Issue Analysis Form

Date: April 23, 2019

Health, Vision & Dental Insurance – FY2019-20

Lead Department(s):

Finance/Human Resources

Contact Person(s): Betsy Drewry & Corrie Hurt

OF PRINCE GEORGE

Description and Current Status

Dental Insurance:

Item:

The 2019-20 renewal from Delta Dental was **proposed at the same rates as in FY2018-19** (0% increase) for active employees and retirees. Staff and our benefit consultant recommend renewal with Delta Dental on a fully insured basis. Rate sheet is attached for board review – See page 3.

Vision Insurance:

The 2019-20 renewal from Anthem Blue View Vision was *proposed at the same rates* as in FY2018-19 (0% increase) for active employees or retirees for FY2019-20. Staff recommends renewal with Anthem Blue View Vision. Rate sheet is attached for board review – See page 3.

Health Insurance:

The 2019-20 renewal from Anthem was proposed at an increase of 9.35% to be absorbed by the County. Staff recommends renewal with Anthem and to remain combined with the School system. Rate sheet is attached for board review — **See page 4**. Retiree rates are shown on Page 5; retirees bear 100% of the cost of health insurance premiums.

The employer contributions to the Health Savings Account (H S A) will remain the same as in FY2018-19. \$1,000 Employee Only; \$1,250 Employee + 1; \$1,500 for Employee + Children / Family.

The health insurance renewal also includes two targeted wellness incentives for FY2019-20.

Requested Board Action:

Renew with Delta Dental, renew with Anthem - Blue View Vision, and renew with Anthem for health insurance on a combined basis with schools. This necessitates a 9.35% increase in the employer rates.

Proposed rate sheets and draft resolution for adoption are attached

Toposed fate silects and draft recolution for adoption	are attacm	ou.	
Government Path			
Does this require IDA action?	☐ Yes	⊠ No	
Does this require BZA action?	☐ Yes	⊠ No	
Does This require Planning Commission Action?	☐ Yes	⊠ No	

Does this require Board of Supervisors action?		□ No	
Does this require a public hearing?	☐ Yes	⊠ No	
If so, before what date?	☐ Yes	□ No	
Fiscal Impact Statement			
The 9.35% increase in health insurance is to be absorbed in the proposed budget (\$158,027).	rbed by the	County and i	s included
County Impact		1000	
Notes			

ACTIVE EMPLOYEES

Prince George County Dental Rates FY/20

Effective June 2019 for July 1, 2019 coverage (monthly rates)

ACTIVE EMPLOYEES - 0% Increase; RETIREES - 0% Increase

FY19 TO FY20 CHANGE

Delta Low Tier Dental Plan								
	Er	nployee		Employer	Fota	I Health		
	Contribution		Contribution		Pr	emium		
	Amount		Amount			Cost		
Employee Only	\$	28.98	\$	5	\$	28.98		
Employee/Child	\$	62.32	\$	36	\$	62.32		
Employee/Children	\$	62.32	\$		\$	62.32		
Employee/Spouse	\$	59.04	\$	(.	\$	59.04		
Employee/Family	\$	68.74	\$		\$	68.74		

nium Inge	% Change
\$ -	0.00%
\$	0.00%
\$	0.00%
\$ 166	0.00%
\$ ·	0.00%

Delta High Tier Dental Plan								
	E	mployee	Employer		Total Health			
	Contribution		Contribution		Premium			
	Amount		Amount		Cost			
Employee Only	\$	35.56	\$		\$	35.56		
Employee/Child	\$	79.86	\$:88	\$	79.86		
Employee/Children	\$	79.86	\$:::::::::::::::::::::::::::::::::::::::	\$	79.86		
Employee/Spouse	\$	71.12	\$		\$	71.12		
Employee/Family	\$	100.53	\$	(28)	\$	100.53		

Pren	nium	
Cha	inge	% Change
\$		0.00%
\$	(3)	0.00%
\$	45	0.00%
\$	10	0.00%
\$	-	0.00%

Prince George County Vision Rates FY/20

NO INCREASE

Blue View (formerly Unicare) Vision Buy-Up (Voluntary)								
	Employee Contribution		Er	nployer	Total Health Premium			
			Con	tribution				
	A	mount	Amount		Cost			
Employee Only	\$	5.91	\$	(48)	\$	5.91		
Employee/Child	\$	10.34	\$	41	\$	10.34		
Employee/Children	\$	11.81	\$	140	\$	11.81		
Employee/Spouse	\$	10.34	\$	190	\$	10.34		
Employee/Family	\$	17.18	\$	*	\$	17.18		

