

# GTCMHIC Benefit Clerk Open Enrollment Training

Presenters:

Elin Dowd, Executive Director

Kylie Rodrigues, Benefits Specialist



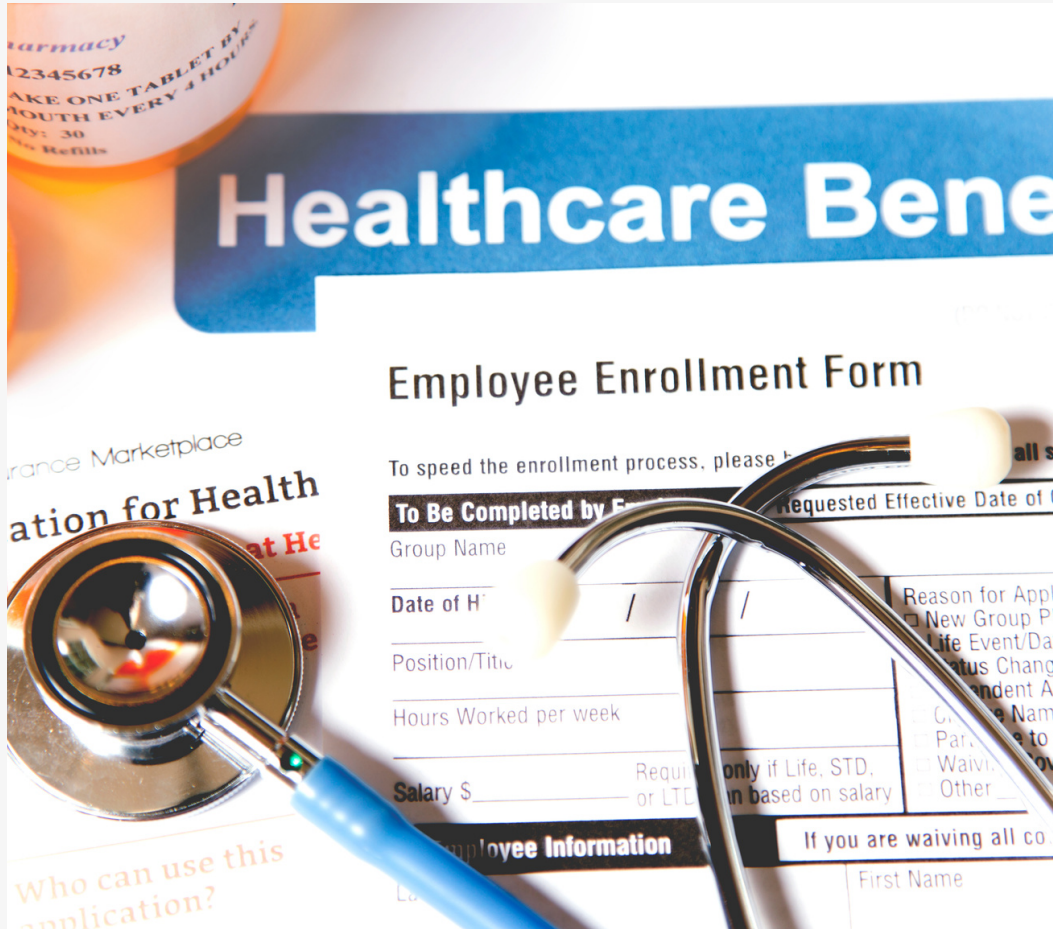
[www.healthconsortium.net](http://www.healthconsortium.net)

# Covered Topics

- 2024 Consortium Updates
  - Premium Rates
  - Silver Plan Benefit Updates
  - Gold Plan Benefit Updates
  - Due Dates
    - Plan Changes
    - Open Enrollment
  - Municipal Changes
    - Municipality Contact Information Form
    - Board Nomination
    - Joint Committee Nomination
  - Billing Quick Tips
  - ESI-EAP- Negotiated Pricing- Direct Contract Service
- New Prescription Benefit Manager- Excellus
- Lifetime Benefit Solutions- COBRA Administration- Small Group Only



# Consortium Open Enrollment



1

Annual election period that, by law, is offered to all employees once per year that allows employees to change their coverage.

2

We recommend November 1st–November 30th every year. Can be in October but must end no later than November 30th.

3

No need to have a qualifying event to make a change to health insurance for the coming year. Unlike making changes outside of Open Enrollment.

