



## Committee of the Whole Meeting - Final

September 13, 2023

6:30 PM

- 
- A. COW2023-050** Human Resources Updates – Carol Sicard, Director
- 2024 Holiday Calendar
  - Retiree Health Benefits



# City of Smyrna

## Issue Sheet

A Max Bacon  
City Hall  
2800 King Street  
Smyrna, GA 30080

File Number: ATH2023-035

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**Agenda Date:** 9/18/2023

**In Control:** City Council

**File Type:** Committee of the Whole

**Agenda Section:**  
Formal Business

**Agenda Number:** E.

**Department:** Human Resources

**Agenda Title:**

Approval of Changes Retiree Health Benefits Effective 01/01/2024

***Citywide***

**ISSUE AND BACKGROUND:**

In 2012, the City approved changes to retiree health benefits which moved Medicare-eligible retirees to the VIA Benefits platform which pairs access to Medicare supplement plans with a City-funded HRA AND federal tax credits. The VIA Benefits Medicare program has been successful and very beneficial to the retirees.

While pre-Medicare retirees (< age 65) who retired prior to 2012 were allowed to stay on the City's health plan and pay rates equal to that of active employees, for those who retired on or after 1/1/2012, the City's contribution to retiree health insurance was capped at the City's 2012 cost for retiree only coverage for the lowest priced health plan. At the time this cap was \$566.67 per month. Retirees were required to "buy up" or pay the difference for higher cost plans and for covering dependents. The 2012 rate cap continued to be applied to retiree rates moving forward despite yearly increases to the rates.

As of 2021, pre-65 spouses of Medicare-eligible (post-65) retirees, were kept on the employee health plan, but were required to pay 100% of the cost for their coverage.

The combination of the 2012 cap and charging 100% for spouse-only coverage on the health plan, has resulted in making it difficult and costly for pre-65 employees to retire and maintain health benefits for themselves and eligible dependents (see attached 2023 Retiree Health rates).

While the city's contributions to premiums was capped, the claims resulting from covered retirees disproportionately impact city's overall claims spend.

Currently, there are 30 pre-65 retirees on the active health plan, with additional retirements to occur before the end of 2023. Six of the 30 retirees cover a spouse. Three pre-65 spouses of post-65 retirees are also covered.



# City of Smyrna

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### **RECOMMENDATION / REQUESTED ACTION:**

On August 15, 2023, Joe Bennett, Kristin Robinson, and I proposed a solution to the Budget Committee (Councilman Lindley, Councilman Gould, and Councilwoman Hines) and Mayor Norton.

It was agreed that we would bring this to the full Council for consideration and action.

City Administration, Finance and Human Resources recommend approval of the following changes to retiree health benefits and to authorize the Mayor to sign and execute all related documents.

- Effective January 1, 2024 move all current and future pre-65 retirees to the Via Benefits platform.
  - Via Benefits Enrollment Specialists will provide individualized guidance, based on the retiree's needs, on selecting a market-place plan.
    - Retirees will select from among hundreds of plans on the healthcare marketplace.
    - Family plans are available.
    - Annual enrollment 11/1 – 12/15
  - Via Benefits Enrollment Specialists will also help the retiree choose between the Federal Tax Subsidy OR the City-funded HRA (not both)
    - If HRA, the City will fund \$1,000/month which can be used to reimburse the retiree for plan premiums and other eligible out-of-pocket medical expenses.
    - If the coverage is for the pre-65 spouse of a post-65 retiree, the retiree will continue to receive \$250/month to their HRA and the spouse will receive the difference of \$750/month to an HRA.
  - Retirees will only pay premiums for coverage that exceeds either the Federal Tax Subsidy or the amount funded by the City.
  - Via Benefits provides ongoing advocacy.

**MEMORANDUM**

DATE:

TO: All City of Smyrna Employees and Department Heads

FROM: Carol Sicard, Human Resources

**RE: 2024 City Holidays**

For 2024, twelve City holidays for eligible employees are scheduled for the following dates:

<b><u>Holiday</u></b>	<b><u>Date Observed</u></b>
New Year's Day - January 1	Monday, January 1, 2024
Martin Luther King, Jr. Day - 3 <sup>rd</sup> Monday in January	Monday, January 15, 2024
Good Friday- Friday before Easter Sunday	Friday, March 29, 2024
Memorial Day - Last Monday in May	Monday, May 27, 2024
Juneteenth - June 19	Wednesday, June 19, 2024
Independence Day - 4 <sup>th</sup> of July	Thursday, July 4, 2024
Labor Day - 1 <sup>st</sup> Monday in September	Monday, September 2, 2024
Veterans Day - November 11	Monday, November 11, 2024
Thanksgiving Day - 4 <sup>th</sup> Thursday in November	Thursday, November 28, 2024
Day After Thanksgiving	Friday, November 29, 2024
Christmas Eve - December 24	Tuesday, December 24, 2024
Christmas Day - December 25	Wednesday, December 25, 2024

For 2024, the Mayor and Council have continued a 13th City holiday – a floating holiday.

This floating holiday may be used for religious or cultural holidays, employee birthdays, other state or federal holidays during which the City of Smyrna remains open or as an additional day for personal use. Floating holidays are available at the beginning of each calendar year for all current employees. A new employee hired before June 30 will receive the floating holiday upon hire; a new employee hired on or after July 1 will receive four (4) floating holiday hours upon hire. Employees must properly request to use their floating holiday. The request must be scheduled and approved in advance by the employee's immediate supervisor. Floating holidays will not be carried over to the next calendar year, nor may they be cashed out if not taken or paid upon termination of employment.

If you have any questions, please contact HR.

