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Public Hearing Notice – 521

**2017 Plan Medical Carrier/Plan Design Changes**

May 20, 2016

In compliance with the Denver Revised Municipal Code (DRMC of the City and County of Denver (the “city”), Section 18-2, subsection (a), part (3), the Career Service Board hereby gives notice that a public hearing will be conducted regarding the proposed health insurance plans for the 2017 plan year beginning on January 1, 2017.

The city’s Employee Health Insurance Committee (the “Committee”), established by DRMC Sect. 18-184, is responsible for advising the Career Service Board and the Office of Human Resources regarding any recommended changes to the employee medical, life, dental and long-term disability insurance benefit programs. Eligible employees are those defined in DRMC section 18-171.

The insurance providers were asked to provide their expected premium requirements for 2017, which were accepted by the Committee. In addition, the Committee recommends the following benefit structure for 2017:

1. Medical Plans
  - a. Kaiser Permanente, UnitedHealthCare, and Denver Health should continue as the city’s three contracted health insurance providers.
  - b. The city should continue to offer one high deductible health plan (HDHP) and one deductible HMO (DHMO) per health insurance provider (a total of six medical plans).
  - c. The city should continue to subsidize the monthly premiums as follows:
    - i. For enrollees in the high deductible health plans, the city should continue to pay monthly: 95% of the employee only premium, 87.5% of the employee plus spouse premium, 90% of the employee plus child(ren) premiums and 85% of the family premium.
    - ii. For enrollees in the deductible HMO Plans, the city should continue to pay monthly: 85% of the employee only premium, 77.5% of the employee plus spouse premium, 80% of the employee plus child(ren) premiums and 75% of the family premium.
  - d. For the DHMO plans, the Committee recommends the following modification in 2017 of the benefit offered in 2016:

- i. Increase the out of pocket maximums for both the Denver Health DHMO plan, and the United HealthCare DHMO plan to \$3000, so that all three DHMO plans have a \$3,000 out of pocket maximum.
      - e. The Committee recommends the following modification in 2017 of the HDHP benefit offered in 2016:
        - i. Replace the Kaiser Permanente HDHP prescription coinsurance benefit with a copay-based structure after deductible.
  - 2. Health Savings Accounts (HSA):
    - a. The Committee recommends the city continue to offer the HSA option to employees enrolled in the HDHP.
    - b. The Committee recommends the city continue to contribute \$600 for employees electing employee only coverage and \$1200 for employees electing employee plus spouse coverage, employee plus child(ren) coverage or family coverage.
  - 3. City Provided Short-Term Disability
    - a. Standard insurance decreased the monthly premium by 6%.

The attached document provides a visual representation of any change in plan design or premium from those offered in 2016 to 2017.

The Committee is proposing no changes to the premiums or plan designs for dental, vision or life insurance for 2017.

A Career Service Board Hearing is scheduled for **Thursday, June 2, 2016**. The public hearing starts **at 5:00 p.m.** in the Webb Building, Room 4.G.4, 4th floor, at 201 W Colfax Ave, Denver CO 80202.

If anyone wishes to be heard by the Board on this item, please contact Alisha Gronniger at (720) 913-5650 no later than 12:00 p.m. on Tuesday, May 30. This notice was published on May 20, 2016.

# 2017 Career Service Medical Premiums

## 2017 Career Service Rates with Proposed Increases From 2016

2016 Career Service Rates						2017 Career Service Rates with Proposed Increases From 2016				
Tier	Carrier	Total Monthly Cost	Required Employee contribution	Monthly City Cost	Monthly Employee Cost	Proposed Increase	Total Monthly Cost	Required Employee contribution	Monthly City Cost	Monthly Employee Cost
Employee Only	Kaiser DHMO	\$454.00	15.0%	\$385.90	\$68.10	8.66%	\$493.32	15.0%	\$419.32	\$74.00
	Kaiser HDHP	\$366.19	5.0%	\$347.88	\$18.31	8.66%	\$397.90	5.0%	\$378.01	\$19.90
	Denver Health DHMO	\$563.44	15.0%	\$478.92	\$84.52	4.40%	\$588.23	15.0%	\$500.00	\$88.23
	Denver Health HDHP	\$450.01	5.0%	\$427.51	\$22.50	3.03%	\$463.65	5.0%	\$440.47	\$23.18
	UHC Navigate	\$638.27	15.0%	\$542.53	\$95.74	2.33%	\$653.13	15.0%	\$555.16	\$97.97
	UHC HDHP	\$600.35	5.0%	\$570.33	\$30.02	3.90%	\$623.76	5.0%	\$592.57	\$31.19
Employee + Spouse	Kaiser DHMO	\$998.80	22.5%	\$774.07	\$224.73	8.66%	\$1,085.30	22.5%	\$841.11	\$244.19
	Kaiser HDHP	\$805.61	12.5%	\$704.91	\$100.70	8.66%	\$875.38	12.5%	\$765.96	\$109.42
	Denver Health DHMO	\$1,239.58	22.5%	\$960.67	\$278.91	4.40%	\$1,294.12	22.5%	\$1,002.94	\$291.18
	Denver Health HDHP	\$990.03	12.5%	\$866.28	\$123.75	3.03%	\$1,020.03	12.5%	\$892.53	\$127.50
	UHC Navigate	\$1,404.21	22.5%	\$1,088.26	\$315.95	2.33%	\$1,436.90	22.5%	\$1,113.60	\$323.30
	UHC HDHP	\$1,320.80	12.5%	\$1,155.70	\$165.10	3.90%	\$1,372.30	12.5%	\$1,200.76	\$171.54
Employee + Child(ren)	Kaiser DHMO	\$908.00	20%	\$726.40	\$181.60	8.66%	\$986.63	20%	\$789.30	\$197.33
	Kaiser HDHP	\$732.37	10%	\$659.13	\$73.24	8.66%	\$795.80	10%	\$716.22	\$79.58
	Denver Health DHMO	\$1,126.89	20%	\$901.51	\$225.38	4.40%	\$1,176.47	20%	\$941.18	\$235.29
	Denver Health HDHP	\$900.02	10%	\$810.02	\$90.00	3.03%	\$927.30	10%	\$834.57	\$92.73
	UHC Navigate	\$1,276.58	20%	\$1,021.26	\$255.32	2.33%	\$1,306.30	20%	\$1,045.04	\$261.26
	UHC HDHP	\$1,200.73	10%	\$1,080.66	\$120.07	3.90%	\$1,247.55	10%	\$1,122.80	\$124.76
Family	Kaiser DHMO	\$1,452.80	25%	\$1,089.60	\$363.20	8.66%	\$1,578.61	25%	\$1,183.96	\$394.65
	Kaiser HDHP	\$1,171.80	15%	\$996.03	\$175.77	8.66%	\$1,273.28	15%	\$1,082.29	\$190.99
	Denver Health DHMO	\$1,803.02	25%	\$1,352.27	\$450.76	4.40%	\$1,882.35	25%	\$1,411.76	\$470.59
	Denver Health HDHP	\$1,440.04	15%	\$1,224.03	\$216.01	3.03%	\$1,483.69	15%	\$1,261.14	\$222.55
	UHC Navigate	\$2,042.82	25%	\$1,532.12	\$510.71	2.33%	\$2,090.38	25%	\$1,567.79	\$522.60
	UHC HDHP	\$1,921.12	15%	\$1,632.95	\$288.17	3.90%	\$1,996.03	15%	\$1,696.63	\$299.40