# Who can be covered by the plan?

## How to make changes?



**Employees**  
**Employee's spouse/  
domestic partner**

**Dependents which include:**  
**Children- natural, adopted  
and step-children**  
**Domestic partner children**

**Verify any  
dependents qualify  
and collect  
supporting  
documentation for  
your records.**

**Complete an updated  
Enrollment Form and  
submit to the Consortium/  
Excellus**



# Greater Tompkins County Municipal Health Insurance Consortium

Governance ▾

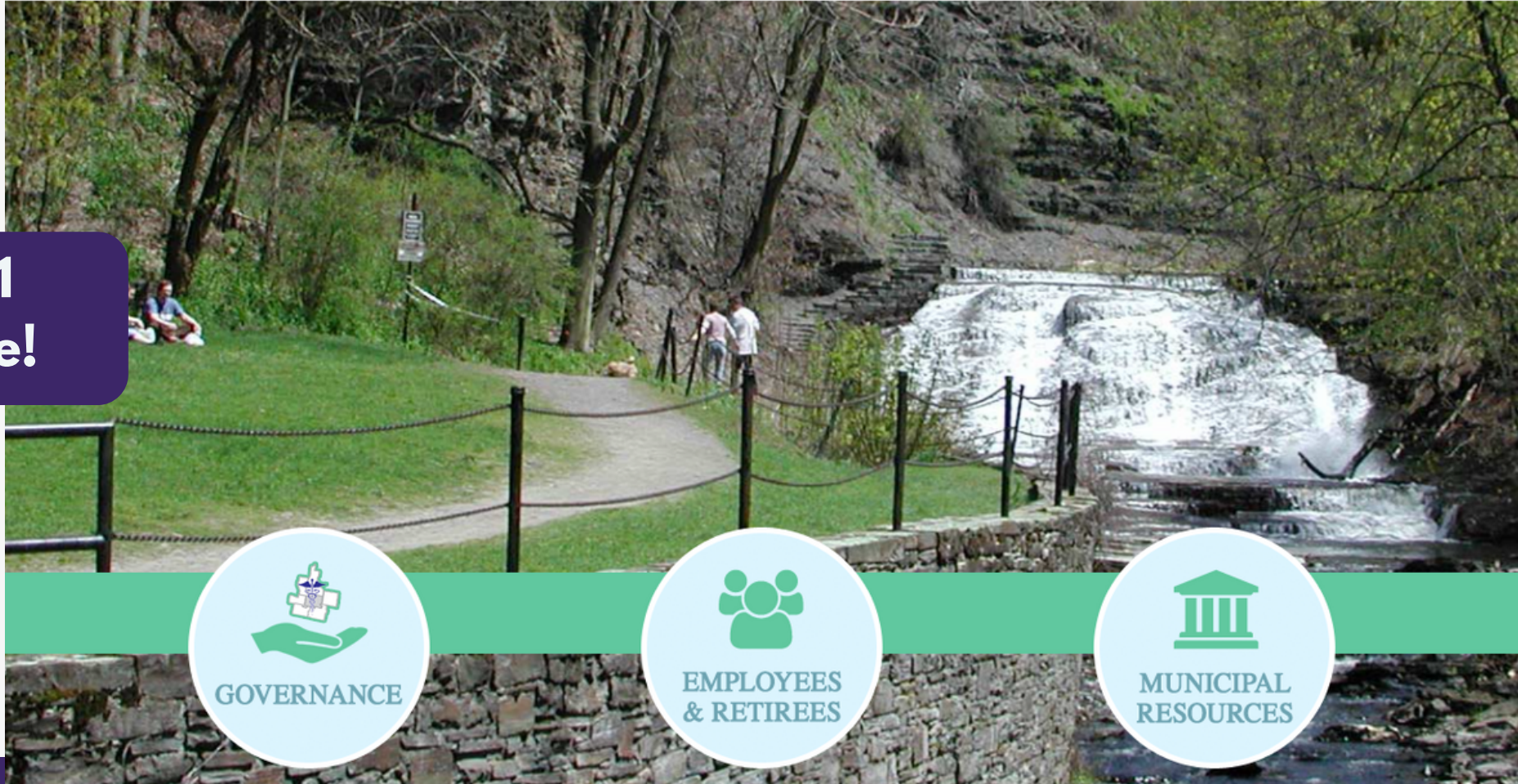
Employee/Retiree  
& Wellness  
Information ▾

Municipal  
Resources ▾

About Us ▾

Current  
Newsletter

Your #1  
Resource!



GOVERNANCE

EMPLOYEES  
& RETIREES

MUNICIPAL  
RESOURCES

[www.healthconsortium.net](http://www.healthconsortium.net)