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Mayor – Derek Norton

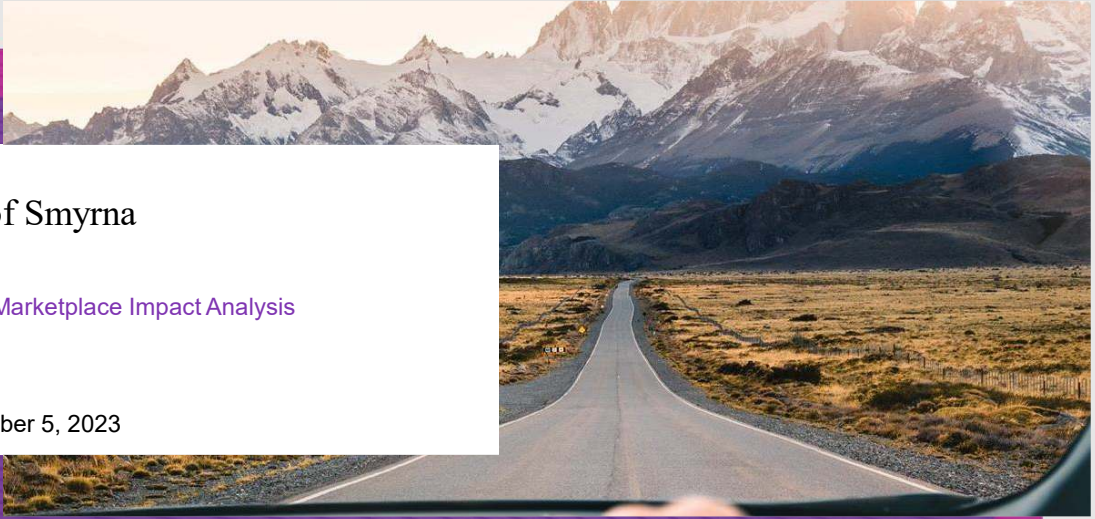
City Council: Ward 1 – Glenn Pickens / Ward 2 – Latonia P. Hines / Ward 3 – Travis Lindley /  
Ward 4 – Charles (Corky) Welch / Ward 5 – Susan Wilkinson / Ward 6 – Tim Gould / Ward 7 –Kathy Young  
City Administrator – Joseph Bennett / City Clerk – Heather Peacon-Corn / City Attorney – Scott Cochran  
Municipal Court Judge – Phyllis G Collins

## 2023 RETIREE INSURANCE CONTRIBUTIONS

	Premium	Surcharge	Monthly Total
<b><u>Middle Option with wellness - Non-Smoker</u></b>			
Retiree	\$ 313.51	\$ -	\$ 313.51
Retiree + One	\$ 1,017.57	\$ -	\$ 1,017.57
Family	\$ 1,897.72	\$ -	\$ 1,897.72
<b><u>Middle Option with Wellness - Smoker</u></b>			
Retiree	\$ 313.51	\$ 50.00	\$ 363.51
Retiree + One	\$ 1,017.57	\$ 50.00	\$ 1,067.57
Family	\$ 1,897.72	\$ 50.00	\$ 1,947.72
<b><u>Middle Option w/out Wellness - Non-Smoker</u></b>			
Retiree	\$ 313.51	\$ 105.00	\$ 418.51
Retiree + One	\$ 1,017.57	\$ 140.00	\$ 1,157.57
Family	\$ 1,897.72	\$ 160.00	\$ 2,057.72
<b><u>Middle Option w/out Wellness - Smoker</u></b>			
Retiree	\$ 313.51	\$ 155.00	\$ 468.51
Retiree + One	\$ 1,017.57	\$ 190.00	\$ 1,207.57
Family	\$ 1,897.72	\$ 210.00	\$ 2,107.72
<b><u>High Option with Wellness - Non-Smoker</u></b>			
Retiree	\$ 342.72	\$ -	\$ 342.72
Retiree + One	\$ 1,070.14	\$ -	\$ 1,070.14
Family	\$ 1,979.51	\$ -	\$ 1,979.51
<b><u>High Option with Wellness - Smoker</u></b>			
Retiree	\$ 342.72	\$ 50.00	\$ 392.72
Retiree + One	\$ 1,070.14	\$ 50.00	\$ 1,120.14
Family	\$ 1,979.51	\$ 50.00	\$ 2,029.51
<b><u>High Option w/out Wellness -Non-Smoker</u></b>			
Retiree	\$ 342.72	\$ 105.00	\$ 447.72
Retiree + One	\$ 1,070.14	\$ 140.00	\$ 1,210.14
Family	\$ 1,979.51	\$ 160.00	\$ 2,139.51
<b><u>High Option w/out Wellness -Smoker</u></b>			
Retiree	\$ 342.72	\$ 155.00	\$ 497.72
Retiree + One	\$ 1,070.14	\$ 190.00	\$ 1,260.14
Family	\$ 1,979.51	\$ 210.00	\$ 2,189.51

**Smoker Surcharge: \$100 Per Month**

**Non-Wellness Surcharge: \$105 Retiree / \$140 Retiree+1  
/ \$160 Family**



City of Smyrna

Retiree Marketplace Impact Analysis

September 5, 2023


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## Subsidy level


Variables that define subsidy



Driven by cost and volatility tolerance



Retiree impact largely dependent on how subsidy is delivered, not the amount



“Defined contribution” approaches eliminate exposure to unrestricted medical inflation

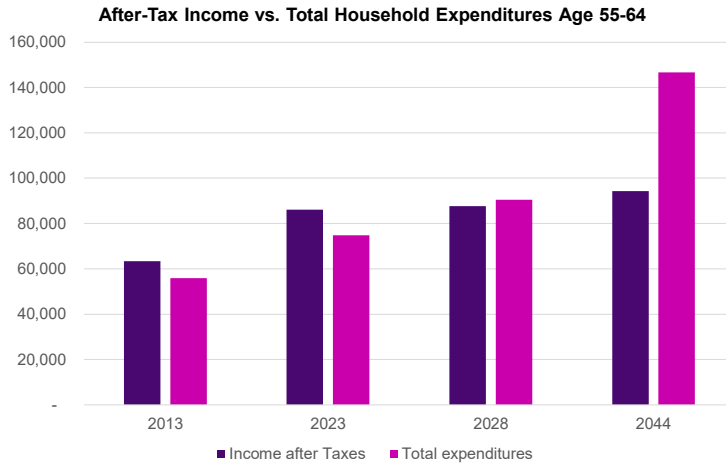
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## Rising cost of goods creates affordability issues for retirees