Premium Change		% Change
\$		0.00%
\$	160	0.00%
\$	•	0.00%
\$		0.00%
<		0.00%

INCREASE	EMPLOYER	ABSORBED		COMBINED WI	TH SCHOOLS				
	Anthem PIN	30		6.	CONTRIBU	TION%	Ş	INCRE	ASE
	Employee Contribution Amount	Employer Contribution Amount	Total Health Premium Cost		EE	ER	EE INCREA	ASE FF	R INCREASE
Employee Only	\$ 40.00	5 743.81	5 783.81	-	5.10%	94,90%			63.64
Employee/Child	\$ 215.00	5 781.12	\$ 996.12		21.58%	78.42%	s -	4	66.79
Employee/Children	\$ 425.00	\$ 817.25	\$1,242.25		34.21%	65.79%			69.8
Employee/Spouse	\$ 500.00	\$ 855.95	\$1,355.95		36.87%	63.13%	\$ -		73.15
Employee/Family	\$ 710.00	\$ 879.59	\$1,589.59		44,67%	55.33%	•	\$	75.23
			LAME	40	28.49%	71.51%			
Anthem High De	ductible Hea	alth Plan (wit	th HSA)						
	Employee Contribution Amount	Employer Contribution Amount	Total Health Premium Cost	Annual Employer HSA Contribution	EE	ER	EE INCREA		R INCREASE
Employee Only	\$ -	\$ 708.62	\$ 708.62	\$ 1,000.00	0.0036	100,00%	\$ -	~	60.5
Employee/Child	\$ 108.00	\$ 833.91	\$ 941.91	\$ 1,250.00	1147%	88.53%	\$ -		713
Employee/Children	\$ 213.00	\$ 984.54	\$1,197.54	\$ 1,500.00	17.79%	82.21%	\$:		84.1
Employee/Spouse	\$ 250.00	\$1,060.50	\$1,310.50	\$ 1,250.00	19.08%	80.92%	1	т -	90.6
Employee/Family	\$ 355.00	\$1,199.12	\$1,554.12	\$ 1,500.00	22.84%	77. 16 %	т	\$	102.5
				NO CHANGE	14.23%	85.77%			
			AVERA	GE CONTRIBUT	ION%]		
					Æ	ER			
		2019-2020	OVERALLAY EE ONLY AV		21.36% 2.55%	78.64% 97.45%			

RETIREES

Prince George County Dental Rates FY/20

Effective June 2019 for July 1, 2019 coverage (monthly rates)

RETIREES - 0% Increase

Delta Low Tier Dental Plan							
	Employee Contribution		Employer		Total Health		
			Col	ntribution	Premium		
	Amount		Amount		Cost		
Employee Only	\$	30.50	\$		\$	30.50	
Employee/Child	\$	65.56	\$	#	\$	65.56	
Employee/Children	\$	65.56	\$	¥	\$	65.56	
Employee/Spouse	\$	62.12	\$	*	\$	62.12	
Employee/Family	\$	72.32	\$	+	\$	72.32	

 mium ange	% Change
\$ 	0.00%
\$ -	0.00%
\$ -	0.00%
\$ -	0.00%
\$,58	0.00%

FY19 TO FY20 CHANGE

Delta High Tier Dental Plan								
	Е	mployee		Employer	Total Health			
	Contribution		Contribution		Premium			
	Amount		Amount		Cost			
Employee Only	\$	37.42	\$	-	\$	37.42		
Employee/Child	\$	84.02	\$	-	\$	84.02		
Employee/Children	\$	84.02	\$.	\$	84.02		
Employee/Spouse	\$	74.82	\$	=	\$	74.82		
Employee/Family	\$	105.76	\$		\$	105.76		

	mium ange	% Change
\$		0.00%
\$	-	0.00%
\$	-	0.00%
\$	н	0.00%
\$	-	0.00%

Prince George County Vision Rates FY/20

NO CHANGE

Blue View (formerly Unicare) Vision Buy-Up (Voluntary)									
	En	nployee	F	mployer	Total Health				
	Contribution		Co	ntribution	Premium				
	A	mount		Amount	Cost				
Employee Only	\$	5.91	\$	-	\$	5.91			
Employee/Child	\$	10.34	\$	-	\$	10.34			
Employee/Children	\$	11.81	\$	-	\$	11.81			
Employee/Spouse	\$	10.34	\$	-	\$	10.34			
Employee/Family	\$	17.18	\$		\$	17.18			

