



Manchester School District

Medical & Dental Plans

July 1, 2017

MSD Agenda

- Overview of Health Plans
- Live Health Online
- VitalsSmartshopper
- Dental



All forms and information can be found on the HR web site
<http://hr.mansd.org/benefits>

MSD – Health Plans At A Glance*

Plan Benefits	HMO \$250	New HMO \$1500 ⁽²⁾	POS \$300 ⁽¹⁾	New POS \$1500 ^(1 & 2)	HSA ⁽¹⁾	HDHP
Preventive Visit	Covered in Full	Covered in Full	Covered in Full	Covered in Full	Covered in Full	Covered in Full
PCP Co-pay	\$20	\$20	\$25	\$25	Deductible	Deductible
Specialist Co-pay	\$30	\$30	\$35	\$35	Deductible	Deductible
Deductible	NA	NA	NA	NA	\$2,000/\$4,000	\$2,000/\$4,000
Inpatient Facility	\$250 Copay	\$1500 Copay	\$300 Copay	\$1500 Copay	Deductible	Deductible
Outpatient Facility	\$250 Copay	\$1500 Copay	\$300 Copay	\$1500 Copay	Deductible	Deductible
Coinsurance	NA	NA	NA	NA	NA	NA
ER Co-pay/ Urgent Care	\$100/\$50	\$100/\$50	\$150/\$75	\$150/\$75	Deductible	Deductible
Chiro/Rehab	\$30	\$30	\$35	\$35	Deductible	Deductible
Retail Drug Copay	\$10/\$30/\$50	\$10/\$30/\$50	\$10/\$30/\$50	\$10/\$30/\$50	Deductible	Deductible
Mail Order Drug Copay	\$20/\$60/\$100	\$20/\$60/\$100	\$20/\$60/\$100	\$20/\$60/\$100	Deductible	Deductible
HSA Contribution	\$0	\$0	\$0	\$0	\$1,500/\$3,000	\$0

Notes: * Please refer to your union contract for the plan(s) available to you.

1. Summary for POS & HSA plans reflect only the in-network benefits.

2. Maximum Inpatient/Outpatient copay is \$1,500/person and \$3,000/family on new HMO/POS.

HDHP Plan with HSA Overview

	Lumenos Plan	Single Coverage	Family Coverage
Preventive	Nationally recommended services	No cost, no deduction from HSA with in-network providers	
HSA	MSD Contribution	\$1,500	\$3,000
Traditional Health Coverage	Annual Deductible You can use the funds from your Health Savings Account to help satisfy your annual deductible	\$2,000	\$4,000
	Then, you pay coinsurance for covered services	0% for In-Network Services 30% for Non-Network Services	
	Plan pays 100% after annual out-of-pocket maximum (includes annual deductible and coinsurance)	In-Network \$2,000 Non-Network \$4,000	In-Network \$4,000 Non-Network \$8,000

But Wait.....

- MSD is giving me
 - \$1,500 for a single plan
 - \$3,000 for a two person or family plan
- My Deductible is
 - \$2,000 for a single plan
 - \$4,000 for a two person or family plan
- So my worst case is
 - \$500 for a single plan
 - \$1,000 for a two person or family plan

And Remember.....

- Preventive care is free (no deductible)
 - Physicals, Mammograms, Pap, PSA, Colonoscopy etc.
- MSD contributes half of the contribution in July, then remaining funds distributed every month until December
- You can add money to your HSA thru payroll ded.
 - Single, less than \$10/ week covers the gap
 - Two Person/Family less than \$20/ week

Show Me An Example

Single Employee, Minimal Use - \$1500 Starting Balance					
Expenses	HSA Medical Plan Pays	HSA Account	HSA Balance	HMO Copays	POS Copays
Preventive Doctor Visit	\$200	\$0	\$1500	\$0	\$0
Specialist Doctor Visit	\$0	\$125	\$1375	\$30	\$35
Prescription Drug	\$0	\$200	\$1175	\$30	\$30
HSA Rollover to Next Year			\$1175		
Total Employee out of pocket cost		\$0		\$60	\$65

➔ Note: Copays based on HMO & POS \$1500 plans

Another Example.....

Single Employee, Heavy Use - \$1500 Starting Balance					
Expenses	HSA Medical Plan Pays	HSA Account Cost	HSA Balance	HMO Copays	POS Copays
Preventive Doctor Visit	\$200	\$0	\$1500	\$0	\$0
3 Specialist Doctor Visit	\$0	\$375	\$1125	\$90	\$105
3 Prescription Drugs	\$0	\$300	\$825	\$50	\$50
ER Visit	\$0	\$800	\$25	\$100	\$150
Surgery	\$8000	\$525	\$0	\$1500	\$1500
HSA Rollover to Next Year			\$0		
Total Employee out of pocket cost		\$500		\$1740	\$1805

➔ Note: Copays based on HMO & POS \$1500 plans

.....One More

Family, Heavy Use - \$3000 Starting Balance					
Expenses	Medical Plan Pays	HSA Plan Cost	HSA Balance	HMO Copays	POS Copays
Preventive Doctor Visit - Employee	\$200	\$0	\$3000	\$0	\$0
6 Specialist Doctor Visit - Employee	\$0	\$850	\$2150	\$180	\$210
4 Prescription Drug – EE	\$0	\$800	\$1350	\$120	\$120
10 Chiropractic Visits	\$0	\$800	\$550	\$300	\$350
Preventive Doctor Visit - Spouse	\$200	\$0	\$550	\$0	\$0
6 Prescription Drug - Spouse	\$0	\$300	\$250	\$80	\$80
Preventive Doctor Visit - Child	\$200	\$0	\$250	\$0	\$0
2 Specialist Visits - Child	\$0	\$250	\$0	\$60	\$70
ER Visit - Child	\$0	\$1000	\$0	\$100	\$150
HSA Rollover to Next Year			\$0		
Total Employee Out of Pocket Cost		\$1000		\$840	\$980

