88	31,718.83						\$219,370,09
AFG Consulting Fee	\$3,500.00	\$3.500.00	\$3,500.00	\$3,500.00	\$3,500.00	\$3,500.00	\$3,500.00						\$24,500.00
Sum of Total Fixed Costs	\$38,739.52	\$38,827.73	\$39,049.54	\$38,961.33	\$41,355.85	\$41,355.85	\$40,423.22						\$278,713.04
Claims Costs													
Medical Claims	133,428.60	174,568.73	268,674,52	217.063.03	154,680,68	138.003.70	108,478.63						\$1,194,897.89
Prescription Drug Claims	17.020.78	13,956.73	31.298.57	41,799,78	47.484.47	46.494.74	40,259.09						\$238.314.16
Shared Savings	263.95	1,710.03	818.14	904.67	607.97	118.35	161.39						\$4,584.50
Clinic Expenses	6.247.68	6,454.22	6.908.06	6,422.47	6.043.90	6,474.85	5,966.91						\$44,518.09
ER HSA Contribution	48.000.00	0.00	0.00	0.00	0.00	0.00	50,600.00						\$98,600.00
Sum of Total Claims Costs	\$204,961.01	\$196,689.71	\$307,699.29	\$266,189.95	\$208,817.02	\$191,091.64	\$205,466.02						\$1,580,914.64
Reimbursements													
Specific Excess Loss	0.00	0.00	(19,405.73)	(45,135.73)	(40,211.90)	(43,109.60)	(42,653.26)						(\$190,516.22)
Prescription Drug Rebate	0.00	0.00	0.00	0.00	0.00	0.00	0.00						\$0.00
Sum of Reimbursements	\$0.00	\$0.00	(\$19,405.73)	(\$45,135.73)	(\$40,211.90)	(\$43,109.60)	(\$42,653.26)						(\$190,516.22)
	<b>V</b> 0.00	Ψ0.00	(\$15,155.15)	(\$10,100.10)	(010,211.00)	(410,100.00)	(4 12,000.20)						(4100,010.22)
Total Costs	\$243,700.53	\$235,517.44	\$327,343.10	\$260,015.55	\$209,960.97	\$189,337.89	\$203,235.98						\$1,669,111.46
Funding Less Costs	\$5,810.67	\$14,614.12	(\$75,639.34)	(\$8,932.15)	\$58,085.15	\$78,708.23	\$58,189.86						\$130,836.54
YTD Plan Performance	\$5,810.67	\$20,424.79	(\$55,214.55)	(\$64,146.70)	(\$6,061.55)	\$72,646.68	\$130,836.54						
YTD % of Total Costs to Funding													92.73%

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\$1,306.59

\$1,240.17

\$1,206.01

\$1,381.58

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### Plan Year 2022 **Dental Plan** Performance

