

STATE OF WISCONSIN Department of Employee Trust Funds

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CORRESPONDENCE MEMORANDUM

DATE: July 31, 2009

TO: Group Insurance Board

FROM: Betty Wittmann, Manager

Optional Insurance Plans & Audits

SUBJECT: VSP Proposal and Open Enrollment

Staff recommends that the Board approve payroll deduction authorization for Vision Service Plan (VSP) to offer vision care benefits to active state and University employees, annuitants and their dependents effective January 1, 2010.

Background

Under authority granted to the Group Insurance Board (Board) by Wis. Stats. § 40.03 (6) (b) and pursuant to § 20.921 (1) (a) (3) and § ETF10.20, the Board is responsible for approving optional employee pay for all group insurance plans to be offered via payroll deduction. Proposals for new plans are reviewed under the Board's Guidelines for Optional Group Insurance Plans Seeking Group Insurance Board Approval for Payroll Deduction Authorization. Benefit Adoption Agreements are issued to the participating state agencies, not the Board.

VSP, a Fortune 500 company with over 50 years of experience in providing and administering vision care benefits is seeking authorization for payroll deduction. VSP has won customer service awards, and utilizes providers who offer full service benefits (exam and materials). In addition, their providers are credentialed to the National Committee for Quality Assurance (NCQA) standards. VSP's proposal requests to offer vision care benefits to active state and University employees, annuitants and their dependents effective January 1, 2010, with premium rates guaranteed through December 31, 2013.

The VSP plan will be voluntary for both agencies and individual employees. State agencies, the University of Wisconsin, or the Hospital and Clinics are not required to offer this plan to their employees. VSP intends to offer an open enrollment from October 5 to November 13, which will coincide with the Employee Reimbursement Account enrollment period. Employees and retirees enroll on a voluntary basis and pay the entire premium.

Reviewed and approved by Tom Korpady, Division of Insurance Services.							
Signature	Date						

Board	Mtg Date	Item #				
GIB	8/25/2009	6				

Discussion

Staff forwarded VSP's proposal to Deloitte Consulting, LLP (Deloitte) for evaluation (copy attached). Deloitte summarizes that VSP's rates are very competitive with OptumHealth's and its proposal meets the requirements outlined in the Board's guidelines. Detailed information regarding the premium rates is illustrated on page 2 of Deloitte's memo, and in the Staff's review below.

Staff has reviewed the proposal, and compared VSP's benefits to the current OptumHealth plan and would like the Board to note the following:

- VSP will administer the open enrollments for all state agencies, which will reduce
 the administrative burden experienced with the OptumHealth plan. The state
 agencies will only be responsible for entering the premium deductions and
 reporting to VSP all eligibility updates and changes, including new hire
 applications. In addition, VSP's enrollment process will greatly reduce the
 amount of our member's personal information that is reported to the plan.
- VSP will also administer open enrollments and all eligibility changes for the annuitant plan, and timely report enrollments to ETF in order to accommodate annuity deductions. In addition, VSP, unlike OptumHealth, can accommodate direct billing for annuitants not eligible for annuity deductions.
- VSP's premiums are competitive with OptumHealth as illustrated below (see full details on page 2 of Deloitte's memo):

2010 Monthly Premium Rates	VSP - Employee	/SP – Retiree*	OptumHealth
Employee Only	\$ 5.24	\$ 6.16	\$ 5.83
Employee & Spouse	\$ 10.49	\$ 12.32	\$ 11.34
Employee & Child(ren)	\$ 11.23	\$ 12.32	\$ 11.88
Employee & Family	\$ 17.93	\$ 14.50	\$ 17.82

*Annuitant premium rates are higher to accommodate personalized enrollment features (online and phone) that were not available through the OptumHealth program. These features will allow annuitants a more secure enrollment process along with instant confirmations.

- VSP's network is comprised mainly of private stand alone providers (66%);
 OptumHealth's provider network was primarily retail chain-based (80%). While this may be an adjustment for some members, VSP's reference checks have indicated subscribers report high provider satisfaction and 90% utilize in-network benefits. In addition, Staff analyzed VSP's provider list and found approximately 20% of VSP providers are also in OptumHealth's network.
- VSP's in-network benefits are comparable to those of OptumHealth: \$10 co-pay for exams, \$25 co-pay for materials, along with a \$130 retail frame allowance (\$50 wholesale) and \$105 elective contact lens allowance. In addition, VSP will include

polycarbonate lenses for children, no material co-pay for contact lenses, and in-network discounts. Staff compared the benefits and found they require their providers to offer a minimum of 200 frames and 50% of those must be covered in full at the \$130 retail allowance, reporting an average out-of-pocket cost of \$28.02 for any frame of choice. In addition, VSP's cost controlled pricing on the most popular lenses compares to the out-of-pocket costs experienced with OptumHealth.

 VSP's out-of-network benefits are slightly lower than OptumHealth's out-of-network benefits, as illustrated on page 2 of Deloitte's memo. This may present an issue for our participants, given the small percentage of OptumHealth providers who also qualify as in-network with VSP. However, the comparable in-network benefits and discounts offered by VSP should assist our participants in the transition.

Conclusion

Based on staff review and the attached Deloitte evaluation, Staff recommends approval of the VSP proposal. We believe this plan offers significantly better administration while remaining competitive on rates, benefits and provider availability.

Staff will be available at the meeting to answer any questions you may have regarding this proposal.

Attachments: Deloitte Consulting, LLP Memorandum

VSP Proposal



Deloitte Consulting LLP 111 S. Wacker Dr. Chicago, IL 60606 U.S.A.

