

## Response to Questions on the FY 2017 Budget

**Request By:** Supervisor Herrity

**Question:** Please provide an analysis of the change in medical insurance benefits over the past 5 years. Please include the employee portion of the premium, county cost, employee deductible and co-pay. Provide the percentage of employees in each plan and the percentage of employees who opt out of county medical benefits.

**Response:** The tables below provide a five-year history of employee and employer premiums, as well as in-network deductibles, co-pays, and co-insurance for each of the County's plans. Attachment 1 has been included to provide a more complete view of all plan design changes, including changes to dependent coverage, out-of-pocket prescription costs, emergency room co-pays, and advanced radiology co-pays. Attachment 2 provides enrollment of active employees by plan.

<b>Kaiser Permanente HMO</b>	<b>CY 2012</b>	<b>CY 2013</b>	<b>CY 2014</b>	<b>CY 2015</b>	<b>CY 2016</b>
<b>Employee Monthly Premium</b>					
Individual	\$73.49	\$79.81	\$81.65	\$86.22	\$86.25
2 Party	\$238.71	\$259.24	\$265.19	\$280.05	\$280.16
Family	\$355.15	\$385.69	\$394.46	\$416.57	\$416.75
<b>Employer Monthly Premium</b>					
Individual	\$416.47	\$452.29	\$462.69	\$488.61	\$488.73
2 Party	\$716.12	\$777.71	\$795.55	\$840.15	\$840.47
Family	\$1,065.43	\$1,157.06	\$1,183.39	\$1,249.70	\$1,250.24
Deductible	\$0	\$0	\$0	\$0	\$0
Primary Care Copay	\$10	\$10	\$10	\$10	\$10
Specialist Copay	\$10	\$10	\$10	\$10	\$10
<b>CareFirst POS<sup>1</sup></b>					
<b>Employee Monthly Premium</b>					
Individual	\$80.69	\$86.18	-	-	-
2 Party	\$264.30	\$282.27	-	-	-
Family	\$388.70	\$415.13	-	-	-
<b>Employer Monthly Premium</b>					
Individual	\$457.26	\$488.35	-	-	-
2 Party	\$792.88	\$846.80	-	-	-
Family	\$1,166.08	\$1,245.37	-	-	-
Deductible	\$0	\$0	-	-	-
Primary Care Copay	\$10	\$10	-	-	-
Specialist Copay	\$15	\$15	-	-	-

<b>Cigna Co-pay Plan<sup>2</sup></b>	<b>CY 2012</b>	<b>CY 2013</b>	<b>CY 2014</b>	<b>CY 2015</b>	<b>CY 2016</b>
Employee Monthly Premium					
Individual	\$88.64	\$100.70	\$102.63	\$110.80	\$118.53
2 Party	\$288.06	\$327.24	\$333.50	\$360.05	\$385.25
Family	\$429.86	\$488.32	\$497.62	\$537.23	\$574.85
Employer Monthly Premium					
Individual	\$502.25	\$570.56	\$581.57	\$627.84	\$671.70
2 Party	\$864.19	\$981.72	\$1,000.50	\$1,080.15	\$1,155.74
Family	\$1,289.57	\$1,464.95	\$1,492.85	\$1,611.67	\$1,724.55
Deductible	\$0	\$0	\$0	\$0	\$0
Primary Care Copay	\$15	\$15	\$15	\$15	\$25
Specialist Copay	\$25	\$25	\$30	\$30	\$50
<b>Cigna 90% Co-insurance Plan<sup>3</sup></b>	<b>CY 2012</b>	<b>CY 2013</b>	<b>CY 2014</b>	<b>CY 2015</b>	<b>CY 2016</b>
Employee Monthly Premium					
Individual	-	-	\$88.68	\$93.52	\$97.26
2 Party	-	-	\$290.43	\$306.31	\$318.61
Family	-	-	\$427.07	\$450.42	\$468.54
Employer Monthly Premium					
Individual	-	-	\$502.50	\$529.97	\$551.17
2 Party	-	-	\$871.28	\$918.93	\$955.81
Family	-	-	\$1,281.21	\$1,351.27	\$1,405.60
Deductible (Individual/Family)	-	-	\$100/ \$200	\$100/ \$200	\$100/ \$200
Co-insurance	-	-	90%	90%	90%
<b>Cigna 80% Co-insurance Plan<sup>4</sup></b>	<b>CY 2012</b>	<b>CY 2013</b>	<b>CY 2014</b>	<b>CY 2015</b>	<b>CY 2016</b>
Employee Monthly Premium					
Individual	\$59.27	\$65.91	\$64.54	\$68.06	\$72.81
2 Party	\$192.62	\$214.19	\$209.70	\$221.14	\$236.62
Family	\$287.45	\$319.64	\$312.91	\$329.98	\$353.10
Employer Monthly Premium					
Individual	\$335.85	\$373.47	\$365.72	\$385.66	\$412.56
2 Party	\$577.87	\$642.59	\$629.09	\$663.42	\$709.84
Family	\$862.36	\$958.94	\$938.73	\$989.94	\$1,059.30
Deductible (Individual/Family)	\$250/ \$500	\$250/ \$500	\$250/ \$500	\$250/ \$500	\$250/ \$500
Co-insurance	90%	90%	80%	80%	80%