Plan Name: Dental Plan											Prepared By: Date Prepared: Plan Year:		08/16/2 01/01/21 - 12/31/2
Dental Carriers: Delta Dental	Total Monthly Single \$40.10	Family \$112.85							Sum		ministration Fee	Total Monti Single \$4.50 \$4.50	Family \$4.50 \$4.50
Monthly Enrollment	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Total
Single	58	59	59	59	62	63	63						42
Family	131	132	133	133	143	143	142						95
Total	189	191	192	192	205	206	205						1,38
Total Funding													
Single	2,325.80	2,365.90	2,365.90	2,365.90	2,486.20	2,526.30	2,526.30						\$16,962.3
Family	14,783.35	14,896.20	15,009.05	15,009.05	16,137.55	16,137.55	16,024.70						\$107,997.4
Sum of Total Funding	\$17,109.15	\$17,262.10	\$17,374.95	\$17,374.95	\$18,623.75	\$18,663.85	\$18,551.00						\$124,959.7
Fixed Costs													
Single	261.00	265.50	265.50	265.50	279.00	283.50	283.50						\$1,903.5
Family	589.50	594.00	598.50	598.50	643.50	643.50	639.00						\$4,306.5
Sum of Total Fixed Costs	\$850.50	\$859.50	\$864.00	\$864.00	\$922.50	\$927.00	\$922.50						\$6,210.0
Claims Costs													
Dental Claims	11,756.00	16,507.00	21,437.00	16,374.00	15,946.00	16,894.00	9,753.00						\$108,667.0
Sum of Total Claims Costs	\$11,756.00	\$16,507.00	\$21,437.00	\$16,374.00	\$15,946.00	\$16,894.00	\$9,753.00						\$108,667.0
Total Costs	\$12,606.50	\$17,366.50	\$22,301.00	\$17,238.00	\$16,868.50	\$17,821.00	\$10,675.50						\$114,877.0
	*,		<del></del> ,	***,									
Funding Less Costs	\$4,502.65	(\$104.40)	(\$4,926.05)	\$136.95	\$1,755.25	\$842.85	\$7,875.50						\$10,082.7
YTD Plan Performance	\$4,502.65	\$4,398.25	(\$527.80)	(\$390.85)	\$1,364.40	\$2,207.25	\$10,082.75						I
YTD % of Total Costs to Funding													91.93
YTD Average Monthly Cost													
Per Employee	\$66.70	\$78.88	\$91.39	\$90.98	\$89.14	\$88.68	\$83.24						\$83.2
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### 2021 Plan Performance

- Move to HealthPartners continues to be a <u>positive change</u> for City plan members as well as for City plan administration
  - Specific to prescription drug coverage:

Comparison	2020 HealthPartners	2019 Anthem/Ingenio
Total Allowed Pharmacy Cost	\$472,895	\$812,293
Total Plan Paid Cost	\$404,297	\$767,393
Generic Dispensing	95.25%	87.42%
Average Generic Cost/Rx	\$18.61	\$51.81
Average Brand Cost/Rx (excl. specialty)	\$341.51	\$1,077

Note: 2021 pharmacy spend is trending like plan 2020

- Over the past 12 months, there have been a higher number of high-cost claimants which in-turn made securing HealthPartners stop loss coverage (\$100,000 specific) challenging for plan year 2022
  - 18 claimants had over \$30,000 in claims
  - 4 claimants had more than \$100K in claims
  - 3 of the 18 had more than \$200K in claims
  - 2 claimants are no longer covered by the plan; remainder are considered to have cases that will continue with similar claims utilization
- Regarding plan year 2022 stop loss coverage with HealthPartners;
  - Renewal offer was negotiated down to an 29% increase and <u>avoided lasers</u>; HealthPartners agreed to do
    so, to show continued partnership with the City

### 2021 Plan Performance cont.

#### Medical Plan cont.

- The current HDHP design, and the amount of out-of-pocket costs, not including employee monthly premiums, City plan members are responsible for, continues to be a concern
  - Annual \$4250 single/\$8500 family out-of-pocket maximum applies
- The current employment environment related to recruitment, and retention of our employees, along with the City's current benefit offerings, continues to be a concern
- Due to these concerns, City benefit benchmarking alongside other company's offerings were reviewed by way of USI's 2021 Benchmark Survey

### 2021 Plan Performance cont.

USI Benefits Benchmarking: In all, over 8000 employers participate the 2021 survey, from dozens of