**Zoom Poll!**



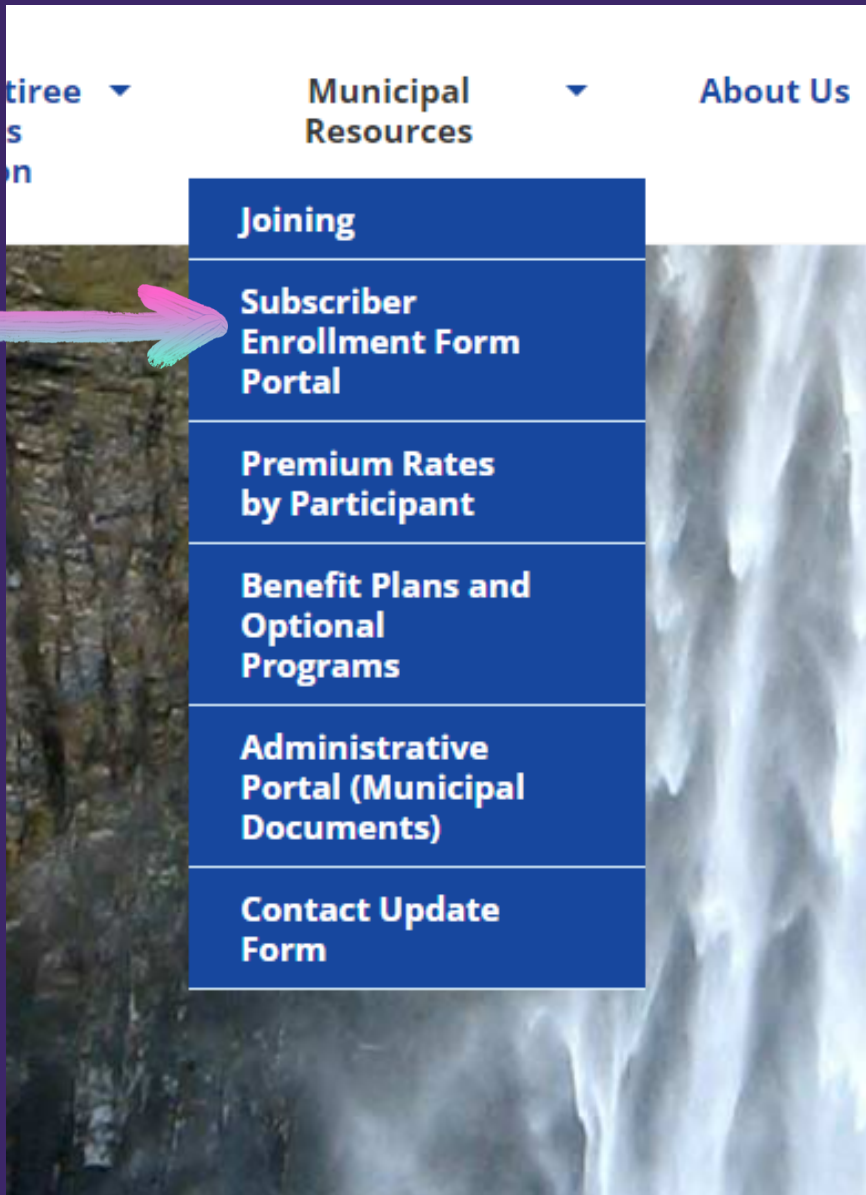
# Enrollment Forms

Enrollment Forms can be found on our website  
[www.healthconsortium.net](http://www.healthconsortium.net)

**Hover over Municipal Resources and select Subscriber Enrollment Form Portal.**

**You will see a list of municipalities. Select your municipality and it will take you directly to a PDF version of your Enrollment Form.**

Note: Each enrollment form is municipality specific with their distinct group number and available plans filled in on the form.



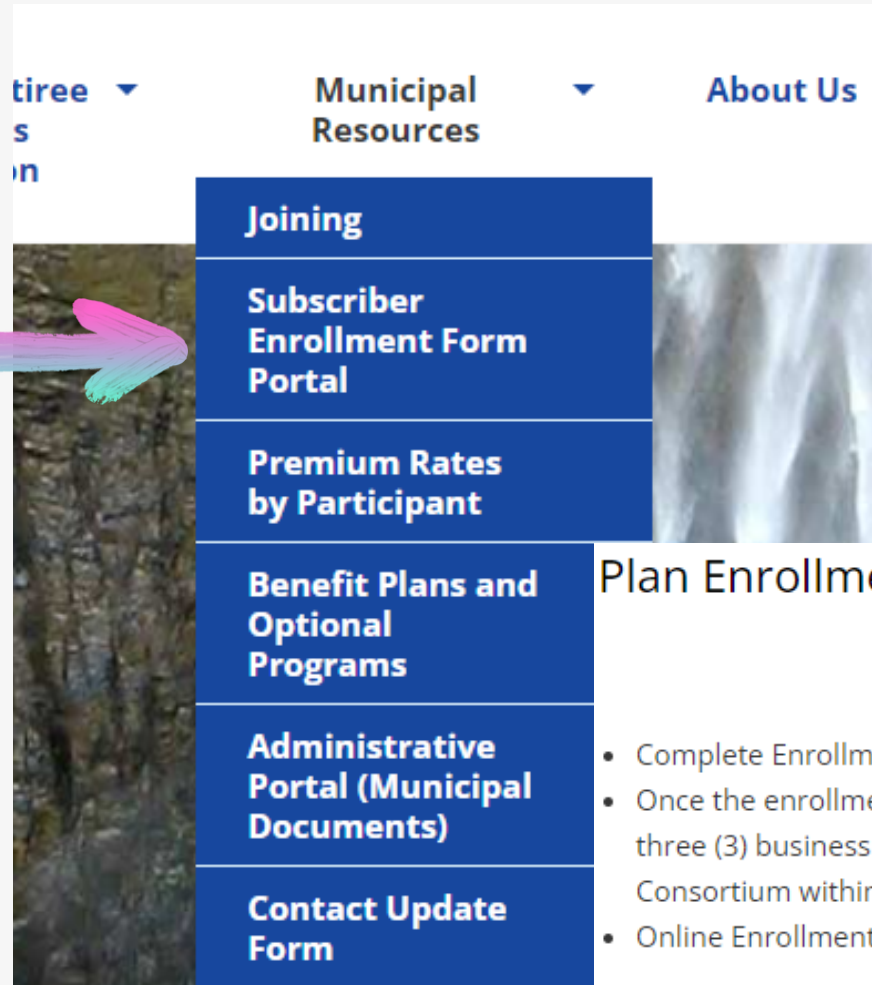
# Submitting Enrollment Forms



If you submit directly through Excellus you would continue to follow the same procedure with marking the effective date of the change to occur 1/1/2024.



If you submit all your enrollment changes to the Consortium you scan the completed Enrollment Form and upload to the Subscriber Enrollment Form Portal. Password no longer needed.



