Exploring Healthcare Savings Through Medicare Advantage Plans

Webinar: June 27, 2022
Mark LaVigne, PhD
Deputy Director
NYSAC
Broome County Purchasing Alliance (BCPA)
In 2019, Broome County qualified and received NY Shared Services matching funds in the amount of $3.1 million. Through oversight and coordination by the Broome County Team, we were able to access a National Pharmacy Alliance and lower the county’s Rx costs by $3.1 million over an 8-month period, for a combined total savings of $6.2 million.

In 2021, Broome County and Statewide Purchasing Alliance of NY designed and pioneered a cooperative purchasing initiative for Medicare Advantage and Prescription Drug programs that generated $9.1 million dollars in premium savings to Entity’s participating in the BCPA.

In addition, most retirees in Plans 1 & 2 will receive lower copayments and out of pocket expenses through UHC’s improved Rx formulary – All generics are in tier 1 at $0 Copay. Our formulary also includes Bonus Drug list that includes drugs that are excluded by Medicare but commonly used by retirees.
Broome County, through the formation of this cooperative purchasing alliance, pools the purchasing power with other municipalities to reduce costs, risks, and future rate instability for retiree health coverage by securing competitive coverage and rates for entities participating in the BCPA - Medicare Advantage and Prescription Drug (MAPD) program. This cooperative purchasing initiative is referred to as the “Broome County Purchasing Alliance” (BCPA or Alliance). Broome County, through a formal RFP, selected MAPD coverage options through United HealthCare. The Alliance achieved an average annual savings of 26% which includes multi-year rate guarantees and better-quality coverage and services for our retirees, now and in the future.
2021 BCPA ACCOMPLISHMENTS

Success Stories
Projected 3-Year Savings

➢ Participating entities achieved 26% average annual savings
  • Broome County Saves $840,294
  • Chemung County MAPD – 3-Year Savings - $2,323,440
  • Chemung Shared Services Matching Funds at 95% - $772,179
  • Total Financial Impact $3,095,615
  • Tioga County MAPD – 3-Year Savings - $2,525,609
  • Tioga Shared Services Matching Funds at 95% - $816,078
  • Total Financial Impact $3,341,687
BCPA Sets the Standards for Excellence

Highest Quality Standards throughout the entire program including UHC’s

BCPA Dedicated Service Team - This program checks all the boxes.

✓ Offers one of UHC’s Top Group Coverage Options in NY
✓ Most generous formulary offered in NY
✓ Pooling purchasing power--not risk
✓ Saved $9.1 Million – Power of the Collective
✓ Designed to qualify for CWSSI Matching Funds
✓ Successfully pioneered Purchasing Platform to benefit all NY Municipalities
✓ Successfully transitioned all entities without a retiree issue
✓ Professionally Coordinated Onboarding, Implementation, and Open Enrollment
BCPA - Participation Requirements

➢ Minimum number of Medicare primary retirees is 25.

➢ Employer must have obligation to provide retiree coverage (i.e., Collective Bargaining Agreement) and contribute a minimum of 50% of premium costs.

➢ Employer may offer only one UHC plan to their retirees. Groups should submit the richest plan design offered in order to meet or exceed collective bargaining expectations. UHC requires complete take over of Medicare retirees and cannot be offered as option along side another carrier.
➢ Employer must pass a resolution by their governing board to participate in the BCPA Program effective 1/01/23. (Sample resolutions can be found on BCPA Website)

➢ Each Entity must submit a copy of the passed resolution, census of covered Medicare retiree population (Date of Birth, Gender, Zip Code), and current Summary Plan Description for their current plan design through the BCPA portal within the 8/01/22 deadline.
Designed to Eliminate Disruption

➢ BCPA provides 3 MAPD Plan Designs to choose from.

➢ Plans Designs were customized to meet or exceed existing coverage.

