

Employee Benefits

Health Insurance Update April 28,2020



TRS Medical Updates– ActiveCare Plans



TRS trustees voted in February 2020 to select Blue Cross and Blue Shield of Texas . Blue Cross and Blue Shield of Texas (BCBSTX) and UnitedHealthcare (UHC) will take over administration of TRS' two health care programs.

The significant savings will improve the position of the TRS-ActiveCare and TRS-Care trust funds, aligning with TRS' strategy to ensure participants have high-value health care.

TRS Medical Updates– ActiveCare Plans



Re-Engineering TRS-ActiveCare: Benefit Enhancements

New	New	
Primary	Primary+	HD
<ul style="list-style-type: none">• -\$250 ind. deductible & -\$500 family• Co-pays only for PCP and specialists (no deductible or coinsurance)• Individuals only need to meet ind. deductible in child, spouse, & family tiers	<ul style="list-style-type: none">• Eliminated many copays, including outpatient surgery and ER (coinsurance after deductible only)• \$30 copay on therapies (↓ from \$70)• -\$1,000 ind. out-of-pocket max & -\$2,000 for families	<ul style="list-style-type: none">• Individuals now only need to meet ind. deductible in child, spouse, & family tiers

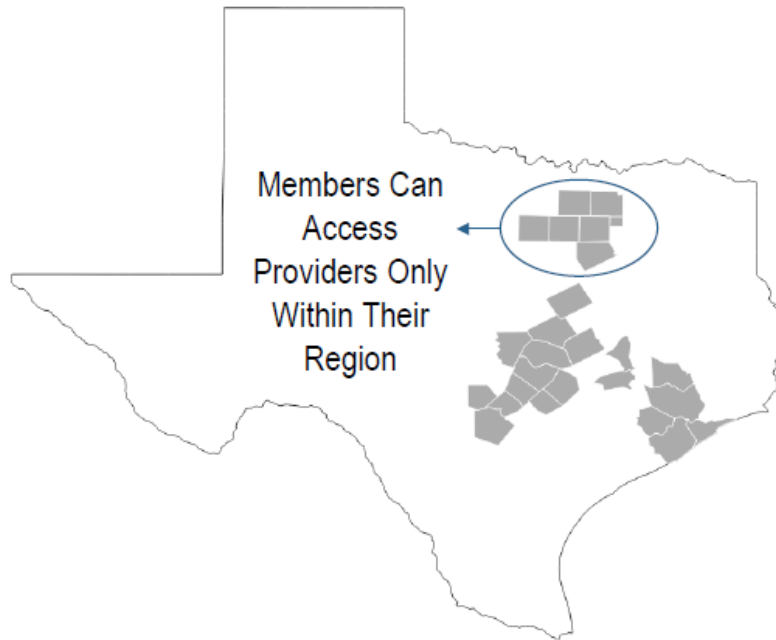
Primary compared to current version of TRS-ActiveCare 1-HD. No changes to AC-2 benefits. Additional details available in plan highlights document.

TRS Medical Updates– ActiveCare Plans

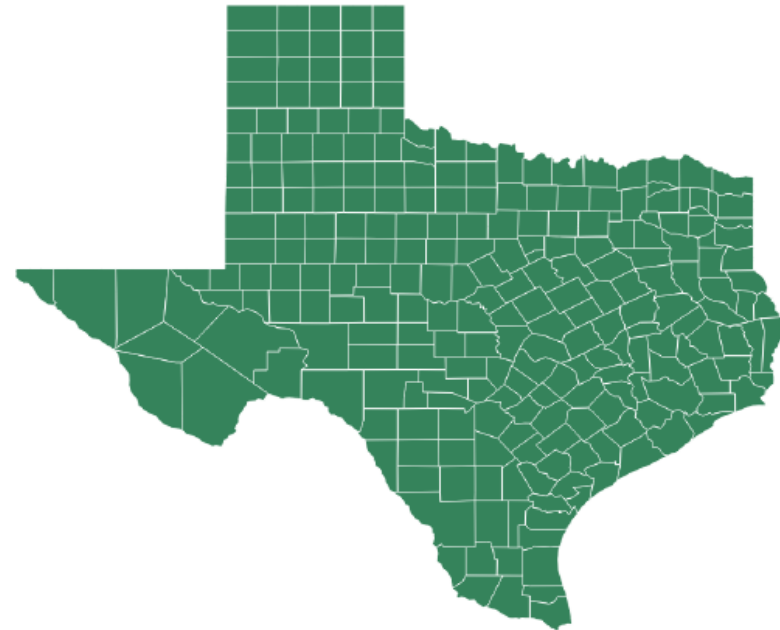


Re-Engineering TRS-ActiveCare: Primary Plus, The New Select

Current Select ACO Regions



Statewide Network in New Primary Plans





TRS Medical Updates– ActiveCare Plans

TRS-ActiveCare: Rate Changes for Existing Plans 2020-21

	FY 2021 Total Monthly Premium	Change from 2020	Median Participant Contribution**
TRS-ActiveCare-HD			
Employee Only	\$397	+\$19	\$80
Employee & Spouse	\$1,120	+\$54	\$803
Employee & Children	\$715	-\$7	\$390
Employee & Family	\$1,338	-\$77	\$1,013
TRS-ActiveCare-2			
Employee Only	\$937	+\$85	\$620
Employee & Spouse	\$2,222	+\$202	\$1,905
Employee & Children	\$1,393	+\$126	\$1,068
Employee & Family	\$2,627	+\$238	\$2,302

**Based on median district contribution received by employees in 2019-20 plan year. This was \$317 for employee only and employee-child tiers and \$325 for others. Max participant contribution = FY2021 total premium - \$225.