Рге	mium	
	ange	% Change
\$	-	0.00%
\$		0.00%
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Ś	:=0	0.00%

Board of Supervisors County of Prince George, Virginia

Resolution

At a regular meeting of the Board of Supervisors of the County of Prince George held in the Boardroom, Third Floor, County Administration Building, 6602 Courts Drive, Prince George, Virginia this 23 rd day of April, 2019:
Present: Vote:
Donald R. Hunter, Chairman
Floyd M. Brown, Jr., Vice-Chairman
Alan R. Carmichael
Marlene J. Waymack
T. J. Webb
A-3
On motion of, seconded by, which carried unanimously, the following Resolution was adopted:
RESOLUTION; APPROVAL OF RECOMMENDED FY2020 HEALTH, DENTAL AND VISION INSURANCE RENEWALS WITH RECOMMENDED RATES AS ATTACHED.
BE IT RESOLVED That the Board of Supervisors of the County of Prince George this 23 rd day of April, 2019, does hereby authorize renewing for FY2020
Health Insurance with Anthem for an overall 9.35% increase all County/employer absorbed remaining combined for health insurance with the school division;
Dental Insurance with Delta Dental of Virginia with no increase to active employees or retirees;
Vision Insurance with Blue View Vision with no increase to active employees or retirees.
BE IT FURTHER RESOLVED That the Board of Supervisors of the County of Prince George this 23 rd day of April, 2019, does hereby approve recommended FY2020 rates as provided and attached.
A Copy Teste:
Percy C. Ashcraft
County Administrator

INCREAS	E EN	IPLOYER	ABS	ORBED			COMBINED WI	TH SCHOOLS					
	Anthem PIN 30							CONTRIBU	ITION %	\$ INCREASE			
	Coi	nployee htribution Amount	Con	nployer tribution .mount	Total He Premiu Cost	ım	1	EE	ER	EE IN	EE INCREASE		INCREASE
Employee Only	\$	40.00	\$	743.81	\$ 783	8.81		5.10%	94.90%	\$	129	\$	63.60
Employee/Child	\$	215.00	\$	781.12	\$ 996	5.12		21.58%	78.42%	\$		\$	66.79
Employee/Children	\$	425.00	\$	817.25	\$1,242	2.25		34.21%	65.79%	\$:#3	\$	69.88
Employee/Spouse	\$	500.00	\$	855.95	\$1,355	5.95		36.87%	63.13%	\$	125	\$	73.19
Employee/Family	\$	710.00	\$	879.59	\$1,589	9.59		44.67%	55.33%	\$	•	\$	75.21
7: 10 - 22 - 27								28.49%	71.51%				
Anthem High De	duct	ible Hea	alth	Plan (wit	th HSA)	w Gil							
	1	ntribution Amount	Α	tribution mount	Cost	t	Employer HSA Contribution	EE	ER		ICREASE		INCREASE
Employee Only	\$		\$	708.62	\$ 708	3.62	\$ 1,000.00	0.00%	100.00%		•	\$	60.59
Employee/Child	\$	108.00	\$	833.91	\$ 941	-	\$ 1,250.00	11.47%	88.53%			\$	71.30
Employee/Children	\$	213.00	\$	984.54	\$1,197	$\overline{}$	\$ 1,500.00	17.79%	82.21%			\$	84.18
Employee/Spouse	\$	250.00	-	1,060.50	\$1,310	_	\$ 1,250.00	19.08%	80.92%			\$	90.68
Employee/Family	\$	355.00	\$1	l,199.12	\$1,554	.12	\$ 1,500.00	22.84%	77.16%		7 8 7	\$	102.53
							NO CHANGE	14.23%	85.77%				
AVERA							GE CONTRIBUTION %						
								EE	ER				
			201	19-2020	OVERA			21.36%	78.64% 97.45%				
			2019-2020 EE ONLY AV				2.55%						

ACTIVE EMPLOYEES

Prince George County Dental Rates FY/20 Effective June 2019 for July 1, 2019 coverage (monthly rates)

