



Kenyon College 2019-2020 Open Enrollment

Today's Discussion Topics

- Dental Plan
 - Change carrier to Delta Dental
 - Increase calendar year maximum from \$1,000 to \$1,500
 - Two dental provider networks Delta Premier and Delta PPO
 - Evidence-based Benefits added
 - No payroll deduction increase
- Medical Plan-UMR
 - Enhanced in-network wellness/preventive care benefits
 - Provider network changing from UHC's Options PPO to UHC's Choice Plus PPO Network
 - Out of network benefits modified slightly
 - Payroll deductions increasing by 5%
- Prescription Plan-Optum RX
 - Change from Express Scripts to OptumRx
 - Adding an out of pocket maximum
- Q&A



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Welcome Kenyon College to Delta Dental of Ohio



We do dental. Better.



Your Plan Highlights

GENERAL PROVISIONS	IN-NETWORK Delta Dental PPO Delta Dental Premier	OUT-OF-NETWORK
 Diagnostic & Preventive Services (Exams, Cleanings, X-rays, Fluoride, Emergency Palliative Treatment, Brush Biopsy and Sealants) 	100%	100%
 Basic Services (Fillings, Bridge & Crown Repair, Periodontic Services, Endodontic Services, Denture and Implant Repair, Extractions, and Oral Surgery) 	90%	90%
 Major Services (Crowns, Bridges, Dentures and Implants) 	60%	60%
Orthodontic Services (Age Limit 19)	50%	50%
Annual Deductible (Waived for Preventive services)	\$50 per person/\$150 per family	
 Maximum Annual Benefit (Benefit year) Maximum Lifetime Orthodontic	\$1,500 per person (Increased from \$1,000) \$1,000 per person	



Extra benefits when you need them!

Your Delta Dental coverage may include additional routine cleanings or periodontal cleanings for people with certain at-risk conditions.

- Diabetes and gum disease
- Pregnancy and gum disease
- Individuals at risk for infective endocarditis
- Other at-risk conditions



If you have one or more of the conditions listed above, ask your dentist and physician how you can better manage your oral health to prevent infection and improve your condition.



Network Highlights

- You have access to both of Delta Dental's two networks, which equals better access
 - Delta Dental PPOSM deepest discounts
 - Delta Dental Premier[®]
- Participating dentists <u>do not</u> balance bill
- Warranty on their work.
- Our dentists submit claims for you, so there's no paperwork for you to file. You don't even need an ID card!
- Payment is sent directly to participating dentists



Network Highlights

- Save money by using a Network Provider.
- PPO Network largest discounts.
- Premier Network larger network.
- Knox County Providers PPO 27/32 Premier 30/32 (March 2019)

		DELTA DENTAL NETWORK		Out-Of-Network
CROWN		PPO Dentist	Premier Dentist	Dentist
	Submitted fee	\$1,100	\$1,100	\$1,100
	Maximum allowed fee	\$754	\$989	\$799
	Coverage level	80%	80%	80%
	Amount Delta Dental pays	\$603.20	\$791.20	\$639.20
	AMOUNT YOU PAY	\$150.80	\$197.80	\$460.80

For out of network services, the patient will be charged their coinsurance amount plus the balance bill amount over the allowed fee.



It's easy to find Participating Dentists

- Visit the delta Dental website
 - www.deltadentaloh.com
- Consumer Toolkit
- Delta Dental Mobile App
- Customer Service
 - **>** (800) 524-0149



» Step 1

Visit www.deltadentaloh.com. Click one of the links to Find a Dentist.

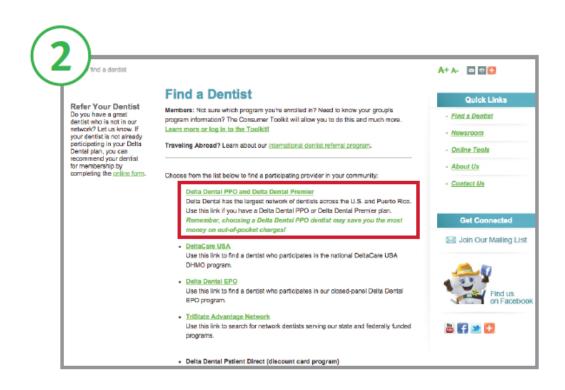
You may also go directly to www.deltadentaloh.com/findadentist





» Step 2

Select **Delta Dental PPO and Delta Dental Premier**.