<b>Cigna MyChoice CHDP w/ HSA<sup>5</sup></b>	<b>CY 2012</b>	<b>CY 2013</b>	<b>CY 2014</b>	<b>CY 2015</b>	<b>CY 2016</b>
Employee Monthly Premium					
Individual	-	-	-	-	\$69.20
2 Party	-	-	-	-	\$224.87
Family	-	-	-	-	\$335.58
Employer Monthly Premium					
Individual	-	-	-	-	\$392.10
2 Party	-	-	-	-	\$674.61
Family	-	-	-	-	\$1,006.74
Employer HSA Contribution (Individual/Family)	-	-	-	-	\$520/ \$1,040
Deductible (Individual/Family)	-	-	-	-	\$1,300/ \$2,600
Co-insurance	-	-	-	-	90%

<sup>1</sup> The Carefirst POS plan was discontinued following plan year 2013. Participants that did not make an alternate election were mapped to the Cigna 90% Co-Insurance Plan.

<sup>2</sup> Prior to January 2014, the Cigna Co-Pay Plan was named the Cigna OAP High Plan.

<sup>3</sup> The Cigna 90% Coinsurance Plan was introduced in January 2014.

<sup>4</sup> The Cigna OAP Low Plan, a 90% co-insurance plan, was transitioned to the Cigna 80% Co-Insurance Plan in January 2014.

<sup>5</sup> The Cigna MyChoice CDHP was introduced in January 2016.

