



THE MARYLAND-NATIONAL CAPITAL
Park and Planning Commission

SPECIAL MEETING of the M-NCPPC

**October 22, 2020
12:00 - 12:20 p.m.**

The Commission will be meeting by teleconference

Topic of Discussion

Health Insurance Rates Changes
for Fiscal Year 2021

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MARYLAND-NATIONAL CAPITAL PARK AND PLANNING COMMISSION
MEETING AGENDA
Thursday, October 22, 2020

Via videoconference, and live-streamed by
The Montgomery Planning Department

12:00 – 12:20 pm

ACTION
Motion | Second

- 1. **Approval of Commission Agenda (12:00 noon.)** (+*) Page 1
- 2. **Action and Presentation Items (12:01 p.m.)**
 - a) Health Insurance Rate Changes for the Fiscal Year 2021 (Spencer/McDonald) (+*) Page 3

(+) Attachment (++) Commissioners Only (*) Vote (H) Handout (LD) Late Delivery

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THE MARYLAND-NATIONAL CAPITAL PARK AND PLANNING COMMISSION

6611 Kenilworth Avenue • Riverdale, Maryland 20737

October 21, 2020

TO: The Maryland-National Capital Park and Planning Commission

VIA: Asuntha Chiang-Smith, Executive Director

FROM: William Spencer, Human Resources Director
Jennifer McDonald, Benefits Manager
Cynthia Henderson, Principal Benefits Specialist

SUBJECT: Benefit Plans Rates for 2021

Action Requested

Approve revised rates for the self-insured medical health plans for calendar year 2021.

Background

In September, the Commission adopted 2021 calendar year rate recommendations for the Commission's self-insured and fully insured health plans. However, in subsequent discussions with staff, management, and union representatives, concerns were raised regarding increases in some health insurance rates that would raise premiums per paycheck for family plans by more than \$30. In a year where employees would not be receiving Cost of Living Adjustments or Merit increases, additional expenditures for health insurance payments could introduce financial hardship to some Commission employees, retirees and their families.

Given reserves in the group insurance fund are in excess of the 10% reserve buffer, the agency is recommending a reduction in premium rates for all four United Healthcare (UHC) medical plans by 8.2%. By doing so, the recommended rate increase for UHC Exclusive Provider Organization (EPO) would be fully covered while the rate increase for the UHC Point of Service (POS) plan, which is the costliest option, would be mitigated to 8.4%. This action would maintain more than the 10% reserve level set by the agency, and would serve to incentivize employees to consider

moving from the most expensive plan (the UnitedHealthcare Point of Service), to one of the two less costly options, the UHC EPO, which will now have no rate increase, or the Kaiser Permanente plan, which already has a 5% reduction in current rates.

Revised 2021 Self-Insured Health Plan Rate Adjustments

The revised rate increases are as follows:

- **UnitedHealthcare (UHC) Exclusive Provider Organization (EPO)**
 - Approved increase was 8.2 % as recommended by AON
 - The revised increase is 0%

- **UnitedHealthcare EPO Medicare Eligible**
 - Approved increase was 13.4% as recommended by AON
 - The revised increase is 5.2%

- **UnitedHealthcare POS**
 - Approved increase was 16.6% as recommended by AON
 - The revised increase is 8.4%

- **UnitedHealthcare Medicare Complement**
 - Approved increase was 13.7% as recommended by AON
 - The revised increase is 5.5%

The following plans remain as approved during the Commission's September 16, 2020 meeting:

- **Caremark Prescription** – 0.6% decrease

- **Kaiser Permanente HMO** - 5.0% decrease

- **Kaiser Permanente Medicare Complement Plan for Over 65 retirees** - 3.4% decrease

See attachment A for the revised rate changes and dollar impact for employee and retiree groups.

