

Administrator

Important news and updates from your benefits professionals

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This Issue

Mental Well-Being

Looking at ways to help members recover from a difficult year.

Legislative Activity

Work continues on Price Transparency and No Surprise Billing.

Health Savings Accounts

More flexibility and higher contribution limits on the way.

Healthcare Data

Some patients receive test results earlier than their physician.

Trends, News, Updates and More Inside!

What the Pandemic Has Taught Us

Whether you're a TPA, broker, employer, plan member or healthcare provider, the past year has been unlike any other. While adapting has often been difficult, some of the lessons learned can have a positive impact on employee healthcare in the future. Here are a few to consider as you begin your planning for the coming year.

Open Enrollment

According to the IFEBP, 1 in 5 companies handled open enrollment differently in 2020, with many using virtual benefit events. Virtual benefits meetings can be viewed by members from any location at any time. In addition, members can easily share their benefits information with a spouse or family member, something that cannot be done with traditional in-person events. Many used short video introductions and important details were typically made available on secure online employee portals following the virtual event. Offering a dedicated email address, phone line or online chat option can make it easy for members to ask questions.

Telemedicine

Think for a moment that Cleveland Clinic delivered 1.2 million virtual physician visits in 2020, compared to just 37,000 in 2019. Even after resuming in-person appointments, 30% to 40% of all visits at Stanford Health Care are virtual and while physicians and patients say there is certainly room for improvement, nearly 3 of 4 patients say they are likely to choose a video consult over in-person in the future. While many physicians say they would prefer to use telehealth visits to manage chronic diseases, many



cite low or no reimbursement and technology challenges on the part of their patients as the biggest obstacles to its continued use.

Health Benefit Value

One challenge that remains even as the threat of Covid-19 lessens is the rising costs facing employer-sponsored health plans. Research from the Kaiser Family Foundation and The Hartford show a decline in the perceived value of health benefits by plan sponsors and members. These trends can only change as personal service improves and the barriers standing in the way of healthcare cost transparency are overcome.

As an independent TPA, we place the needs of your health plan and members first by providing personalized service and striving to eliminate costly conflicts of interest that have plagued our healthcare system.



How Are Your Employees Really Doing?

The American Psychological Association reports that nearly 80% of adults say the Coronavirus pandemic was a significant source of stress in their life. The U.S. Census Bureau says the percentage of surveyed employees experiencing anxiety or depression rose from 11% in 2019 to more than 40% this Spring. There is no doubt that even as restrictions ease and more people return to their offices, employers will need to place a very high priority on mental health and wellness.

As we know, there are no one size fits all solutions to employee well-being and every organization is different. The following qualities, however, are even more important to employees when stress is running at a high level.

Connection - When remote workers are separated from co-workers and managers, personal concerns can weigh more heavily. Finding time for people to connect, even virtually, is important.

Communication - Keeping workers informed about what's to expect in the near future is comforting. Knowing your job is safe in difficult times can relieve a great deal of pressure.

Encouragement - Recognition is more meaningful than employers often realize. Everyone wants to know the work they are doing is important and their efforts are appreciated.

Price Transparency Rules Issued

New guidelines issued by CMS earlier this Spring state that all files uploaded by health plans and insurance carriers must be in formats the public can use. Before issuing this guidance, some files included coding that kept Google and other search engines from indexing names and prices listed by hospitals on their websites, making it very hard for consumers to access the data.



The American Hospital Association lost a suit to block the rule on the basis that HHS lacks the authority to oversee its regulation and such rates are not useful to consumers. According to CMS, hospitals are expected to comply with these requirements to provide pricing information that is searchable and accessible without barriers.

Regs Coming for No Surprise Billing Act



While former President Trump signed the No Surprises Act into law as part of the Consolidated Appropriations Act of 2021, CMS is still working on regulations that will become effective for insured and self-funded health plan years that begin on or after Jan. 1, 2022. Implementing this law will be interesting, experts say. While many of its provisions were

designed to protect people from getting unexpected bills for care from out-of-network providers at in-network hospitals and surprise bills from out-of-network emergency care providers including air ambulance services, many types of bills that “surprise” consumers may indeed be outside the scope of the Act.

