

## FY23 cost share rates approved; Open Enrollment May 2-13

Levy Court has decided to once again renew County health insurance coverage with Delaware Valley Health Trust/Aetna and retain the current 7%/20% cost share for employee/dependent health insurance for the 2022-23 plan year. Commissioners also agreed to keep the same plan design with integrated HRA

The overall premium quoted by DVHT/Aetna for the fifth year renewal increased 1.98% and that has slightly impacted the monthly cost share paid by full-time employees and eligible retirees, due largely to a 3.15% increase (down from +9.1% last year) in the Rx portion of the overall premium. The cost share for eligible retirees from active service age 65 or more remains at \$0.

The Levy Court will continue to self-fund the integrated HRA – meaning that the \$5,000 single/\$10,000 family deductible is fully paid by the County for in-network and out-of-network expenses. DVHT will continue to offer the Vision Benefits of America plan, Healthcare Bluebook, and the popular wellness programs.

Employees & retirees will see higher health insurance premium deductions beginning June 1.

<b>FY2023</b> <b>(July 1, 2022 – June 30, 2023)</b>	<b>Employee/Retiree</b>	<b>Employee &amp; Spouse</b>	<b>Employee &amp; Child(ren)</b>	<b>Employee &amp; Family</b>
<i>PPO 100%/Modified HRA – High</i> <b>DVHT – Aetna</b> <i>7% employee &amp; 20% dependents</i>	Employee pays <b>\$89.80/month</b> (+1.74/mo.)	Employee pays <b>\$423.34/month</b> (+\$8.20/mo.)	Employee pays <b>\$243.74/month</b> (+\$4.72/mo.)	Employee pays <b>\$551.62/month</b> (+\$10.68/mo.)
<i>PPO 90%/Modified HRA – Low</i> <b>DVHT - Aetna</b> <i>7% employee &amp; 20% dependents</i>	Employee pays <b>\$84.88/month</b> (+1.64/mo.)	Employee pays <b>\$400.14/month</b> (+\$7.68/mo.)	Employee pays <b>\$229.44/month</b> (+\$3.48/mo.)	Employee pays <b>\$521.40/month</b> (+\$10.00/mo.)
<i>PPO \$0 Medicare–(retirees 65+)</i> <b>DVHT – Aetna</b> <i>\$0 retiree &amp; 20% dependent</i>	Retiree pays <b>\$0.00/month</b>	Retiree pays <b>\$166.20/month</b> (+\$3.62/mo.)	<i>Retiree 65+, but</i> <i>Dependent &lt;65</i> <i>=</i> \$256.58/month	<i>Retiree &lt;65, but</i> <i>Dependent 65+</i> <i>=</i> \$253.88/month

An RFP has been issued for employee/retiree dental insurance, life insurance, long term disability insurance, voluntary life insurances, and other coverages with a due date of April 13. Commissioners are scheduled to review the RFP results at the Administration Committee meeting on April 19 and hopefully make a final decision on April 26.

Open enrollment is scheduled for May 2 – May 13, 2022, which is the only time employees can make changes to their health plan, dental plan, optional life insurance, long term disability, and section 125 plans including the flexible spending accounts with the exception of qualifying event occurring mid-plan year. No action is required unless a coverage change is needed.

Since this is renewal of the existing DVHT health insurance program, no employee/retiree health insurance information meetings have been scheduled. Employees wishing to add dependents or coverages including Section 125 eligible plans can do so by submitting applicable forms to the Personnel office by May 13.

If you have questions or concerns, please contact the Personnel Office for more information.

(Posted 04/13/22)

## KENT COUNTY MEDICAL PLAN INFORMATION (July 1, 2022)

PLAN OPTION AVAILABLE: Delaware Valley Health Trust utilizing the Aetna provider network.  
(Descriptions are only representative. Summary plan documents available in the Personnel Office)

**REMEMBER TO: Ask provider if accepts Aetna & inform provider that your employer pays the full cost of the applicable HRA deductible.**

1. **HDHP HRA \$5,000/\$10,000 PPO 100%** option: HIGH plan - A Preferred Provider Organization plan (Aetna Open Choice PPO) paying 100% of costs in network with \$10 copayment for primary care physician visits, \$20 copayment for specialists, and \$10 generic, \$25 brand name, and \$75 non-formulary prescriptions (90-day supply available at 2Xcopay). Emergency room copay is \$150 per visit. Urgent Care facility copay is \$50 per visit. Chiropractic care has 30 visits per plan year limit. Services outside of the Aetna national provider network are covered at 80% after deductible, employee pays 20% co-insurance.

HRA component is fully funded (self-insured) by the County. The County will pay the first \$5,000 of expense annually up to a maximum of \$10,000 for spouse/children/family aggregate deductible for hospital stays including semiprivate room & board, physician & surgeon services, and related professional services, laboratory services, imaging services, high tech radiology, chiropractic care, radiation therapy and chemotherapy, outpatient surgery and anesthesia, ambulatory surgical center, ambulance, maternity and related services, mental health inpatient and intensive outpatient care, inpatient private duty nurse, durable medical equipment, skilled nursing facility, and home health care.

Aetna will process all claims and apply negotiated allowable charges with providers, then invoice the County for HRA services within the deductibles. DVHT pays first dollar (full cost) of primary care and specialist services, preventive medical services, prescriptions, emergency room services, and urgent care.