ACTIVE EMPLOYEES - 0% Increase; RETIREES - 0% Increase

FY19 TO FY20 CHANGE

Delta Low Tier Dental Plan									
En	nployee		Employer	Total Health					
Contribution		Contribution		Pr	emium				
Amount		Amount		Cost					
\$	28.98	\$	57 4 c	\$	28.98				
\$	62.32	\$	790	\$	62.32				
\$	62.32	\$		\$	62.32				
\$	59.04	\$		\$	59.04				
\$ 68.74		\$	-	\$	68.74				
	En Con A \$ \$ \$	Employee Contribution Amount \$ 28.98 \$ 62.32 \$ 62.32 \$ 59.04	Employee Contribution Amount \$ 28.98 \$ \$ \$ 62.32 \$ \$ \$ 62.32 \$ \$ \$ 59.04 \$	Employee Contribution Amount	Employee Contribution Amount Employer Contribution Amount Total Proper \$ 28.98 \$ - \$ \$ 62.32 \$ - \$ \$ 59.04 \$ - \$				

 mium ange	% Change
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Delta High Tier Dental Plan									
	E	mployee		Employer	Total Health				
	Co	ntribution	Contribution		Pr	emium			
		Amount		Amount	Cost				
Employee Only	\$	35.56	\$	=	\$	35.56			
Employee/Child	\$	79.86	\$	-	\$	79.86			
Employee/Children	\$	79.86	\$	-	\$	79.86			
Employee/Spouse	\$	71.12	\$	-	\$	71.12			
Employee/Family	\$	100.53	\$		\$	100.53			

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\$	<u></u>	0.00%

Prince George County Vision Rates FY/20

NO INCREASE

Blue View (formerly Unicare) Vision Buy-Up (Voluntary)									
	En	nployee	Er	nployer	Total Health				
	Con	tribution	Con	tribution	Premium				
	Amount		А	mount	Cost				
Employee Only	\$	5.91	\$		\$	5.91			
Employee/Child	\$	10.34	\$	=	\$	10.34			
Employee/Children	\$	11.81	\$	-	\$	11.81			
Employee/Spouse	\$	10.34	\$		\$	10.34			
Employee/Family	\$	17.18	\$	Ě	\$	17.18			

Premium Change	% Change
\$ -	0.00%
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1 age 4 01 4											
		RETIRE	ES								
Prince George County Dental Rates FY/20								FY19 TO FY20 CHANGE			
Effective June 2019 f	-										
R	ETIR	EES - 0%	Incre	ase							
Del		ow Tier C									
		mployee		nployer		ıl Health	Pre	mium			
		ntribution Amount		tribution mount	Pr	emium Cost		ange	% Change		
Employee Only	\$	30.50	\$	anount	\$	30.50	\$	unge -	0.00%		
Employee/Child	\$	65.56	\$	X#	\$	65.56	\$		0.00%		
Employee/Children	\$	65.56	\$	7	\$	65.56	\$	1920	0.00%		
Employee/Spouse	\$	62.12	\$	020	\$	62.12	\$	(1 <u>4</u>)	0.00%		
Employee/Family	\$	72.32	\$	riii	\$	72.32	\$	84	0.00%		
Del	ta H	igh Tier (Denta	l Plan							
	E	mployee		nployer	Tota	al Health	Dua	mium			
	'	ntribution		tribution	Pr	emium	- 1		0/ Chanas		
	_	Amount	_	mount	+_	Cost		ange	% Change		
Employee Only	\$	37.42	\$	-	\$	37.42	\$	*	0.00%		
Employee/Child	\$	84.02	\$	-	\$	84.02	\$	√ <u>a</u>	0.00%		
Employee/Children	\$	84.02	\$	72	\$	84.02	\$	**	0.00%		
Employee/Spouse	\$	74.82	\$		\$	74.82	\$	3.00	0.00%		
Employee/Family	\$	105.76	\$	-	\$	105.76	\$	-	0.00%		
		_									
Prince Geor	_			n Rates F	Y/20						
		NO CHAI			TRO III						
Blue View (former	_	I nicare) \ mployee		Buy-Up (mployer		ntary)	-				
		mployee ntribution		ntribution		emium	Pre	mium			
	1	Amount	1	Amount		Cost	Ch	ange	% Change		
Employee Only	\$	5.91	\$	<u> </u>	\$	5.91	\$	5 =	0.00%		
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Employee/Child

Employee/Spouse

Employee/Family

Employee/Children \$

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11.81 \$

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17.18 \$