There are other concerns as well. One of these is a part of the law that requires health plans and out-of-network providers who disagree about charges to seek arbitration. Another is a provision that lets some providers offer care on an out-of-network basis if they advise the patient about potential billing and get a consent form signed. Even though there will be challenges to work through once the law is implemented, policymakers are confident that the No Surprises Act will be a great help to consumers.

Trends Latest Happenings in Today's World

US Mortality Rate Rises

As expected, the Covid-19 Pandemic took a toll on our nation's mortality rate. According to provisional data from the CDC, our age-adjusted mortality rate, which measures deaths per 100,000 people, rose by about 16 percent in 2020. Experts say this surge was the largest since the 1920s when disease outbreaks were more common. While the vaccines have

drastically lowered Covid death rates, experts say the effects of missed screenings and other problems could be felt for up to two years.

Lyft to the Doctor?

In response to a 2019 study showing that millions of patients fail to receive required medical care due to a lack of transportation, ride-sharing company Lyft is partnering with sponsoring

healthcare organizations to let patients request rides for non-emergency medical appointments, vaccinations or prescription pickups. While the company tried this previously with employers covering the cost for employees, these “Lyft Passes,” similar to those used to provide rides to and from Covid-19 vaccinations, would be sponsored by health plans including Medicare and Medicaid.



More Flexibility for HSA Users

Following the many hardships caused by Covid-19, members of the House Education and Labor Health Subcommittee have asked Congress to make it easier for Health Savings Account holders to obtain some low or no-cost mental health care before meeting their deductibles. In response to the pandemic, Congress allowed first-dollar coverage for telehealth. Members of the committee would like to make this option permanent and include access to worksite clinics as well. With estimates reflecting a nearly four-fold rise in the number of US adults reporting symptoms of depression or anxiety compared to a year ago, we can expect calls for help to continue.

2022 HSA Contribution Limits



The IRS has announced that contribution limits for 2022 are increasing by \$50 for individual coverage and \$100 for family coverage, to \$3,650 and \$7,300 respectively. This represents an increase of 1.4% from 2021 levels and those age

55 and older can still contribute an additional \$1,000 per year. While minimum annual deductible levels will remain unchanged at \$1,400 for individual coverage and \$2,800 for family coverage, maximum out-of-pocket expense limits for HDHPs will increase to \$7,050 for individual coverage and \$14,100 for family coverage.

Overall, enrollment in HSAs continues to grow. Advisory firm Devenir reports that approximately 30 million Americans currently own health savings accounts with overall balances totaling more than \$82 billion.

More Employers Open to Change

With healthcare costs expected to rise by some 6.5% this year and growing concerns over hospital price transparency, many employers are open to new ideas. Some who have looked at Self-Funding or Reference Based Pricing (RBP) in the past are now revisiting these options in an effort to keep healthcare affordable for their organization and their employees.

Alternative ways of funding employee health benefits have always been a concern for HR directors, charged with helping employees adapt to change. The fact is that these strategies are becoming more and more widespread every year. In most cases, moving away from a fully insured plan with a traditional PPO can often result in a health plan that is not only stronger but more cost-effective as well. If your broker has failed to speak with you about self-funding or reference based pricing, contact us to learn more.

Return, Remote or Both

Surveys showing that about half of office workers would prefer to continue working remotely have many organizations debating how to respond to loosening CDC restrictions. As of mid-May, about a third seem to be planning to bring workers back and half or more are preparing to move forward with a mix of remote and in-person staff.

Over the past year or so, many companies have learned to manage remote staffing but supervising a hybrid workforce could pose unique challenges. Scheduling, spacing people out in work areas and tracking time and performance are a few common concerns. Some employers are taking steps to make sure that in-office workers and those working at home are treated equally in future performance reviews. One interesting concern for offices bringing workers back is vaccinations. While few employers have mandated vaccinations, those making masks optional are hoping to avoid conflicts between employees who choose to wear a mask and those who do not.

