



PfISD Insurance Committee Meeting

February 18, 2025

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1. Level Set
2. Open Enrollment Feedback
3. Financial Update
4. Looking Ahead
5. Updates & Reminders

Agenda

Level Set

Benefit Changes for 2025

- Replaced BCBS Low plan with BCBS HMO plan on Blue Essentials network
- Changes to deductibles/out of pockets for medical plans
- Added condition management programs to BCBS plans
- Moved from Guardian to Standard for dental with a triple plan offering
- Increased frequency for glasses under VSP and added Lightcare
- Moved from Optum (HSA) and iSolved (FSA) to Inspira

- Cost saving strategies discussed but not selected:
 - Direct primary care
 - Eliminating district contribution to HSA

Level Set

Medical Plan Design Changes

Medical - Plan Features		High Plan - BCBS	Low Plan - HCH	HMO Plan - BCBS	HD Plan - HCH
	Plan Network	BlueChoice PPO	HCH Sync	BlueEssentials	HCH Sync
		<i>In Network ONLY</i>	<i>In Network ONLY</i>	<i>In Network ONLY</i>	<i>In Network ONLY</i>
	Individual Deductible	2250 \$3,000	2750 \$3,500	3100 \$4,000	3500 \$6,000
	Family Deductible	4500 \$6,000	5500 \$7,000	6200 \$8,000	7000 \$12,000
	Coinsurance Paid by the Plan	80%	80%	70%	70%
	Individual Maximum Out of Pocket*	5500 \$8,500	6000 \$8,500	6500 \$8,500	\$7,500
	Family Maximum Out of Pocket*	11000 \$17,000	12000 \$17,000	13000 \$17,000	\$15,000
	Primary Office Visit	\$35 copay	\$20 copay	\$40 copay	70% after deductible
	Specialist Office Visit	\$50 copay	\$35 copay	\$55 copay	70% after deductible
Medical - Plan Features	Virtual Visit	\$0 copay	\$0 copay	\$0 copay	100% after deductible
	Inpatient Hospital	80% after deductible	80% after deductible	70% after deductible	70% after deductible
	Outpatient Surgery	80% after deductible	80% after deductible	70% after deductible	70% after deductible
	ER - Facility	\$500 copay + 80% after deductible	\$500 copay + 80% after deductible	\$500 copay + 70% after deductible	70% after deductible
	ER - Physician				
	Urgent Care	\$50 copay	\$35 copay	\$55 copay	70% after deductible
	<i>In-Network Prescriptions</i>				
	Retail Prescription Drugs (30 days)	\$15 / \$40 / \$65 / 10% up to \$2,500	\$15 / \$40 / \$65 / 10% up to \$2,500	\$15 / \$50 / \$75 / 10% up to \$2,500	70% after deductible
	Mail Order Prescription Drugs (90 days)	3X	3X	3X	70% after deductible

* Maximum Out of Pocket includes deductibles, coinsurance, medical and Rx copays.

EE Rates		BCBS High Plan	HCH Low Plan	BCBS HMO Plan	HCH HD Plan
	Employee Rates	2025 Rates	Current	Current	Current
	Employee Only	\$260.00	\$130.00	\$89.00	\$40.00
	Employee + Spouse	\$925.00	\$761.00	\$669.00	\$611.00
	Employee + Children	\$725.00	\$545.00	\$455.00	\$411.00
	Employee + Family	\$1,400.00	\$1,153.00	\$1,035.00	\$970.00

Level Set

Dental Plans

- Lifetime deductible: does not reset year over year
- NEW Mid Plan option added

Each person in the plan has to meet the deductible

Dental - Dual Plan Features	Dental Services by Plan	Standard - Triple Option Dental Plan		
		Low Plan	Mid Plan	High Plan
	Dual Option	<i>In Network</i>	<i>In Network</i>	<i>In Network</i>
	Individual Deductible	\$50	\$50 Lifetime	\$50 Lifetime
	Family Deductible	\$150	N/A	N/A
	Annual Maximum	\$1,250	\$1,250	\$2,000
	Late Entrant Penalty	True Annual Open Enrollment		
	Preventive (Type 1)	100%	100%	100%
	Basic (Type 2)	80%	80%	80%
	Major (Type 3)	Not Included	50%	50%
	Orthodontics (Type 4)	Not Included	50%	50%
	Endodontics	Not Included	80%	80%
	Periodontics	80%	80%	50%
	Implants	Not Included	Not Included	50%
	Child Orthodontia	Not Included	Included	Included
	Adult Orthodontia	Not Included	Not Included	Included
	Orthodontic Lifetime Maximum	N/A	\$1,500	\$1,500
	Out-of-Network Reimbursement	80th UCR	80th UCR%	80th UCR

