### Small Group Product Training 2024





Putting Members First. Pursuing Better Healthcare.

### Agenda

- Who We Are
- Service Area and Network
- 2024 Plans & Rates
- Reminders
- ♦ Q&A



### Who we are



### Cooperative

We are not owned by any corporation or health system. We are member governed and member centered.



### Board of Directors

The Board is made up of CGHC members. The board provides the strategic direction of the cooperative.



### Non-profit

Operated for the mutual benefit of our members. Any earnings we make are returned to our members in the form of lower prices and improved services.



### **Our Mission**

## Putting Members First.

## Pursuing Better Healthcare.



### Sales Team



Jennifer Walkowiak
VP Business Development



Kati Gresk Business Development Specialist



April Schultz Broker Specialist



Aidy Hichez Admin Specialist - SG



Verina Girgis SG Acct Manager



Jennifer Wenner SG Account Executive

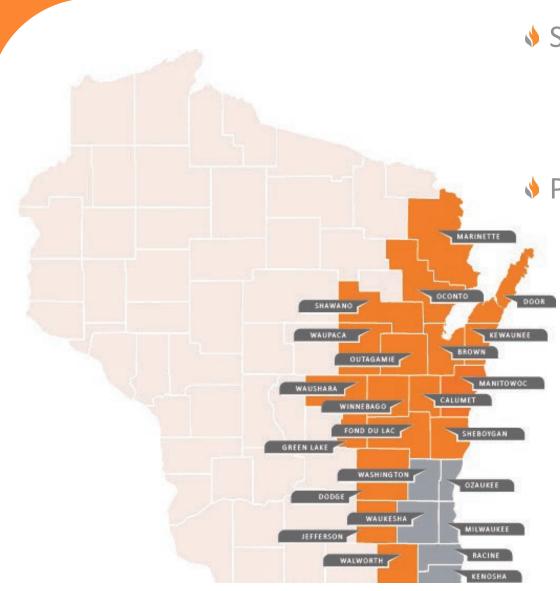


## Service Area Changes

2024



### **Service Area & Networks**



Service Area Changes

- Exiting Florence County
  - Communication being sent to current members
- Remaining in existing 24 counties
- Provider Networks
  - Can only have Envision or RISE then EPO Plus
  - Envision Network remains unchanged
    - o EPO
    - High Value Provider Network
  - Rise Network
    - New EPO network available 1/1/2024
    - Network includes the same providers as the Envision network, but will also include Ascension hospitals and providers
    - Will only be offered to employers in Rating Areas 1,
       9 and 12; however, employees can reside outside of these rating areas and have access to Ascension

### Rise Network - Hospitals















Kids deserve the best.



### **Envision Network - Hospitals**







Kids deserve the best.







Trusted team. Close to home.



### **EPO Plus**

- Solution for employers with out-of-area employees
- ♦ 10 EPO Plus plans that match the 10 most sold base plans
- Employees access care via First Health Complementary Network
- One of the largest provider networks in the country
- Contracted providers in all 50 states



Employees who select an <u>In-Service Area</u> (Envision or Rise) plan but experience the need to seek out-of-area urgent and/or emergency services are allowed to access our First Health Complementary Network: <a href="https://www.firsthealthcomplementary.com/">https://www.firsthealthcomplementary.com/</a>



### **Pharmacy Network**

- Managed by OptumRX
- Wide pharmacy network
  - Within service area
  - Nationwide
  - Note: CVS Pharmacy will NO LONGER be in the network starting 1/1/24
- Many Independent Pharmacies
- Note: All mail order must use OptumRX
- Other updates
  - Generic Alternative Program
  - Manufacturer Coupons



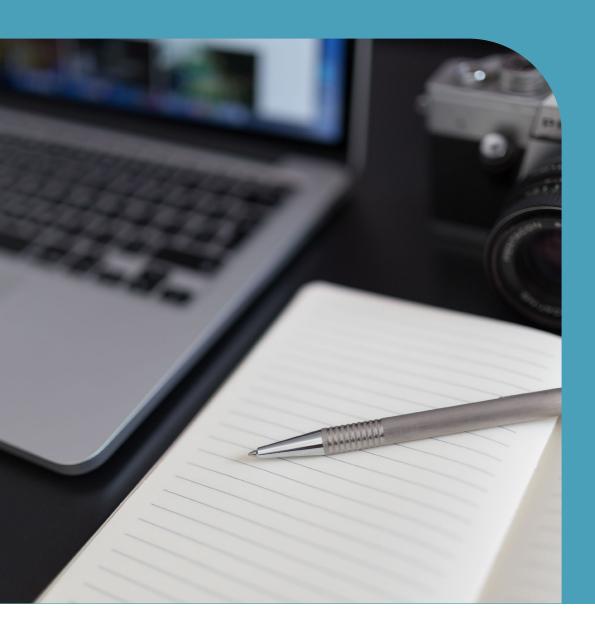












## SG Plan Updates and Rates

2024



### **Actuarial Value (AV)**

### Definition

\* "Actuarial value" measures the relative generosity of benefits covered by a health insurance plan. Under the ACA, a health insurance plan's actuarial value indicates the average share of medical spending that is paid by the plan, as opposed to being paid out of pocket by the consumer.

