



The Value of “The New Fully Funded City Plan” Medicare Advantage PPO for San Francisco HSS

June 21, 2016



Agenda – “The New Fully Funded City Plan”
UnitedHealthcare Medicare Advantage PPO (MAPD PPO)



Review the addition of the UnitedHealthcare Medicare Advantage PPO (MAPD PPO) in 2016

UnitedHealthcare Solutions for 2017

We will address the following questions:

- What can retirees expect with regard to their doctors
- What can retirees expect with regard to their prescriptions
- What can HSS expect with regard to transition support
- Why consider this offer

Current Status of UnitedHealthcare's MAPD PPO

- 1,268 people chose the MAPD PPO plan. Enrollment was split evenly between people coming from City Plan and Blue Shield, plus a small number from Kaiser.
 - UHC engaged with 9 members after enrollment to solve various issues ranging from filling prescriptions to benefit questions to provider outreach.
 - 84 Housecalls accepted through June 4.
 - Over 100 People enrolled in SilverSneakers
 - 15 people enrolled in care management programs

2017 UnitedHealthcare Solutions

In 2016:

- Proposed full replacement of City Plan - \$278.19
- Proposed adding MAPD PPO as an option alongside all other Medicare plans - \$305.12

2017 Solutions:

- Change Medicare retirees in City Plan from self-funded to fully funded
- Propose “The New Fully Funded City Plan” as a replacement for Blue Shield for all Medicare A & B retirees
 - **“New City Plan” rate \$320.83**
- If offer is accepted and there are 13,000 enrollees after January 2017, UHC is offering a **2018** rate cap, net of the insurer’s fee, of \$336

OR

- Renew current arrangement - \$334.11

Provider Access - California Data

# of Physicians	% Physicians	# of Claims	% Claims	# of Patients*	% Patients	Comments
6,815	89.5%	29,966	90.3%	17,509	93.8%	These providers will treat MAPD PPO patients
801	10.5%	3,232	9.7%	1,159	6.2%	We will send mailings to these providers, except for emergency, ambulance, government facilities and providers employed inside a hospital/facility, before open enrollment begins.
1	0.0%	1	0.0%	1	0.0%	This provider does not want to treat any MAPD PPO patients.
7,617		33,199	100%	18,669	100%	

➤ **No balance billing for covered services under the MAPD PPO plan, even if a patient pays for services upfront.**

- Overwhelmingly, doctors are participating in the plan (Green)
- UHC will do an extensive outreach to providers who we have not received claims from before, including such practitioners as acupuncturists, to ensure the smoothest experience possible for your retirees (Yellow)
- We know there is one provider who does not want to treat MAPD PPO patients (Red)

Conclusion – we expect there will be very little patient/provider disruption

City Plan Prescription Changes

Types of Drug	Unique Utilizing Members*	Percent	# of Claims	Percent
All Prescriptions	47,274		83,596	
High Risk Medications (HRMs)	478	1.01%	796	0.95%
Part B	467	0.99%	679	0.81%

- 478 unique utilizing members have filled 796 prescriptions that are non-formulary HRMs (See Appendix for further definition)
 - Therapeutic equivalent alternatives for all prescriptions
 - 31 day transition supply
 - Exception Process to continue coverage if necessary
- 467 unique utilizing members have filled 679 Part B diabetic supplies which will be covered at 100% under the MAPD PPO plan. (The New City Plan)

Conclusion – we expect there will be very little prescription changes and some positive outcomes

Blue Shield Prescription Changes

The “New City Plan” provides a simplified copay structure:

Drug Tier	“New City Plan”	BSC Plans
Generics	\$5	\$10
Preferred Brands	\$20	\$25
Non-preferred Brands	\$45	\$50
Specialty	\$5, \$10, or \$25	20% to \$100