Premium	Enrollment & Rates by Plan	Standard - Triple Option Dental Plan		
	Employee Only	\$28.68	\$34.70	\$52.62
	Employee + Spouse	\$57.84	\$69.34	\$116.94
	Employee + Children	\$48.48	\$93.54	\$106.06
	Employee + Family	\$74.38	\$128.18	\$150.88

Open Enrollment Feedback

PCP Issues, numbers incorrect. B.Moyers was assigned to doctors in temple. Could be a system issue. MMA to look into it.

The PCP will carry over to the following year, EE can review during OE as an opt to update PCP as necessary.

Okay to use another doctor if designated by PCP.

New card will be mailed out if EE updates PCP Member Phone # on BCBS Health Card –There is an option to change thru your online portal, use the chat portal this change will take effect the 1st of the following month

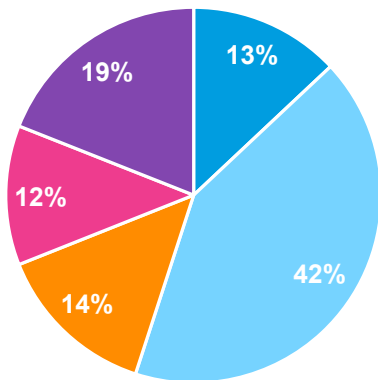
Referral is this a one-time or an ongoing referral to a specialist? Challenges with referrals maybe how the office runs..

Can you get referrals from a virtual visit? MMA to find out.

Enrollment Results

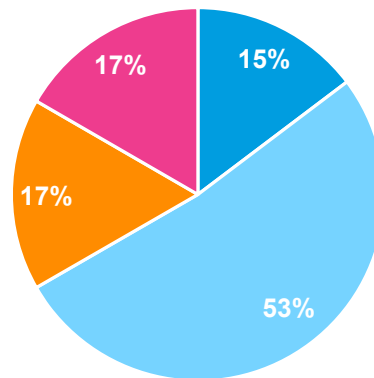
2023 Enrollment

■ BCBS High Plan ■ BCBS Low Plan
■ BCBS HD Plan ■ HCH Low Plan
■ HCH HD Plan



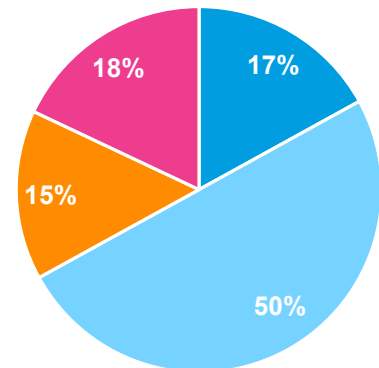
2024 Enrollment

■ BCBS High Plan ■ BCBS Low Plan
■ HCH Low Plan ■ HCH HD Plan



2025 Enrollment

■ BCBS High Plan ■ BCBS HMO Plan
■ HCH Low Plan ■ HCH HD Plan



Financial Update

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Current State of the Plan

- Our plan is self-funded. What does that mean?
 - BCBS & HCH process claims with funding from district and participants
 - Majority of plan costs come from claims
 - Choices participants make affect the overall cost
- Healthcare costs, including our cost, have continued to rise each year
- 2022-2024 costs ran higher than budgeted (due to unexpected level of high cost claimants)
- Adjustments were made in 2025 to bring the plan back into budget

Self Funded plan, we aren't playing with BCBS or HCH money, this is PflSD's money. Comes out of the district funding for health care.

True high cost claimants will reflect by March. Our Phys Yr went from Sept 1st to July. The district Phy Year will now change. Calendar Year does not match phys year. Most of the deficit reflected on the prev year. We will keep monitoring(JL) Money is being captured from previous years. We are having to deal with what sustains our business.

