Heber Public Utility District

Board of Directors

MEETING DATE: December 15, 2022

FROM: Laura Fischer, General Manager

INFORMATION ONLY: Regarding Employee Medical Benefit Cost Increase.

FISCAL IMPACT:

During the development and approval of the Fiscal Year 2022-2023 budget, staff estimated a 5% rate increase for employee medical benefits. According to our insurance carrier the actual increase is 6.43%. This is a total of \$1,238.25. This amount will change along with our employee demographics.

Staff does not anticipate a budget modification will be necessary. Our insurance carrier provided the attached documents for your consideration. These documents present an option to change insurance plans from a plan with a \$500 deductible to a \$750 deductible.

In order to change insurance plans, the Board will need to negotiate any change with the NRTA bargaining unit. At this time, staff does not recommend making any changes.

Respectfully Submitted,

Laura Fischer, General Manager



P.O. Box 9062 Oxnard, CA 93031

November 24, 2022

HEBER PUBLIC UTILITY DISTRICT FINANCING CORP 1078 DOGWOOD RD HEBER, CA 92249

It's time to renew your benefits. We've included everything you need to choose the right plan for your business.

Dear Valued Customer,

Thank you for entrusting us with your employees' healthcare. We remain committed to delivering whole-health benefits that meet your budget and help your employees live healthier, more productive lives. Our strong partnerships with leading providers and wide range of personalized plan options enable us to offer coverage to help your employees feel confident in their care.

We know how important it is to have a benefits plan that reflects both your financial objectives and the unique health needs of your employees. That's why this package includes everything you need to renew your current plan or select from a variety of other plans. It covers:

- The current rates and new renewal rates for your new proposed plan(s) are displayed on the Monthly Premium Comparison page. <u>Please provide a copy of the current and new renewal</u> rates to your employees. Anthem rates and benefits are subject to regulatory review and approval.
- Alternate medical plan options are displayed on Your Alternate Option and Medical Benefit Selection Form pages. Please review all of the plan details in this packet. For more information, you can visit EasyRenew at anthem.com/easyrenew or visit anthem.com/ca.
- Important benefit information and other inserts. Your medical plan(s) may have been amended or may no longer be available. Some of the changes may include new plan names, cost-sharing changes, benefit changes and metal level changes from the current plan(s). This information can be found in the 2022-2023 medical Benefit to Benefit Comparison chart. Please provide copies of these important documents to your employees.

High-quality programs to enhance your employees' total health journey and simplify administration for you

EmployerAccess

The EmployerAccess online tool and new mobile app allows you to manage employee benefits quickly and easily, 24/7. With just a few clicks, you can make changes in enrollment, check eligibility, or pay bills. EmployerAccess can help you work simpler and smarter. Your renewal packet is also available on our employer portal, EmployerAccess, at anthem.com 60 days prior to your renewal date.

Employee Assistance Program with Emotional Well-being Resources

The Employee Assistance Program (EAP) is included with all employees' medical plans and comes at no extra cost for the member and their household. The program helps employees when facing personal, financial, legal, or family challenges to access support programs and a network of licensed professionals. We also offer access to Emotional Well-being Resources, an online self-help tool that uses clinically proven models to help people manage stress, depression, anxiety, substance use, and sleep issues.



P.O. Box 9062 Oxnard, CA 93031

Employees can benefit from expanded access to services and resources, including 24/7 phone support, Psychologist or therapist visits through LiveHealth Online with an Anthem health plan and confidential counseling and guidance services.

Anthem Whole Health Plans

These are bundled plans that can help employees develop healthier habits, identify and support health conditions earlier, and explore cost-saving opportunities.

Embedded dental benefits include network diagnostic and preventive dental services covered at no cost, other dental services subject to a \$50 deductible, 20% coinsurance for basic services, and 50% coinsurance for major services and enhanced dental benefits for children and adults.

Embedded vision benefits include coverage of annual eye exams and coverage of materials.

