USG Benefits Update



Thursday, October 10, 2019

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UNIVERSITY SYSTEM OF GEORGIA

Housekeeping Items

- This session is being recorded and the archive/presentation will be distributed following today's meeting
- Feel free to post questions in the chat
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Agenda

- Known Issues
- Alight Updates
- ACA Update
- Dependent Audit
- Open Enrollment Update
- Northeast Georgia Health System
- Working Spouse Surcharge
- Tobacco Surcharge
- Well being Update
- Service Center Performance
- 2020 Pharmacy Changes
- Wrap-Up



Known Issues

Sporadic Issue with online changes to the Health Savings Plan

Employees who are attempting to make updates to their HSA plans online are getting an error message.

- **Population impacted:** Random
- Root cause: To be Determined
- **Corrective action steps:** Employees should call the call center for assistance



Alight Updates

Look-Back is Changing to 90 days

The look-back period for premium processing is moving from 60 to 90 days

DBP Impact:

One-time Extensions for Direct Billings and Payments will extend to 90 days



Alight Updates

Employer Mandate – Annual Process

- **Measurement Window** 10/3/2018 10/2/2019
- Assessments: All Employees
- Benefits Eligibility Threshold: 1,559.01
- Reporting: Provided to process owners for review and sign off on 10/23 (tentatively)
- Alight's Process following USG sign off is to extend an offer of coverage in the healthcare plan eff. 1/1/2020 – 12/31/2020 for all eligible employees and term eligibility for anyone currently eligible but below the threshold effective 12/31/2019



Dependent Audit

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Dependent Audit Updates

Termination letters

- 1652 will be terminated
- Mailed on 10/5/2019
- Effective Date of Termination is 10/1/2019

Claims & Appeals

- After the grace period
- No action or incomplete submission
- Submitted to DVS team through proper channel
- Same documentation is required
- Decision can take up to 30 days; per case basis



Northeast Georgia Health System

- The previous agreement expired on Sept. 30, 2019.
- Effective October 1, 2019, Northeast Georgia Health System's providers and facilities are out-of-network.
- Employees or dependents currently under treatment may apply for Continuation of Care. If approved, providers and facilities will be considered in-network.
- Anthem's website is being updated with out-of-network claim processing information.



OE2020 Enhancements

Active Open Enrollment: October 28 – November 8

- Acceptance testing 75% completion rate and only 1 issue identified
- Web Enhancements will be made to improve language on the 'working spouse' surcharge page
- Add text to the benefits summary page to explain the per pay period monthly rate for summer accrual pay groups
- Varied the Enrollment Worksheets and Confirmation Statements so that retirees will see tobacco surcharge information only if it applies



Open Enrollment Communications

Communcation	Date
OE Postcard	October 1
Website Updates	October 7
2020 Comparison Guide & Posters	October 11
OE Emails	Oct. 15, 28, 31 - Nov. 7
OE Text Messages	Oct. 9, 15, 20, 28 - Nov. 4, 7
Active & Retiree Newsletters w/ Enrollment Worksheet *Post 65 retirees with only USG dental, vision and life & Split families will	October 23
receive separate communications MetLife Enrollment Confirmations	October 23



Working Spouse Surcharge

FAQ's

Who does the spousal surcharge apply to?

• The spousal surcharge applies ONLY to a spouse who is working and has an offer of subsidized health insurance offered by his or her employer. Subsidized coverage means the employer contributes towards the cost of the coverage.

Is proof required? Will certification be dependent on the honor system?

 Proof of your spouse's employment status will not be required. Employees will be required to certify that they are making a true statement. Penalties may apply for answering falsely when certifying.

What happens if my spouse's coverage ends mid-year and they should no longer be subject to the surcharge?

 To change your working spouse surcharge status mid – year, call the OneUSG Connect call center at 1-844-5-USGBEN (1-844-587-4236)



Tobacco Cessation

Effective January 1, 2020, employees enrolled in the USG healthcare plans, and their covered dependents (age 18+) will be charged a **\$100** per tobacco user per month surcharge for using tobacco products.

 During the 2020 open enrollment period, you must certify your status as a tobacco user or non-tobacco user, as well as the status of any dependents (age 18+), enrolled in your USG healthcare plan through OneUSG Connect – Benefits.

A **reasonable alternative** is made available during the certification process for individuals who would like to become non-tobacco users.