YOY Funding Summary

	2017	2018	2019	2020	2021	2022	2023	2024	2025 Projected
Total Medical / Rx Paid Claims	\$14,930,418	\$15,402,745	\$15,805,169	\$17,712,740	\$18,604,136	\$21,609,970	\$22,666,339	\$21,253,076	\$20,776,316
PMPM	\$330.11	\$336.54	\$335.74	\$350.36	\$369.75	\$461.16	\$485.82	\$470.82	\$459.29
% Increase	-9.6%	1.9%	-0.2%	4.4%	5.5%	24.8%	5.3%	-2.8%	-4.4%
District Funding PEPM	\$400	\$400	\$400	\$400	\$400	\$400	\$410	\$435	\$435
High Cost Claimant Impact (\$100k+)	11 claimant \$1.73MM	16 claimants \$2.49MM	18 claimants \$3.1MM	24 claimants \$4.1MM	27 claimants \$4.83MM	38 claimants \$7.39MM	36 claimants \$8.34MM	40 claimants \$7.19MM (Claims thru June)	Projecting a 1.5m
Surplus/Deficit	Surplus \$555,998	Surplus \$1,276,502	Surplus \$2,112,223	Surplus \$1,383,122	Surplus \$348,659	Deficit (\$3,982,758)	Deficit (\$4,142,893)	Deficit (\$95,748)	
Strategies	- Discontinued non-engaged plans - Increased deductibles/copays - Carved out Rx - Added 4th tier specialty copay - Eliminated Q4 deductible carryover	- Added HDHP - Increased deductibles/copays - Removed INGAGEDhealth	- Move to UHC with EPO/ACO plans \$0 premium plan - Removed Compass - Added CAP programs with RxB - Introduced HSA contribution	- Replaced ACO plan with EPO - Moved to new AUM & opioid program with RxB	- Consolidated Mid & High plans - Implemented Naviguard - Removed SaveonSP - HSA to half match - Increased ISL	- Moved from UHC to BCBS/HCH 5 plan designs - HSA to match only	Minor plan design changes to comply with IRS limits	- Removed BCBS HD plan - Plan design changes - Implement PAP & CAP Programs \$1MM infusion	- BCBS Low plan to Essentials HMO - Network - Plan design changes \$1MM infusion
National Medical/Rx Trend*	5.5%	5.7%	5.7%	6.0%	7.0%	6.5%	6.0%	7.0%	8.0%

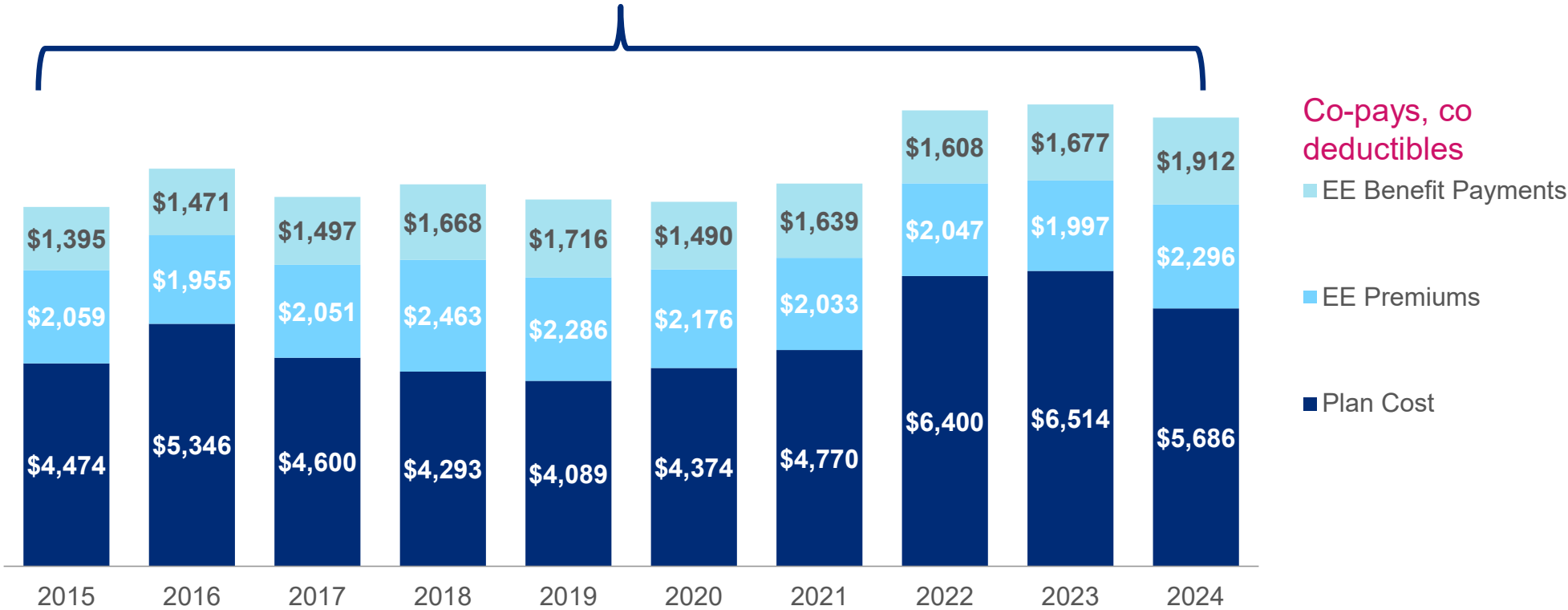
*PwC Health Research Institute 2016-2025
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Medical & Rx Per Employee Per Year