Source: Federal Bureau of Labor Statistics' data on consumer spending, 2013 - 2022

- Retirees with fixed income levels face an increased risk of an income gap (expenditures exceeding income), even if inflation rates moderate in the near future
- Nearly 40% of employees are already living paycheck to paycheck and are not adequately preparing for healthcare expenses in retirement
- 60% – 70% of employees living paycheck to paycheck report avoiding medical care

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The Inflation Reduction Act will have far-reaching impacts for retirees

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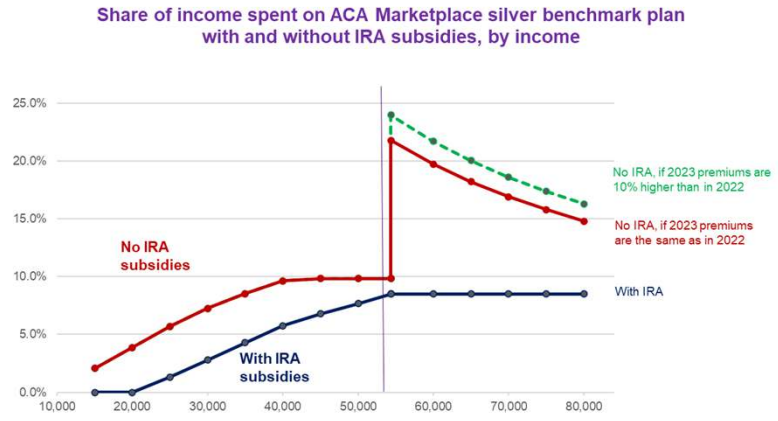
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## Reduced premium costs for many early retirees

- Renews the ACA subsidies provided by the American Rescue Plan Act (ARPA) for three more years (2023-2025)
- Enhances and extends eligibility for subsidies to all households, regardless of income
- **Many retirees leave employer plans due to defined dollar caps**
- **The IRA expands premium tax credits which are NOT CAPPED and inflate MORE than health care trend**



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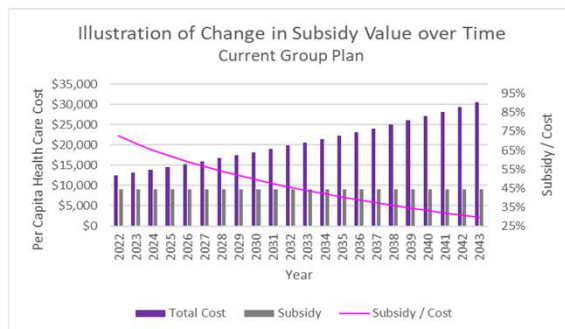
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## Reduced premium costs for many early retirees

Defined dollar caps quickly deteriorate in value

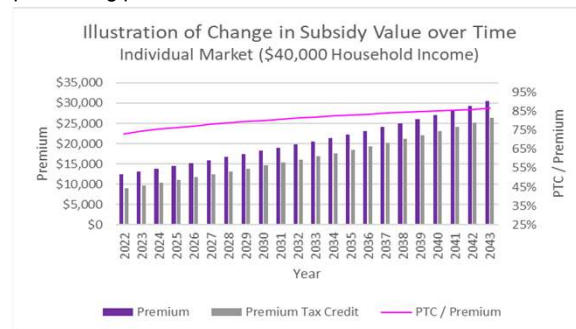
### Capped plan:

Decreasing purchasing power of employer subsidy relative to total cost



### Marketplace:

PTCs trend more closely to underlying plan costs, increasing purchasing power



**PTCs are likely to inflate relative to premiums...the exact opposite of many employer subsidy structures**

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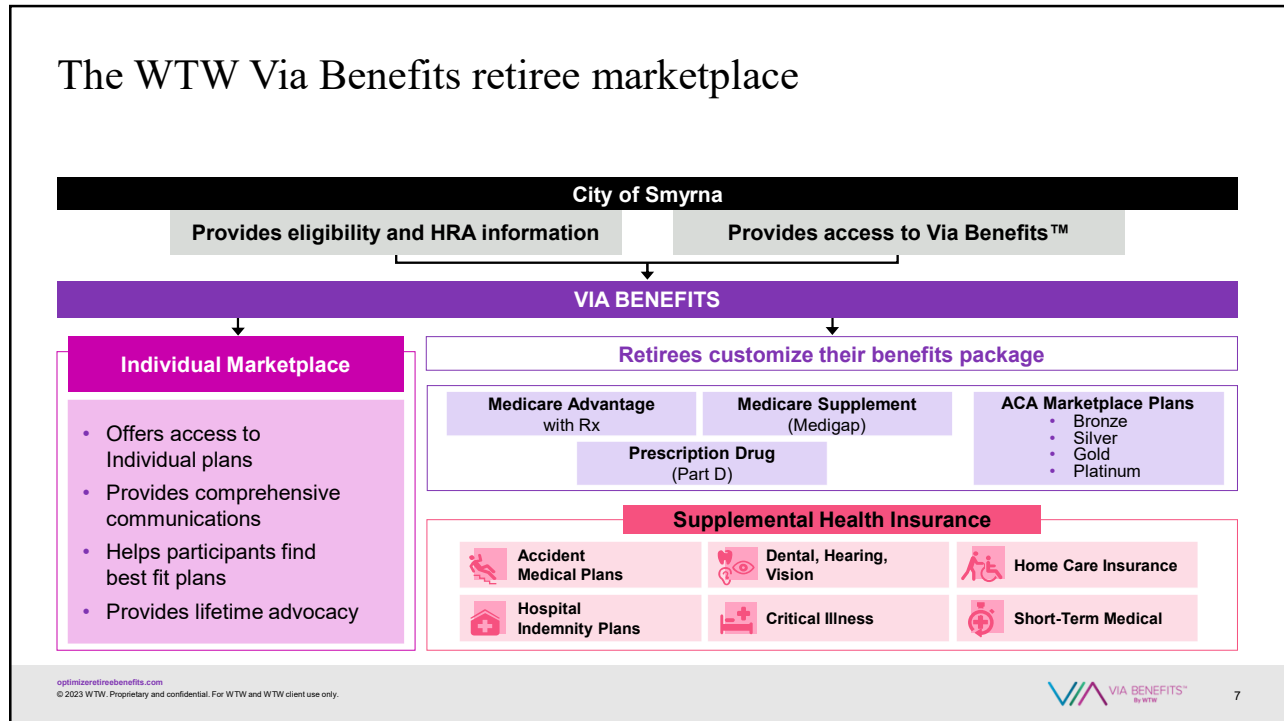
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## The WTW Via Benefits retiree marketplace