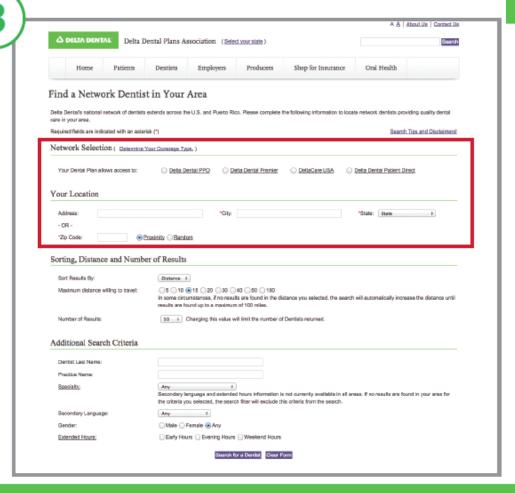




» Step 3

Select either **Delta Dental PPO** or **Delta Dental Premier** (your plan allows you access to both networks). You can save the most money and maximize your dental benefits by choosing a Delta Dental PPO dentist. Next, enter your address or your ZIP code.

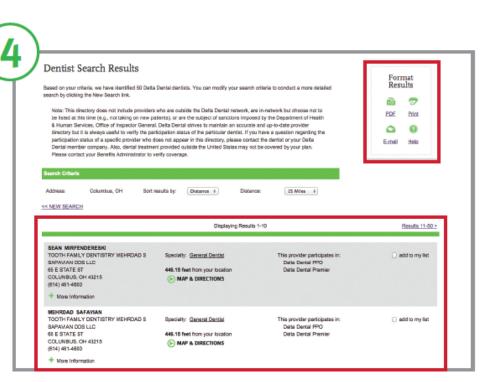
Optional: You can filter your search results by distance, number of results, dental specialty, languages spoken and gender. You can also search for a specific dentist by name.





» Step 4

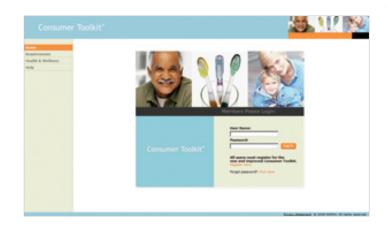
Your results will be displayed. In addition to viewing your search results online, you can print or email your results or view your results as a PDF.





Online Consumer Toolkit®

- Verify eligibility status
- Obtain alternate ID
- Confirm address
- Benefit overview
- View/print EOBs
- Print ID cards, if you choose
- Plan maximums used-to-date
- Valuable oral health information





Mobile Smartphone App

- Verify eligibility and benefits
- Find a dentist
- View ID card
- Cost Estimator





Hassle-free Customer Service 800-524-0149

- Experienced, well-trained customer service reps
- Easy access to answers
 - Nationwide toll-free number staffed 8:30 a.m. to 8:00 p.m. ET
 - Automated system available 24/7 answers more than half of all inquiries
- More than 99% of inquiries are resolved on the first call









Sign up for your 2019 benefits

May 1st – June 15th

Today you'll learn more about:

- Medical plan options
 - Premium Plan
 - Basic Plan
- How to Enroll
- ID Card
- UMR.com



What's new for 2019

- Preventive Care Coverage
- Out of Network Deductible Increase
- New Pharmacy Benefit Manager,
 Optum Rx



Premium Plan

	In-network	Out-of-network
Annual deductible	\$250 individual / \$500 family	\$500 individual / \$1,000 family
Benefit percentage (coinsurance)	Plan pays 80%	Plan pays 60%
Out-of-pocket maximum- Medical	\$1,250 individual / \$2,500 family	\$2,250 individual / \$4,500 family
Preventive care	Claims paid at 100%	\$15 copay and 40%
Office visit	\$15 copay	Deductible & 40%
Emergency room	Deductible & 20%	Deductible & 20% True ER Deductible & 40% Non-True ER
Urgent care	Deductible & 20%	Deductible & 40%
Inpatient hospitalization	Deductible & 20%	Deductible &40%
Outpatient surgery	Deductible & 20%	Deductible & 40%
Prescription drugs Generic/Preferred brand/Non-preferred	Retail: 10%, \$10 min/\$150 max 20% \$25 min/\$250 max 30%, \$50 min/\$250 max Mail: \$20/\$50/\$100	N/A