➔ Note: Copays based on HMO & POS \$1500 plans

So I Need To Consider

- The deductible (\$2,000 or \$4,000)
 - Minus my Employer HSA Contribution (\$1,500 or \$3,000)
 - Minus my savings through my paycheck
 - Minus the copays I spend in my current plan

Better yet, look up your own claims at [Anthem.com](https://www.anthem.com)

How Are Claims Paid

- Show your Anthem medical card when you see a provider
- The HSA account comes with a Debit Card
- At the Pharmacy you pay for prescriptions with your Debit Card
- Doctors Office – will send you a bill, write your debit card info on the bill and mail it back for payment
- View Claims on line at Anthem.com, HSA balance on line at BenefitWallet.

Did You Know?

- HSA contributions are tax free; Accumulate tax free and distributions are tax free for qualified medical expenses. Triple tax advantage!!!
- The money can be used to pay some Medicare and LTC Premiums
- The account has a named beneficiary
- When you retire, the balance of the HSA account is yours
- The money can be used for non-medical expenses once you reach age 65 (you pay taxes for non- medical expenses)

And.....

- To open and make and/or receive contributions to an HSA, an individual:
 - Must be on a federally qualified high deductible health plan (HDHP)
 - IRS tax dependent status applies for dependent medical expenses
 - Cannot have any other medical coverage, including a spouse's FSA, unless the other medical coverage also qualifies as a federal HDHP and the individual is covered as a dependent by the secondary plan
 - Must not be enrolled in TRICARE or be claimed as a dependent on someone else's tax return

And There's More.....

- You cannot contribute to your HSA if you have Medicare Part A or Part B
- You can delay receiving Social Security benefits
- You can defer Medicare Part A and B and continue contributing to your HSA
 - **Check with your local Social Security office on any penalties to defer Medicare**

How to get the most out of your health plan

- Urgent Care, Walk In Facilities, LiveHealth Online vs. Emergency Room
- Use the Vitals Smart Shoppers Program
www.vitalssmartshopper.com or 1-800-824-9127
- Utilize Independent Ambulatory Surgical Centers
 - Bedford Ambulatory Surgical Center, Concord ASC at Horseshoe Pond, Elliot One Day Surgery Center, etc.
- Utilize Independent Lab Facilities
 - Quest Diagnostic, Lab Corporation, NorDx Lab, Convergence Lab
- Generic Medication & Mail Order Pharmacy (HMO/POS)

What is LiveHealth Online?

LiveHealth Online:

- Is available in most states*
- Is available anywhere you have a computer or mobile device with Internet access (at home, in the office or on the go)
- Connects you to in-network board-certified doctors 24 hours a day, 7 days a week, 365 days a year. Doctors can ePrescribe** utilizing local pharmacies (where applicable)
- Connects you to in-network licensed psychologists and therapists by appointment only.
- Takes member payments via Visa, MasterCard, American Express and Discover
- Is secure, convenient and easy-to-use

*LHO is not yet available in some states. **In certain states, prescriptions cannot be issued as a result of an online interaction with a doctor. For state telehealth availability, check the map on www.LiveHealthOnline.com.

Doctors consult with patients 24/7 on a variety of conditions, such as:

- Fever
- Sore throat
- Cough and colds
- Flu
- Urinary tract infections
- Sinusitis
- Allergies
- Eczema, rashes and skin lesions
- Heartburn

- ALL EMPLOYEES ARE ELIGIBLE – no matter the plan
- Shop BEFORE you have a procedure
 - EACH TIME you need a procedure, you must shop
- Website: www.vitalssmartshopper.com
 - Available 24/7
 - Individual profiles – keep it updated!
- Phone: **800.824.9127**
 - Monday - Thursday, 8:00 am-8:00pm, Friday 8:00am-6:00pm
 - Personal Assistants Team to help
- Incentives can be expected 45-60 days after a procedure
 - Procedure must match what was shopped for
 - Claim must be paid by Anthem, then Vitals sends incentive check

SmartShopper Example: Knee Injury



vitalssmartshopper

Example: Doctors Recommends an MRI

- **Call Anthem for approval**
- **Call SmartShopper**
 - Verify location is cost-effective
 - Earn up to \$150 incentive with SmartShopper

Based on MRI, Doctor Recommends Arthroscopic Knee Surgery

- **Call Anthem for approval**
- **Call SmartShopper**
 - Verify location is cost-effective
 - Earn up to \$250 incentive

After Surgery, Doctor Recommends Physical Therapy

- **Call Anthem for approval**
- **Call SmartShopper**
 - Verify location is cost-effective
 - Earn up to \$150 incentive

What happens if location is not cost-effective:

- If location is not cost-effective the members Personal Assistant can continue to search until they locate a cost-effective facility that the member is comfortable with.
- Once the members Personal Assistant locates a cost-effective facility they will contact the members physicians office, and communicate that the member would like to have their procedure done at an alternative facility and ask the physician to change the location on the order.
- A Personal Assistant will then call the new cost-effective facility and assist the member in scheduling their procedure
- A Personal Assistant will enter the members appointment in their system so they can contact the member days after their appointment to confirm the process was successful, and see if the member needs to search and schedule additional cost-effective procedures.

Dental Plan Design

	Benefit
Annual Maximum Benefit	\$1,500 per person
Diagnostic/Preventive Services	100%
Basic Services	60%
Major/Restorative	50%