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## City of Smyrna: retiree health insurance

Analysis summary - moving to the Pre-Medicare marketplace in 2024



**100%**

of retirees would be better off financially in the individual marketplace (compared to the current plan)



**\$5,654**

is the average annual savings (for those who would be better off financially)

### Results by cohort:

Cohort Name	Members	Annual Premium	Average Employer Subsidy	Average Adjusted HRA <sup>1</sup>	Subsidy Reduction	Winners Percentage	Average Savings
Base COS	17	\$10,562	\$5,540	\$12,000	-117%	100%	\$4,733
High COS	10	\$10,913					\$7,220

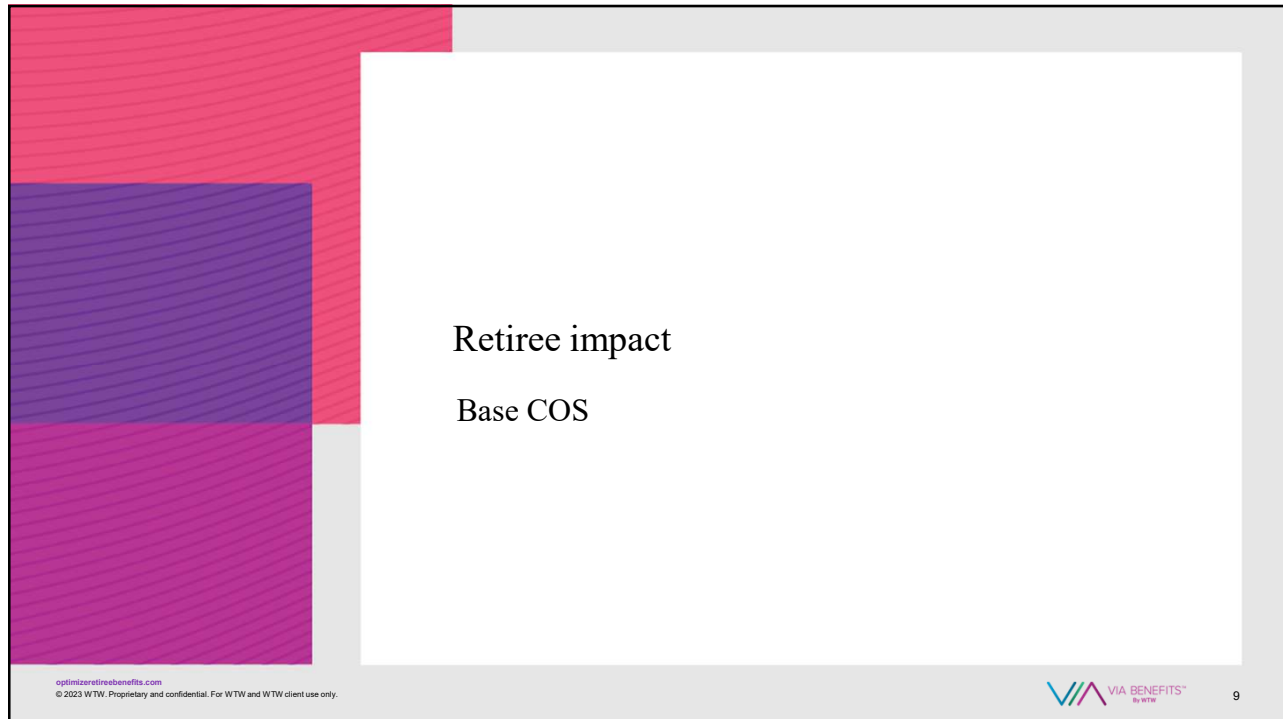
<sup>1</sup>Adjusted for Contribution Differentials

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The diagram shows a large white rectangle on a grey background. To the left of the rectangle are three overlapping squares: a red one at the top, a purple one in the middle, and a magenta one at the bottom. The text "Retiree impact" and "Base COS" is centered within the white rectangle.