➢ Provider Network
  ➢ National Passive PPO Network or Open Network
    ➢ In Network - Any Doctor that Accepts Medicare and/or belongs to National Network

➢ Pharmacy Formularies
  ➢ Most extensive carrier formulary and specifically designed to meet and/or exceed current coverage
BCPA – Additional Benefits

➢ The benefits gained by smaller groups include a multiple-year rate guarantee, lower premiums, more competitive options, bonus coverages and provisions, only available to large groups. It is “The Best Practices in Purchasing” approach to securing quality retiree health coverage. The Alliance handles the entire process which may reduce your staff time. May also lower GASB Liability.

➢ The requirements to participate in this Alliance are designed to comply with CWSSI for eligibility in shared services matching grants if available. For 2022, the match will be 95% of first year savings.

➢ UHC provides dedicated service teams to handle Onboarding, Implementation, Retiree Meetings and Open Enrollment.
CWSSI - Eligibility

- Each County submits Shared Services Initiative.
- The Panel members from each County must approve and submit CWSSI paperwork by December 31st.
- Entities on the Panel can Opt Out of project--not required to participate on Medicare Advantage initiative.
- Towns, villages and cities are typically automatically included in Shared Services initiatives.
- Schools usually need be invited to participate on the Panel by the County Leader.
- Panel for each county determines how matching funds are to be distributed.
- For additional guidance, forms, and resources on the CWSSI go to: https://www.ny.gov/shared-services-initiative/forms-guidance-resources
BCPA Timelines

- Resolutions and Data Submission Deadline - 8/01/22
- BCPA/UHC Account Registration Deadline - 8/01/22
- Communications and Onboarding - 8/15/22
- BCPA and UHC Dedicated Service Team Meetings - 9/01/22
- Retiree Meetings (Virtual and On-site) 9/01/22 – 12/15/22
- Open Enrollment Meetings - 10/01/22 - 12/01/22
BCPA Program Highlights

Plan 1

- National Passive PPO
- $0 Copay Medical
- $0 - Generic, $5 Brand, $20 Specialty & Non-Preferred Brand
- All Generics $0 Copay
- 2 Copays for 90 Day Supply - Retail Pharmacy
- 1 Copay for 90 Day Supply – Mail Order
- $260 Monthly Premium
BCPA Program Highlights – cont-

➢ Plan 2

National Passive PPO
$10 Copay Medical
80%/20% on DME
$0 - Generic, $10 Brand, $20 Specialty & Non-Preferred Brand
All Generics $0 Copay
2 Copays for 90 Day Supply - Retail Pharmacy
1 Copay for 90 Day Supply – Mail Order
$240 Monthly Premium
BCPA Program Highlights – cont-

➢ Plan 3

National Passive PPO
$0 Copay Medical
$10 - Generic, $20 - Brand, $35 - Specialty & Non-Preferred Brand
3 Copays for 90 Day Supply - Retail Pharmacy
1 Copay for 90 Day Supply – Mail Order
$227 Monthly Premium
BCPA and Statewide Purchasing Alliance of NY
Contact Information: Spany.org

BCPA

Robin Laabs, Purchasing
Robin.laabs@broomecounty.us
607-778-2188

Tom Dellapenna, Risk and Insurance
Thomas.dellapenna@broomecounty.us
607-778-2311

SPANY

Douglas Bulman, President
dbulman@spany.org
607-222-1203
UnitedHealthcare Retiree Solutions

Broome County Purchasing Alliance

Medicare Advantage Overview
UnitedHealthcare Retiree Solutions

<table>
<thead>
<tr>
<th>A complete Medicare portfolio with a history of long-term rate stability</th>
<th>98% retention in Group Medicare Advantage since 2014</th>
<th>40+ years of Medicare experience</th>
<th>Experience with 645 plan sponsors</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>6.5 million</strong> Medicare Advantage members</td>
<td><strong>4.4 Million</strong> Medicare Supplement members</td>
<td><strong>3.7 Million</strong> Part D prescription drug plan members</td>
<td><strong>14.6 Million</strong> Total Medicare members served</td>
</tr>
</tbody>
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Market leadership

1M

UnitedHealthcare has grown Group Medicare Advantage membership by 1 million members since 2014.