## Plan Enrollment/Change Forms

### Instructions for *Enrollment Additions/Deletions/Changes*:

- Complete Enrollment Form (Below) and Submit by secure [Subscriber Enrollment Form Portal](#);
- Once the enrollment application is received by the Consortium, the enrollment data will be submitted online within three (3) business days. Confirmation or notice of incomplete information will be sent to municipal partner from the Consortium within 3 business days.
- Online Enrollment Policy (*Adopted via Resolution No. [003-2018](#)*)





# Benefit Summaries

**2023 Benefit Summaries can be found on our website  
[www.healthconsortium.net](http://www.healthconsortium.net)**

**2024 Benefit Summaries are not available until November-December. We will notify all Benefit Clerks once they are posted on the website.**

**Hover over Employee/Retiree & Wellness Information Tab. Click on Plan Information by Municipality. Find your municipality.**

Note: Benefit Summaries offer an overview whereas Summary of Benefits offers more of a narrative description of benefits.

Employee/Retiree & Wellness Information

Appeals

Plan Information by Municipality

Wellness

2022 Benefit Summaries by Municipality

[Premium Equivalent Rates](#)

[Cortland, City](#)

[Ithaca, City](#)

[Seneca County](#)

[Tompkins County](#)

\* [Tompkins Cortland Community College](#)

\* [Tompkins County Public Library](#)

\* [Soil and Water Conservation District](#)

[Town of Aurelius](#)

[Town of Big Flats](#)

[Town of Caroline](#)

[Town of Catharine](#)

[Town of Cincinnatus](#)

[Town of Cuyler](#)

[Town of Danby](#)

[Town of Dix](#)

[Town of Dryden](#)

[Town of Enfield](#)

[Town of Erwin](#)

[Town of Groton](#)

[Town of Hector](#)

[Town of Homer](#)

# Plan Changes



# 2023 NYS Mandate: Frozen Drug Formulary

Prior to January 2023 formulary adjustments occurred every January and July.

NYS Implemented Senate Bill S4111 which established the requirement of a frozen formulary. What has changed?

- Can still add new medications
- There can be no changes with a negative impact
- Cannot remove any medication from the formulary unless FDA rules the medication to be removed
- No updates to the formulary in July (only January)
- May cause an increase in prescription medication costs to the Consortium



**Zoom Poll!**



## Premium Rate Stability

In the last 5-years, the average premium increase has been 5.75%.

| Fiscal Year          | Budget Income % Increase |
|----------------------|--------------------------|
| 2011                 | 9.50%                    |
| 2012                 | 9.50%                    |
| 2013                 | 9.00%                    |
| 2014                 | 8.00%                    |
| 2015                 | 5.00%                    |
| 2016                 | 3.00%                    |
| 2017                 | 5.00%                    |
| 2018                 | 4.00%                    |
| 2019                 | 5.00%                    |
| 2020                 | 5.00%                    |
| 2021                 | 5.00%                    |
| 2022                 | 5.00%                    |
| 2023                 | 6.50%                    |
| 2024                 | 8.00%                    |
| Average Increase     | 6.25%                    |
| 5-Year Avg. Increase | 5.75%                    |

# Market Comparison of Community Rated 2023 Premiums

| Benefit Plan<br>GTCMHIC<br>Premiums | 2023<br>Individual | 2023 Family |
|-------------------------------------|--------------------|-------------|
| Platinum Plan                       | \$776.31           | \$2,018.43  |
| Gold Plan                           | \$663.79           | \$1,725.84  |
| Silver Plan                         | \$521.84           | \$1,356.76  |
| Bronze Plan                         | \$425.52           | \$1,106.34  |

| Benefit Plan<br>Excellus<br>Premiums | 2023 Individual | 2023 Family |
|--------------------------------------|-----------------|-------------|
| Platinum Plan                        | \$1,041.92      | \$2,969.47  |
| Gold Plan                            | \$900.34        | \$2,565.97  |
| Silver Plan                          | \$745.20        | \$2,123.82  |
| Bronze Plan                          | \$560.81        | \$1,598.31  |

**2024 Premium  
Rate Increase  
8%**

# 2024 Premium Rates



| Plan Name         | Platinum   | Gold       | Silver     | Bronze     | Medicare Supplement MS3 | Medicare Supplement MS4 |
|-------------------|------------|------------|------------|------------|-------------------------|-------------------------|
| <b>Individual</b> | \$838.41   | \$709.12   | \$557.79   | \$459.56   | \$904.93                | \$730.44                |
| <b>Family</b>     | \$2,179.90 | \$1,843.72 | \$1,450.24 | \$1,194.84 | N/A                     | N/A                     |

# Actuarial Value Calculated

The Consortium must annually review the actuarial values for its Metal Level Plans to ensure they each fall within the established ranges set by the Centers for Medicare and Medicaid Services (CMS).