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August 1, 2009

Ms. Betty Wittmann
Manager, Optional Plans & Audits
Division of Insurance Services
Department of Employee Trust Funds
801 West Badger Road
Madison, WI 53702

Re: VSP Proposal – Proposed 2010-2013 Vision Benefits

Dear Betty:

As requested by the State of Wisconsin Department of Employee Trust Funds, we have reviewed the proposal submitted by VSP to replace OptumHealth as a voluntary, payroll-deduction vision option for active state employee, eligible state retirees, and employees and dependents of the University of Wisconsin. VSP is proposing a four-year guarantee with comparable benefits to what OptumHealth currently offers the State of Wisconsin.

This memo summarizes our actuarial analysis of the proposed four-year premium rates, effective January 1, 2010 through December 31, 2013. We received a copy of the July 14, 2009 proposal from VSP, which is the basis for our analysis. We have evaluated VSP's rating methodology, calculated rates, and recent experience with a similar plan.

VSP Rating Methodology

VSP uses a per-participant-per-month claim cost development methodology, which is based on known costs and actual experience from similar existing clients of VSP. Rates are developed separately for the Employee and Retiree populations. VSP developed four-tier rates for these two populations for the following plan benefits:

- Exams/Lenses/Frames covered every 12/12/24 months
- \$10 Exam Co-pay / \$25 Materials Co-pay
- \$130 Retail Frame Allowance
- \$105 Elective Contact Lens Allowance

The following provides an overview of the rating methodology:

- Average Claim Cost and Claim Frequency was calculated for Employees/Retirees
- 5% of Claims Cost Risk Margin is added
- 10% of Gross Premium Administration Fee is added

 Add-on Admin Fees for Open Enrollment is added for both Employees and Retirees

We analyzed VSP's documentation supporting their premium rate development, and did not identify any calculation errors or any concerns about the methodology.

VSP Rates

The Resulting VSP Rates for Employees and Retirees along with the combined rates from OptumHealth are provided below:

2010 Monthly Premium Rates	VSP	- Employee	V.	VSP - Retiree		otumHealth
Employee Only	\$	5.24	\$	6.16	\$	5.83
Employee & Spouse	\$	10.49	\$	12.32	\$	11.34
Employee & Child(ren)	\$	11.23	\$	12.32	\$	11.88
Employee & Family	\$	17.93	\$	14.50	\$	17.82

When comparing the rates in the table above, it is important to recognize that the VSP rates are guaranteed for four years (2010-2013), while the OptumHealth rates represent the current (2009) rates. The following table summarizes the percentage change (from OptumHealth to VSP) in premium rates by tier for both Employees and Retirees:

VSP % Difference from OptumHealth	VSP - Employee	VSP - Retiree
Employee Only	-10.1%	5.7%
Employee & Spouse	-7.5%	8.6%
Employee & Child(ren)	-5.5%	3.7%
Employee & Family	0.6%	-18.6%

With VSP, the (non-Family) Employees will receive a rate decrease of approximately 6% to 10%, while the (non-Family) Retirees will receive an increase of approximately 4% to 9%. Employees with Families will receive a slight premium increase while Retirees with Families will receive close to a 19% rate decrease.

There are some Out-of-Network benefit differences in the proposed plans between VSP and OptumHealth which somewhat contribute to VSP's lower premium levels. Specifically, these Out-of-Network benefit differences include the following allowed reimbursement levels:

Out-of-Network Reimbursement	VSP	OptumHealth			
Lenses - Single Vision	\$33	\$40			
Lenses - Bifocal	\$50	\$60			
Lenses - Trifocal	\$66	\$80			
Lenses - Lenticular	\$80	\$80			
Contact Lenses - Elective	\$105	\$105			
Contact Lenses – Medically Necessary	\$210	\$210			

Given that a small percentage of the members' current In-Network providers with OptumHealth will qualify as In-Network providers with VSP, these reduced Out-of-Network benefits may be a

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more significant issue to those affected members. It is difficult to quantify the financial impact precisely, although we would not expect the benefit differences to materially affect the assessment of the reasonableness of VSP's proposed rates.

VSP Experience

VSP provided the following five year historical experience comparison for a "similar plan":

VSP 5-year Experience	}	Year 1 - 2008	,	Year 2 - 2007	Year 3 - 2006	1	Year 4 - 2005	,	Year 5 - 2004
Number of Participants		14,603,083		13,956,032	12,968,658		12,302,803		11,496,069
Annual Premium Income	\$	1,760,627,929	\$	1,637,226,598	\$ 1,507,073,487	\$	1,419,414,993	\$	1,310,307,700
Number of Claims		12,408,402		11,446,529	10,612,636		10,133,818		9,504,335
Amount of Claims	\$	1,765,128,433	\$	1,613,608,930	\$ 1,484,884,704	\$	1,387,070,604	\$	1,282,603,130
Monthly Premium per Participant	\$	10.05	\$	9.78	\$ 9.68	\$	9.61	\$	9.50
Monthly Claims per Participant	\$	10.07	\$	9.64	\$ 9.54	\$	9.40	\$	9.30
Loss Ratio		100.3%		98.6%	98.5%		97.7%		97.9%

It appears that VSP's recent Loss Ratio experience is fairly high for this block of business and well in excess of the State's 75% minimum standard.

Summary

Based on our review of VSP's four-year voluntary vision proposal, it appears that VSP is using appropriate methodology in their rate development and calculating their rates reasonably. Their 2010-2013 rates appear to be very competitive with OptumHealth's current 2009 rates, and they appear to be relatively consistent with their recent experience with a similar plan. We believe that VSP's proposal is reasonable and appears to be in line with State's guidelines. It provides adequate assurance that the plan design is sound and that the premium rates are reasonable in relation to the benefits provided.

Sincerely,

Timothy D. Gustafson, FSA, MAAA

Enclosure

cc: Eric Viney

Tim FitzPatrick