Anthem Health Guide

Our Anthem Health Guide concierge service helps your employees navigate the healthcare system with confidence. Highly-trained health guides, backed by smart technology, create a simpler experience and offer extra support, including resources for comparing costs, finding in-network doctors, and accessing virtual care. Cancer support for employees and their families during treatment. Behavioral health support for employees and their families struggling with mental health, substance abuse, or other personal issues.

Consider integrating Anthem Specialty plans for more connected care

Adding dental, vision, life and/or disability to your medical coverage helps improve coordination, quality, and cost-effectiveness. Our Anthem Whole Health Connection® model is designed to present a fuller picture of employees' health by linking all aspects of their care together. This approach helps to identify issues earlier, bridge any gaps in care, and promote whole-person health. Your renewal may include a dental and/or vision quote if you have a minimum of 5 enrolled medical subscribers. However, additional plans and possibly better rates can be provided. Have your broker request a quote by contacting our Connect team at 877-567-1802 or connect@anthem.com. Click here for more Specialty Plan Information.

To make your renewal easier, you have a couple of options:

- Renew into the proposed plan you don't have to do anything! <u>Please review the proposed plan(s)</u> <u>carefully as the proposed plan(s) may have a different benefit design and/or be in a different metal level</u> than your current plan.
- Select an alternative plan we've given you a couple of different options to help you select the right plan(s) for your employees. If you choose one of the alternatives, all you need to do is complete the Medical Benefit Selection Form and return it to us no later than 30 days before your renewal date.
- Select an alternative plan that is not listed in your renewal alternative(s) –You also have the option to
 offer any available plan(s) you are eligible to purchase. If you choose one of these plans(s) all you need
 to do is complete the Medical Benefit Selection Form and return it to us no later than 30 days before your
 renewal date or work with your broker.
- NOTE for HMO plans: enrollment in the selected plan is dependent upon the employee residing or
 working within a plan's geographical service area, and the network, provider, and physician availability
 within the geographical service area. If at the time of enrollment, the network or physician/medical group
 is not available or an employee does not reside or work in the geographical service area of the plan, the
 employee may be assigned to or be required to choose a different provider, network, and/or plan.



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Still have questions?

Your broker can help you choose a plan for you and your employees, while also keeping your budget in mind. Or contact our Customer Service department at (855) 854-1429 Monday through Friday, 8:00 a.m. to 6:00 p.m., Pacific Standard Time.

We are privileged to serve as your trusted health partner. We will continue to work hard to control costs, simplify access, and help improve the overall health and well-being of your employees.

Thank you for your continued trust and confidence,

Your Anthem Small Group Team

Summary of Benefits and Coverage - The Affordable Care Act requires that all members of fully insured plans receive a copy of the Summary of Benefits and Coverage (SBC). Please access these at **sbc.anthem.com** and provide a copy to your employees.

Summary of Dental Benefits and Coverage Disclosure – CA State law requires that all members receive a copy of the Summary of Dental Benefits and Coverage (SDBC). Please access these at **sbc.anthem.com** and provide a copy to your employees.

Enclosures

ANTHEM'S BIG-PICTURE APPROACH

REIMAGINING WHAT IS POSSIBLE FOR EVERY MOMENT OF HEALTH

Renewal Packet

for HEBER PUBLIC UTILITY DISTRICT FINANCING CORP

Your Agent/Broker as of 11/08/2022 12:30 KEENAN & ASSOCIATES

Group #: H37703

Effective Date: February 01, 2023

Group State: California

Zip Code: 92249 Rating Area: 13



Life and Disability products underwritten by Anthem Blue Cross Life and Health Insurance Company.

Anthem Blue Cross is the trade name of Blue Cross of California. Anthem Blue Cross and Anthem Blue Cross Life and Health Insurance Company are independent licensees of the Blue Cross Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc.





Research tells us employees increasingly want holistic benefits from their employers, and show higher levels of productivity, loyalty, and well-being when they receive them. We can help your employees access the benefits they need, connect those benefits across the healthcare spectrum, and make informed healthcare decisions with digital tools and professional support.