Platinum Preferred Provider Organization Plan +2% / -2% (87.50% to 92.49%)

Current Value: 91.78%

Gold High Deductible Health Plan +2% / -2% (77.50% to 82.49%)

Current Value: 82.55%

Silver High Deductible Health Plan +2% / -2% (67.50% to 72.49%)

Current Value: 72.68%

Bronze High Deductible Health Plan +5% / -2% (57.50% to 65.49%)

Current Value: 65.05%



# Silver Plan Updates for 2024

| Silver HDHP                 | From In-Network  | To In-Network    | From Out-of-Network | To Out-of-Network |
|-----------------------------|------------------|------------------|---------------------|-------------------|
| Deductible Single/Family    | \$2,750/\$5,500  | \$3,000/\$6,000  | \$4,125/ \$8,250    | \$4,500/\$9,000   |
| Out-of-Pocket Single/Family | \$7,000/\$14,000 | \$7,500/\$15,000 | \$10,500/ \$21,000  | \$11,250/\$22,500 |
| Coinsurance Amount          | 80%              | 80%              | 50%                 | 60%               |
| Actuarial Value             | 72.68%           | 71.57%           | 72.68%              | 71.57%            |

# Gold Plan Updates for 2024

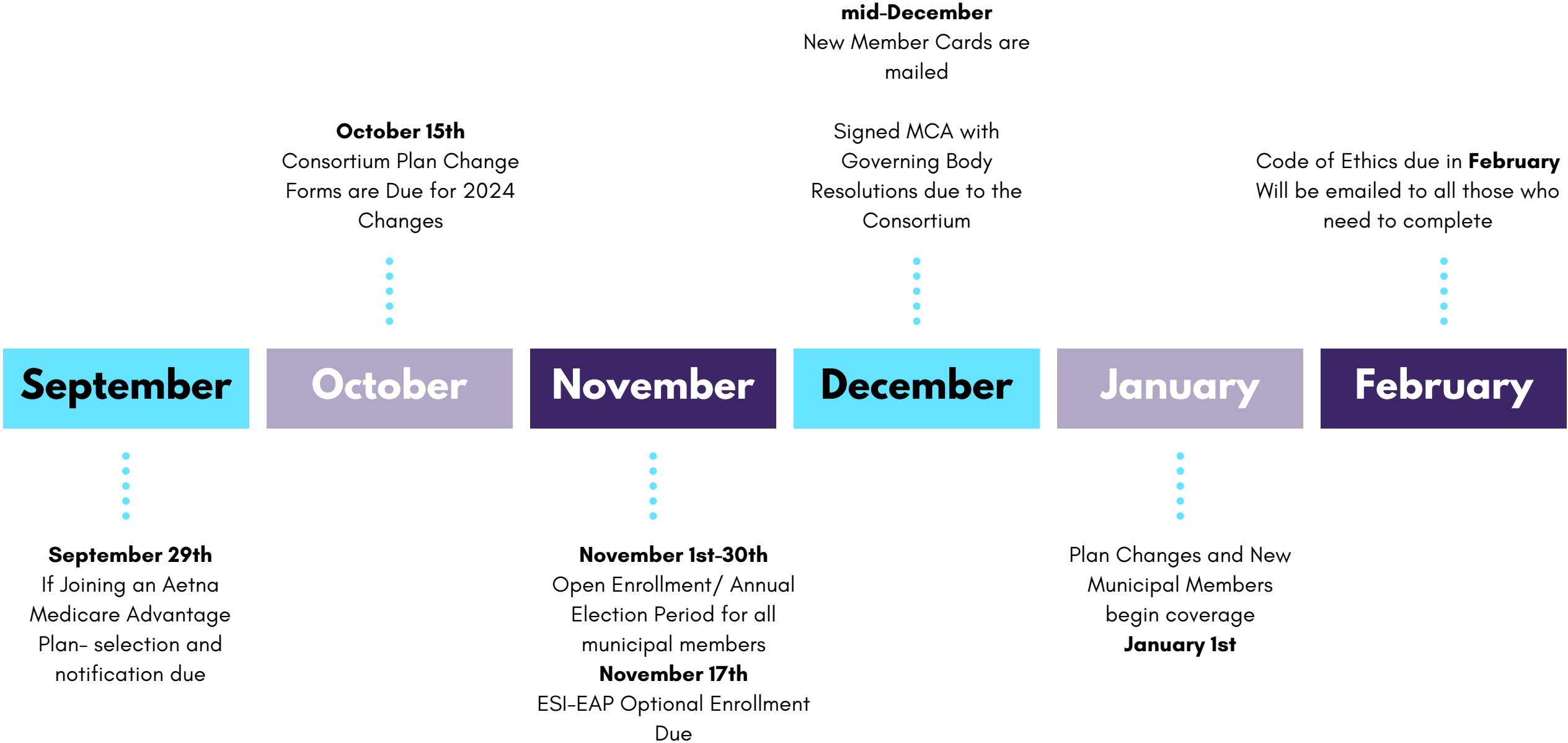
| Gold HDHP                   | From In-Network  | To In-Network    | From Out-of-Network | To Out-of-Network |
|-----------------------------|------------------|------------------|---------------------|-------------------|
| Deductible Single/Family    | \$1,500/ \$3,000 | \$1,800/ \$3,600 | \$2,250/ \$4,500    | \$2,700/ \$5,400  |
| Out-of-Pocket Single/Family | \$3,500/ \$7,000 | \$3,600/ \$7,200 | \$5,250/ \$10,500   | \$5,400/ \$10,800 |
| Coinsurance Amount          | 80%              | 80%              | 60%                 | 60%               |
| Actuarial Value             | 82.55%           | 81.38%           | 82.55%              | 81.38%            |

**All other plan benefits remain the same.**

# Consortium Due Dates



# Benefit Clerk Timeline



# Municipality Updates



# Municipal Change Notification

1

Municipal Resources

visit our website  
[www.healthconsortium.net](http://www.healthconsortium.net) and  
hover over Municipal Resources

2

**Contact Update Form**

Questions? contact [consortium@tompkins-co.org](mailto:consortium@tompkins-co.org)

Person completing form:

Email

Municipality

This update is for:

Name of former contact or member   
who is being replaced?

