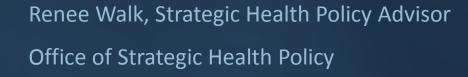
2019 Health Benefits & Agreement: Proposed Changes

GIB Item 4B





Informational item only

Board feedback is requested; no action required.



Prior change process

- Changes submitted via Study Group process
- Four month review of submissions
- Culminated in several day meeting
- Some key players missing from original process
- Short timeline for completion

Opportunities

ETF stakeholder group forums

- MC&E
- CHPI

Board request for earlier input

 More time to vet proposals Invested vendor partners

Early cost and impact analyses

Improved input process

Jan – Dec 2017:

ETF collects stakeholder inputs

January 2018:

Changes discussed at CHPI

March 2018:

MC&E reviews proposed changes













December 2017:

Health plans submit ideas

February 2018:

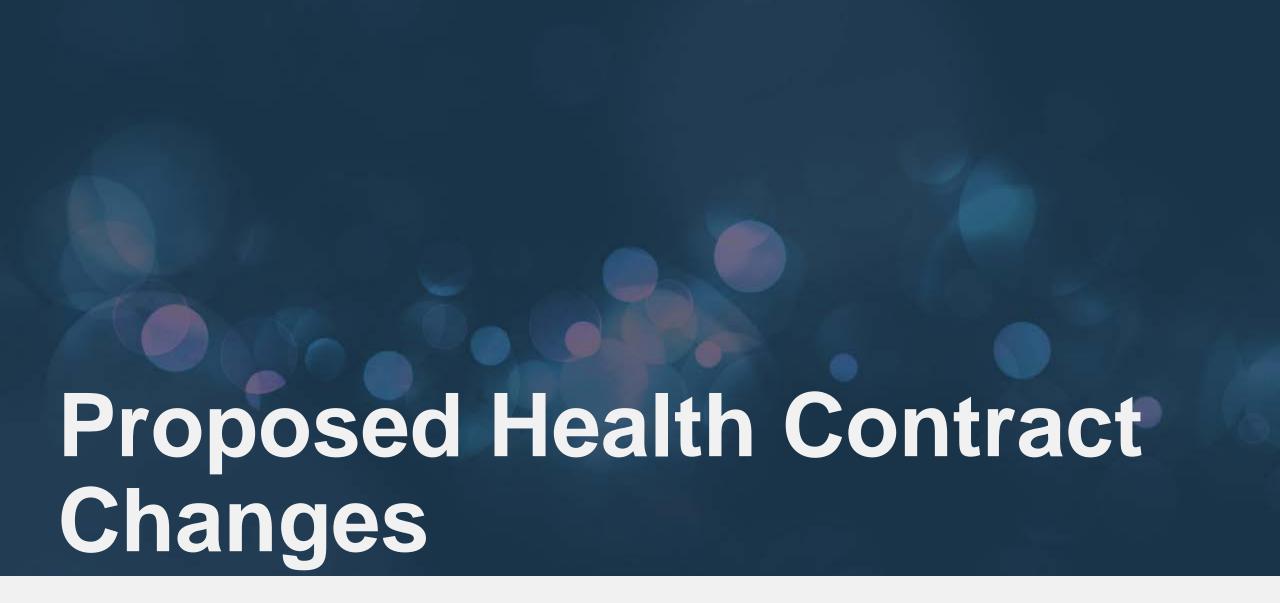
ETF presents initial proposals to GIB

May 2018:

Final changes presented to GIB







Proposed Modifications

Changes to Required Activities

- Performance standards enhancements
- Primary Care
 Provider
 requirement change to Primary Clinic
- Review of ETF Initiatives

Clarifications to Required Activities

- Telehealth / Nurseline Requirements
- Out-of-Area Student Coverage

Administrative & Technical Updates

- Remove reporting only applicable to self-insured program
- Other administrative and technical clarifications





Proposed Benefit Concepts

Coverage additions

- New telehealth service benefit
- Initial contact lenses for keratoconus
- Home sleep studies

Coverage modifications

- Single coinsurance rate (90/10 or 80/20)
- Remove copays from HDHP
- Extraction of impacted teeth only
- Simplify prior authorization limits for therapies

Coverage exclusions

- Skin tag removal
- Limit covered custom orthotics



Proposed Benefit Concepts

Simplify transplant language

- Defer to health plan clinical determination
- Remove authorization requirement for corneal transplants

Drugs administered in an outpatient setting

Clarify coverage under medical benefit

Clarify coverage of labs related to biometric screenings

• ETF working with plans to balance promoting wellness and appropriate screening intervals

Investigate coverage of bariatric surgery

- Requested to investigate addition for all members
- Health plans who cover are providing a fiscal impact estimate



Proposed Benefit Concepts

- Additional administrative clarifications
 - Increase plan compliance
 - Clarify presentation of schedule of benefits
- Additional cost savings initiatives in development



Proposed Pharmacy Change Concepts

Stand-alone Uniform Pharmacy Benefits

Value-based pharmacy benefit design

Increase cost-sharing for "DAW-1" drugs

Remove pharmacy out-of-pocket limits in non-HDHP

Explore maximizing MedicareRx subsidies





Pilot Proposal Process

Health plans submitted pilot program ideas in December

etc. ETF staff will review and discuss proposals with plans in March/April

error staff will bring any recommendations to the Board in May

Questions?

Thank you











608-266-3285