Experience the value of connected benefits

Anthem Whole Health Connection[®] is a big-picture care model that integrates dental, vision, behavioral health, pharmacy, life, and disability benefits to make managing all aspects of care simpler, smarter, and more cost-effective.² This approach begins with using advanced technology and data to build more complete member health profiles. With that information, we are able to reach out to your at-risk employees with personalized, targeted interventions and resources. Then, our mobile app gives them real-time access to wellness programs and medical professionals who can help address health questions, concerns, and care gaps.

Anthem Whole Health Connection offers:

- Programs and incentives to motivate employees to take charge of their well-being.
- Engaged care management teams, including primary care doctors, dentists, and eye doctors, who can identify potential health issues and coordinate action plans and treatment.
- Digital tools to help employees connect to resources, receive alerts and updates, and make decisions.

By putting you and your employees at the center of a whole-person, team-based care model, we're transforming healthcare into a truly collaborative process.

- 1 Optum®/National Business Group on Health: Well-being and the employee experience white paper, based on survey of more than 2,000 employees (2018) www.optum.com/content/dam/optum3/optum/en/resources/case-studies/well-being_NBGH_final.pdf.
- 2 Anthem Whole Health Connection is included at no extra charge for employers with Anthem health and wellness coverage and one or more of the following plans from us: pharmacy, dental, vision, disability, and supplemental health.
- 3 Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP): Workplace Health Promotion: How CDC Supports a Healthy, Competitive Workforce (accessed May 2021); cdc.gov.
- 4 Academy of General Dentistry, Know Your Teeth: *Dral Warning Signs* (accessed April 2021): knowyourteeth.com. 5 Your Sight Matters: 7 *Health Problems Eye Exams Can Detect* (accessed March 2021): yoursightmatters.com.
- 6 Anthem, Integrated Medical and Dental Quantifying Value Study for Diabetes, Cardiovascular Disease, Cancer, and Organ Transplant Conditions, 2020.
- 7 Anthem 2020 data, February 2021,

Sydney Health is offered through an arrangement with Carelon Digital Platforms, a separate company offering mobile application services on behalf of your nealth nlan @2020-2022

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A digital guide to better health and clear plan information

sydney

The Sydney HealthSM mobile app empowers your employees to:

- Search for in-person or virtual care wherever they are.
- Text or video chat with a board-certified doctor.
- Order and refill prescriptions.
- Estimate and compare costs for common procedures.
- Easily access their member ID card on their smart devices.
- Check their recent claims history and confirm benefits.
- Find immediate answers to health questions through interactive chat or our Symptom Checker.
- Use My Health Records, where they can view, download, and share health records.

With Sydney Health, employees can keep track of their health and benefits in one convenient place.

Why connected care matters

Preventable chronic conditions, like diabetes and high blood pressure, are the leading drivers of insurance premiums, medical claims, and other employer healthcare costs, including more than \$36.4 billion lost annually because of absenteeism.3

- Regular dental and eye exams can help doctors find early signs of chronic health conditions.^{4,5}
- In 2020, enhanced dental benefits helped lower members' total medical costs by \$8,280.6
- In 2021, vision claims helped identify 32,213 members with diabetes.⁷

Effective Date: 02/01/2023

Your Medical Renewal Snapshot

Your current medical plan(s) and the new proposed plan(s) are reflected in the grid(s) below. All of our ACA-compliant plans cover Preventative Care at 100% in network. In-Network benefits are shown below. A complete listing of benefit details can be found on the Summary of Benefits at sbc.anthem.com. Or click on the plan name in electronic copies, then enter your renewal effective date into the top box of that page.