Basic Plan

	In-network	Out-of-network
Annual deductible	\$500 individual / \$1,000 family	\$750 individual / \$1,500 family
Benefit percentage (coinsurance)	Plan pays 70%	Plan pays 50%
Out-of-pocket maximum- Medical	\$3,500 individual / \$7,000 family	\$5,500 individual / \$11,000 family
Preventive care	Claims paid at 100%	\$20 copay and 50%
Office visit	\$20 copay	Deductible & 50%
Emergency room	Deductible & 30%	Deductible & 30% True ER Deductible & 50% Non-True ER
Urgent care	Deductible & 30%	Deductible & 50%
Inpatient hospitalization	Deductible & 30%	Deductible & 50%
Outpatient surgery	Deductible & 30%	Deductible & 50%
Prescription drugs Generic/Preferred brand/Non-preferred	Retail: 10%, \$10 min/\$150 max 20%, \$25 min/\$250 max 30%, \$50 min/\$250 max Mail: \$20/\$50/\$100	N/A





How to enroll

During open enrollment, you can:

- Sign up for medical coverage
- Switch from one plan to another (if eligible)
- Add or drop coverage for a spouse
- Choose to contribute tax-free dollars to a flexible spending account (FSA) \$2700 maximum for health care and \$5,000 maximum



Remember to complete and submit all necessary enrollment forms prior to June 15th.

Changing your coverage after a 'life event'





Loss of other insurance



Marriage or divorce



Dependent child reaching limiting age



Adoption or birth of a child

Contact HR within 31 days to make changes.

Activate your member ID card



Call the number and peel off the sticker





If you or your covered dependents have other health insurance coverage, please be prepared to provide that information.

03122-0002-L

Dependents
JACK SMITH 01 MED DEN
JORDYN SMITH 02 MED DEN
MARK SMITH 03 MED DEN

Copay: OFFICE \$XX

Rx BIN: 123456 Rx GRP: 12345678 Rx PCN: 87654321 COPAY:TIER 1/2/3 \$XX/\$XX/\$XX

> Primary network logo here

Administered by UMR

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Signing up for umr.com

- Visit **umr.com** on your desktop computer or tablet device
- 2 Click Login/Register to sign up

Helpful hints

- Have your UMR member ID card handy
- Spouses and adult children must create their own online account
- You must provide a valid email address
- Select a username and password you can remember

A digital ID card on umr.com



- View your member ID information on your computer or mobile device
- Have your doctor scan the on-screen bar code for your benefits information
- Print a temporary replacement card
- Fax a copy of your card to your doctor's office



See your benefits information anytime, anywhere





With umr.com you can:

- View My taskbar, your personalized to-do list
- Check your benefits and see what's covered
- Look up what you owe and how much you've paid
- Find a doctor in your network
- Learn about medical conditions and your treatment options





myMenu makes it easy



Quickly find the answers you're looking for

- View myMenu, your personalized to-do list
- View benefits and claims
- Order, view, print or fax an ID card
- Find a provider
- Check account balances
- Access your pharmacy benefits
- Visit the health center for tools and information

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Look for provider ratings for quality and cost



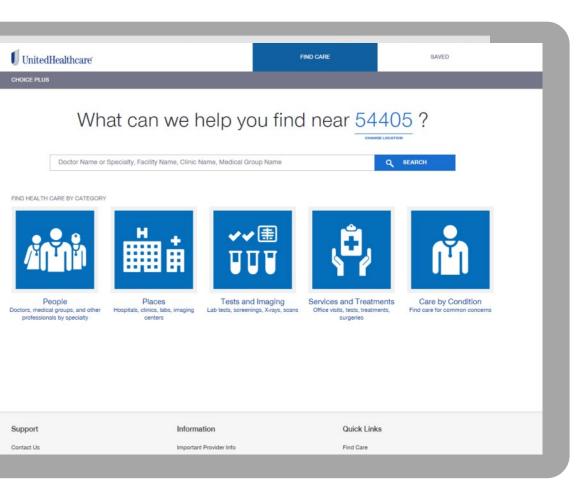
UnitedHealth Premium symbols look like this:



When you receive care from a Premium provider, you may pay less in out-of-pocket costs for your visit.