M-NCPPC HEALTHCARE PREMIUM RATES EFFECTIVE 1/1/2021

FRATERNAL ORDER OF POLICE (FOP) PREMIUM RATES EFFECTIVE 1/1/2021						
Plan	Cost Share %	Full 2021 Monthly Rate	Full Bi-Weekly	M-NCPPC Bi-Weekly	Employee Bi-Weekly	\$ Change from 2020
SINGLE COVERAGE						
Caremark Prescription	77%/23%	\$228.00	\$ 105.23	\$ 81.03	\$ 24.20	\$ (0.11)
Kaiser Permanente HMO with Prescription	77%/23%	\$524.73	\$ 242.18	\$ 186.48	\$ 55.70	\$ (2.92)
Kaiser Permanente Medicare Complement	77%/23%	\$305.64	\$ 141.06	\$ 108.62	\$ 32.44	\$ (1.14)
UnitedHealthcare Choice Plus POS	77%/23%	\$715.44	\$ 330.20	\$ 254.25	\$ 75.95	\$ 5.88
UHC Medicare Complement Plan	77%/23%	\$276.41	\$ 127.57	\$ 98.23	\$ 29.34	\$ 1.53
UnitedHealthcare Select EPO	77%/23%	\$588.00	\$ 271.38	\$ 208.96	\$ 62.42	\$ -
UHC Select EPO Medicare Eligible	77%/23%	\$410.28	\$ 189.36	\$ 145.81	\$ 43.55	\$ 2.15
TWO MEMBER COVERAGE						
Caremark Prescription	77%/23%	\$456.00	\$ 210.46	\$ 162.05	\$ 48.41	\$ (0.21)
Kaiser Permanente HMO with Prescription	77%/23%	\$1,049.46	\$ 484.37	\$ 372.96	\$ 111.41	\$ (5.84)
Kaiser Permanente Medicare Complement	77%/23%	\$611.28	\$ 282.13	\$ 217.24	\$ 64.89	\$ (2.29)
UnitedHealthcare Choice Plus POS	77%/23%	\$1,430.88	\$ 660.41	\$ 508.52	\$ 151.89	\$ 11.77
UHC Medicare Complement Plan	77%/23%	\$552.82	\$ 255.15	\$ 196.47	\$ 58.68	\$ 3.06
UnitedHealthcare Select EPO	77%/23%	\$1,176.00	\$ 542.77	\$ 417.93	\$ 124.84	\$ -
UHC Select EPO Medicare Eligible	77%/23%	\$820.56	\$ 378.72	\$ 291.61	\$ 87.11	\$ 4.31
FAMILY COVERAGE						
Caremark Prescription	77%/23%	\$684.00	\$ 315.69	\$ 243.08	\$ 72.61	\$ (0.32)
Kaiser Permanente HMO with Prescription	77%/23%	\$1,574.18	\$ 726.54	\$ 559.44	\$ 167.10	\$ (8.76)
Kaiser Permanente Medicare Complement	77%/23%	\$916.92	\$ 423.19	\$ 325.86	\$ 97.33	\$ (3.43)
UnitedHealthcare Choice Plus POS	77%/23%	\$2,146.32	\$ 990.61	\$ 762.77	\$ 227.84	\$ 17.66
UHC Medicare Complement Plan	77%/23%	\$829.23	\$ 382.72	\$ 294.69	\$ 88.03	\$ 4.59
UnitedHealthcare Select EPO	77%/23%	\$1,764.00	\$ 814.15	\$ 626.90	\$ 187.25	\$ -
UHC Select EPO Medicare Eligible	77%/23%	\$1,230.84	\$ 568.08	\$ 437.42	\$ 130.66	\$ 6.46

CONTRACT EMPLOYEES PREMIUM RATES EFFECTIVE 1/1/2021						
Plan	Cost Share%	Full 2021 Monthly Rate	Full Bi- Weekly Rate	M-NCPPC Bi-Weekly	Employee Bi-Weekly	\$ Change from 2020
SINGLE COVERAGE						
Caremark Prescription	65%/35%	\$228.00	\$105.23	\$68.40	\$36.83	\$ (0.16)
Kaiser Permanente HMO with Prescription	65%/35%	\$524.73	\$242.18	\$157.42	\$84.76	\$ (4.45)
UnitedHealthcare Select EPO	65%/35%	\$588.00	\$271.38	\$176.40	\$94.98	\$ -
TWO MEMBER COVERAGE						
Caremark Prescription	65%/35%	\$456.00	\$210.46	\$136.80	\$73.66	\$ (0.32)
Kaiser Permanente HMO with Prescription	65%/35%	\$1,049.46	\$484.37	\$314.84	\$169.53	\$ (8.89)
UnitedHealthcare Select EPO	65%/35%	\$1,176.00	\$542.77	\$352.80	\$189.97	\$ -
FAMILY COVERAGE						
Caremark Prescription	65%/35%	\$684.00	\$315.69	\$205.20	\$110.49	\$ (0.49)
Kaiser Permanente HMO with Prescription	65%/35%	\$1,574.18	\$726.54	\$472.25	\$254.29	\$ (13.34)
UnitedHealthcare Select EPO	65%/35%	\$1,764.00	\$814.15	\$529.20	\$284.95	\$ -

