





2018 Benefit Development: Premium Strategy

Board of Trustees

August 5, 2016

A Division of the Department of State Treasurer

Presentation Overview

- Wellness Premiums & Credits
- Base Premiums
- Board Discussion



Wellness Premiums & Credits



Future of Wellness Premium Credits

- Consider reducing the number of wellness activities and premium credits to one: Tobacco Attestation
 - Also expand attestation to include E-cigarettes in CY 2018
 - Previously, the FDA regulated cigarettes, cigarette tobacco, roll-your-own tobacco and smokeless tobacco, but in 2016, the FDA finalized a rule – Deeming Tobacco Products To Be Subject to the Federal Food, Drug, and Cosmetic Act – which extends the FDA's authority to include the regulation of electronic nicotine.
 - In North Carolina e-cigarettes are included in the definition of a tobacco product and are regulated.
 - The Plan's Tobacco Attestation should reflect the inclusion of e-cigarettes as regulated tobacco products.
- Credits eliminated: Primary Care Provider Selection and Health Risk Assessment
 - There is potential to address these activities through the Health Engagement Program



CY 2018 Potential Healthy Activities & Premium Credits

Healthy Activity	CDHP 85/15	Enhanced 80/20	Traditional 70/30
Non-Tobacco User or QuitlineNC Enrollment (applies to subscriber only, attestation regarding spousal tobacco use not required)	\$100	\$100	\$100
Primary Care Provider Selection	N/A	N/A	N/A
Health Assessment Completion	N/A	N/A	N/A
Total Credits Available	\$100	\$100	\$100

- Traditionally, the monthly premium credit for the tobacco attestation has increased by \$20 each biennium
 - Will need to consider a revised approach if the Plan moves to one credit to ensure the total credits available continue to increase over time
- Currently, members in the Enhanced 80/20 who do not earn any premium credits pay an additional \$80 per month on top of the \$24.20 base premium; however, members who complete all three activities earn credits totaling \$90 per month and pay \$14.20



Base Premiums



Why Implement a Base Premium on all Plans?

- Board members have expressed concern about further reducing benefits to offset cost growth and meet legislative mandates
 - Concern for cost increases being solely borne by sickest members
- Base premiums would add a fixed amount of premium to individual coverage in all plans
- Base premiums would spread cost growth among all members
 - Currently, about one-third of active employees pay no premium
 - Separately, 42% in the Enhanced 80/20 only pay the individual premium;
 which can be earned to \$14.20 per month
 - Premiums are pre-tax deductions versus many members paying out-ofpocket at the time of service
 - Premiums on individual coverage could partially offset growth of dependent premiums
- Provides additional options for structuring incentives, such as alternative network arrangements
- A premium free option would remain for retirees



Why Implement a Base Premium on all Plans? Continued

- This approach would have several benefits:
 - It would allow for future plan adjustments based on premium, in lieu of or in combination with to adjustments to cost sharing;
 - It could further engage membership in plan selection;
 - It could have the effect of spreading risk more effectively since the costs would be borne by both healthy and sick members



CDHP 85/15 Monthly Premium Comparison (CY 2016)

Plan	Total Premium	Employer Share	Employee Share	% of Premium Paid by Employer	Relative Value to Enhanced 80/20
Virginia PPO					
Employee-Only	\$634.00	\$543.00	\$91.00	86%	1.09
Family Coverage	\$1,690.00	\$1,427.00	\$263.00	89%	
NC CDHP 85/15					
Employee-Only	\$463.68	\$463.68	\$0.00	100%	1.08
Family Coverage	\$984.64	\$463.68	\$520.96	47%	
Tennessee PPO					
Employee-Only	\$658.30	\$539.80	\$118.50	82%	1.08
Family Coverage	\$1,711.60	\$1,403.51	\$308.09	82%	



Enhanced 80/20 Monthly Premium Comparison (CY 2016)

Plan	Total Premium	Employer Share	Employee Share	% of Premium Paid by Employer	Relative Value to Enhanced 80/20	
Kentucky CDHP						
Employee-Only	\$663.68	\$650.70	\$12.98	98%	1.01	
Family Coverage	\$1,591.52	\$1,291.54	\$299.98	81%		
NC Enhanced 80/	NC Enhanced 80/20					
Employee-Only	\$477.88	\$463.68	\$14.20	97%	1.00	
Family Coverage	\$1,163.10	\$463.68	\$699.42	40%		
Virginia HDHP						
Employee-Only	\$465.00	\$465.00	\$0.00	100%	0.96	
Family Coverage	\$1,265.00	\$1,265.00	\$0.00	100%		

Comparable plans to Enhanced 80/20 are Consumer Directed products.