industries, and nearly every state in the country. 250-500 City Midwest Government **Employees** Region Bolded City benefits are at, or better than benchmarks **HDHP Medical Plan Deductible** Individual deductible \$2,000 \$2,000 \$3,000 \$3,000 \$4,000 \$4,000 \$6,000 \$6,000 Family deductible \$4,250 \$3,000 \$4,500 \$4,500 Individual Annual out-of-pocket maximum \$8,500 \$6,000 \$9,000 \$9,000 Family annual out-of-pocket maximum In-network plan member coinsurance after deductible 20% 20% 20% 20% **Employer Provided HSA contribution** Single coverage \$400 \$1,000 \$600 \$600 \$800 \$2,000 \$1,000 \$1,000 Family coverage Prescription Drug Co-pays 20% 20% 20% 20% Generic 20% 20% 20% 20% Preferred Brand 20% Non-preferred Brand 20% 20% 20% Specialty 20% 20% 20% 20% Monthly Medical Insurance Premiums \$620 \$551 \$561 \$552 Single \$1,572 \$1,635 \$1,667 \$1,608 Family Monthly Medical Insurance Employee Contribution \$78 \$82 \$105 \$106 Single \$197 \$262 \$485 \$405 Family Monthly Employer Contribution Percentage 81% Single 87% 85% 81% 87% 71% 84% 75% Family

## Plan Year 2022 Plan Projections

### ANNUAL COST SUMMARY

	Total Medical & Drug Costs									
	Current	Renewal	% Change	\$ Change						
Specific Stop Loss	\$341,952.00	\$441,124.00	29.00%	\$99,172.00						
Aggregate	\$18,626.00	\$18,626.00	0.00%	\$0.00						
Medical Administration	\$49,655.00	\$49,655.00	0.00%	\$0.00						
Wellness Platform/Incentives	\$26,761.00	\$26,761.00	0.00%	\$0.00						
COBRA Administrator	\$1,600.00	\$1,600.00	0.00%	\$0.00						
HSA 1 Contributions	\$138,004.00	\$138,004.00	0.00%	\$0.00						
Annual PCORI Fee	\$1,439.06	\$1,482.23	3.00%	\$43.17						
<b>Total Fixed Cost</b>	\$582,521.06	\$681,736.23	17.03%	\$99,215.17						
Claims Cost	\$2,694,031.00	\$2,764,396.00	2.61%	\$70,365.00						
Total Fixed & Claims Cost	\$3,276,552.06	\$3,446,132.23	5.18%	\$169,580.17						

Total Dental Costs								
	Current	Renewal	% Change	\$ Change				
Fixed Cost	\$11,124.00	\$11,124.00	0.00%	\$0.00				
Claims Cost	\$212,842.00	\$212,842.00	0.00%	\$0.00				
Total Fixed & Claims Cost	\$223,966.00	\$223,966.00	0.00%	\$0.00				

Total Cost Summary								
	Current	Renewal	% Change	\$ Change				
Fixed Cost	\$593,645.06	\$692,860.23	16.71%	\$99,215.17				
Claims Cost	\$2,906,873.00	\$2,977,238.00	2.42%	\$70,365.00				
Total Fixed & Claims Cost	\$3,500,518.06	\$3,670,098.23	4.84%	\$169,580.17				

Effective: Innuary 1 2022

## City/SD Sponsored Clinic Services RFP Results

The following vendors were invited to respond to the City/School District RFP:

- Aurora (incumbent)
- Froedtert/Holy Family
- Prevea Health (<u>not in-network</u> with the City's medical plan)
- Nice Healthcare

**Pricing Overview** 

Theng overview						
Vendor		Froedtert & CMEDICAL OLLEGE or Workforce Health	PREVEA	♠ nice		
SUMMARY OF COSTS						
Implementation Cost	\$0	Waived - \$0	\$0	\$0		
Advanced Practice Provider (APP) (30 hrs/wk * 50 weeks)	\$165,000	\$142,500	\$117,000	\$352,980		
Medical Assistant (MA) (30 hrs/wk * 50 weeks)	See note below	See note below	See note below	Included in above cost		
Physical Therapist (PT) (4 hrs/wk * 50 weeks)	\$30,000	\$19,000	\$15,000	Referral to a virtual provider		
Licensed Athletic Trainer (LAT) (16 hrs/wk * 50 weeks)	\$40,000	\$52,000	\$32,000	Referral to a virtual provider		
Additional Administration Costs	\$0	\$0	\$0	Included in PEPM fee		
Management Fee (Supplies)*	Included	Waived - \$0	Waived - \$0	Included in PEPM fee		
Labs	Pass through	Pass through	Pass through	Included in PEPM fee		
Pharmacy	Pass through	Pass through	Pass through	Included in PEPM fee		
Facility fee/Lease	\$0	\$0	\$12,000	N/A - Providers visit patients at home		
Estimated Total Cost	\$235,000	\$213,500	\$176,000	\$352,980		
Estimated Cost - City of Manitowoc = 33%	\$77,550	\$70,455	\$58,080	\$116,483		
Estimated Cost - Manitowoc Public School District = 67%	\$157,450	\$143,045	\$117,920	\$236,497		