M-NCPPC HEALTHCARE PREMIUM RATES EFFECTIVE 1/1/2021 (Continued)

MCGEO, NON-UNION REPRESENTED PREMIUM RATES EFFECTIVE 1/1/2021						
Plan	Cost Share %	Full 2021 Monthly Rate	Full Bi- Weekly Rate	M-NCPPC Bi-Weekly	Employee Bi-Weekly	\$ Change from 2020
SINGLE COVERAGE						
Caremark Prescription	85%/15%	\$228.00	\$105.23	\$89.45	\$15.78	\$ (0.07)
Kaiser Permanente HMO with Prescription	85%/15%	\$524.73	\$242.18	\$205.85	\$36.33	\$ (1.91)
Kaiser Permanente Medicare Complement	85%/15%	\$305.64	\$141.06	\$119.90	\$21.16	\$ (0.75)
UnitedHealthcare Choice Plus POS	80%/20%	\$715.44	\$330.20	\$264.16	\$66.04	\$ 5.12
UHC Medicare Complement Plan	80%/20%	\$276.41	\$127.57	\$102.06	\$25.51	\$ 1.33
UnitedHealthcare Select EPO	80%/20%	\$588.00	\$271.38	\$217.10	\$54.28	\$ -
UHC Select EPO Medicare Eligible	80%/20%	\$410.28	\$189.36	\$151.49	\$37.87	\$ 1.87
TWO MEMBER COVERAGE						
Caremark Prescription	85%/15%	\$456.00	\$210.46	\$178.89	\$31.57	\$ (0.14)
Kaiser Permanente HMO with Prescription	85%/15%	\$1,049.46	\$484.37	\$411.71	\$72.66	\$ (3.81)
Kaiser Permanente Medicare Complement	85%/15%	\$611.28	\$282.13	\$239.81	\$42.32	\$ (1.49)
UnitedHealthcare Choice Plus POS	80%/20%	\$1,430.88	\$660.41	\$528.33	\$132.08	\$ 10.24
UHC Medicare Complement Plan	80%/20%	\$552.82	\$255.15	\$204.12	\$51.03	\$ 2.66
UnitedHealthcare Select EPO	80%/20%	\$1,176.00	\$542.77	\$434.22	\$108.55	\$ -
UHC Select EPO Medicare Eligible	80%/20%	\$820.56	\$378.72	\$302.98	\$75.74	\$ 3.74
FAMILY COVERAGE						
Caremark Prescription	85%/15%	\$684.00	\$315.69	\$268.34	\$47.35	\$ (0.21)
Kaiser Permanente HMO with Prescription	85%/15%	\$1,574.18	\$726.54	\$617.56	\$108.98	\$ (5.72)
Kaiser Permanente Medicare Complement	85%/15%	\$916.92	\$423.19	\$359.71	\$63.48	\$ (2.24)
UnitedHealthcare Choice Plus POS	80%/20%	\$2,146.32	\$990.61	\$792.49	\$198.12	\$ 15.35
UHC Medicare Complement Plan	80%/20%	\$829.23	\$382.72	\$306.18	\$76.54	\$ 3.99
UnitedHealthcare Select EPO	80%/20%	\$1,764.00	\$814.15	\$651.32	\$162.83	\$ -
UHC Select EPO Medicare Eligible	80%/20%	\$1,230.84	\$568.08	\$454.46	\$113.62	\$ 5.62

M-NCPPC HEALTHCARE PREMIUM RATES EFFECTIVE 1/1/2021 (Continued)