Traditional 70/30 Monthly Premium Comparison (CY 2016)

Plan	Total Premium	Employer Share	Employee Share	% of Premium Paid by Employer	Relative Value to Enhanced 80/20	
Georgia HMO	Georgia HMO					
Employee-Only	\$616.59	\$445.91	\$170.68	72%	0.95	
Family Coverage	\$1,726.46	\$1,173.75	\$552.71	68%		
NC Traditional 70/30						
Employee-Only	\$463.68	\$463.68	\$0.00	100%	0.92	
Family Coverage	\$1,042.54	\$463.68	\$578.86	44%		
South Carolina CDHP						
Employee-Only	\$369.80	\$360.10	\$9.70	97%	0.86	
Family Coverage	\$1,006.04	\$893.04	\$113.00	89%		



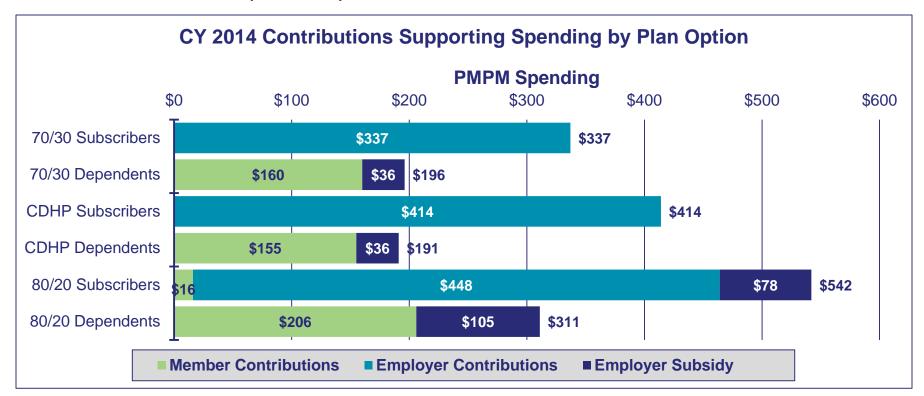
Base Premium Impact on Dependent Premiums

- Currently when the Board votes on premium increases it only impacts individual coverage on the Enhanced 80/20 and dependent coverage in all plans
 - Premium growth for individual coverage under the Enhanced 80/20 has typically been less than a dollar while the increase is much higher for dependent coverage
- Most states provide a higher subsidy for dependent coverage and in general, require some employee only premium level
- Options to offset increases to dependent coverage:
 - Additional funding from General Assembly (low Board control)
 - Reduce benefits
 - Add base premium for individual coverage



Premium Structure Subsidizes Dependent Coverage

- In 2014, the State (employer) contributed/paid \$448 per month for each active employee and non-Medicare retiree
 - In the Traditional 70/30 Plan and CDHP, average costs/spending for subscribers was less than the employer contribution
 - The difference between cost and contributions was used to subsidize Enhanced 80/20 subscribers and dependent premiums





Increase Base Premiums for Individual Coverage

- Establishing/increasing base employee/retiree premiums could leave more of the employer contribution to subsidize dependent premium costs
- Segal modelled two base premium scenarios:
 - Scenario 1: Add base premiums to allow for a 20% reduce to the dependent contribution
 - Scenario 2: Price the plan options based on actuarial value
- Segal assumed the following in their modeling:
 - A 5% increase in dependent membership is assumed as a result of the reduced dependent premiums
 - The model is revenue neutral for the State *i.e.*, the employer contributions would be equivalent to current forecasts



Monthly Base Premium Scenarios

Scenario 1: Add base premiums to allow for a 20% reduction to the dependent contribution