# High-Deductible Health Plan (HDHP)

## Plan overview

***Bolded and Italic indicates a change in 2017***

	Denver Health				Kaiser		United Health Care			
	In Network		Cofinity Network		No Out-of-Network coverage		Choice Network		Out-of-Network	
	Single	Family	Single	Family	Single	Family	Single	Family	Single	Family
<b>Preventive Visit</b>	No cost to member									
<b>Deductible</b>	\$1,350	\$2,700	\$1,350	\$2,700	\$1,350	\$2,700	\$1,350	\$2,700	\$3,000	\$6,000
<b>Coinsurance</b>	10%	10%	20%	20%	20%	20%	20%	20%	20%	20%
<b>Out-of-Pocket Max</b>	\$2,700	\$5,400	\$2,700	\$5,400	\$2,700	\$5,400	\$2,700	\$5,400	\$6,000	\$12,000
<b>All Medical Services</b>	<p><b>1.</b> Member pays all non-preventive costs up to their <b>deductible</b>. Those with employee only coverage must meet the in network single deductible (\$1,350), those with dependents enrolled must meet the family deductible (\$2,700).</p> <p><b>2.</b> After reaching the deductible, member pays a percentage of costs, or <b>coinsurance</b>. Note: Prescription costs below.</p> <p><b>3.</b> <b>All coinsurance, prescription copay and deductible expenses count toward the out-of-pocket maximum (OPM)</b>. Once the OPM is reached, insurance pays 100%. Those with employee only coverage must meet the in network single OPM (\$2,700), those with dependents enrolled must meet the family OPM (\$5,400).</p>									
<b>Prescription Drugs</b>	After Deductible:		After Deductible:		<b><i>After Deductible:</i></b>		After Deductible:			
Generic	\$10 copay		\$20 copay		<b><i>\$10 copay</i></b>		\$10 copay		Not Covered	
Preferred Brand	\$15 copay		\$40 copay		<b><i>\$35 copay</i></b>		\$35 copay			
Non-Preferred	\$30 copay		\$60 copay		<b><i>\$60 copay</i></b>		\$60 copay			

## Deductible HMO (DHMO)/Navigate

### Plan overview

***Bolded and Italic indicates a change in 2017***

Summary of Covered Services	Denver Health DHMO	Kaiser DHMO	UHC Navigate
	<b>Single/Family</b>	<b>Single/Family</b>	<b>Single/Family</b>
<b>Preventive Visit</b>	Free	Free	Free
<b>Deductible</b> (Does not apply to Office visits and RX)	\$500 single/\$1500 family	\$500 single/\$1500 family	\$500 single/\$1500 family
<b>Coinsurance</b> (Does not apply to Office visits and RX)	20% after deductible	20% after deductible	20% after deductible + Per Occurrence Deductible
<b>Out-of-Pocket Maximum (OPM)</b> (copays, deductibles and coinsurance count toward OPM)	<b><i>\$3,000 single/\$6,000 Family</i></b>	\$3,000 single/\$6,000 Family	<b><i>\$3,000 single/\$6,000 Family</i></b>
<b>Office Visits and Prescriptions</b>	Member Pays Flat Copay based on service (no deductible)		
<b>All Procedures, Hospitalizations and X-ray</b>	<ol style="list-style-type: none"> <li>1. Member pays procedure and hospital costs up to their individual \$500 annual deductible. Families pay up to 3 individual deductibles.</li> <li>2. Then member pays 20% coinsurance.</li> <li>3. Member pays deductible and coinsurance up to their individual OPM. Once all coinsurance, copay and deductible expenses reach OPM, insurance pays 100%.</li> </ol>		
<b>Lab</b>	20% after deductible	No member cost	20% after deductible