Review and Approve Change in Non-Medicare Plans Administrator To UnitedHealthcare For Non-Medicare Split Family Lives, Where One or More Family Members Are Covered Under Medicare and Enrolled in UnitedHealthcare Medicare Advantage PPO

June 9, 2022

Agenda

- Staff Recommendation—Review and Approve Change in Non-Medicare Plans Administrator To UnitedHealthcare For Non-Medicare Split Family Lives, Where One or More Family Members Are Covered Under Medicare and Enrolled in UnitedHealthcare Medicare Advantage PPO
- Rationale for Recommended Change
- Projected Covered Life Impacts By Current Plan Enrolled for Non-Medicare Split Family Covered Lives
- Recommendation for Health Service Board (HSB) Action

"Non-Medicare Split Family Covered Life"—an employee, retiree, or dependent who is part of a family enrolled in SFHSS medical coverage where the covered life is not yet eligible for Medicare (e.g., "Non-Medicare") and one or more family covered life is Medicare-eligible <u>and</u> enrolled in the UHC Medicare Advantage PPO (UHC MAPD) plan

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Staff Recommendation—Review and Approve Change in Non-Medicare Plans Administrator To UnitedHealthcare For Non-Medicare Split Family Lives, Where One or More Family Members Are Covered Under Medicare and Enrolled in UnitedHealthcare Medicare Advantage PPO

Staff Recommendation

The SFHSS Staff recommends that the Health Service Board (HSB):

1. Review and Approve Change in Non-Medicare Plans Administrator To UnitedHealthcare For Non-Medicare Split Family Lives, Where One or More Family Members Are Covered Under Medicare and Enrolled in UnitedHealthcare Medicare Advantage PPO

For split families where at least one Medicare covered life is enrolled in the UHC MAPD Plan:

- The UHC Non-Medicare PPO Plan (UHC Companion Plan) would continue to be one of three plan choices for Non-Medicare Split Family lives, as it is in 2022.
- Exclusive Provider Organization (EPO) Plans administered by UHC will be available to all Non-Medicare split-family covered lives. The EPO plans will align with the current benefits, provider networks and plan design of the 2022 Blue Shield of CA Access+ and Trio HMO plans.

Rationale for Recommended Change

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CURRENT STATE

Split Families have the following options currently for SFHSS plan enrollment:

- Entire family enrolls in Kaiser Permanente plan options (Non-Medicare covered lives in Kaiser HMO, Medicare covered lives in Kaiser Permanente Senior Advantage); or
- 2. Medicare covered lives within a Split Family enrolled in UHC MAPD Plan—with three plan choices available to Non-Medicare Split Family covered lives:
 - UHC Non-Medicare PPO plan (UHC Companion Plan);

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- BSC Access+ HMO plan; and
- BSC Trio HMO plan.

History of Non-Medicare Split Family Covered Life Administration with Split Carriers

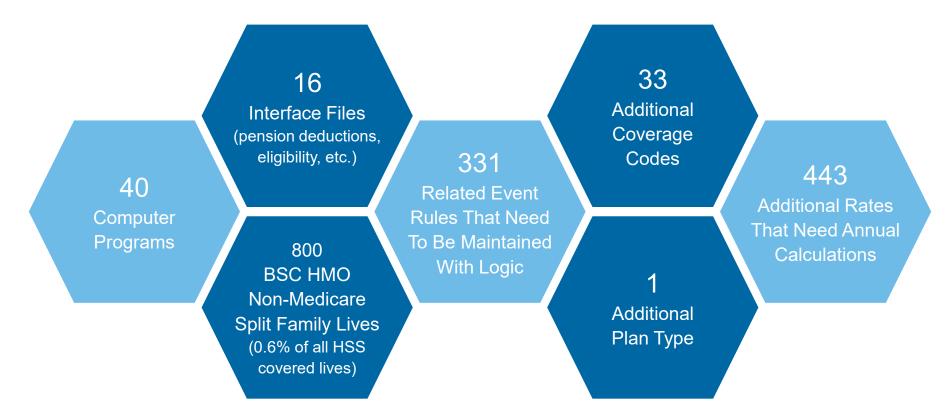
For Plan Year 2017, all Blue Shield MAPD HMO participants were migrated to UnitedHealthcare Medicare Advantage PPO Plan. At that time, SFHSS discovered that there was a population of split-families with Non-Medicare covered lives that would be left without an affordable health plan option with reasonable member shares of cost. In order to minimize the financial impact to these members, SFHSS allowed non-Medicare family members to enroll in the existing Blue Shield HMO plans.