#1

in Group and Individual Medicare Advantage market share.

Group MA/MAPD enrollment by carrier
January 2022

Total MA/MAPD enrollment by carrier
December 2021

We have averaged 98% client retention from 2014 to present.

CMS reported group Medicare Advantage membership data as of January 2021 and December 2013.
Our national PPO solution

- More than 890,000 contracted providers nationally
- Nationwide PPO solution covers all Medicare retirees regardless of where they live in the United States including U.S. territories
- Custom "passive" PPO plan design with same benefits and retiree cost share in and out-of-network
- No referrals required to see a Specialist & no PCP selection required to enroll
- Benefits travel with the retiree and the benefit experience stays the same across the U.S.
Benefit enhancements

- HouseCalls
- Member Rewards Program
- Renew Active Fitness
- Routine Podiatry
- UHC Hearing + Hearing Aid Discounts
- UHC Healthy At Home
High quality requires consistent innovation

100% of Group MA PPO members are in a 5 Star plan; a 4.5+ Star plan for five consecutive years and in a 4+ Star plan for ten years

A quality bonus is paid to plans that have 4 Stars or higher

Advanced outreach and timely interventions
Proactive engagement
Better outcomes yield increased savings
<table>
<thead>
<tr>
<th>Benefit Name</th>
<th>In Network Services</th>
<th>Out of Network Services</th>
<th>In Network Services</th>
<th>Out of Network Services</th>
<th>In Network Services</th>
<th>Out of Network Services</th>
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<tbody>
<tr>
<td>Annual Medical Deductible</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
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<td>Annual Medical Out-of-Pocket Maximum</td>
<td>$0</td>
<td>$0</td>
<td>$1,250</td>
<td>$1,250</td>
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<tr>
<td>Primary Care Physician Office Visit (includes Non-MD office visits)</td>
<td>$10</td>
<td>$10</td>
<td>$0</td>
<td>$0</td>
<td>$10</td>
<td>$10</td>
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<tr>
<td>Inpatient Hospital Stay</td>
<td>$0 Per Admit</td>
<td>$0 Per Admit</td>
<td>$0 Per Admit</td>
<td>$0 Per Admit</td>
<td>$0 Per Admit</td>
<td>$0 Per Admit</td>
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<tr>
<td>Outpatient Hospital Services</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
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<tr>
<td>Ambulance Services</td>
<td>$0</td>
<td>$0</td>
<td>$10</td>
<td>$10</td>
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<tr>
<td>Emergency Room (includes Worldwide coverage)</td>
<td>$0</td>
<td>$0</td>
<td>$50</td>
<td>$50</td>
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<tr>
<td>Urgent Care (includes Worldwide Coverage)</td>
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<td>$0</td>
<td>$25</td>
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<tr>
<td>Outpatient X-ray Services</td>
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<td>$10</td>
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<td>$0</td>
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**Part D Retail Copay**

*Note: 90 day retail supply is available for 2x copay amount*

| Tier 1: Generic                                  | $0                  | $0                      | $10                 | $10                     | $0                  | $0                      |
| Tier 2: Preferred Brand                          | $5                  | $10                     | $20                 | $20                     | $35                | $35                     |
| Tier 3: Non-Preferred Brand                      | $20                 | $20                     | $20                 | $20                     | $20                | $20                     |
| Tier 4: Specialty Tier                           | $20                 | $20                     | $20                 | $20                     | $20                | $20                     |

**Part D Mail Order Copay**

*Note: 90 day retail supply is available for 3x copay amount*

| Tier 1: Generic                                  | $0                  | $0                      | $20                 | $20                     | $20                | $20                     |
| Tier 2: Preferred Brand                          | $5                  | $10                     | $40                 | $40                     | $70                | $70                     |
| Tier 3: Non-Preferred Brand                      | $20                 | $20                     | $70                 | $70                     | $70                | $70                     |
| Tier 4: Specialty Tier                           | $20                 | $20                     | $70                 | $70                     | $70                | $70                     |
Thank you!
Questions?