TRS Medical Updates– ActiveCare Plans



Re-Engineering TRS-ActiveCare: Rates

		FY 2021 Total Monthly Premium	Change from 2020*	Median Participant Contribution**
New	TRS-ActiveCare-Primary			
	Employee Only	\$386		\$69
	Employee & Spouse	\$1,089		\$772
	Employee & Children	\$695		\$370
	Employee & Family	\$1,301		\$976
New	TRS-ActiveCare-Primary+			
	Employee Only	\$514	-\$42	\$197
	Employee & Spouse	\$1,264	-\$103	\$947
	Employee & Children	\$834	-\$68	\$509
	Employee & Family	\$1,588	-\$130	\$1,263

*Based on comparisons to TRS-ActiveCare Select, 2019-20 plan year

**Based on median district contribution received by employees in 2019-20 plan year. This was \$317 for employee only and employee-child tiers and \$325 for others. Max participant contribution = FY2021 total premium - \$225.

TRS Medical Updates– ActiveCare Plans



TRS-ActiveCare: Benefits Summary

Benefit	Primary	HD	Primary+
Ind. Med Deductible	\$2,500	\$2,800 (+\$50)	\$1,200
Rx Deductible	Integrated w/ medical	Integrated w/ medical	\$200
Coins	30%	20%	20%
Ind. In-Network MOOP	\$8,150	\$6,900 (+\$150)	\$6,900 (-\$1,000)
PCP	\$30	Deductible, 20%	\$30
Spec	\$70	Deductible, 20%	\$70
Therapy	\$30	Deductible, 20%	\$30 (-\$40)
Generic Rx	\$15	Deductible, 20%	\$15
Pref Brand Rx	Deductible, 30%	Deductible, 25%	Deductible, 25%
Non-Pref Brand Rx	Deductible, 50%	Deductible, 50%	Deductible, 50%
Specialty Rx	Deductible, 30%	Deductible, 20%	Deductible, 20%

No changes to AC-2 benefits. Additional details available in plan highlights document.

TRS Updates– HMO

Gross Rates Listed– State and District Contributions **NOT** included.

Scott & White Health Plan

Coverage Tier	Current FY 2020 Gross Premium Rates	Proposed FY 2021 Gross Premium	Average Percent Change
Employee Only	\$558.54	\$551	-1%
Employee and Spouse	\$1,306.58	\$1,382	5.4%
Employee and Children	\$876.76	\$884	1%
Employee and Family	\$1,457.28	\$1,479	1.5%

Remember – HMO Networks are limited geographically.
Plan availability is determined by employee address.

Medical Plan Options



February

- TRS Summit – Outlined steps to consider medical plan options
- Denton Isd obtained Medical Loss Runs from Gabriel, Roeder, Smith and Company Health and Welfare Consulting, LLC (GRS)

March

- Board approved WTPS Purchasing Cooperative

April

- Board Approved Amendment to District of Innovation
- FBS bid our data to procure Medical Plan options for 2020-2021



Medical Plan Options



Representatives:

Richard Peace

Russ Edwards





Texas Schools Health Benefits Program (TSHBP)

2020-2021
PLAN SUMMARY



Texas School Health Benefits Summary

District Contributory \$260

TRSAC – Aetna (2019-2020)	Employee Only	Employee Child	Employee Spouse	Employee Family
TRS/ActiveCare 1 HD	\$118	\$462	\$806	\$1,155
Baylor Scott & White	\$299	\$617	\$1,047	\$1,197
TRS/ActiveCare Select Plan	\$296	\$641	\$1,107	\$1,458

TRSAC – BCBS (2020-2021)	Employee Only	Employee Child	Employee Spouse	Employee Family
TRS/ActiveCare 1 HD	\$137	\$455	\$860	\$1,078
Baylor Scott & White	\$291	\$624	\$1,125	\$1,219
TRS/ActiveCare Primary	\$126	\$435	\$829	\$1,041
TRS/ActiveCare Primary Plus	\$254	\$574	\$1,004	\$1,328

TSHBP (2020-21)	Employee Only	Employee Child	Employee Spouse	Employee Family
HD Health Plan	\$82	\$391	\$712	\$1,032
CoPay Plan	\$237	\$535	\$991	\$1,290