Total Medical Subscribers: 13

		Monthly Medical Premium 	Deductible (individual/ family)	Out of Pocket Maximum (individual/ family)	Office Visits PCP/SPC	Inpatient Hospital	ER/ Urgent Care	Prescription Drugs-Retail Network Formulary	Vision/ Dental Benefits Included
Current Plan 1	# OF SUBSCRIBERS ENROLLED IN PLAN: 13 Anthem Gold PPO 30/500/20% Contract Code: 6BP1 CalendarYear Embedded	\$19518.51 Current	\$500/ \$1500	\$7900/ \$15800	\$30/ \$60	Ded;20%	Ded;\$250; 20%/\$60	Rx Choice Tiered Network with R90 Select Level 1- \$10/ \$50/ \$90/ 30% up to \$250/script/ \$150 Ded Tier(s) 2-4 Level 2- \$20/ \$60/ \$100/ 40% up to \$250/script/ \$150 Ded Tier(s) 2-4	V2/ D1
Pronosed Plan 1	# OF SUBSCRIBERS ENROLLED IN PLAN: 13 Anthem Gold PPO 30/500/20% Contract Code: 6RG9 CalendarYear Embedded	\$20756.76 6.34%	\$500/ \$1500	\$7900/ \$15800	\$30/ \$60	Ded;20%	Ded;\$250; 20%/\$30	Rx Choice Tiered Network with R90 Select Level 1- \$10/ \$50/ \$90/ 30% up to \$250/script Level 2- \$20/ \$60/ \$100/ 40% up to \$250/script	V2/ D1

Note: In the Vision/Dental column, please refer to the following codes to call out additional vision and/or dental benefits included within the medical plan:

D1: Dental Embedded Pediatric Only

V2: Vision Embedded Adult Exam Plus Pediatric

Effective Date: 02/01/2023

Your Alternate Options

Here are some alternate plans to consider and discuss with your agent/broker. Other options are available, so please ask your agent/broker if you would like to see additional plan options. All of our ACA compliant plans cover Preventive Care at 100% in-network. In-Network benefits are shown below. A complete listing of benefit details can be found by clicking on the plan name below in electronic copies, then enter your renewal effective date into the top box of that page. Plan change forms/instructions can be found towards the end of this package.

Total Medical Subscribers: 13

	Alternate Options for Contract Code: 6RG9	Monthly Medical Premium % Change	Deductible (individual/ family)	Out of Pocket Maximum (individual/ family)	Office Visits PCP/SPC	Inpatient Hospital	ER/ Urgent Care	Prescription Drugs-Retail Network Formulary	Vision/ Dental Benefits Included
Alternate Option 1	# OF SUBSCRIBERS ENROLLED IN PLAN: 13 Anthem Gold PPO 30/750/20% Contract Code: 6RGS CalendarYear Embedded	\$20333.16 	\$750/ \$2250	\$8200/ \$16400	\$30/ \$55	Ded;20%	Ded;\$250; 20%/\$30	Rx Choice Tiered Network with R90 Select Level 1- \$10/ \$50/ \$90/ 30% up to \$250/script/ \$250 Ded Tier(s) 2-4 Level 2- \$20/ \$60/ \$100/ 40% up to \$250/script/ \$250 Ded Tier(s) 2-4	V2/ D1

Note: In the Vision/Dental column, please refer to the following codes to call out additional vision and/or dental benefits included within the medical plan:

D1: Dental Embedded Pediatric Only

V2: Vision Embedded Adult Exam Plus Pediatric

Effective Date: 02/01/2023

Monthly Premium Comparison Details (continued)

	Medical	Dental	Vision	Life & Disability	Grand Total
Current Premium	<i>\$19518.51</i>	\$0.00	\$0.00	\$0.00	\$19518.51
New Premium	\$20756.76	\$0.00	\$0.00	\$0.00	\$20756.76
Premium Rate Change	\$1238.25	\$0.00	\$0.00	\$0.00	\$1238.25
Premium Percent Change	6.34%	0%	0%	0%	6.34%

Please note that your total premium may change for various reasons, including but not limited to changes in your employee census, changes in your employees' tobacco use status where applicable, and changes to the ACA requirements. If your group has multiple products, changes made to coverage and/or participation levels may also result in the loss of any multi-product discounts.