Look up care where you live





Search by category:

- People: Doctors and other health care providers
- Places: Hospitals, clinics, imaging centers
- Tests and Imaging: Lab tests, screenings, scans
- Services and Treatments: Office visits, surgeries
- Care by Condition: Area of the body, type of illness





Access to personal health information online

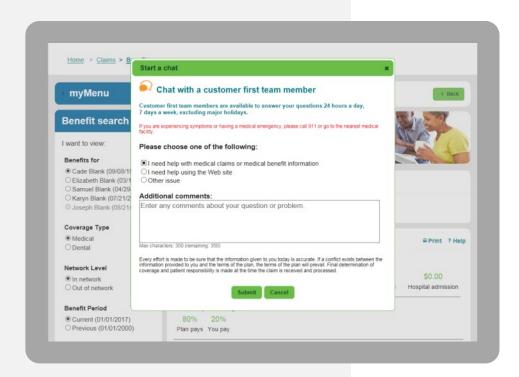
Plan members over age 18 must grant others access to their information. In other words, plan holders cannot see a spouse or adult dependent's claims, benefits, or eligibility information unless that spouse or adult dependent grants access.

Here's how:

- A spouse or adult dependent must create their own account on umr.com
- After logging in, select the "Account settings" icon from the top of the page
- In the "Access privileges" section, make the appropriate security selections

Chat online with UMR customer service





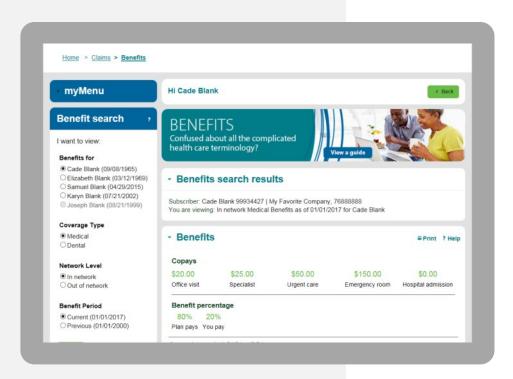


We've made it easier for you to get the answers you need – fast

- Simply log in to umr.com and click the Live Chat icon in the top navigation bar
- Team members are available 24 hours a day, seven days a week (excluding major holidays)

Review deductible and out-of-pocket amounts



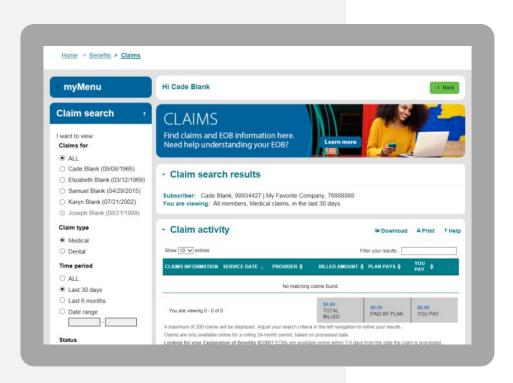


Get your answers fast

- Is there a co-payment for your office visit?
 If so, how much?
- What's your deductible, and are you close to reaching it?
- How much have you paid toward your out-of-pocket maximum?

How to check claims status on umr.com



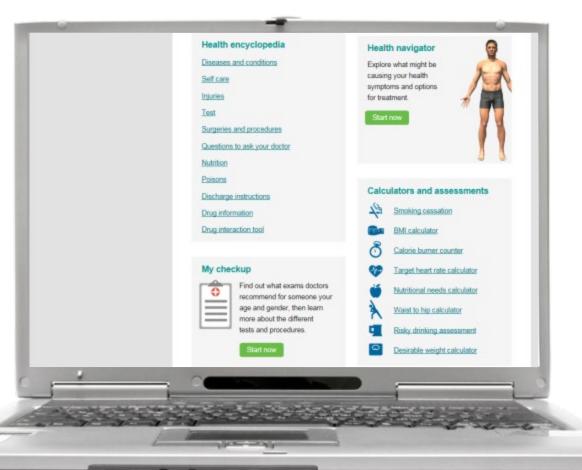


View claims by service date, family member, status and more

- Clearly organized and easy to sort
- Find out what you owe
- Get all the details in one place
- Safe and secure
- No lost paperwork

Check out the Health Education Library





Explore a wealth of information:

- Care guides on chronic conditions and preventive care
- **DrugNotes** on brand name and generic medications
- Drug interactions with food, alcohol and alternative medicines
- Symptom Navigator offers a quick way to get the answers you're looking for