Employees must pay for routine (non-diagnostic) laboratory tests, and normal copayments for services and prescriptions, with no deductible or co-insurance except for certain services. Quest & LabCorp are in-network.

2. **HDHP HRA \$5,000/\$10,000 PPO 90%** option: LOW plan - A Preferred Provider Organization plan (Aetna Open Choice PPO) paying 90% of costs in network with \$20 copayment for primary care physician visits, \$40 copayment for specialists, and \$20 generic, \$60 brand name, and \$80 non-formulary prescriptions (90-day supply available at 2Xcopay). Emergency room copay is \$250 per visit. Urgent Care facility copay is \$50 per visit. Chiropractic care has/30 visits per plan year limit. Services outside of the Aetna national provider network are covered at 70% after deductible, employee pays 30% co-insurance. Under the LOW plan, most medical, surgical, hospital, maternity, chiropractic, behavioral, ambulance, laboratory services, (etc.) require employee to pay 10% co-insurance in network or 30% out of network.

HRA component is fully funded (self-insured) by the County. The County will pay the first \$5,000 of expense annually up to a maximum of \$10,000 for spouse/children/family aggregate deductible for hospital stays including semiprivate room & board, physician & surgeon services, and related professional services, laboratory services, imaging services, high tech radiology, chiropractic care, radiation therapy and chemotherapy, outpatient surgery and anesthesia, ambulatory surgical center, ambulance, maternity and related services, mental health inpatient and intensive outpatient care, inpatient private duty nurse, durable medical equipment, skilled nursing facility, and home health care in addition to any co-payment or co-insurance requirements.

Aetna will process all claims and apply negotiated allowable charges with providers, then invoice the County for HRA services within the deductibles.

Employees must pay full cost of routine (non-diagnostic) laboratory tests, applicable co-insurance, and copayments for services and prescriptions, except for certain services. Quest & LabCorp are in-network.

3. **Aetna PPO \$0 Medicare Supplement** option - A PPO type Medicare supplement that pays Part A and Part B deductibles and normal 20% coinsurance for Medicare eligible treatment. Prescription copayment costs are \$10 for generic, \$25 brand name, and \$75 for non-formulary with no annual maximum. This option is fully insured and mandatory for all retirees age 65 & over. Prescriptions are provided under this option, so Medicare Part D coverage is not needed, but Medicare Part A & B are required.

Below is the monthly employee cost for individual, & optional family, child and spouse coverages:

<b>FY2023 (July 1, 2022 – June 30, 2023)</b>	<b>Employee/Retiree</b>	<b>Employee &amp; Spouse</b>	<b>Employee &amp; Child(ren)</b>	<b>Employee &amp; Family</b>
HDHP/HRA PPO100/80– <i>High</i> Aetna Open Choice PPO	Employee pays <b>\$89.80/month*</b>	Employee pays <b>\$423.34/month</b>	Employee pays <b>\$243.74/month</b>	Employee pays <b>\$551.62/month</b>
HDHP/HRA PPO 90/70– <i>Low</i> Aetna Open Choice PPO	Employee pays <b>\$84.88/month</b>	Employee pays <b>\$400.14/month</b>	Employee pays <b>\$229.44/month</b>	Employee pays <b>\$521.40/month</b>
PPO \$0 – (Medicare sup) Aetna Open Choice PPO	<b>\$0.00/month</b>	<b>\$166.20/month</b>	<i>*retiree 65+, but dependent &lt;65 = \$256.58</i>	<i>*retiree &lt;65, but dependent 65+ = \$253.88</i>

County contributes 80%/month toward dependent coverage (all employees/retirees under 65 pay 7%/month)  
\*Employees & Retirees waiving County health insurance coverage receive \$100 per month medical cashback.

**DELAWARE VALLEY HEALTH TRUST (Aetna) MONTHLY PREMIUMS July 1, 2022 – June 30, 2023**  
FY2023 (Rates billed monthly to Kent County Levy Court)

<b>Coverage Type</b>	<b>Employee</b>	<b>Employee &amp; Spouse</b>	<b>Employee &amp; Child</b>	<b>Family</b>
DVHT HRA HDHP PPO 100/80 (HIGH)- <b>phantom rate</b>	\$1,282.86	\$2,950.55	\$2,052.54	\$3,591.97
DVHT HRA HDHP PPO 90/70 (LOW)- <b>phantom rate</b>	\$1,212.51	\$2,788.80	\$1,935.34	\$3,395.06
DVHT premium# HIGH plan	\$1,132.20	\$2,604.04	\$1,811.49	\$3,170.12
DVHT premium# LOW plan	\$1,061.85	\$2,442.29	\$1,698.97	\$2,973.21
DVHT Premium# Medicare Supplement	\$820.36	\$1,651.36		Rx 10/25/75 High Rx 20/60/80 Low

(#PPO premium actually charged by DVHT, does not include self-insured \$5K/\$10K HRA expense)

Want to save your health plan money and help keep future health insurance premiums as low as possible? Check out [www.healthcarebluebook.com](http://www.healthcarebluebook.com) and use the code DVHT1 to access high quality, lower cost procedures that can reward you with a cash incentive.

Want to help reduce ever increasing prescription costs? Check out discount websites that bypass the health insurance plan and often reduce the Rx copay using manufacturer coupons such as [www.GoodRx.com](http://www.GoodRx.com) or [www.singlecare.com](http://www.singlecare.com)