ACA Metal Tiers are determined by the percent of the actuarial value with respect to essential benefits:

METAL TIER	Actuarial Value Percent
Bronze	60 percent
Silver	70 percent
Gold	80 percent
Platinum	90 percent



### De Minimis

### Definition

♦ The de minimis range is the allowable variation in the AV of a health plan that does not result in a material difference in the true dollar value of the health plan.

Due to difficulty for insurers to design plans that have a precise actuarial value, the ACA allows a de minimis range for each metal tier.

Plan Years	De Minimis Range
2023 - 2024	-2 / +2
2018 - 2022	-4 / +2
2013 - 2017	-2 / +2

<sup>\*</sup> CSR Plans have a narrower de minimis



### **New Plans & New Plan IDs**

#### **2024 SMALL EMPLOYER** BENEFIT PLAN DESIGNS

All Gold plans listed are available with the **Envision** network. The **Rise** network is available for all Gold plans

	Calendar Year Deductible	Out-of-Pocket Maximum			In-Netv	Provider Visits work Copays / Coin	surance
EPO Plan Name	Single / Family	Single / Family	Coinsurance	Quick / Fast Care	PCP <sup>1</sup>	Specialist	Emergency <sup>2</sup>
CGHC EPO Gold \$0 Deductible/20% Plan ID: 87416WI004003400 Plan ID: 87416WI004006300	\$0/\$0	\$8,000 / \$16,000	20%	\$15	\$35	\$70	\$300
CGHC EPO Gold \$800 Deductible/20% Plan ID: 87416WI004003500 Plan ID: 87416WI004006400	\$800 / \$1,600	\$8,350 / \$16,700	20%	\$15	\$35	\$70	\$300
CGHC EPO Gold \$1500 Deductible/20% Plan ID: 87416WI004003700 Plan ID: 87416WI004006500	\$1,500 / \$3,000	\$6,000 / \$12,000	20%	\$15	\$35	\$70	\$300
CGHC EPO Gold \$2000 Deductible/20% Plan ID: 87416WI004003900 Plan ID: 87416WI004006600	\$2,000 / \$4,000	\$7,500 / \$15,000	20%	\$15	\$30	\$60	D/C³
CGHC EPO Gold \$2200 Deductible/20% Plan ID: 87416WI004004100 Plan ID: 87416WI004006700	\$2,200 / \$4,400	\$6,500 / \$13,000	20%	\$15	\$35	\$70	\$300
CGHC EPO Gold \$2600 Deductible/15% Plan ID: 87416WI004004200 Plan ID: 87416WI004006800	\$2,600 / \$5,200	\$8,500 / \$17,000	15%	\$15	\$20	\$60	D/C³
CGHC EPO Gold \$2750 Deductible/15% - ER Copay Plan ID: 87416WI004004300 Plan ID: 87416WI004006900	\$2,750 / \$5,500	\$8,550 / \$17,100	15%	\$15	\$35	\$70	\$300
CGHC EPO HSA Gold \$3200 Deductible/0% Plan ID: 87416WI004005400 Plan ID: 87416WI004007600	\$3,200 / \$6,400	\$3,200 / \$6,400	0%	D/C³	D/C³	D/C³	D/C³

### New Plans

- Envision Plan
  - CGHC EPO Gold \$0 Deductible/20% -Envision Network
- Rise Plans
  - Will mirror all Envision EPO plans including the new Gold \$0 Deductible plan; however, the name will end with "Rise Network"
- New Plan IDs
  - All existing plans will have new Plan IDs each year going forward



### **Small Group Benefit Changes – Gold Plans**

Plan Year	Plan Name	Changes
2023	CGHC EPO Gold \$2750 Deductible/15% - Envision Network	Deductible: \$2,750 / \$5,500 Maximum Out-of-Pocket: \$8,550 / \$17,100 Primary Care Provider: \$35 Specialist: \$70
2024	CGHC EPO Gold \$2600 Deductible/15% - Envision or Rise Network	Deductible: \$2,600 / \$5,200 Maximum Out-of-Pocket: \$8,500 / \$17,000 Primary Care Provider: \$20 Specialist: \$60
2023	CGHC EPO HSA Gold \$3000 Deductible/0% - Envision Network*	Deductible: \$3,000 / \$6,000 Maximum Out-of-Pocket: \$3,000 / \$6,000
2024	CGHC EPO HSA Gold \$3200 Deductible/0% - Envision or Rise Network*	Deductible: \$3,200 / \$6,400 Maximum Out-of-Pocket: \$3,200 / \$6,400
2024	NEW: CGHC EPO Gold \$0 Deductible/20% - Envision or Rise Network	Deductible: \$0/\$0 Maximum Out-of-Pocket: \$8,000 / \$16,000 Primary Care Provider: \$35 Specialist: \$70