Look for this tile on umr.com

Prescription Drug Plan

OptumRx – new carrier

Retail	Premium Plan	Basic Plan
Generics	10% (\$10 minimum/\$150 maximum)	10% (\$10 minimum/\$150 maximum)
Preferred Brands	20% (\$25 minimum/\$150 maximum)	20% (\$25 minimum/\$150 maximum)
Non-Preferred Brands	30% (\$50 minimum/\$250 maximum)	30% (\$50 minimum/\$250 maximum)
Mail Order		
Generics	\$20 copay	\$20 copay
Preferred Brands	\$50 copay	\$50 copay
Non-Preferred Brands	\$100 copay	\$100 copay
Out of Pocket Maximum	\$6,650 / \$13,300	\$4,400 / \$8,800



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Pharmacy benefits

OptumRx is the new Pharmacy Benefit Manager

OptumRx offers:

- More than 65,000 pharmacies nationwide
- Customer service center available 24 hours a day, 7 days a week
- Online preferred product listing and pharmacy network listing:
 - Visit www.umr.com
 - Click on **Pharmacy** in the myMenu

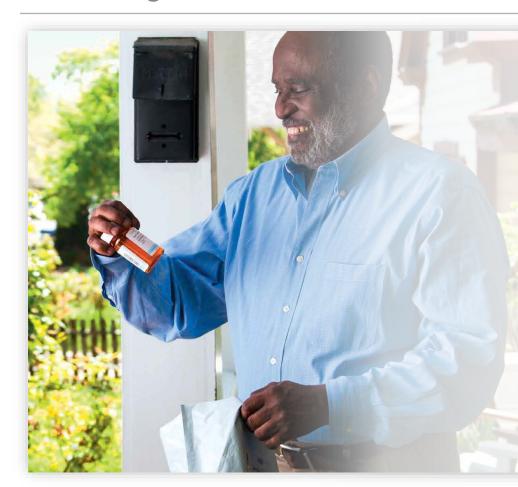
Call toll-free:

877-559-2955



OptumRx Home Delivery

Delivering lower costs and better results



Affordability

Mail service pharmacies save an average of 16% on prescription costs compared to retail pharmacies.¹

Convenience

Free standard shipping on medications delivered to member mailboxes.

Better Adherence

OptumRx members are 13.4% more adherent using 90-day Home Delivery compared to 90-day retail²

99.995% Accuracy³

Automated process and several safety checks to ensure member safety.

1. "Mail-Service and Specialty Pharmacies To Save More than \$300 Billion Over 10 Years." Visante Sept 2014; 2. Medication Adherence among Mail-order Pharmacy Users versus Retail Pharmacy Users with 90-day Supply Prescription Fills. Lihua Zhang, MD, PhD, et al. Presented at the Academy of Managed Care Pharmacy 2015 Annual Meeting, San Diego, CA – April 7-10, 2015; 3. Based on OptumRx Home Delivery reporting 2015



Simplify prescriptions with Hassle-Free Fill™

This OptumRx home delivery program automatically refills and delivers 3-month supplies of a member's medication.



When it's time to fill, the member is automatically notified in advance



OptumRx processes and refills the medication



Medication is delivered up to a 90-day supply to member's home, with no charge for standard delivery



Hassle-Free Fill helps members stay adherent to their medications, which can improve outcomes and reduce future medical costs.



Note: not all medications are eligible for automatic refill. A member can cancel delivery of medication prior to shipping and can dis-enroll in the program at any time. The Hassle-Free Fill program is not customizable at this time

Prior Authorization

Promoting safe and effective medication use

Some medications must be authorized for coverage because

- They're only approved or effective in treating specific illnesses
- They cost more or they may be prescribed for conditions for which safety and effectiveness have not been well-established

If left unmanaged without requiring prior authorization, these medications can significantly increase plan costs.

Example: Actiq®





FDA-approved for treating cancer-related pain in members already taking opioid medication around-the-clock



NOT COVERED for migraines

Contraindicated in the management of acute or post-operative pain including migraines

Program Benefits

The Prior Authorization Program creates potential for plans to achieve the following benefits:

- Increased formulary awareness and positioning through clinical criteria that promote safe and effective medication use
- Improved quality of member care by using evidence-based criteria to promote appropriate use of certain medications
- Reduced inappropriate use of these medications which generates cost savings



Step Therapy

Directing members to safe and cost-effective medications

Directing members to preferred cost-effective medications as initial steps in treatment.