This created prohibitive and complex administrative burdens for both SFHSS and the Health Plans, as eligibility systems are only designed to enroll dependents under a primary subscriber. Since 2017, SFHSS has been looking for a solution that would not cause significant member disruption.

In 2020, SFHSS learned about the UnitedHealthcare Doctors Plan and Broad Network EPO plans, which closely align the benefits and provider network, while eliminating the need to split enrollment between two different carriers. SFHSS recognized these plans could be a viable solution to the split family dilemma with minimal disruption.

Rationale for Recommended Change

The magnitude of system impacts and the support of these modifications to "trick the system" into enabling SFHSS to enroll dependents with different carriers than subscribers is wholly out of balance in terms of time and resources used to maintain this.



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Rationale for Recommended Change, continued

The administration of a split carrier solution is fraught with issues for SFHSS. A split carrier solution is not industry standard for employer group benefits administration, because none of the eligibility systems are designed to enroll dependents without subscribers.

- Reconciling recurring electronic data Interface issues with the eligibility files/enrollment (most recent issue impacted 300 BSC splits who were not showing as enrolled).
- Addressing recurring issues with carrier billing and reconciliation of enrolled members/ "dependents as members".
- Resolving recurring issues with inbound data load of pension actual deductions for members in this configuration.
- Redesigning enrollment reports to maintain all customized programming.

Member Confusion



2 Different ID Cards

2 Different Carriers

Dependents getting dropped or having incorrect pension deductions

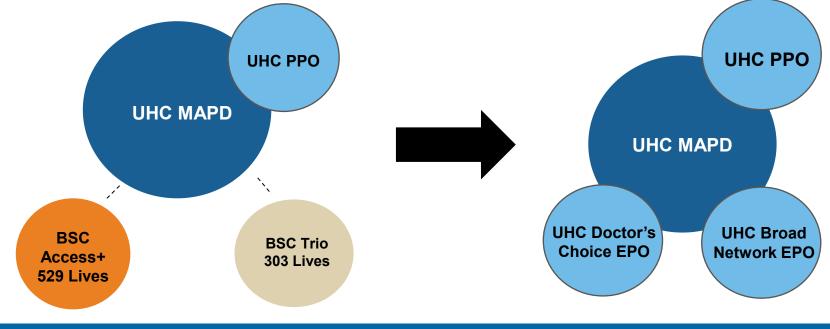
Dependents have to explain to providers the subscriber is on a different plan

Extra education on how the plan works

Rationale for Recommended Change, continued

Today's recommendation replaces the BSC HMO plan choices for Non-Medicare Split Family lives with two UHC EPO plans and maintains the UHC Non-Medicare PPO Companion Plan as a choice for Non-Medicare Split Family lives.

This recommendation does not impact UHC Non-Medicare PPO covered lives. Projected impacts for current BSC HMO Non-Medicare Split Family covered lives are addressed in the next section of this document.



SAN FRANCISCO HEALTH SERVICE SYSTEM

Projected Impact

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Current Plan	Count	Mapped Plan*	Provider Match	Cost Impact
UHC Non- Medicare PPO	392	UHC Non-Medicare PPO	100%	Neutral
BSC Access+	525	UHC Broad EPO	95% (unmatched only had 1-2 SFHSS patients during 2021)	Neutral
	4	UHC Non-Medicare PPO	100%	More
BSC Trio	279	UHC Doctors Plan EPO	52%**	Neutral
	24	UHC Broad Network EPO	Unknown	More

- * Mapped plan represents the plan available (within the retiree's geography) with the closest plan design. Retirees may choose their desired plan during 2023 open enrollment.
- ** Disruption driven primarily by those seeking care through BTMG, El Camino Hospital, Stanford Hospitals and Clinics, certain Sutter entities such as Alta Bates/Summit, CPMC, and Eden Medical Center). However, all of these networks are available on the UHC Broad Network EPO.

Member Transition Support

The HSS Member Services Team and UnitedHealthcare stand ready to provide concierge-level support to explain the recommended change and to support members with any resulting Continuity-of-Care issues.

- Staff Training
- Advanced communications prior to Open Enrollment via custom mailer and email along with a dedicated webpage for impacted members
- Call Center Support
- UHC Office Hours
- UHC to call all impacted members to inform them of the change and their choices

Recommendation for Health Service Board Action

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The SFHSS staff recommends that the Health Service Board (HSB):

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