- The alternative allows 90 days to complete a tobacco cessation program. Tobacco cessation programs are available at no cost to you and your dependents. Please contact these helpful resources for tobacco cessation programs:
 - Georgia Tobacco Quit Line: 1-877-270-7867
 - ➢ Kaiser Permanente: 1-866- 862-4295

If you or your dependent become tobacco-free for three (3) months or complete a tobacco cessation program at any time during the year while you are enrolled in a USG healthcare plan, you will notify USG within 30 days at OneUSG Connect — Benefits Call Center at 1-844-5-USGBEN (1-844-587-4236) to change your status.



Tobacco Cessation

USG healthcare plans

• Provides coverage with a \$0 copay (with a prescription) for most over the counter and prescription Nicotine Replacement Therapy resources.

Phone Coaching

 You have access to phone coaching resources that can help you quit — and stay tobacco free

Virgin Pulse Phone Coaching: Schedule by going to your well-being portal and selecting Programs. Choose Tobacco Cessation Coaching.
Georgia Tobacco Quit Line: 1-877-270-7867
Kaiser Permanente: 1-866- 862-4295



Well-being Update

Participation rate

- As of 10/07/2019 we are at 28%.
- 1st Dalton State College with 42.89%
- 2nd Abraham Baldwin Agri College with 42.48%
- 3rd Georgia Highlands College with 42.31%
- 2019 goal is 45% for all campus locations.

Money Monday

- Oct. 28 at 12 p.m., University System Office ITS Athens
- Topic: The Purpose of Estate Planning- Is My Family's Legacy Protected?

Well-being Wednesday

- Nov. 13 at 1 p.m., Savannah State University
- Topic: Diabetes

USG Well-being email

- 10/9/2019: October Blood Pressure
- 11/05/2019: Diabetes
- 12/03/2019: Resiliency
- 12/09/2019: 2020 Program Coming Soon



Well-being Update

- In 2020, \$100/year incentive for well-being participation will continue
- RedBrick Health > Virgin Pulse
- Employees and spouses on a USG healthcare plan can access resources for
- Diabetes prevention, management, and education
- Weight loss/management support (at a reduced cost, if eligible)
- For more information about USG's 2020 well-being program, visit usg.edu/well-being



Call Center Performance

Performance Topic	Results
Call Center Forecast	Actual is 14% above the forecast
Call First Call resolution	87%
Calls Abandoned	2%
Trends	DVS Audit RelatedQSCDiBP



Service Connect—Performance

Performance Topic	Results
Service Tickets Pending in total	144
Service Tickets Pending > 5 days	82
Service Tickets pending an external response	4
Trends	 Life Interaction (Death Process) Exceptions General information



2020 Standard Control Formulary

Helping clients stay ahead of trends and better meet their cost control goals

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CVS Caremark guiding principles of formulary management



Maintain clinical integrity

Target classes with sufficient generic availability, clinically appropriate brands; evaluate appropriate specialty classes

Secure competitive pricing for our clients

Continually assess marketplace to identify lower-cost options and opportunities to help maximize manufacturer rebate values

Educate and engage members & physicians

Help ensure access to clinically appropriate drugs that can help keep members healthy; provide resources for prescribers to support member transition





Drug prices can be increased at any time

Making payors and consumers vulnerable to the unpredictable market

3,400+ drugs

had price increases first half of 2019

+17% compared to first half 2018 +10.5% = 5x

Average

increase

Inflation rate

Pressure to deliver higher profits and public demand may be driving increases

https://www.cbsnews.com/news/drug-prices-in-2019-are-surgingwith-hikes-at-5-times-inflation/, accessed August 26, 2019.



Evolving our formulary strategy to stay ahead of trends

Implementing strategies that enable greater flexibility to quickly respond to market changes



CVS managed formularies help clients achieve an average lower-net cost per 30-day supply

\$102.58 ► \$88.30

Without drug removals

With drug removals



Expected to save payors more than \$4.3B in 2020

Total projected savings from 2012-2020 is more than \$23.4B¹



Fewer than 1% of members affected by changes²

32 drugs removed, 3 drugs added back to formulary*



Tier 1 approach leverages lowest net cost

Preferred placement to whichever drug, brand or generic, is the lower cost option; inclusive of rebates and member cost share is at Tier 1 copay/coinsurance

Does not require new prescription; change made at pharmacy

Quarterly review of comprehensive formulary drug list

Reviewed for potential removals and add-backs

Upcoming changes available approximately 60 days in advance

*Numbers may change quarterly

- 1. Savings are cumulative.
- 2. Based on changes for 1/1/20.