Member prescribed Rx



STEP 1:

Try a lower-cost medication first



STEP 2:

Before higher-cost medication covered

Program Benefits

The Step Therapy Program creates potential for plans to achieve the following benefits:

- Provide opportunity for member savings by using clinically preferred and/or more cost-effective medications
- Reduced pharmacy costs
- Improved formulary management and positioning



Quantity Limits

Ensuring clinically appropriate use of medications



Per Prescription

- Applied to fewer drugs
- Take as needed, such as:
 - Anti-infectives (e.g., eye drops)
 - Bowel preps and titration kits



Per Duration

- Applied to more drugs
- Taken on a regular basis, such as:
 - High blood pressure
 - High cholesterol
 - Diabetes

Program Benefits

The Quantity Limits Program creates potential for plans to achieve the following benefits:

- Improved quality of member care through prevention of excessive dosages
- Minimized potential misuse of certain medications
- Reduced pharmacy plan medication costs through dose optimization
- Reduced pharmacy claim submission errors related to medication quantity by dispensing pharmacies

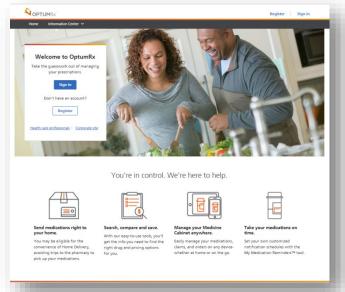


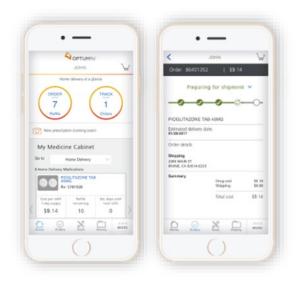
OptumRx Digital Member Tools





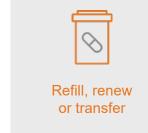
Convenient tools to improve member experience





Key Features

Locator





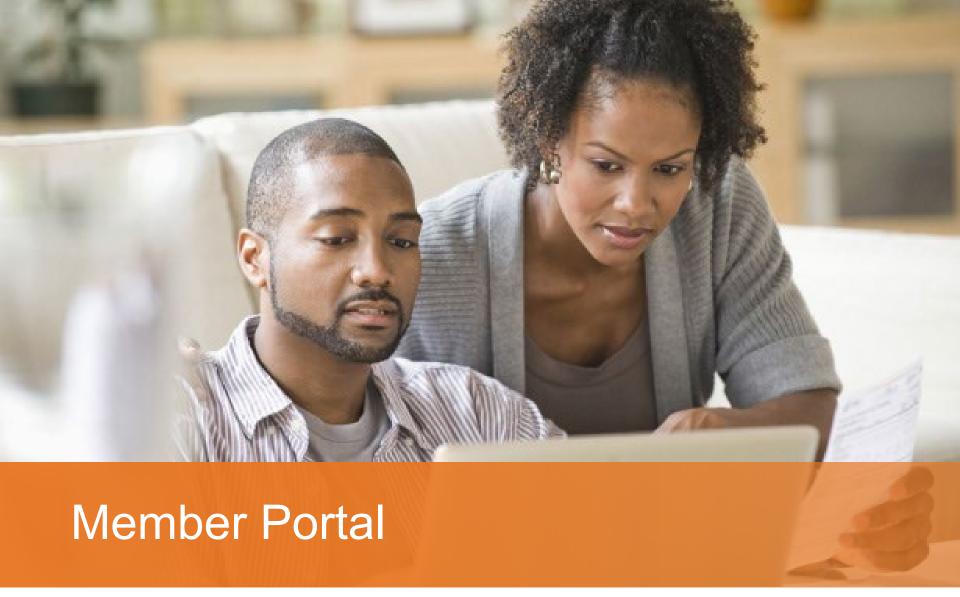




Order history and claims detail







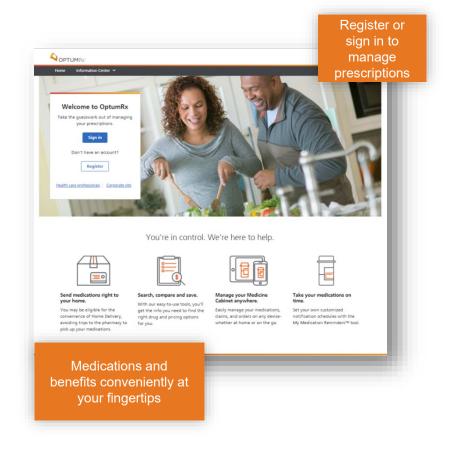


OptumRx member portal

Convenient, user-friendly tools help simplify and improve the consumer experience

