

GIC Listening Sessions

Fiscal Year 2020 Benefit Recommendations



Group Insurance Commission



@MassGIC

I. Welcome

I. Summary of FY 20 Benefit Recommendations – GIC Executive Director Dr. Roberta Herman

II. Public Comments / Q & A

Commonwealth of Massachusetts Group Insurance Commission

The GIC: Overview

425,000 total members

76,000 Medicare subscribers

The GIC is the single largest purchaser of health insurance in the Commonwealth!

FY2019 Budget: \$2.1 billion

670 State, Regional and Quasi-**Public Agencies**

(including Housing/Redevelopment Authorities, MWRA, MassPort, MBTA, etc.)

Municipalities:

Reg. School

Districts and Ed.

Collaboratives:

Executive Summary: Reflection

Using GIC's purchasing power to obtain better pricing

FY2019

- Aggregate rate increase: 0%
- Pharmacy benefits: carved out for active and Medicare plans
- Behavioral health benefits: integrated with medical
- Benefit Harmonization: OOP maximums aligned across plans
- Steerage: Limited network deductibles reduced (from \$500 to \$400)
- Provider Tiering Tier 3 specialist copay reduced (from \$90 to \$75)
- Pool 2 eliminated: all plans available for all members
- Employee Assistance Program (EAP)
 introduced

Targeted Out of Pocket cost reductions

Executive Summary: Looking to Tomorrow and Beyond

FY2020

- Aggregate projected increase: 3.3%
- Medicare: no benefit changes
- Non-Medicare: All carriers, products, yearly deductibles remain the same
- Benefit Harmonization: Catalogue "below the line" benefit inconsistencies
- Steerage: Introduce differential co-pay to steer members to lower cost settings for ambulatory surgery
- Provider Tiering: Move from individual to group for Specialists
- Socialization of above focus areas with key stakeholders

FY2021 & Beyond*

- Centers of Excellence: Use GIC's buying power to concentrate volume with high value providers
- Benefit Harmonization: Re-visit opportunities to correct benefit inconsistencies
- Steerage: Consider additional opportunities, to steer (e.g. high tech imaging)
- Provider Tiering: Align tier assignments within groups for primary MD's, facilities, specialists
- Continued socialization

*Priorities and projects still under development

Current State: Member & Budget Impacts for Ambulatory Surgery

- Goal is to give members a portion of savings when they utilize freestanding facilities
- Health carriers expect 5% 15% steerage to freestanding facilities
- Health carriers have many contracted ambulatory surgical centers in Massachusetts:
 HPHC- 63; Tufts- 55; AllWays- 44; UniCare- 33; Fallon- 52; HNE- 2

Category	Current State	Recommendation	Member impact
Ambulatory surgery site of service for eye and GI procedures	 All products except Unicare: \$250 copay then deductible for all outpatient surgeries regardless of place of service UniCare \$0 copay after deductible 	 Maintain \$250 co-pay for hospital-based outpatient Offer lower \$150 co-pay for freestanding facilities 	 Members can pay less if they utilize a freestanding facility Members who continue to choose hospital-based facilities will not see an increase in copay
	freestanding ASC facilities. Fees range from \$110-250 for hospital based ambulatory surgery	 UniCare design would retain \$0 copay for freestanding facilities 	 It is estimated that approximately 10,000 – 20,000 of these procedures are done each year

Provider Tiering Roadmap

Group Tiering for Specialists implemented in FY20 paving the road to align PCPs and Hospitals in FY21 and beyond

	Broad	Limited	Regional	National Indemnity
Product Names	UniCare Plus, Tufts Navigator, Fallon Select, HPHC Independence	UniCare Community Choice, Tufts Spirit, Fallon Direct, HPHC Primary Choice	HNE HMO, AllWays Health Partners Complete	UniCare Basic
FY19	PCP: \$10-40 Specialist: \$30-75 Inpatient: \$275-1,500	PCP: \$15-20 Specialist: \$30-75 Inpatient: \$275-500	PCP: \$20 Specialist: \$30-75 Inpatient: \$275	PCP: \$15-20 Specialist: \$30- 75 Inpatient: \$275
FY20	No Change	No Change	PCP: No Change Specialist: \$30-60 Inpatient: No Change	PCP: No Change Specialist: \$30-60 Inpatient: No Change
Potential FY21 & Beyond	PCP: \$10-40 Specialist: \$30-75 Inpatient: \$250-1,500	PCP: \$10-20 Specialist: No Change Inpatient: \$250-500	PCP: \$10-20 Specialist: No Change Inpatient: \$250-500	PCP: \$10-20 Specialist: \$30-60 Inpatient: \$250-500

Green text represents potential member cost share decrease. *Italics* indicates for future consideration and is illustrative only.

THE END

THANK YOUR FOR YOUR ATTENTION!

Additional comments may be emailed to GIC.Info@mass.gov

Friendly Reminder

Please refrain from sharing personal health information or claim disputes when providing feedback

The GIC Public Information Unit or your health carrier will help with individual health insurance matters. Call (617) 727-2310 for assistance.