2020 Standard Control Formulary removals and updates

Standard Control Formulary removals

Drug class	Removed medications
Antiemetic	Transderm-Scop
Chronic pain	Butrans, Hysingla ER, Oxycontin, Zohydro ER
Continuous glucose monitor	Enlite Glucose Sensor, Freestyle Libre Reader/Sensor, Guardian Sensor
Contraceptives	Lo Loestrin FE, Natazia, Taytulla
Dermatologic	Epiceram, Kamdoy, Sil-K Pads
DPP4-SGLT2	Qtern
Folic acid	Ortho D
Laxatives	MoviPrep, Osmoprep
MS Beta-Interferons	Avonex, Plegridy
Ophthalmic	Alrex, Flarex, Lotemax/Lotemax SM, Timoptic Ocudose, Zylet
SABA/LAMA respiratory	Combivent Respimat
Scar Treatment	Beau Rx, Recedo
Short-acting beta agonists	ProAir HFA, ProAir RespiClick
Steroid inhalants	Asmanex Twisthaler/Asmanex HFA
Ulcer drugs	Carafate

Standard Control Formulary add backs

Drug class	Added-back medications
Alpha-1	Prolastin-C
Asthma	Fasenra
Opioid induced constipation	Relistor

ER (Extended release). DPP4 (dipeptidyl peptidase-4). SGLT2 (Sodium-glucose co-transporter-2).

MS (Multiple sclerosis). SABA (Short-acting beta-antagonist). LAMA (Long-acting muscarinic antogonists).

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Tier 1 Approach:

When the brand-name drug is more cost effective

- Brand or generic, preferred placement to whichever is the lower-cost option, inclusive of rebates
- Incorporated into Standard Control Formulary
- Helps ensure member cost share is at Tier 1 copay/coinsurance regardless of plan design
- No need for new Rx; pharmacist can make the change

3 brand drugs, Advair Diskus^{*}, Concerta and Adderall XR, with significant savings over generics



All 3 of these branded drugs remain as preferred formulary options on our standard template formularies

Processed at Tier 1 copay/coinsurance based on generic reference price for appropriate member cost share including the deductible phase.

*Implemented 2019. For 100/50 dosage. Includes typical average brand discounts and generic maximum allowable cost (MAC) pricing across our book of business. Other pricing arrangements may vary..
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Robust member and prescriber support

Targeted and actionable communications enable us to focus our efforts where they are needed the most

- Focuses on new savings options and encourages outreach to prescriber
- Current drug and recommended drug are clearly listed
- Provide support in contacting their physician, if requested by members



30 to 45 days prior

Targeted member and physician notifications 15 to 30 days prior

Live outbound calls to specialty patients

Drug list information available online

Quarterly

Targeted communications to affected members





2020 Standard Control Formulary

Thank you



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All data sharing complies with applicable law, our information firewall and any applicable contractual limitations.

Adherence results and savings projections are based on CVS Caremark data. Actual results may vary depending on benefit plan design, member demographics, programs implemented by the plan and other factors. Client-specific modeling available upon request.

The Maintenance Choice program is available to self-funded employer clients that are subject to ERISA. Non-ERISA plans such as fully insured health plans, plans for city, state or government employees and church plans need CVS Caremark legal approval prior to adopting the Maintenance Choice program. Prices may vary between mail service and CVS Pharmacy due to dispensing factors, such as applicable local or use taxes.

Specialty Expedite is available exclusively for providers who use compatible electronic health record (EHR) systems, including Epic Systems and others that participate in the Carequality Interoperability Framework.

Specialty delivery options are available where allowed by law. In-store pick up is currently not available in Oklahoma. Puerto Rico requires first-fill prescriptions to be transmitted directly to the dispensing specialty pharmacy. Products are dispensed by CVS Specialty and certain services are only accessed by calling CVS Specialty directly. Certain specialty medication may not qualify. Services are also available at Long's Drugs locations.

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Next USG Benefits Update

Tentatively scheduled for November 14, 2019



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