Retiree impact

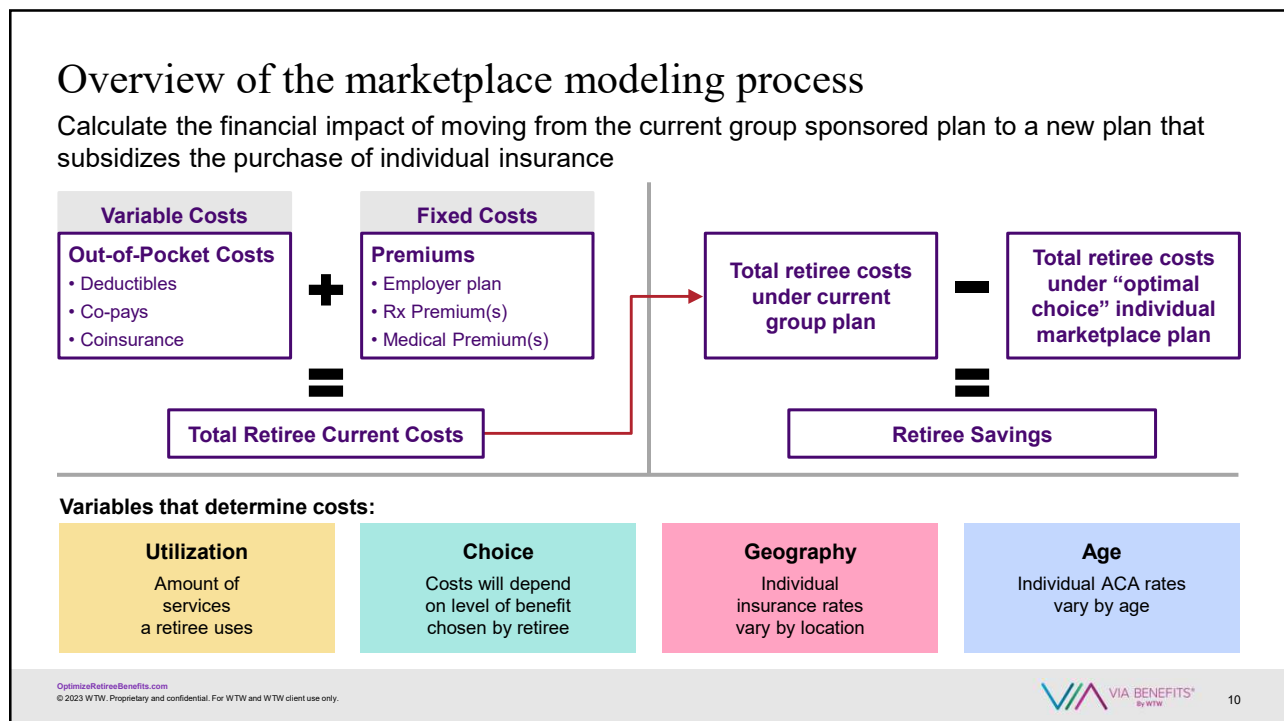
Base COS

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## Base COS

## Current plan design/cost/contributions, population demographics

## Pre-Medicare Plan Design

<b>Total headcount</b>	17	<b>Medical benefits (\$ or % paid by the retiree)</b>		<b>Rx Benefits</b>	
<b>Average age</b>	61	Deductible	\$1,000	Deductible	\$0
		Out-of-pocket maximum (medical only)	\$3,000	Out-of-Pocket Maximum	\$3,000
		Out-of-pocket maximum (medical/Rx combined)	N/A	Annual Maximum Benefit	N/A
<b>Total group plan premium</b>	\$10,562	Inpatient hospital	20%	<b>Retail</b>	
<b>Average contribution \$</b>	\$5,022	Skilled nursing facility copay per day(10+)	0%	Generic	\$15 copay
<b>Average contribution %</b>	48%	Outpatient surgery	20%	Brand Formulary	\$40 copay
		Outpatient non-surgery	20%	Brand Non-Formulary	\$70 copay
<b>Top 5 most populous zip codes</b>		Physician office visit (primary) retiree copay	\$30	<b>Mail Order</b>	
<b>Rank</b>	<b>Zip</b>	<b>State</b>	<b>Headcount</b>	Generic	\$45 copay
1	30082	GA	2	Brand Formulary	\$120 copay
2	30064	GA	2	Brand Non-Formulary	\$270 copay
3	30157	GA	2		
4	30106	GA	2		
5	30114	GA	1		
		Physician office visit (specialist) retiree copay	\$40		
		Emergency room	retiree copay \$250		
		X-ray/Labs	retiree copay \$30		
		Outpatient rehab/physical medicine	retiree copay \$30		
		Durable medical equipment	20%		
		Ambulance	20%		
		Vision	20%		

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## Base COS

## Retiree savings analysis

## Illustrative enrollee, first year (2024) – excluding Premium Tax Credits (PTCs)

## Pre-Medicare Retiree Benefits

Comparison of **SAMPLE** Financials between Current Group Plan and Future Individual Market Options  
Excluding impact of PTCs

	Current Group Plan	Select Individual Market Options			Optimal Choice Bronze High
		Bronze High	Silver High	Gold High	
<b>Sample Retiree Financials</b>					
<b>Fixed Cost (e.g., premiums)</b>					
Premium at 50th percentile	\$10,562	\$9,761	\$11,933	\$12,561	\$9,761
City of Smyrna Subsidy/Unadjusted HRA	(\$5,540)	(\$12,000)	(\$12,000)	(\$12,000)	(\$12,000)
<b>Total</b>	<b>\$5,022</b>	<b>(\$2,239)</b>	<b>(\$67)</b>	<b>\$561</b>	<b>(\$2,239)</b>
<b>Variable Cost (e.g., copays)</b>					
Medical at 50th percentile	\$500	\$3,949	\$3,223	\$1,776	\$3,949
Rx at 50th percentile	\$520	\$1,558	\$1,432	\$1,369	\$1,558
<b>Total</b>	<b>\$1,020</b>	<b>\$5,507</b>	<b>\$4,655</b>	<b>\$3,145</b>	<b>\$5,507</b>
<b>Total Retiree Cost</b>	<b>\$6,042</b>	<b>\$3,268</b>	<b>\$4,588</b>	<b>\$3,706</b>	<b>\$3,268</b>
<b>Total Retiree Savings</b>	<b>—</b>	<b>\$2,774</b>	<b>\$1,454</b>	<b>\$2,336</b>	<b>\$2,774</b>
<b>City of Smyrna Financials</b>					
Subsidy/HRA	\$5,540	\$12,000	\$12,000	\$12,000	\$12,000
<b>Total City of Smyrna Savings</b>	<b>—</b>	<b>(\$6,460)</b>	<b>(\$6,460)</b>	<b>(\$6,460)</b>	<b>(\$6,460)</b>