Healthcare or Netflix

Research from Voya Financial and PwC shows that most employees spend about 17 minutes choosing their health benefit plan at open enrollment. In contrast, the average Netflix user spends 18 minutes a day deciding what to watch. With all the attention paid to financial wellness these days, helping members examine their options might be a good place to start.

Goodbye Haven, Hello Morgan

Only a few months after Amazon, JPMorgan Chase and Berkshire Hathaway ended their "Haven" healthcare experiment, JPMorgan Chase introduced a new unit dedicated to collaborating with outside organizations to accomplish its healthcare objectives. Morgan Health is expected to partner with leading health plans

and provider groups to improve access, quality and cost for its nearly 300,000 employees and dependents.

Fewer Working Parents

There is no doubt that the pandemic opened the eyes of many employers to the difficulties many working parents face. Surveys by FlexJobs, conducted during the height of Covid-19, showed that 38 percent of workers who quit

would not rejoin the workforce. Now that companies are facing serious worker shortages, employers are offering incentives and flexible options to lure working parents back. A determining factor will likely be the availability of in-classroom learning at elementary and secondary schools throughout the country.

Did You Know? New Ideas for Healthy Consumers

Receiving Healthcare Data

In early April, a federal rule took effect enabling patients to view their medical records without paying any fees and without waiting days or weeks. As a result, many patients will be able to find test results, clinical notes from their doctor and other medical information posted to their electronic portal as soon as they are available. While most physicians and patients view this as long overdue, a few obstacles have arisen. In some cases, test results can be made available to a patient before their physician has seen them. This can be a problem if further explanation or comments are appropriate. Doctors are also concerned about sensitive comments being seen by a parent of an adolescent who wants to keep the information confidential.



The AMA is pushing for modifications that would provide for brief delays when results involve a difficult diagnosis, such as cancer. Representatives of the Office of the National Coordinator for Health Information Technology, the federal agency overseeing the rule, have emphasized that patients can always decide whether they want to look at results or wait and review them with their doctor. Also, the rule does not require that parents be given access to protected health information if they did not already have that right under HIPAA. Some electronic health records enable doctors to withhold results, a step the doctor can discuss with their patient prior to ordering the test. While the overall response is positive, discussions will likely continue as patients become better informed about the tools available.

Quantity Over Quality

Dietitians recommend drinking half your body weight in ounces per day – that's 75 ounces of water daily if you weigh 150 pounds. But what type of bottled water is best? The International Bottled Water Association offers the following descriptions.

- Spring water comes from underground, flowing naturally to the earth's surface.
- Purified water is produced by distillation, deionization, reverse osmosis or other approved process.
- Mineral water is natural and contains a constant level of mineral elements coming from its source. No other minerals can be added.
- Sparkling bottled water is treated but can only contain the same amount of carbon dioxide it had when it emerged from its source.
- While well water is derived from a hole in the ground that taps the water aquifer, artesian well water comes from a source above an underground layer or rock or sand.
- Alkaline water has a higher pH level than tap water, meaning that it is less acidic.

While many choices exist, health experts say the amount of water you consume is far more important than the type of water. No matter what water you prefer, keep a bottle handy and stay hydrated!

More Women Avoided Care

The Kaiser Family Foundation reports that more women than men failed to receive preventive care during the pandemic. Statistics show that 38% of women skipped their annual checkup compared to 26% of men and nearly one in four women failed to get a recommended medical test or treatment versus only 15% of men. Income did not appear to be a big factor, leading consultants to believe that fear of exposure to Covid-19 and the inability to access medical facilities were big contributing factors.

Please Contact Us: This newsletter is not intended as a substitute for personal medical or employee benefits advice. Please consult your physician before making decisions that may impact your personal health. Talk to your benefits administrator before implementing strategies that may impact your organization's employee benefit objectives.



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