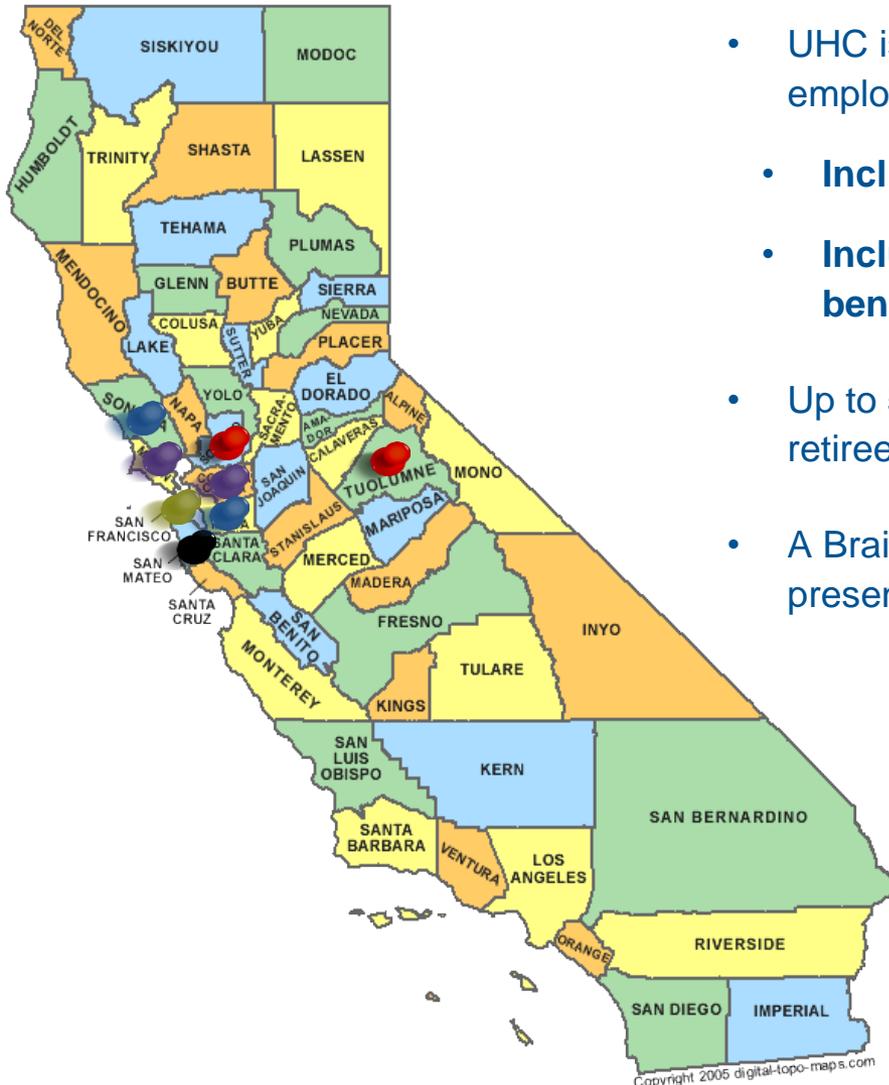
- At least 90% of medications will become less expensive
- Some medications might be become more expensive; a therapeutic equivalent alternative is available for anything that might increase in copay
- ✓ All allowable Mail Order Open Refills will be transferred from BSC to UHC
 - ✓ All allowable prior authorizations, step therapies and quantity limit exceptions will be transferred from BSC to UHC

Conclusion – we expect there may be some prescription changes but many more positive outcomes

Transition Support for HSS

- Rebranding the MAPD PPO plan as the “New City Plan”
- \$5 per new enrolled person implementation credit to help cover any expenses incurred by HSS
- In person support during open enrollment and immediately after January 1
- Extensive training and support structure for HSS Member Services
- Expanded Retiree Education Support
- Aggressive Provider Education Support

Retiree Education Support



- UHC is suggesting 30 meetings, staffed by UHC employees or licensed, appointed and certified agents
- **Including Hetch Hetchy**
- **Including Retiree Associations that protect your benefits**
- Up to 5 telephonic meetings can also be arranged for retiree added convenience
- A Brainshark, which is a recorded education meeting presentation, posted to myHSS.org



Provider education and outreach – before, during and after open enrollment



UHC will work with SFHSS to ensure that the provider education and outreach process is effective and patient-friendly.

- A** If a member who is interested in the plan finds that their provider is not in the MAPD PPO network, UHC will gather that member's information and their provider's information and perform a telephonic outreach to the provider

- B** UHC Provider Education Specialists will perform telephonic outreach to all providers requested through the process

- C** UHC will provide educational support to providers to ensure that providers understand how to bill UHC

- D** UHC will follow up with the member to provide final information about provider decision to bill UHC

Why Consider “The New Fully Funded City Plan” UnitedHealthcare Medicare Advantage PPO as the solution



- Better health outcomes through senior focused medical management programs that close gaps in care
- Additional programs tailored to the unique needs of seniors:
 - SilverSneakers
 - Solutions for Caregivers
 - HouseCalls
 - Routine Podiatry
 - Rewards for Health
 - Diabetes care management program and no cost for Part B diabetic supply
- Predictable medical copays (No coinsurance)
- Lower drug copays and no specialty tier
- Significant savings in 2017
- Protection from inflation and CMS Funding cuts in 2018
- Program stability for the long-term health of your plan

Appendix

What are High Risk Medications (HRMs)?

The most common therapeutic classes of drugs that include HRMs are certain:

- Antidepressants
- Anxiety medications
- Hormonal Agents
- Muscle relaxants
- Pain medications
- Sleep Disorder Agents



HRM Exception Process

Transition Supply

For MAPD retirees (currently using these medications) that attempt to fill a non-formulary HRM on or after January 1, 2017, the plan may cover up to a 31-day transition supply of the drug, at a network pharmacy, through March 31, 2017.

Members that have not taken these drugs in the past 120 days will not be granted a transition fill. However, the member or their doctor can request an exception.

Exception Process

The member or their doctor can request an exception.

- Members call Customer Service to initiate a request. OptumRx contacts the provider.
- Providers call OptumRx's Prior Authorization Dept.

Provider Access – National Data

# of Physicians	% Physicians	# of Claims	% Claims	# of Patients*	% Patients	Comments
19,617	94.5%	72,129	94.5%	55,439	97.3%	These providers will treat MAPD PPO patients
1,145	5.5%	4,166	5.5%	1,523	2.7%	We will send mailings to these providers, except for emergency, ambulance, government facilities and providers employed inside a hospital/facility, before open enrollment begins.
3	0.0%	5	0.0%	3	0.0%	These providers do not want to treat any MAPD PPO patients.
20,765		76,300	100%	56,965	100%	

- Providers in the yellow stage include a variety of provider types that range from acupuncturists to a urologist in Yakima, WA. We will do an outreach/ mailing campaign to all of them.
- The three providers in the red stage would require a patient to pay for services upfront.

No balance billing for covered services under the MAPD PPO plan, even if a patient pays for services upfront.

UnitedHealthcare program stability