Your Cost Versus the Districts Cost Year over Year

EE cost and EE premium and Employees paying the benefit premium is going down slightly. Due to plan changes in 2023

EE Cost = 2.5% Avg Increase Year Over Year



Looking Ahead

What are we thinking for 2026

We have Optum as our EAP, PflSD looking for other options thru RFP's for vendors on that space.

WW , We are dealing with Ellie, any feedback?

Ellie is maxed out for scheduling.

3 is not enough for many people, we are looking into other options,

CJ we have an add on with Optum, 8 30 min sessions, does not count against your 3.

Looking Ahead

Marketing Strategies for 2026

- RFP 1 – EAP
 - Currently with Optum
 - Consider other vendors and program enhancements
 - RFP 2 – Accident, Critical Illness, Hospital Indemnity, and Whole Life
 - Currently with Cigna for Accident, Critical Illness, & Hospital Indemnity
 - Currently with Trustmark for Whole Life
 - RFP 3 – Pharmacy Benefit Manager
 - Currently with Express Scripts through RxBenefits
 - Consider other PBMs who can drive savings through lower unit cost & better rebates while minimizing member disruption
 - Frontier Direct Primary Care
- Wellness visits for all 3 plans, submit the claim. Cigna takes phone calls.
EE having issues with wellness reimbursement. Has to submit per plan.
Accident denied accident claim,
The policy we have is only an outline,
- WW requesting we add more than the summary for Cigna to webpage.
- Disability, WW – not enough funds for the family.
- Delco contact, EA's do not have enough funds to get health coverage thru PfISD
HD plan, low deductible – HSA contribution
TrustMark is portable,
Looking into 2026 RX Benefits Manager
Frontier, Higher level of care and more direct care. EE to save ideal goal is to not wait longer than 5 mins in the lobby.

Updates & Reminders

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Don't Forget About....

No cost to use MD Live

- Telemedicine with MDLive
 - No cost to members on the High, Low, or HMO plans
 - No cost after deductible to members on the HD plan

Better than having a co-pay from the ER
WW used it on Friday at 11pm

- Pet Insurance with MetLife

- Customizable plans
- Enroll at anytime at www.metlife.com/getpetquote and entering **Pflugerville ISD** as your employer or call 1-800-GET-MET8

MD Live, They can find a local RX for you near by, including Puerto Rico

Unless it's an emergency you can go anywhere.

- Wellness Benefit with Cigna

- Members enrolled in the Cigna Accident, Critical Illness or Hospital Indemnity can receive a benefit for completing a preventive exam or screening
- \$50 - \$100 depending on coverage elected

Can make a change at any time.

Add or remove pets ANYTIME

Next Meetings....

- April 16, 2025
- May 14, 2025



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