- Monthly Base Premium Increase Amount:
 - \$27 per subscriber

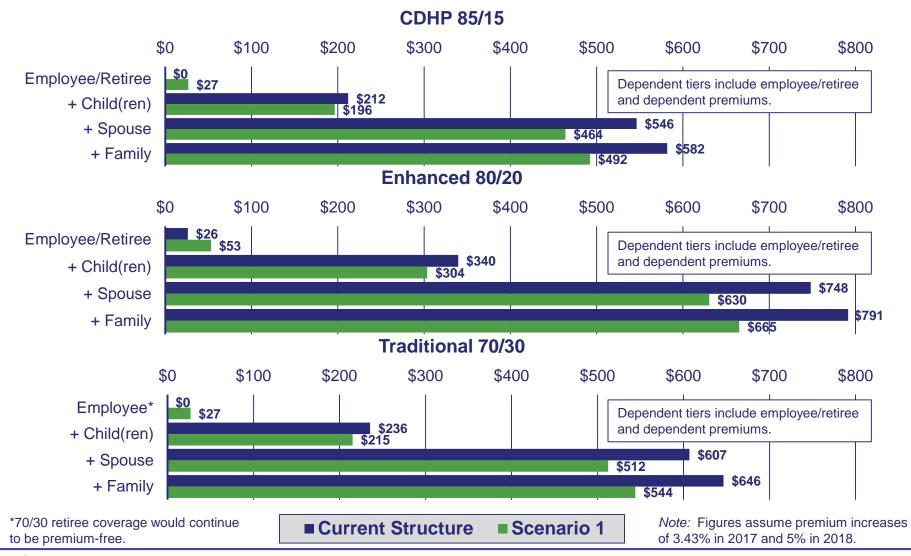
- Reduction in Monthly
 Dependent Contribution: 20%
- Strength: Significant reduction in dependent premiums
- Weakness: Doesn't clearly drive toward value-based plans

Scenario 2: Price the plan options based on actuarial value

- Monthly Base Premium Amount:
 - Traditional 70/30: \$10
 - Enhanced 80/20: \$30
 - CDHP 85/15: \$63
- Reduction in Monthly
 Dependent Contribution: 9.6%
- Strength: Prices plans on value
- Weakness: May drive people away from value-based plans

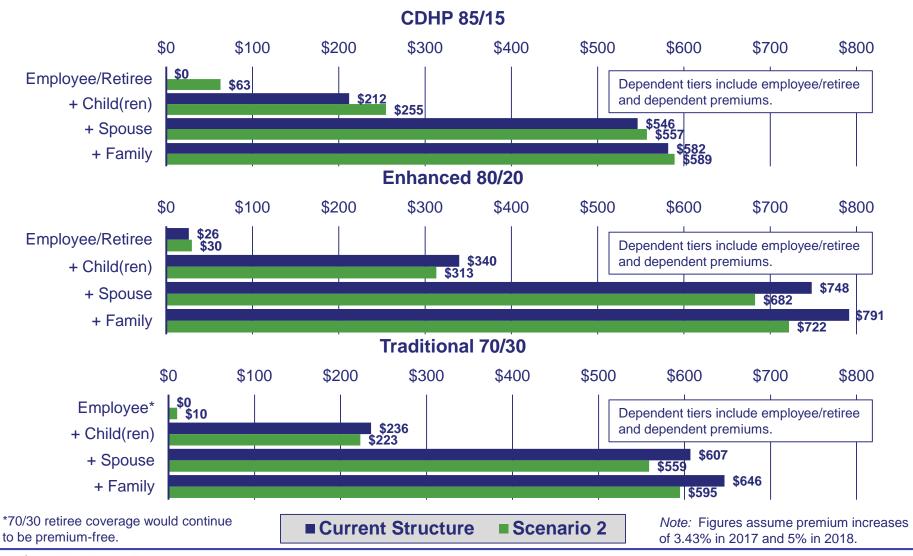


Scenario 1: Estimated Monthly Member Paid Premiums: CY 2018 Equivalent Employee/Retiree Premium Increases





Scenario 2: Estimated Monthly Member Paid Premiums: CY 2018 Employee/Retiree Premiums Based on Option Value





Questions to Board

- Should the Plan pursue a base premium strategy on all plans?
- Is there a dollar cap the Plan should pursue?
- Should the plans be priced based on actuarial value CDHP highest and Traditional 70/30 the lowest?
- Should the goal be to mitigate dependent premium growth?
- Is there an alternative approach to consider?
- Is the Board in favor of moving to only the Tobacco Attestation?
 - Is the proposed amount reasonable?