Name of new contact or member:

Title of new contact or member:

Email address of new contact or member:

Phone number of new contact or member?

Effective date

Board of Directors and Joint Committee Appointments:

Date of appointment by municipality   
upload or attach a copy of appointment by Municipality (Resolutions, Minutes or Correspondence from Chief Elected Official)

Upload documentation

Click on the bottom option Contact Update Form. This will take you form to complete to update newly elected officials, change in benefit clerks, or changes to appointments to the Board of Directors and/or Joint Committee.

Note: Board of Directors and Joint Committee positions are appointed by the municipality and require a resolution, minutes, or correspondence from the Chief Elected Official.

# Billing Quick Tips



# Billing Quick Tips

1

|    | A        | B          | C        | D             | E                    | F                     | G             | H               | I                  | J                 |
|----|----------|------------|----------|---------------|----------------------|-----------------------|---------------|-----------------|--------------------|-------------------|
| 1  | Group Id | Group Name | Subgroup | Subscriber Id | Subscriber Last Name | Subscriber First Name | Contract Type | Subscriber Plan | Subscriber Plan    | Subscriber Status |
| 2  | 00036760 | GTCMHIC    | 0001     | 20000000      |                      |                       | 2             | MBP00100        | PPO \$10, ER \$100 | Active            |
| 3  | 00036760 | GTCMHIC    | 0001     | 20000000      |                      |                       | 2             | MBP00100        | PPO \$10, ER \$100 | Active            |
| 4  | 00036760 | GTCMHIC    | 0001     | 20000000      |                      |                       | 1             | MBP00100        | PPO \$10, ER \$100 | Active            |
| 5  | 00036760 | GTCMHIC    | 0001     | 20000000      |                      |                       | 2             | MBP00100        | PPO \$10, ER \$100 | Active            |
| 6  | 00036760 | GTCMHIC    | 0001     | 20000000      |                      |                       | 5             | MBP00100        | PPO \$10, ER \$100 | Active            |
| 7  | 00036760 | GTCMHIC    | 0001     | 20000000      |                      |                       | 2             | MBP00100        | PPO \$10, ER \$100 | Active            |
| 8  | 00036760 | GTCMHIC    | 0001     | 20000000      |                      |                       | 4             | MBP00100        | PPO \$10, ER \$100 | Active            |
| 9  | 00036760 | GTCMHIC    | 0001     | 20000000      |                      |                       | 5             | MBP00100        | PPO \$10, ER \$100 | Active            |
| 10 | 00036760 | GTCMHIC    | 0001     | 20000000      |                      |                       | 3             | MBP00100        | PPO \$10, ER \$100 | Active            |

Every monthly bill comes with a full roster of enrollees in an Excel spreadsheet. Always double check the roster.

2

If you find a subscriber missing or not yet terminated verify you have submitted the change via the Consortium/ Excellus.

3

Process terminations and changes as soon as you know of them. Back dated terminations will only be reimbursed back up to 120 days.

The number 1 in Contract Type represents single coverage. Any other number represents family coverage.

**Note:**

**Never short pay a monthly bill.** Changes not reflected on the current bill will be processed as a credit on the next billing cycle. We bill two months in advance.

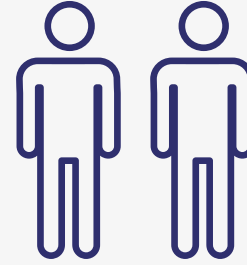


# Billing Quick Tips

4

An employee and their spouse should be enrolled in family coverage not two individual single coverage plans. (Medicare Supplement Plans are the exception.)

If the spouse is also an employee then they each can have an individual plan enrollment.



5

The consortium has ACH capabilities and if your municipality prefers payment in this method versus paper checks. If submitting payment via ACH a remittance needs to be emailed to Teri.

6

Excellus billing/ rosters are pulled the 14th of every month (or following business day). Therefore, submitting enrollment changes before this date can help ensure more accurate billing.



**Consortium Billing Contact:**  
**Teri Apalovich**  
**[tapalovich@tompkins-co.org](mailto:tapalovich@tompkins-co.org)**

**Zoom Poll!**




# Newborn Coverage

Have the employee, who will be adding a child once born, pre-complete their enrollment form. Therefore they can simply call in the birth date while on paternity or maternity leave.

Newborn enrollment can be effective date the day they are born.

Backdating coverage can result in multiple months having to be billed at once and causes claim issues for the employee.

Excelsus  Greater Tompkins County Municipal Health Insurance Consortium

FOR INTERNAL USE ONLY  
HIOS ID# \_\_\_\_\_  
EC \_\_\_\_\_

**Commercial Group Health Insurance Application/Change Form** **CONFIDENTIAL**

Please print clearly and complete all sections that apply. Signatures are required. Additional instructions included on Page 4.