### Clinic Services RFP Results

- The School District originally preferred the Prevea offer
- To aid in retaining the School District as a partner with the City and the Froedtert offer, Froedtert agreed to waive a Management Fee (\$24,000) and the City agreed to taking a higher % of costs (42% from current 33%) in the Manty Clinic

(Note: % share would be reviewed on an annual basis)

Vendor		Froedtert & COLLEGE of Wisconsin  Workforce Health
SUMMARY OF COSTS	Split = City 33% / MPSD 67%	Split = City 42% / MPSD 58%
Implementation Cost	\$0	Waived - \$0
Advanced Practice Provider (APP) (30 hrs/wk * 50 weeks)	\$165,000	\$142,500
Medical Assistant (MA) (30 hrs/wk * 50 weeks)	See note below	See note below
Physical Therapist (PT) (4 hrs/wk * 50 weeks)	\$30,000	\$19,000
Licensed Athletic Trainer (LAT) (16 hrs/wk * 50 weeks)	\$40,000	\$52,000
Additional Administration Costs	\$0	\$0
Management Fee (Supplies)*	Included	Waived - \$0
Labs	Pass through	Pass through
Pharmacy	Pass through	Pass through
Facility fee/Lease	\$0	\$0
Estimated Total Cost	\$235,000	\$213,500
Estimated Cost - City of Manitowoc	\$77,550	\$89,670
Estimated Cost - Manitowoc Public School District	\$157,450	\$123,830

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### Plan Year 2022 Recommendations

### Keep:

- Robin HealthPartners medical plan administration and its HealthPartners focused provider network
- Delta Dental of Wisconsin as dental plan administrator and dental provider network
- The current HDHP/HSA medical plan design in place
- Wellness Related
  - City HSA contribution at \$400 single/\$800 family as an incentive for participating in wellness programming
    - 2022 IRS HSA Contributions limits are . . .
       \$3,650 single (+\$50 from 2021)
       \$7,300 family (+\$100 from 2021)
  - Go365 Wellness platform and \$Bucks incentives
- Employee monthly contributions the same as current (\$22,045 from reserves)
- Continue City sponsored Manty Clinic access to no/low-cost care for covered employees and spouses
- 100% employee insurance funded plans (through NVA vision and Mutual of Omaha disability coverages)

### Plan Year 2022 Recommendations

### Change:

- Increase funding budget for PY 2022 5.18% with overage from current (\$169,580)
   drawn from City medical plan reserves; year-end 2020 reserves at \$1,009,367
- Clinic services vendor from Aurora to Froedtert/Holy Family
- EAP Vendors
  - Finalist presentations taking place (2 national EAP vendors)
  - Move from Aurora estimated to save City \$1500/\$1600 dependent on vendor selected

### Add:

Voluntary Critical Illness and Accident coverages insured through Mutual of Omaha

	CIA Ob	City Government	250-500 Employees	Midwest Region
Voluntary or Worksite Benefits				
Accident Coverage	N/A	68%	58%	62%
Critical Illness/Cancer Coverage	N/A	76%	57%	60%

USI 2021 Benchmark Study

# Questions?



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