\*HRA reflects no adjustment for differences in geography-based costs and an adjustment for current group plan retiree contributions

Sample Illustration Statistics: 50th Percentile Claims | 50th Percentile Geography | 50th Percentile Retiree Contribution

## 50% Percentile

50% of individuals will have lower claims/premiums/ contributions than the illustration shown here

## PTC

Qualifying individuals will receive a Federal PTC equal to [second-lowest Silver Plan premium in a geography] minus [fixed percentage of individual's household income]; "fixed percentage," varies based on income level relative to the Federal Poverty Line

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## Base COS

## Retiree savings analysis

## Average enrollee, first year (2024) – including PTCs

## Pre-Medicare Retiree Benefits

Comparison of Average Financials between Current Group Plan and Future Individual Market Options  
Including impact of PTCs; excluding impact of Metal Gap Plans

	Current Medical Plan	Overall Optimal Choice	
Sample Retiree Financials		HRA Only (No PTC)	With PTC <sup>2</sup>
Fixed Cost (e.g., premiums)			
Premium	\$10,562	\$9,889	\$9,917
City of Smyrna Subsidy/HRA <sup>1</sup> /PTC	(\$5,540)	(\$12,000)	(\$12,000)
Total	\$5,022	(\$2,111)	(\$2,083)
Variable Cost (e.g., copays)			
Medical	\$394	\$2,716	\$2,374
Rx	\$551	\$1,071	\$936
Total	\$945	\$3,787	\$3,311
Total Retiree Cost	\$5,967	\$1,676	\$1,228
Total Retiree Savings	—	\$4,291	\$4,739
Plan Sponsor Costs			
Subsidy/HRA	\$5,540	\$12,000	\$12,000
Total Client Savings	—	\$ (6,460)	\$ (6,460)

<sup>1</sup>HRA reflects no adjustment for differences in geography-based costs and an adjustment for current group plan retiree contribution  
<sup>2</sup> Assuming 0% of individuals collect PTC (informed by data from U.S. Census Bureau and CMS) rather than employer HRA

## PTC

Qualifying individuals will receive a federal PTC equal to [Second-lowest Silver plan premium in a geography] minus [fixed percentage of individual's household income]; "fixed percentage", varies based on income level relative to the Federal Poverty Line

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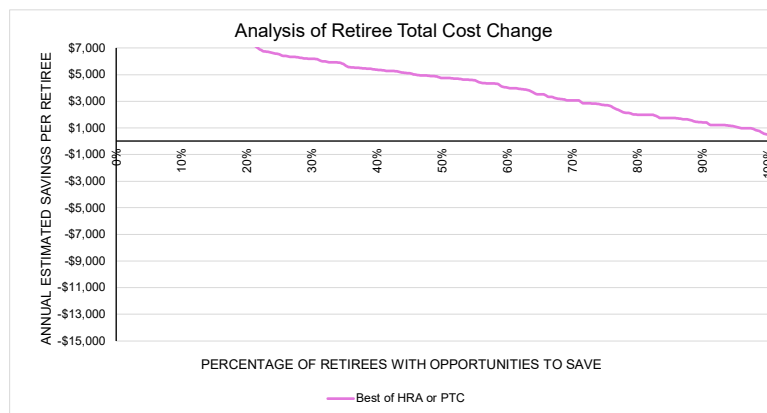
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## Base COS

## Retiree savings analysis

## All utilizers moving to the Pre-Medicare individual marketplace, first year (2024)



KEY STATS: Pre-Medicare Ret/Dep \$12,000/\$12,000 Annual HRA

Impact Assuming No PTCs		Impact with PTC	
Avg Loss	\$0	Avg Loss	\$0
Avg Win	\$4,277	Avg Win	\$4,733
% Loss	0.00%	% Loss	0.00%
% Win	100.00%	% Win	100.00%
% Neutral	0.00%	% Neutral	0.00%

**Loss: retiree savings less than \$0**

**Win: retiree savings more than +\$0**

## Key Takeaway:

Up to **100%** of retirees can "win" financially if they select the "best choice" marketplace plan, compared to the current group plan

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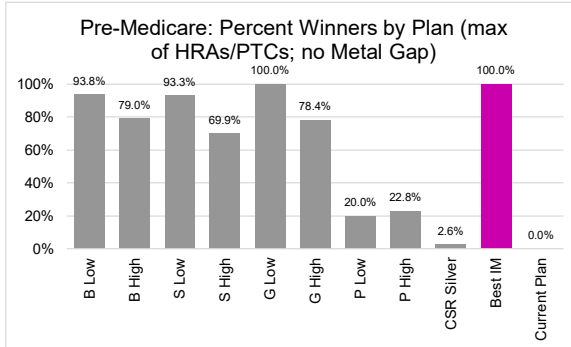
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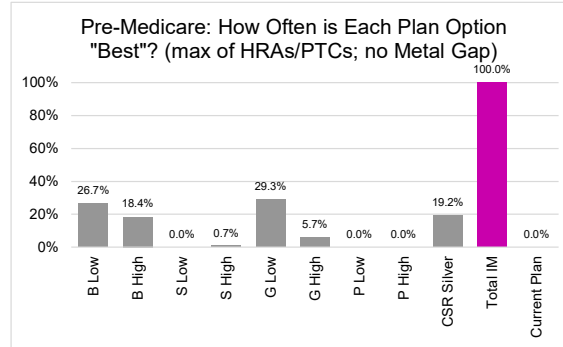
## Base COS

## Retiree savings analysis

All utilizers, first year (2024) – base HRA of \$12,000



The % of winners that would be generated by each plan individually



The % of winners produced by each plan based on optimal outcomes

**Key takeaway:** retirees can "win" financially under many different individual marketplace options, illustrating the tangible value of choice