<sup>-</sup> Benefits are richer in 2024

### Small Group Benefit Changes – Silver Plans

Plan Year	Plan Name	Changes
2023	CGHC EPO HSA Silver \$4800 Deductible/0% - Envision Network*	Deductible: \$4,800 / \$9,600 Maximum Out-of-Pocket: \$4,800 / \$9,600
2024	CGHC EPO HSA Silver \$5100 Deductible/0% - Envision or Rise Network*	Deductible: \$5,100 / \$10,200 Maximum Out-of-Pocket: \$5,100 / \$10,200
2023	CGHC EPO HSA Silver \$3000 Deductible/20% - Envision Network	Deductible: \$3,000 / \$6,000 Maximum Out-of-Pocket: \$6,800 / \$13,600
2024	CGHC EPO HSA Silver \$3200 Deductible/20% - Envision or Rise Network	Deductible: \$3,200 / \$6,400 Maximum Out-of-Pocket: \$7,000 / \$14,000

## Small Group Benefit Changes –Bronze Plans

Plan Year	Plan Name	Changes
2023	CGHC EPO HSA Bronze \$7000 Deductible/0% - Envision Network*	Deductible: \$7,000 / \$14,000
2024	CGHC EPO HSA Bronze \$7100 Deductible/0% - Envision or Rise Network*	Deductible: \$7,100 / \$14,200

# Envision/Rise Network plans that also have a matching EPO Plus plan



Plan Name	EPO Plus Available
CGHC EPO Platinum \$500 Deductible/20%	
CGHC EPO Platinum \$500 Deductible/10%	
NEW: CGHC EPO Gold \$0 Deductible/20%	
CGHC EPO Gold \$800 Deductible/20%	Yes
CGHC EPO Gold \$1500 Deductible/20%	Yes
CGHC EPO Gold \$2000 Deductible/20%	Yes
CGHC EPO Gold \$2750 Deductible/15%	
CGHC EPO Gold \$2750 Deductible/15% - ER Copay	
CGHC EPO Gold \$2200 Deductible/20%	
CGHC EPO HSA Gold \$3000 Deductible/0%	Yes
CGHC EPO Silver \$4000 Deductible/20%	Yes
CGHC EPO HSA Silver \$4800 Deductible/0%	Yes
CGHC EPO Silver \$5000 Deductible/20%	Yes
CGHC EPO HSA Silver \$3000 Deductible/20%	
CGHC EPO Silver \$5500 Deductible/20%	
CGHC EPO Silver \$6000 Deductible/20%	
CGHC EPO HSA Bronze \$7000 Deductible/0%	Yes
CGHC EPO Bronze \$8550 Deductible/0%	Yes
CGHC EPO Bronze \$5500 Deductible/30%	Yes

### **Premium Rate Changes**

As a non-profit, we set our premiums to keep pace with the cost of the health care our members receive. Our 2024 small grou plan composite premium increase is driven by both an increase in the cost of services as well as an increase in the utilization of services.

- ♦ Composite Rate Increase 7.71%
- Some rating areas will be higher, and some will be lower





## Reminders



### **Quoting & Renewals**

### ♦ 1/1/24 Rates will be available on 10/1/24

- Quoting can then begin
- Also available on Benefix, Zywave and from Ideon

### Renewals for 1/1/24

- Renewal packets generate on October 3<sup>rd</sup> (90 days out)
- Renewals available to be completed as of October 18<sup>th</sup> (75 days out)

### Section 111 Form

- Reporting required by CMS
- Please assist in obtaining this information

### Auto Renewal

- 1 month prior to the renewal date
- Changes can still be made up until day prior to renewal date
- Allows invoices and ID cards to process timely and accurately