**Fairfax County Government Medical Plan Changes  
Plan Years 2012-2016**

Plan Name	2012	2013	2014	2015	2016
Kaiser Permanente HMO	No Changes	No Changes	No Changes	Increase in Mail Order Prescription Drug co-pays from \$16/\$36/\$66 to \$20/\$40/\$70	Plan re-opened to Medicare Eligible Participants
CareFirst POS	No Changes	Change in Prescription Drug Plan from co-pay structure to: Annual Deductible \$50/\$100 30 day Retail Generic: \$7 co-pay Preferred Brand: 20% co-insurance with \$50 maximum Non-Preferred Brand: 30% co-insurance with \$100 maximum Rx OOP \$1,000/\$2,000 Mail Order allows a 90 day supply for the price of 60 days	Plan eliminated through RFP consolidation process CareFirst participants that did not make an alternate election were mapped to the Cigna 90% Co-insurance Plan		
Cigna OAP Co-pay Plan <i>(Cigna OAP-High prior to 2014)</i>	Increase in co-pay for Primary Care from \$10 to \$15 Increase in co-pay for Specialist from \$15 to \$25 Change in Rx co-pays from \$10/\$20/\$40 to \$7/\$30/\$50 Add \$75 co-pay for Advanced Radiology Add \$100 co-pay for Inpatient Hospital Admission	Change in Prescription Drug Plan from co-pay structure to: Annual Deductible \$50/\$100 30 day Retail Generic: \$7 co-pay Preferred Brand: 20% co-insurance with \$50 maximum Non-Preferred Brand: 30% co-insurance with \$100 maximum Rx OOP \$1,000/\$2,000 Mail Order allows a 90 day supply for the price of 60 days	Increase in co-pay for Specialist from \$25 to \$30 Increase in co-pay for Inpatient Hospital Admission from \$100 to \$200 Increase in co-pay for Outpatient Facility from \$25 to \$50	Remove age limitations for Autism Spectrum Disorder Therapies Remove medical review for OON Chiropractic Care; Limited to 12 visits per plan year	Increase in co-pay for Primary Care from \$15 to \$25 Increase in co-pay for Specialist from \$30 to \$50 Increase in co-pay for Urgent Care from \$25 to \$50 Increase in Prescription Drug OOP from \$1,000/\$2,000 to \$1,500/\$3,000
Cigna 90% Co-insurance Plan			<b>New Plan for 2014</b> 90% co-insurance plan with annual deductible of \$100/\$200 for In-Network services In-Network annual OOP Maximum \$1,000/2,000	Remove age limitations for Autism Spectrum Disorder Therapies Remove medical review for OON Chiropractic Care; Limited to 12 visits per plan year	Increase to In-Network annual OOP Maximum from \$2,000/\$4,000 to \$1,500/\$3,000; OON from \$2,000/\$4,000 to \$3,000/\$6,000 Increase in co-pay for Urgent Care from \$25 to \$50 Increase in Prescription Drug OOP from \$1,000/\$2,000 to \$1,500/\$3,000
Cigna 80% Co-insurance Plan <i>(Cigna OAP-Low prior to 2014)</i>	No Changes	Change in Prescription Drug Plan from co-pay structure to: Annual Deductible \$50/\$100 30 day Retail Generic: \$7 co-pay Preferred Brand: 20% co-insurance with \$50 maximum Non-Preferred Brand: 30% co-insurance with \$100 maximum Rx OOP \$1,000/\$2,000 Mail Order allows a 90 day supply for the price of 60 days	Co-insurance percentage decreased from 90% to 80%	Remove age limitations for Autism Spectrum Disorder Therapies Remove medical review for OON Chiropractic Care; Limited to 12 visits per plan year	Increase in co-pay for Urgent Care from \$25 to \$50 Increase in Prescription Drug OOP from \$1,000/\$2,000 to \$1,500/\$3,000

**Fairfax County Government Medical Plan Changes  
Plan Years 2012-2016**

Plan Name	2012	2013	2014	2015	2016
Cigna MyChoice CDHP w/ HSA					<b>New Plan for 2016</b> High Deductible Health Plan with a Health Savings Account (HSA) 90% Co-insurance plan with annual In-Network deductible of \$1,300/\$2,600; OON deductible \$2,600/\$5,200 County contributes 40% of annual In-Network deductible to HSA (\$520/\$1,040)

### Active Employee Enrollment Changes

Figures are reflective of enrollment from January of each year

	2012	2013	2014	2015	2016
Total Eligible	12,455	12,989	13,075	13,284	13,405
Kaiser Permanente HMO	14.6%	14.4%	14.9%	14.7%	14.9%
CareFirst POS	23.0%	23.0%	Plan eliminated through RFP, those who did not make an alternative election were mapped to Cigna 90% Plan		
Cigna Co-Pay Plan (Cigna OAP-High prior to 2014)	45.5%	41.7%	53.5%	51.8%	47.3%
CIGNA OAP 90% Co-insurance Plan	New Plan added for 2014		8.6%	9.0%	9.9%
Cigna 90% Co-insurance Plan (Cigna OAP-Low prior to 2014)	1.3%	2.4%	3.2%	4.8%	6.2%
CIGNA MyChoice CDHP w/ HSA	New Plan added for 2016				2.1%
Waived	15.5%	18.5%	19.8%	19.8%	19.5%