**Section 1: Employer Group & Benefit Information** To be completed with your Group Administrator

Town of Caroline  
Employer Name: \_\_\_\_\_ Association/Chamber Name (if applicable): \_\_\_\_\_  
Group Administrator's Signature (required): \_\_\_\_\_ Date: \_\_\_\_\_ Employee Number: \_\_\_\_\_ Department Number: \_\_\_\_\_  
Check Desired Action:  Add  Cancel  Change

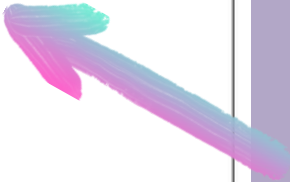
**Medical Information**  
00036758  
Medical Group Number (8 digits)  
Medical Subgroup Number (4 digits)  
Medical Class Number (e.g. A001) \_\_\_\_\_ Medical Effective Date: \_\_\_\_\_

If enrolling in a Medical plan, who do you need coverage for?  
 Self Only  
 Family

**Subscriber Status:**  
 Actively Working  
 Retired  
 Disabled  
 Canceled  
 COBRA

**Medical Plan Selection**  
 BGN PPO \$10  
 JA CB Supplement  
 DBH Signature Gold Integrated Rx

**Section 2: Subscriber's Information**



Social Security numbers are required for all enrollments except newborns.

What's Been  
Happening with  
the  
Consortium?

## Consortium 2024 Updates

**COBRA Administration**

**Employee Assistance Program-EAP**

**Lifetime Benefit Solutions: Negotiated Rates**

**Consortium Connection Newsletter**

**Consortium Facebook page:  
[www.facebook.com/GTCMHIC](https://www.facebook.com/GTCMHIC)**

# COBRA Administration

## Small Group Administration

- Inconsistent Administration
- Legally obligated to offer under federal COBRA laws
- Article 47 rules dictate a 36 month enrollment period

## Lifetime Benefit Solutions Administration

- Terminations are submitted via Consortium/Excellus Website
- COBRA notices/mailings are generated
  - Enrollment is processed through LBS submission to Excellus
    - LBS bills the ex-employee directly 102% premium rate
    - LBS sends payments to the municipal employer
  - Consortium's billing continues but with 102% premium rate for COBRA enrollments

# Small Group: Municipal Members



Town of Aurelius  
Town of Big Flats  
Town of Brutus  
Town of Caroline  
Town of Catharine  
Town of Cincinnatus  
Town of Cuyler  
Town of Danby  
Town of DeRuyter  
Town of Dix  
Town of Dryden  
Town of Enfield  
Town of Erwin  
Town of Groton  
Town of Hastings  
Town of Hector  
Town of Homer  
Town of Horseheads

Town of Lansing  
Town of Locke  
Town of Marathon  
Town of Mentz  
Town of Montezuma  
Town of Moravia  
Town of Newfield  
Town of Owasco  
Town of Preble  
Town of Scipio  
Town of Sennett  
Town of Springport  
Town of Spencer  
Town of Throop  
Town of Tioga  
Town of Truxton  
Town of Ulysses  
Town of Virgil

Town of West Monroe  
Town of Willet  
Village of Camillus  
Village of Cayuga Heights  
Village of Dryden  
Village of Fair Haven  
Village of Fayetteville  
Village of Freeville  
Village of Groton  
Village of Homer  
Village of Horseheads  
Village of Lansing  
Village of Minoa  
Village of Owego  
Village of Skaneateles  
Village of Trumansburg  
Village of Union Springs  
Village of Watkins Glen

DeWitt Fire District  
Lansing Community Library

# EAP- Employee Assistance Program

Joint Committee Requested Additional Mental Health Supports

**Consortium Negotiated Pricing**

**Direct Contracted Service with ESI EAP to  
Municipalities**

**ESI EAP offers services beyond mental health support, including financial planning, caregiving support, childcare support and more!**

**Notify [krodrigues@tompkins-co.org](mailto:krodrigues@tompkins-co.org) if interested in enrolling by November 17th, to be effective January 1, 2024.**





## ESI EAP Pricing

|                |         |                       |
|----------------|---------|-----------------------|
| 250 employees  | \$23.40 | Per employee per year |
| 500 employees  | \$21.94 | Per employee per year |
| 1000 employees | \$19.03 | Per employee per year |
| 1500 employees | \$18.61 | Per employee per year |
| 2000 employees | \$18.19 | Per employee per year |
| 2500 employees | \$18.10 | Per employee per year |
| 3000 employees | \$18.01 | Per employee per year |
| 3411 employees | \$17.91 | Per employee per year |

Included in Price (This quote is good for 60 days):

### • Employee Benefits and Services Summary

- ✓ **Counseling Benefits**
  - Face-to-Face Sessions per issue per year: Up to 3
  - Unlimited Telephonic Counseling • Family Members Covered • Master's & Ph.D. Level Licensed Counselors
- ✓ **Work-Life Benefits**
  - Legal • Financial • Caregiver Benefits • Adoption Benefits • Children with Disabilities
  - Personal Assistant • Self-Help Resources • Tools for Tough Times • Pet Information
- ✓ **ESI Employee & Learning Development**
  - Personal & Professional Online Trainings • Personal Finance & Education Center
  - GCN Compliance Training (GCN is optional)
- ✓ **Wellness Resource Center & Lifestyle Savings Benefit**

### • Peak Performance Coaching Benefits and Services – Topics Include:

- Certified Financial • Balancing Life at Work and Home • Resilience • Effective Communication
- Certified Student Debt • Home Purchase • Relaxation for Beginners • Workplace Conflict
- Practical Aspects of Retirement • Succeeding as a Supervisor

### • Administration Services

- EAP Member & Supervisor Orientation • EAP Ongoing Communication
- Automated Digital Communication (ADC) • EAP Mobile App

### • Manager, Supervisor and HR Services

- Human Resource Consultations w/SPHR's • Administrative Referral
- Supervisor Resource Center • Drug-Free Workplace • HR Web Café

• **Trauma Response:** 1 free per year (\$250 per hour thereafter)

• **Wellness Coaching Included**

• **ESI Accountability: Confidentiality, Activity Reports, Quality Assurance Program**

**The full proposal can be emailed to you upon request.**



# Lifetime Benefit Solutions



Consortium Pricing

The Consortium does not offer FSA/HRA/HSA services. LBS has offered us discounted rates to pass along to all our municipal members.