Per the Affordable Care Act (or health care reform law), Summary of Benefits and Coverage (SBCs) can be accessed through our Internet Posting Site at sbc.anthem.com. The benefit information included in this packet is intended to present only a general overview of the benefits. The entire provisions of benefits and exclusions are contained in the Certificate of Coverage. In the event of a conflict between the Certificate of Coverage and the description included in this packet, the terms of the Certificate of Coverage will prevail.

H37703 Effective Date: 02/01/2023



Monthly Premium Rate and Product(s) Selected-Schedule B

Effective date of this Addendum is 12:01 a.m. on 02/01/2023.

This Addendum applies to the Employer and its affiliated companies as agreed to in writing by Anthem Blue Cross.

The Employer will pay a per Subscriber per month fee calculated by adding the sum of the rates for each of the Member categories (Subscriber, Spouse, up to 3 oldest Dependents 20 years and younger, and Dependents 21 years and over) set forth in the tables below:

Proposed Plan 1							Alternate Option 1					
Anthem Gold PPO 30/500/20% Contract Code: 6RG9 Rating Area: 13						Anthem Gold PPO 30/750/20% Contract Code: 6RGS Rating Area: 13						
Age	Rate	Age	Rate	Age	Rate	Age	Rate	Age	Rate	Age	Rate	
0-14	\$353.19	31	\$535.09	48	\$754.85	0-14	\$345.98	31	\$524.17	48	\$739.45	
15	\$384.58	32	\$546.17	49	\$787.63	15	\$376.73	32	\$535.02	49	\$771.56	
16	\$396.58	33	\$553.09	50	\$824.56	16	\$388.49	33	\$541.81	50	\$807.74	
17	\$408.59	34	\$560.48	51	\$861.03	17	\$400.25	34	\$549.04	51	\$843.46	
18	\$421.51	35	\$564.17	52	\$901.20	18	\$412.91	35	\$552.66	52	\$882.81	
19	\$434.44	36	\$567.87	53	\$941.83	19	\$425.58	36	\$556.28	53	\$922.61	
20	\$447.83	37	\$571.56	54	\$985.69	20	\$438.69	37	\$559.90	54	\$965.58	
21	\$461.68	38	\$575.25	55	\$1,029.55	21	\$452.26	38	\$563.52	55	\$1,008.54	
22	\$461.68	39	\$582.64	56	\$1,077.10	22	\$452.26	39	\$570.75	56	\$1,055.12	
23	\$461.68	40	\$590.03	57	\$1,125.11	23	\$452.26	40	\$577.99	57	\$1,102.16	
24	\$461.68	41	\$601.11	58	\$1,176.36	24	\$452.26	41	\$588.84	58	\$1,152.36	
25	\$463.53	42	\$611.73	59	\$1,201.75	25	\$454.07	42	\$599.24	59	\$1,177.23	
26	\$472.76	43	\$626.50	60	\$1,253.00	26	\$463.11	43	\$613.72	60	\$1,227.43	
27	\$483.84	44	\$644.97	61	\$1,297.32	27	\$473.97	44	\$631.81	61	\$1,270.85	
28	\$501.85	45	\$666.67	62	\$1,326.41	28	\$491.61	45	\$653.06	62	\$1,299.34	
29	\$516.62	46	\$692.52	63	\$1,362.88	29	\$506.08	46	\$678.39	63	\$1,335.07	
30	\$524.01	47	\$721.61	64+	\$1,385.04	30	\$513.32	47	\$706.88	64+	\$1,356.78	

Additional Fees or Charges:

Payment by Phone: \$10 NSF Charge: \$25 Late Payment Fee: \$25 Reinstatement Fee: \$50

The rates listed above may include charges for riders that have been purchased by the group. These additional charges are not applicable to the dependent rates. Please refer to your Monthly Premium Comparison page for dependent rates.

Anthem Blue Cross

Beth P Andersen, President

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