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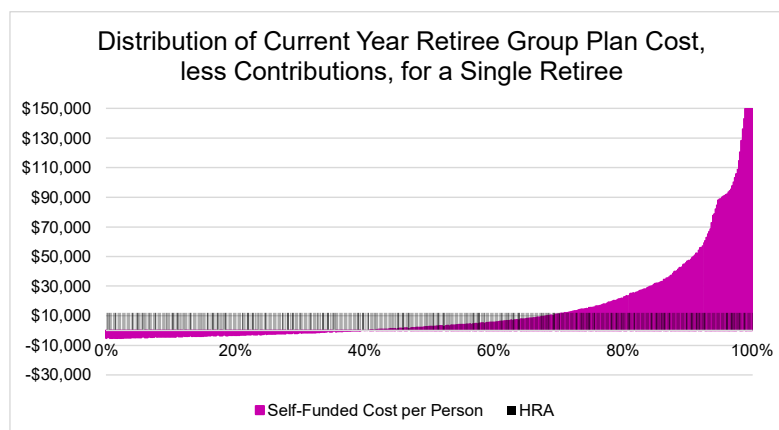
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## Base COS

## Pre-Medicare employer risk avoidance - first year (2024)



- Employer retains unlimited downside risk of large claims in current design
- HRA/marketplace eliminates risk

Upside risk (favorable/positive outcomes) under the group plan are limited to retiree premium level.

**Key takeaway:** City of Smyrna is shouldering the risk of claims' exceeding budget; said burden could turn catastrophic in any given year

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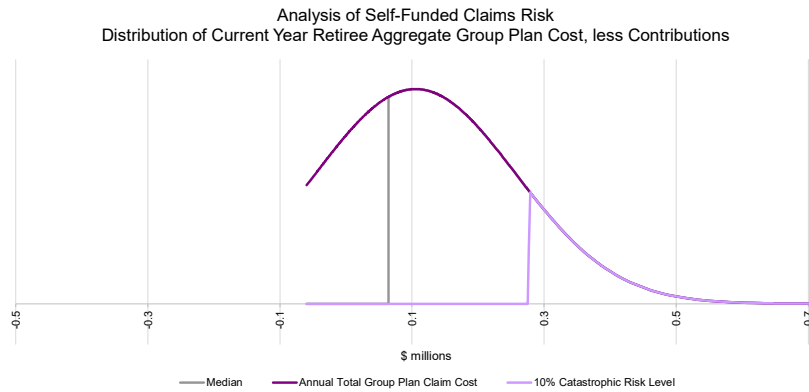
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## Base COS

## Employer risk avoidance (cont.)



Under the current employer group plan, there is a **10%** chance of "catastrophic" claims experience exceeding **\$287 Thousand**

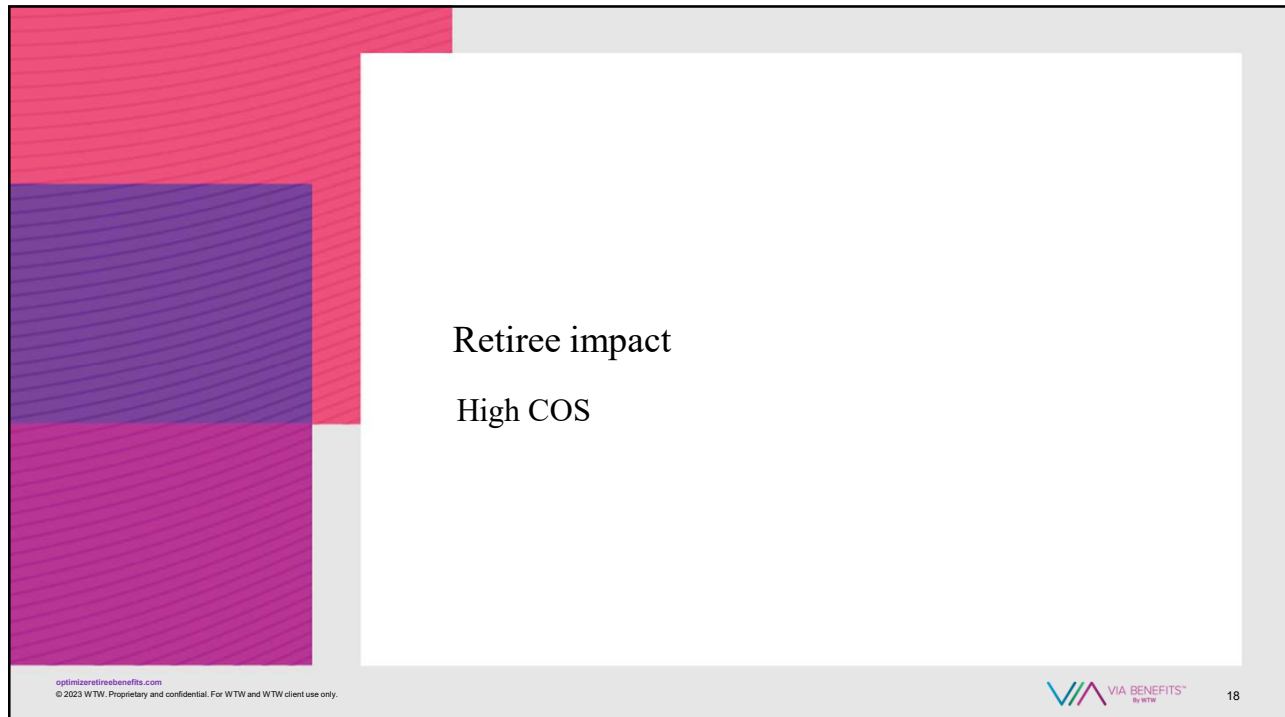
**The individual marketplace eliminates claims risk.**