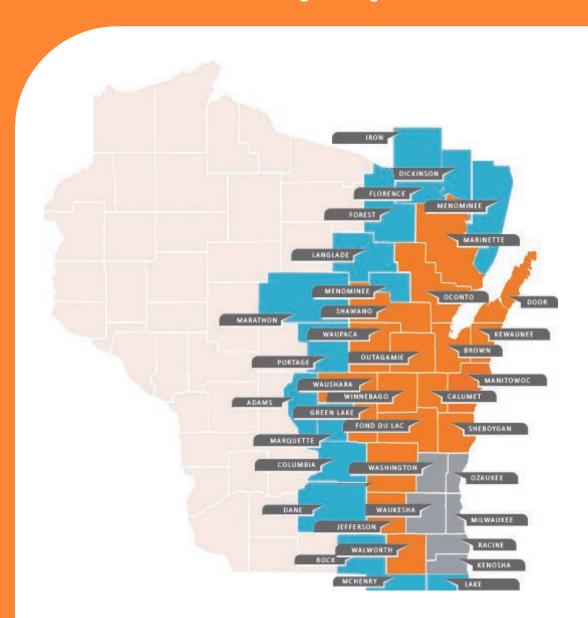


### **General Eligibility**



- Employer is located within 24-county service area.
- Employer has 2-50 total employees
- Full-time employees work at least 30 hours/week
- At least 80% of applying employees reside within service area
- Employer contributes at least 50% of the employee premium

### **Border County Options**



**Envision Network Service Area** 

Rise or Envision Network Service Area

First Health Complementary, Envision or Rise Network Service Area

\*Members in all other WI counties and outside of the State always have the First Health Complementary Network through the EPO Plus plan.

### **Broker Portal Quoting**

OPTION #1:



LOG INTO YOUR BROKER PORTAL AT CGCARES.ORG



HOVER OVER
'GET QUOTE' BUTTON



CLICK ON 'SMALL GROUP QUOTE'

OPTION #2: Email <a href="mailto:quotes@commongroundhealthcare.org">quotes@commongroundhealthcare.org</a>

### **Information Required**

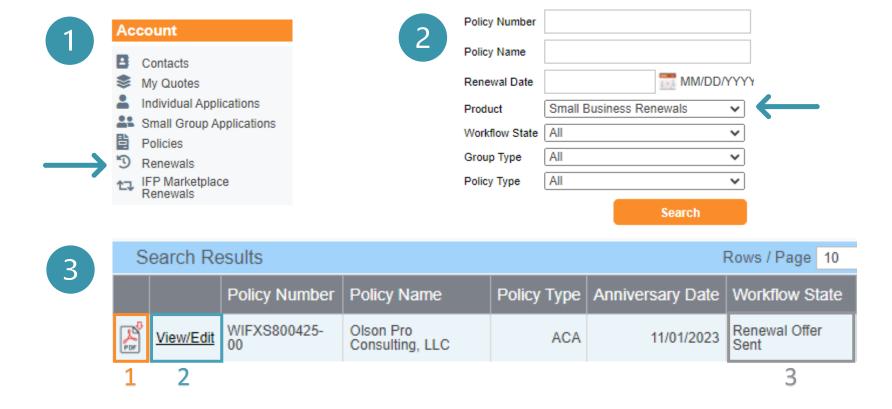
**Group:** Name, Zip Code, County, and Requested Effective Date

**Employees:** Name, Zip Code and Date of Birth

**Dependents:** Date of Birth



### **Broker Portal Renewals**



- 1 Download the renewal packet
- 2 View more plans or complete the renewal offer
- 3 Check the status of the renewal



### **Small Group Portal Enhancements**

### Renewals

- Renewal notification to agent 15 days prior to group
- Renewal offer mimics current plan selection for groups offering more than 1 plan

### Quoting

- Employee zip code field, also auto populates OOA question
- Date of birth field for dependents (Age field still available)
- Select All button for plan selection

### Enrollment

- Required documents checklist
- Missing requirements notification from portal
- Initial payment 1 month pay option
- Plan name added to Invoice
- Employee portal and more!
- If you are not seeing the updates; clear cache and cookies



### **Small Group Submission Base Requirements**

- Employer Application
- Employee Applications & Waivers
- Disclosure of Rating & Renewability
- ☐ Copy of Prior Carrier Invoice
- Current copy of most recent
   Wage and Tax report

\*\*All requirements must be submitted by the 25<sup>th</sup> of the month for consideration of 1<sup>st</sup> of the month effective date

- Send submissions to: sales@commongroundhealthcare.org
- Additional information may be requested such as recent Payroll or Ownership verification
- Remember clean submissions will go through faster! Please review to ensure you have gathered all the information

### Marketing Materials

## We will be sending the following materials in a training follow-up email:

- Slide Deck
- Plan Grids
- Summary of Benefits (SOBs)
- CGHC Employee Census Form

- Group Submission Packet
- NEW Agent Underwriting Guidelines
- Link to Appointment documents

All appointed agents will also receive an Open Enrollment Kit with hard copies of the plan grids and other helpful information



### Contact Us:

### **♦** Broker Services:

- Email: sales@commongroundhealthcare.org
- Phone: 888-870-4717

◆To request an in-person presentation on our Small Group product please contact Jen Wenner at jwenner@commongroundhealthcare.org



## Question & Answers

