



## 2017 Open Enrollment - Important Background Information

***(READ FIRST before viewing FAQs)***

### ***The Challenge At Hand***

- Expenditures in the State Group Health Insurance Program (GHIP) have risen almost 50 percent since the start of the decade.
- Employee and pensioner health care was the largest cost driver in the State Operating Budget for Fiscal Year 2016.
- It is estimated that the State of Delaware's health care costs could exceed \$1 billion by Fiscal Year 2022.
- Skyrocketing costs mean potentially millions of dollars that the State would be unable to invest in areas such as employee raises, improving our schools, protecting our environment and making our neighborhoods safer.

### ***State of Delaware's Commitment***

- The State of Delaware is committed to managing the total cost of care for both the GHIP and its participants and driving improvements in the health of the GHIP population.
- In December 2016, the State Employee Benefits Committee (SEBC) formalized this commitment as a mission statement and has established goals, strategies and tactics to uphold that commitment. The SEBC will continue with its commitment to drive the level of change needed to mitigate total cost of care and produce longer term improvements in the GHIP population's health.
- The SEBC, which is comprised of members of various State agencies as well as elected officials, has control and management of employee benefit coverage. For more information on the SEBC, visit [www.ben.omb.delaware.gov/sebc](http://www.ben.omb.delaware.gov/sebc). The Statewide Benefits Office (SBO) functions as the administrative arm of the SEBC by executing the decisions made by the committee and overseeing the day-to-day operations of the benefit programs.

### ***Initiatives To Drive Change***

#### ***March 2016:***

- Launched a comprehensive campaign called "*Being A Wise Health Care Consumer: What's In It For Me?*" along with a Consumerism Resource Link ([de.gov/healthconsumer](http://de.gov/healthconsumer)).
- Since its launch, the Consumerism Resource Link has logged more than 54,000 web page views!



### **September 2016:**

- Launched the “Being A Wise Health Care Consumer” online course in the Delaware Learning Center (DLC), Schoology and through a Separate Website Access Link.
- More than 16,000 employees completed the online course!
- 93% of survey respondents indicated that they either “agree” or “strongly agree” they learned ways to save money and improve/maintain the health and wellbeing of themselves and their family.

### **December 2016:**

- The SEBC approved:
  - Use of the online myBenefitsMentor® Consumer Decision Tool by State of Delaware employees and non-Medicare pensioners (*does not apply to Participating Group employees*) to help them make the best health plan selection during Open Enrollment. The tool uses actual medical and prescription claim costs and can factor anticipated healthcare services to provide a customized plan cost comparison.
  - Contract awards for the medical (health plan) third party administrators (TPAs) to serve the GHIP, effective July 1, 2017:
    - Aetna to administer the Consumer Directed Health (CDH) Plan and HMO Plan.
    - Highmark Delaware to administer the First State Basic PPO Plan, the Comprehensive PPO Plan, and the Special Medicfill Medicare Supplement Plan (available to Medicare pensioners).
    - The recommendation for contract awards was the culmination of well over seven months of planning, education and discussion.
    - The contract award decisions were made for several reasons:
      - Cost effectiveness (i.e., reduced administrative fees to the State, etc.)
      - Favorable provider network access with minimal member disruption (less than 2%)
      - Administrative efficiency – decreasing the plan offerings from two CDH and HMO plans down to one CDH and one HMO plan
      - Aetna HMO Plan now offers “Care Link” which leverages a team of Christiana Care Health System (CCHS) clinicians supported by shared electronic medical records to deliver care management and primary care coordination
    - **Important:** The Aetna HMO Plan and Aetna CDH Gold Plan have essentially the same plan design and premiums as the HMO and CDH Plans previously offered by Highmark.