Monthly Variance from 2019-2020 Plan

TRSAC – BCBS (2020-2021)	Employee Only	Employee Child	Employee Spouse	Employee Family
TRS/ActiveCare 1 HD	\$19	\$-7	\$54	\$-77
Baylor Scott & White	\$-8	\$7	\$78	\$22
TRS/ActiveCare Primary Plus*	\$-42	\$-67	\$-103	\$-130

TSHBP (2020-21)	Employee Only	Employee Child	Employee Spouse	Employee Family
HD Health Plan	\$-36	\$-71	\$-94	\$-123
CoPay Plan	\$-59	\$-106	\$-116	\$-168

*Compared to TRSAC Select 2019-2020

Note: TRS/ActiveCare Primary (new plan) not shown since is not comparable to 2019-20

Annual Variance from 2019-2020 Plan

TRSAC – BCBS (2020-2021)	Employee Only	Employee Child	Employee Spouse	Employee Family
TRS/ActiveCare 1 HD	\$228	\$-84	\$648	\$-924
Baylor Scott & White	\$-96	\$84	\$936	\$264
TRS/ActiveCare Primary Plus*	\$-504	\$-804	\$-1,236	\$-1,560

TSHBP (2020-21)	Employee Only	Employee Child	Employee Spouse	Employee Family
HD Health Plan	\$-432	\$-852	\$-1,128	\$-1,476
CoPay Plan	\$-708	\$-1,272	\$-1,392	\$-2,016

*Compared to TRSAC Select 2019-2020

Note: TRS/ActiveCare Primary (new plan) not shown since is not comparable to 2019-20

Denton ISD TRS-ActiveCare and TSHBP Plans

	Texas Schools Health Benefits Program HD	TRS ActiveCare HD	Texas Schools Health Benefits Program CoPay	TRS ActiveCare Primary	TRS ActiveCare Primary+	Baylor Scott & White
Network	National	National	National	Statewide Only	Statewide Only	Regional
Primary Care Provider Required	No	No	No	Yes	Yes	Yes
PCP Referral to Specialist Required	No	No	No	Yes	Yes	Yes
Ind. Med Deductible	\$3,000	\$2,800	\$3,500	\$2,500	\$1,200	\$950
Rx Deductible	Integrated w/ medical	Integrated w/ medical	None - \$0	Integrated w/ medical	\$200	\$150
Coinsurance	None	20%	None	30%	20%	20%
Ind. In-Network MOOP	\$3,000	\$6,900	\$3,500	\$8,150	\$6,900	\$7,450
PCP	Deductible, the Plan pays 100%	Deductible, 20%	\$35	\$30	\$30	\$20
Specialist	Deductible, the Plan pays 100%	Deductible, 20%	\$35	\$70	\$70	\$70
Emergency Care	Deductible, the Plan pays 100%	Deductible, 20%	\$500 Copay	Deductible, 30%	Deductible, 20%	\$500 Copay after Deductible
Generic Rx	Deductible, the Plan pays 100%	Deductible, 20%	\$0 / \$10	\$15	\$15	\$5
Pref Brand Rx	Deductible, the Plan pays 100%	Deductible, 25%	\$35 or 50% (max \$100)	Deductible, 30%	Deductible, 25%	Deductible, 30%
Non-Pref Brand Rx	Deductible, the Plan pays 100%	Deductible, 50%	\$70 or 50% (max \$200)	Deductible, 50%	Deductible, 50%	Deductible, 50%
Specialty Rx	Not Covered	Deductible, 20%	Not Covered	Deductible, 30%	Deductible, 20%	Tier 1 and 2 – 15% after drug deductible Tier 3 - 25% after drug deductible
Specialty Rx Note	Funding for 90 Days. Patient Asst and Copay Asst		Funding for 90 Days. Patient Asst and Copay Asst			
Monthly Rates without district contribution of \$260						
Employee Only	\$342	\$397	\$497	\$386	\$514	\$551
Employee Child	\$651	\$715	\$795	\$695	\$834	\$884
Employee Spouse	\$972	\$1,120	\$1,251	\$1,089	\$1,264	\$1,382
Employee Family	\$1,292	\$1,338	\$1,550	\$1,301	\$1,588	\$1,479
Annual Premium plus Maximum Out-of-Pocket						
Employee Only	\$7,104	\$11,664	\$9,464	\$12,782	\$13,068	\$14,062
Employee Family	\$24,504	\$29,856	\$29,100	\$31,912	\$32,856	\$32,642

Voluntary Benefits

Board Approved the following on February 25, 2020

- Health Savings Account
- MASA Emergency Transportation
- Dental Cigna
- Vision
- Basic Life

Open Enrollment

- Open Enrollment
 - Denton ISD's benefits open enrollment will begin on July 15.
- Passive Enrollment
 - Employees who do not choose to make changes in plan coverage will not be required to enter enrollment portal
 - Evergreen language included in Section 125 of IRS code for Flexible spending account amounts

2020 Looking Ahead

Continued collaboration with FBS with
implementation of retirement savings benefits:

457 plans / 403b offerings

Coordinated Wellness initiatives