RETIREE/SURVIVORS PREMIUM RATES EFFECTIVE 1/1/2021					
Plan	Cost Share %	Full 2021 Monthly Rate	M-NCPPC Monthly	Retiree Monthly	\$ Change from 2020
SINGLE COVERAGE					
Caremark Prescription	80%/20%	\$228.00	\$182.40	\$45.60	\$ (0.20)
Kaiser Permanente HMO with Prescription	80%/20%	\$524.73	\$419.78	\$104.95	\$ (5.50)
UnitedHealthcare Choice Plus POS	80%/20%	\$715.44	\$572.35	\$143.09	\$ 11.09
UnitedHealthcare Select EPO	80%/20%	\$588.00	\$470.40	\$117.60	\$ -
TWO MEMBER COVERAGE					
Caremark Prescription	80%/20%	\$456.00	\$364.80	\$91.20	\$ (0.40)
Kaiser Permanente HMO with Prescription	80%/20%	\$1,049.46	\$839.57	\$209.89	\$ (11.01)
UnitedHealthcare Choice Plus POS	80%/20%	\$1,430.88	\$1,144.70	\$286.18	\$ 22.18
UnitedHealthcare Select EPO	80%/20%	\$1,176.00	\$940.80	\$235.20	\$ -
FAMILY COVERAGE					
Caremark Prescription	80%/20%	\$684.00	\$547.20	\$136.80	\$ (0.60)
Kaiser Permanente HMO with Prescription	80%/20%	\$1,574.18	\$1,259.34	\$314.84	\$ (16.51)
UnitedHealthcare Choice Plus POS	80%/20%	\$2,146.32	\$1,717.06	\$429.26	\$ 33.26
UnitedHealthcare Select EPO	80%/20%	\$1,764.00	\$1,411.20	\$352.80	\$ -
UNITEDHEALTHCARE MEDICARE COMPLEMENT PLAN					
1 Medicare Complement	80%/20%	\$276.41	\$221.13	\$55.28	\$ 2.88
2 Medicare Complement	80%/20%	\$552.82	\$442.26	\$110.56	\$ 5.76
Family - 3 or More All Medicare Complement	80%/20%	\$829.23	\$663.38	\$165.85	\$ 8.65
1 Medicare Complement + 1 POS	80%/20%	\$991.85	\$793.48	\$198.37	\$ 13.97
1 Medicare Complement + 2 or More POS	80%/20%	\$1,707.29	\$1,365.83	\$341.46	\$ 25.06
2 Medicare Complement + 1 or More POS	80%/20%	\$1,268.26	\$1,014.61	\$253.65	\$ 16.85
UNITED HEALTHCARE EPO MEDICARE PLAN					
1 Medicare Complement	80%/20%	\$410.28	\$328.22	\$82.06	\$ 4.06
2 Medicare Complement	80%/20%	\$820.56	\$656.45	\$164.11	\$ 8.11
Family - 3 or More All Medicare Complement	80%/20%	\$1,230.84	\$984.67	\$246.17	\$ 12.17
1 Medicare Complement + 1 EPO<65	80%/20%	\$998.28	\$798.62	\$199.66	\$ 4.06
1 Medicare Complement + 2 or More EPO<65	80%/20%	\$1,586.28	\$1,269.02	\$317.26	\$ 4.06
2 Medicare Complement + 1 or More EPO<65	80%/20%	\$1,408.56	\$1,126.85	\$281.71	\$ 8.11
KAISER PERMANENTE MEDICARE COMPLEMENT PLAN WITH PRESCRIPTION DRUG					
1 Medicare Complement	80%/20%	\$305.64	\$244.51	\$61.13	\$ (2.16)
2 Medicare Complement	80%/20%	\$611.28	\$489.02	\$122.26	\$ (4.31)
Family - 3 or More All Medicare Complement	80%/20%	\$916.92	\$733.54	\$183.38	\$ (6.47)
1 Medicare Complement + 1 HMO	80%/20%	\$830.37	\$664.30	\$166.07	\$ (7.66)
1 Medicare Complement + 2 or More HMO	80%/20%	\$1,355.10	\$1,084.08	\$271.02	\$ (13.16)
2 Medicare Complement + 1 or More HMO	80%/20%	\$1,136.01	\$908.81	\$227.20	\$ (9.82)