

**Staff Health Care Committee
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Benefits Overview

The overview of benefits focused only on our health benefits since that is what SHCC works on.

Premera is the provider of our medical, pharmacy and dental plans. They have a 24-hour nurse line for answering a whole range of questions. A voluntary disease management program offers personal health support to individuals with particular conditions such as asthma or diabetes.

A new travel benefit has been offered- aka Medical Tourism. If pre-approved for particular operations, travel for yourself and a care-provider companion to locations in the Northwest is covered. You must apply first using a simple application process.

VSP is the vision provider.

Wage works manages the flexible spending account. It has a \$2500 annual limit and is a "use it or lose it" account.

Bank of America is the vendor for the new Health Savings Account. The HSA must be used in conjunction with the consumer-driven high deductible health plan (CDHP) in order to satisfy pharmacy requirements. The HSA has a \$3250 annual contribution limit, but this account can build up and roll over annually and transfer with you if you change jobs.

Best Doctors is a referral program that offers a professional second opinion on treatment recommendations. Persons concerned about the necessity of a proposed operation may use this service.

Compsych is the employee assistance program. This is a personal counseling service for a whole variety of needs from legal advice to help coping with personal relationship struggles, loss or stress. Up to six sessions are free. There is web-based assistance too.

Epic provides a discount hearing program.

Quit For Life is a robust tobacco cessation service that provides a personal quit coach and medications to aid in ending tobacco use.

When the pharmacy plan moved to Premera there were some changes to how specific medications were ranked that affected some people's co-pay amounts. UA has no control over the tier placement of individual medications. The overall goal is to drive generic use as much as possible.

Update on RFPs

There is an RFP for a consumer advocacy service (such as Patient Care, a vendor many heard about before) to provide assistance to individuals trying to choose a health provider for particular operations or other medical needs. They help reduce first dollar costs by assisting with price comparisons—they also rate the health providers, so not the entire recommendation is based on cost.

Wellness Vendor

An intent to award went to Healthy Roads, but WIN for Alaska filed an injunction. Nothing is happening with either vendor until the legal process has taken its course.

Rates vs. Actuals review

Timothy and Erika explained the plan costs and recoveries for the past year.

In FY12 there were high claims and an under-recovery. Part of the under-recovery was because there was no tobacco surcharge, which didn't go into effect but was included in the plan cost projections. The goal for FY13 was to recoup 80% of that under-recovery. In actuality it was completely recovered with some surplus. Rates for FY14 are slightly decreased as a result.

Timothy and Erika also presented the 4th Quarter Utilization report as presented to the Joint Health Care Committee. There was a 10-11 percent enrollment in the new CDHP, a higher than expected rate for the new plan.

Use of generics is up to 75%, continuing an upward trend of utilization that started under Caremark, our former pharmacy provider. On the other end, specialty medicines drive up the cost. Just .09% of the pharmacy claims make up 21.3% of the cost.

Affordable Care Act Impacts

All of the UA plans are up to the standards of the ACA to date. There may be some administrative changes to the plan to help alleviate the impacts of the excise tax in the future, such as making our vision and dental plans an additional accepted benefit instead of an embedded benefit. (Something we could "opt-in to" for little or no additional cost, but would reduce the cost value of the base plan.)

Wellness Incentives

July 1 we will begin the first phase of wellness incentive program by gathering baseline biometric data on all plan participants.

JHCC will work closely with the vendor to oversee this process

Comparisons and Alternatives

The SHCC has been asked to review other university plans, or other institutional plans, to seek out potential cost-saving measures, potential wellness incentives or programs, or other fresh ideas for keeping plan rates as low as possible.