



2016 Medical Provider Change

Approval for United Healthcare Beginning in 2016 as
Medical Carrier

August 31, 2015

Benefits Philosophy & Strategy

- Alignment with employees & culture
- Benefit plan and financial control
- Employee and City ability to have choices
- Balance best quality healthcare with cost containment
- Provide highest quality (value) health and wellness care/services
- Member education and consumerism (member engagement)



Renewal Process & Timeline

- **Selection process**
 - Human Resources
 - Broker IMA
 - Benefits Committee
- **Process requires expertise and direction**
 - Impact on: employees; financial; short/long-term strategy

2016 Renewal & Open Enrollment Project Plan

Task	Status Update	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Planning Meeting (medical) - IMA	Meeting 1/13	X											
Benefit Committee Meeting	Meeting 2/18		X										
Planning Meeting (all plans) - IMA	Meeting 3/3			X									
Census Request for RFP	Deadline 4/15				X								
Benefit Committee Meeting	Meeting 4/22				X								
Medical RFP to Market	Issued 5/1; deadline 5/22					X							
Benefit Committee Meeting	Meeting 6/2						X						
Medical Vendor Selection Finalists	Select Finalists: 6/22-6/30						X						
Benefit Committee Meeting	Meeting 6/30 (select Finalists)						X						
Medical Finalist Presentations	Finalist Presentation: 7/15							X					
Benefit Committee Meeting	Meeting 7/21 (Finalist de-brief)							X					
Benefit Committee Meeting	Meeting 7/28							X					
Medical Final Vendor Selection	Selection, presentation to Exec Leadership, approval by 8/7							X	X				
Benefit Committee Meeting	Meeting 8/18								X				



Medical Recommendation

- **Select United Healthcare as 2016 carrier**
 - Fully insured, Triple Option, Navigate & Choice network
 - Best suited to fill needs of our benefits philosophy
 - Offers more choices for employees
 - Enhanced health and wellness quality and services
 - Provides more plan design and financial control (current and future)
 - Enhanced resources and tools for member engagement, education, consumerism
 - Justification & Alignment
 - High quality health and wellness
 - Plan and financial control and customization/flexibility
 - Member education, resources and tools
 - Challenges, Concerns, Issues
 - Impact on employees



Why Select UHC

- High quality health and wellness
 - Larger network: over 3 times the size of Kaiser's network
 - More selection of PCP, Surgeons, Specialist, Hospitals, Labs/Tests, Rx/pharmacies
 - Cost and quality: research, estimate, choice
 - Convenience care (minute clinics) and virtual visits are an option

Medical Network Comparison

Service	Kaiser Permanente	United HealthCare	Notes
Physicians	931	>3,100	UHC offers employees more choice
Hospitals	17	107	
Specialist	2,733	>10,500	
Convenience Care	No	Yes	Walk-in, No appts, similar co-pay for office visit
Nurse Line	Yes, 24 hours	Yes, 24 hours	
Call Center	Yes, 8-5 M-F	Yes, 8-8 M-F	UHC offers evening hours
Email Doctor	Yes	Doctor Dependent	Through UHC, some doctor's will email patients
Virtual Visits	No	Yes	Doctor's visits through video call
Pharmacies	28	66,000 Nationwide	KP members have to use KP pharmacy. UHC is contracted with all major chains



Why Select UHC

- High quality health and wellness
 - Increased access to medical and prescription services
 - Faster claims processing and Explanation of Benefits (EOBs)
 - Access claim status, EOBs, insurance cards via mobile app
 - Pharmacy facilities (select location close to home or work; pick up when ready)
 - Offer enhanced wellness and health services and incentive programs
 - Investment in technology as means of easy access for members and focus on member engagement: devoted wellness website and app (Rally); devoted incentive program (SimplyEngaged) UHC funds between \$25k to \$75k
 - More experience managing Health Savings Account (HSA)
 - New Option C



Why Select UHC

- **Plan and financial control (customizable)**
 - Plan design offerings: UHC has more options
 - More options with prescriptions: tiers, formulary, plan design
 - Health and wellness incentives (Rally and SimplyEngaged)
 - Access to data (reports/analysis): guides plan design options & control costs
 - UHC offers more options with premiums, plan structure, wellness
 - Timely medical and prescription claims processing (less delay in claim data)
 - UHC is financially beneficial:
 - Transition credit of \$75k
 - Wellness budget of \$25k for 2016 and 2017
 - Incentives from \$25k to \$75k (SimplyEngaged/Rally)
 - UHC positions us for companies to compete for our business
 - UHC positions us better for self-funding option in the future



Why Select UHC

- UHC's Member Education, Resources, Tools to Increase Employee Engagement
 - **Customer service** uses Predictive Personalization to enhanced experience, customized to member's needs through integrated technology
 - **Website** provides members easy access to relevant personal information
 - **Mobile app**, convenient access to health information and decision support
 - **Rally**: innovative health and wellness platform that inspires members to take steps that lead to better health and sustainable behavior changes
 - **SimplyEngaged** offers rewards to drive health awareness, completion of specific health activities and encourage health improvement

Implementation and Transition

- Challenges, Concerns, Issues

Impact of Moving Away from Kaiser	Negative impact	Positive impact
100% network disruption	All members will need to find new PCP within the Navigate Network	Broader network to select new PCP, find locations closer to home
Integrated system: one-stop-shop (Office, Rx, lab tests)	Removes convenience of doctor, lab work, RX, etc. in one location	Allows members larger selection of doctor's offices. Ability to visit most major RX retailers at longer operating hours
Specialist referrals	Referrals are not always needed through Kaiser, members will need to be educated on UHC's referral process	Members can get 2nd, 3rd opinions and find specialists and facilities that best fit their needs
Eliminate KP's email doctor system	Emailing PCP will be dependent/specific to doctor	Some doctor's offices may accommodate emails. Members will have ability to do Virtual Visits online
Member learning curve for health and wellness processes and procedures	Time needed to learn new processes and procedures	Helps with consumerism; UHC's resources and tools are an enhancement over Kaiser



Implementation & Transition

- Impact on employees
 - Some employees will be upset with change; we will:
 - Increase communication and member education
 - Pay special attention to assisting members with:
 - Finding Doctors (PCP, surgeons, specialist)
 - Understanding referral process with doctors (Option A and B only)
 - Transition of care process
 - Proactively address employee concerns and situations
 - Provide extensive communication and resources
 - Develop and implement detailed communication plan



Implementation & Transition

- **Communication Plan**
 - Focus on explaining the “why” of UHC
 - Help employees with the transition
 - Provide advanced notice and details of the transition
- **Phase One - Announcement**
 - Focused on initial announcement of move to UHC
 - Meetings/presentations, documents and online resources
 - Provide details and dates of next Phase
- **Phase Two – Employee Education/Transition**
 - Action oriented focusing on education, information, transition
 - Three focus items: finding doctors, transition of care, Kaiser exit
 - Meetings/presentations, documents and online resources
- **Phase Three & Four**
 - Open Enrollment (November)
 - Member Onboarding & Follow-up (December and Q1 2016)



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2016 MEDICAL PROVIDER CHANGE

QUESTIONS?