### **March 2017:**

- Prior to Open Enrollment, benefit-eligible **State of Delaware employees** are *strongly encouraged* to access Employee Self-Service (<http://employeeselfservice.omb.delaware.gov/>) and complete the Pre-Open Enrollment To-Do's (*see the FAQs for details*) to ensure a smooth Open Enrollment:
  - Make sure they can Sign In to Employee Self-Service
  - View and update as needed, their Personal Contact Information
  - Consent by March 15 to receive their Open Enrollment packet materials online rather than through U.S. mail (this is a quicker and more cost effective way to receive materials).
- **Participating Group employees** should provide their HR Office with any changes to their personal information- home address, phone number and email address.
- Your Personal Contact Information is used to provide you with important information related to Open Enrollment and for the benefit plans you select for you and your family, this information will be shared with those vendors so that they may provide you with ID Cards and Welcome Kits and outreach to you as appropriate regarding important care management programs and services.

### **April 2017:**

- SBO will launch several consumerism resources:
  - Online mini-videos (5-15 minutes each) to educate employees and pensioners on what's new for Open Enrollment, available health plan options, how to get the most from the myBenefitsMentor tool and the Coordination of Benefits policy.
  - An online, Interactive Open Enrollment Benefits Guide which uses audio and screen interaction to help employees and pensioners learn about available benefits, including navigation demos of the SBO website to assist with locating important information.
  - myBenefitsMentor Consumer Decision Tool welcome letter mailed to State of Delaware employee and pensioner homes (*does not apply to Participating Group employees*).

### **May 2017:**

- During Open Enrollment:
  - Benefit-eligible **State of Delaware employees** are encouraged to actively participate in Open Enrollment by logging into Employee Self-Service to view their benefits coverage and take advantage of this once a year opportunity to make benefit changes and/or elections.
    - The IPA/HMO Plan and CDH Gold Plan offered through Highmark Delaware will no longer be available effective July 1, 2017; therefore, these will not be available for selection during Open Enrollment. Employees currently enrolled in either plan will be automatically defaulted at the start of Open Enrollment into the Aetna equivalent plan.



- Highmark IPA/HMO employees that log into Employee Self-Service will see themselves with “New” and “Current” Coverage effective July 1, 2017 as being the Aetna HMO Plan, and the same will apply for Highmark CDH Gold Plan as they will be automatically moved to the Aetna CDH Plan, and keep the same coverage tier they are currently in (either employee only, employee and spouse, employee and child(ren) or family).
  - Employees who are enrolled in the Highmark IPA/HMO or CDH Gold Plan in the current plan year and take no action during Open Enrollment will have coverage in the corresponding Aetna HMO or CDH Plan for the plan year that begins July 1, 2017. Their coverage will not be terminated if they take no action during Open Enrollment; however, these employees will lose the opportunity to consider other plans until the next Open Enrollment unless they experience a qualifying event during the plan year.
- Benefit-eligible **Participating Group employees** are encouraged to actively participate in Open Enrollment by reviewing their benefits coverage and taking advantage of this once a year opportunity to make benefit changes and/or elections.
    - The IPA/HMO Plan and CDH Gold Plan offered through Highmark Delaware will no longer be available effective July 1, 2017; therefore, these will not be available for selection during Open Enrollment. Participating Group employees currently enrolled in either plan will be automatically defaulted into the Aetna equivalent plan, if no action is taken during Open Enrollment.
  - Employees who cover their spouse MUST complete a new Spousal Coordination of Benefits Form in Employee Self-Service during Open Enrollment.
  - Benefit-eligible **State of Delaware Pensioners** are encouraged to actively participate in Open Enrollment by reviewing their benefits coverage and taking advantage of this once a year opportunity to benefit changes and/or elections.
    - The IPA/HMO Plan and CDH Gold Plan offered through Highmark Delaware will no longer be available effective July 1, 2017; therefore, these will not be available for selection during Open Enrollment. Pensioners currently enrolled in either plan will be automatically defaulted into the Aetna equivalent plan, if no action is taken during Open Enrollment.