## COBRA Administration Services

|   |  |
|---|--|
| <input type="checkbox"/> COBRA Administration | \$0.58 Per Enrolled Per Month<br>(\$55.00 Monthly Minimum) |
|---|--|

## Flexible Spending Account Administration Services

|   |  |
|---|--|
| FSA Administration  | \$3.00 Per Enrolled FSA Participant Per Month*<br>(\$75 Monthly Minimum) |
| Account Type Options<br><input type="checkbox"/> Health Care Account<br><input type="checkbox"/> Dependent Care Account<br><input type="checkbox"/> Transportation Spending Account<br><input type="checkbox"/> Limited Purpose FSA |  |
| *Pricing includes multiple product offerings (i.e. FSA/HRA)   |  |

## Health Reimbursement Account Administration Services

|   |  |
|---|--|
| HRA Administration  | \$3.00 Per Enrolled HRA Participant Per Month*<br>(\$75 Monthly Minimum) |
| Account Type Options<br><input type="checkbox"/> Health Reimbursement Account<br><input type="checkbox"/> Limited Purpose HRA |  |
| *Pricing includes multiple product offerings (i.e. FSA/HRA)   |  |

## Health Savings Account Administration Services

|   |   |
|---|---|
| <input type="checkbox"/> Health Savings Account | \$1.25 Per Enrolled HSA Participant Per Month |
|---|---|

## Retiree and/or Active Premium Billing Administration Services

|  |   |
|--|---|
| <input type="checkbox"/> Retiree and/or Active Premium Billing | \$2.75 Per Billed Retiree/Active Per Month<br>(Monthly minimum of \$50 for retiree premium billing<br>Monthly minimum of \$75 for active premium billing) |
|--|---|

## Compliance Services

|  |                    |
|--|--------------------|
| <input type="checkbox"/> POP, HRA or FSA Summary Plan Description (SPD)      | \$300 per document |
| <input type="checkbox"/> Non-Discrimination Testing (Section 125 and 105(h)) | \$275 annually     |
| <input type="checkbox"/> Annual Compliance Bundle (documents and testing)    | \$325 annually     |

## Value Added Services

- ✓ Dedicated Client Service Team
- ✓ Unified digital experience
- ✓ LBS accounts accessible through Excellus BCBS member portal and app
- ✓ Open Enrollment Support
- ✓ Attendance at Benefit/Health Fairs
- ✓ Distribution of Open Enrollment Materials
- ✓ Campaigns to boost participation

# Staying Connected in 2024



## Consortium Connection (Newsletter)

### New!!\* Subscribe to the Consortium Connection Newsletter

\* indicates required

Email Address \*

First Name

Last Name

Subscribe

made with  mailchimp

Click on the Current Newsletter Tab. It will take you to the subscribe page to sign up to receive our newsletter via email in 2024.

Our newsletter is published quarterly and contains information on a variety of topics including budget information, wellness, staffing changes, new member additions, and more!



# Facebook Wellness and Growth!

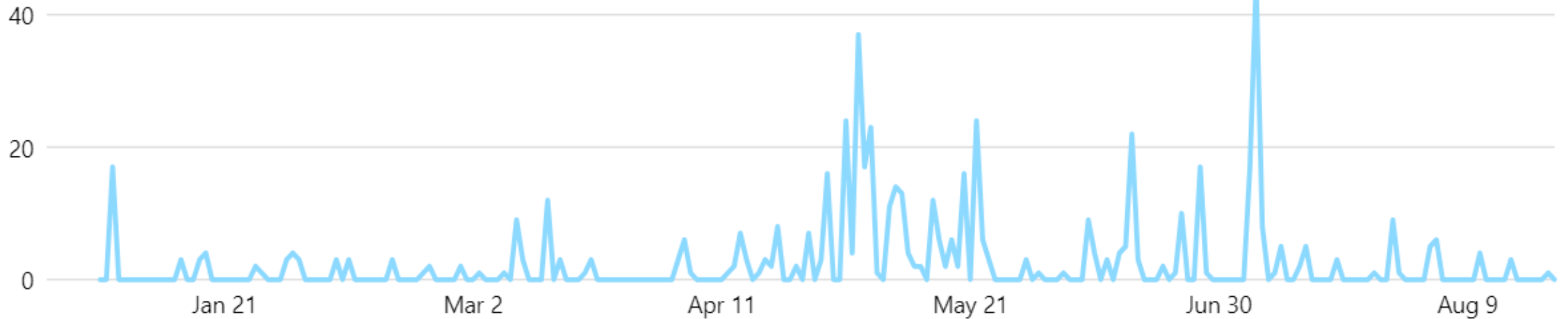
[www.facebook.com/GTCMHIC](http://www.facebook.com/GTCMHIC)



## Page and profile visits

Facebook visits ⓘ

583 ↑ 7.4%





**Thank you!**