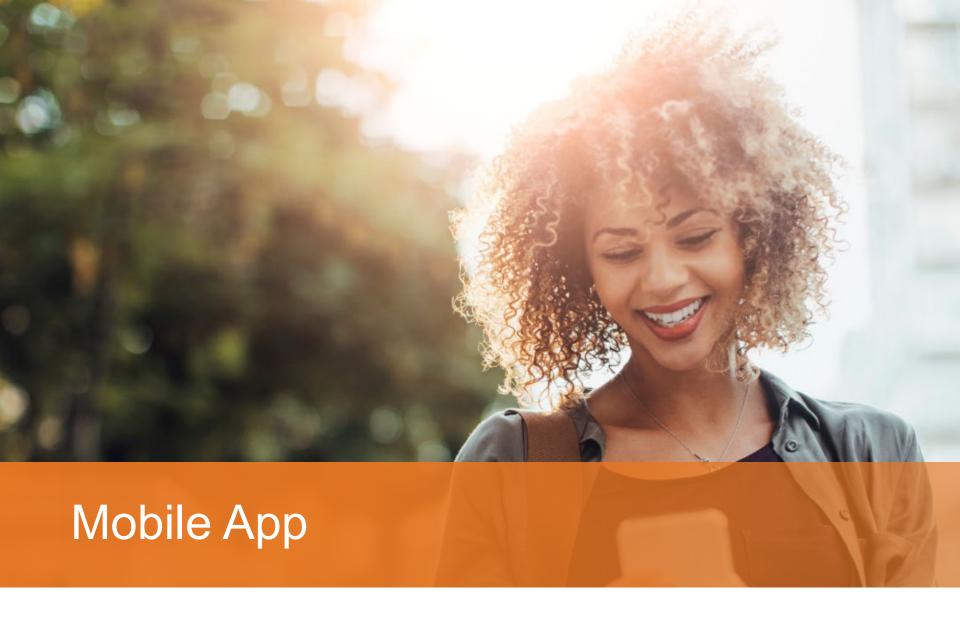
Today's Portal features:

- Order home delivery refills, renew and transfer prescriptions and track order status
- Refill select specialty pharmacy medications
- Release order holds online
- Price medications and search for lower cost alternatives
- Review pharmacy benefits, prescription drug list coverage, and claim history
- Locate in-network pharmacies
- Medication reminder enrollment
- Manage household and caregiver access
- Digital delivery of prescription Lit-packs
- Improved Hassle Free Fill enrollment









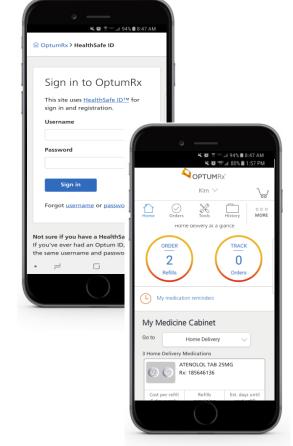


OptumRx Mobile App

Delivering mobile solutions for members on the go

Today's features and enhancements:

- Easy Start Rx submit a Rx by photo or scan an OptumRx home delivery barcode to expedite Home Delivery refills
- My Medication Reminders two-way push notifications allowing users to note if they took their medications, skipped a dose or would like to be reminder later
- Order home delivery refills, renew and transfer prescriptions, track order status and remove order holds
- Review pharmacy benefits, prescription drug list coverage, and claim history
- Household access
- Price drugs for home delivery or multiple retail locations
- · View prior authorizations (PA) history
- Quickly pay your balance online
- Login by Touch ID











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What you need to do...

- Review the information and make decisions
- Open Enrollment decisions must be to Human Resources no later than June 15, 2019.
- The benefits you elect during open enrollment will be effective from July 1, 2019 through June 30, 2020.
- You will not be able to make changes to your elections until the next open enrollment of July 1, 2020 unless you experience a valid Qualifying Event.
- If no changes are requested your current benefits and enrollment will be carried forward.



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Questions?



Should you have further questions, please contact:

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We are here for you!



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