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## High COS

## Current plan design/cost/contributions, population demographics

## Pre-Medicare Plan Design

<b>Total headcount</b>	10	<b>Medical benefits (\$ or % paid by the retiree)</b>		<b>Rx Benefits</b>	
<b>Average age</b>	60	Deductible	\$500	Deductible	\$0
		Out-of-pocket maximum (medical only)	\$2,500	Out-of-Pocket Maximum	\$3,000
		Out-of-pocket maximum (medical/Rx combined)	N/A	Annual Maximum Benefit	N/A
<b>Total group plan premium</b>	\$10,913	Inpatient hospital	20%	<b>Retail</b>	
<b>Average contribution \$</b>	\$5,373	Skilled nursing facility	20%	Generic	\$15 copay
<b>Average contribution %</b>	49%	Outpatient surgery	20%	Brand Formulary	\$40 copay
		Outpatient non-surgery	20%	Brand Non-Formulary	\$70 copay
<b>Top 5 most populous zip codes</b>		Physician office visit (primary) retiree copay	\$25	<b>Mail Order</b>	
<b>Rank</b>	<b>Zip</b>	<b>State</b>	<b>Headcount</b>	Generic	\$45 copay
1	30127	GA	3	Brand Formulary	\$120 copay
2	30144	GA	1	Brand Non-Formulary	\$270 copay
3	30127	GA	3		
4	30127	GA	3		
5	32034	FL	1		
		Physician office visit (specialist) retiree copay	\$35		
		Emergency room retiree copay	\$250		
		X-ray/Labs	20%		
		Outpatient rehab/physical medicine	20%		
		Durable medical equipment	20%		
		Ambulance	20%		
		Vision	20%		

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## High COS

## Retiree savings analysis

## Illustrative enrollee, first year (2024) – excluding Premium Tax Credits (PTCs)

## Pre-Medicare Retiree Benefits

Comparison of **SAMPLE** Financials between Current Group Plan and Future Individual Market Options  
Excluding impact of PTCs

	Current Group Plan	Select Individual Market Options			Optimal Choice Bronze Low
		Bronze Low	Silver High	Gold High	
<b>Sample Retiree Financials</b>					
<b>Fixed Cost (e.g., premiums)</b>					
Premium at 50th percentile	\$10,913	\$8,918	\$12,067	\$12,843	\$8,918
City of Smyrna Subsidy/Unadjusted HRA <sup>1</sup>	(\$5,540)	(\$12,000)	(\$12,000)	(\$12,000)	(\$12,000)
<b>Total</b>	<b>\$5,373</b>	<b>(\$3,082)</b>	<b>\$67</b>	<b>\$843</b>	<b>(\$3,082)</b>
<b>Variable Cost (e.g., copays)</b>					
Medical at 50th percentile	\$791	\$2,902	\$1,906	\$1,133	\$2,902
Rx at 50th percentile	\$750	\$447	\$449	\$440	\$447
<b>Total</b>	<b>\$1,540</b>	<b>\$3,349</b>	<b>\$2,355</b>	<b>\$1,573</b>	<b>\$3,349</b>
<b>Total Retiree Cost</b>	<b>\$6,913</b>	<b>\$267</b>	<b>\$2,422</b>	<b>\$2,416</b>	<b>\$267</b>
<b>Total Retiree Savings</b>	<b>—</b>	<b>\$6,647</b>	<b>\$4,492</b>	<b>\$4,497</b>	<b>\$6,647</b>
<b>City of Smyrna Financials</b>					
Subsidy/HRA	\$5,540	\$12,000	\$12,000	\$12,000	\$12,000
<b>Total City of Smyrna Savings</b>	<b>—</b>	<b>(\$6,460)</b>	<b>(\$6,460)</b>	<b>(\$6,460)</b>	<b>(\$6,460)</b>

<sup>1</sup>HRA reflects no adjustment for differences in geography-based costs and an adjustment for current group plan retiree contributions

Sample Illustration Statistics: 50th Percentile Claims | 50th Percentile Geography | 50th Percentile Retiree Contribution

## 50% Percentile

50% of individuals will have lower claims/premiums/ contributions than the illustration shown here

## PTC

Qualifying individuals will receive a Federal PTC equal to [second-lowest Silver Plan premium in a geography] minus [fixed percentage of individual's household income]; "fixed percentage," varies based on income level relative to the Federal Poverty Line

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## High COS

## Retiree savings analysis

## Average enrollee, first year (2024) – including PTCs

## Pre-Medicare Retiree Benefits

Comparison of Average Financials between Current Group Plan and Future Individual Market Options  
Including impact of PTCs; excluding impact of Metal Gap Plans

		Current Medical Plan	Overall Optimal Choice	
<u>Sample Retiree Financials</u>			HRA Only (No PTC)	With PTC <sup>2</sup>
Fixed Cost (e.g., premiums)				
Premium		\$10,913	\$9,506	\$9,544
City of Smyrna Subsidy/HRA <sup>1</sup> /PTC		(\$5,540)	(\$12,000)	(\$12,000)
Total		\$5,373	(\$2,494)	(\$2,456)
Variable Cost (e.g., copays)				
Medical		\$1,056	\$2,425	\$2,094
Rx		\$740	\$374	\$323
Total		\$1,796	\$2,799	\$2,416
Total Retiree Cost		\$7,169	\$304	(\$40)
Total Retiree Savings		—	\$6,864	\$7,208
Plan Sponsor Costs				
Subsidy/HRA		\$5,540	\$12,000	\$12,000
Total Client Savings		—	\$ (6,460)	\$ (6,460)

<sup>1</sup>HRA reflects no adjustment for differences in geography-based costs and an adjustment for current group plan retiree contribution  
<sup>2</sup> Assuming 0% of individuals collect PTC (informed by data from U.S. Census Bureau and CMS) rather than employer HRA

## PTC

Qualifying individuals will receive a federal PTC equal to [Second-lowest Silver plan premium in a geography] minus [fixed percentage of individual's household income]; "fixed percentage", varies based on income level relative to the Federal Poverty Line

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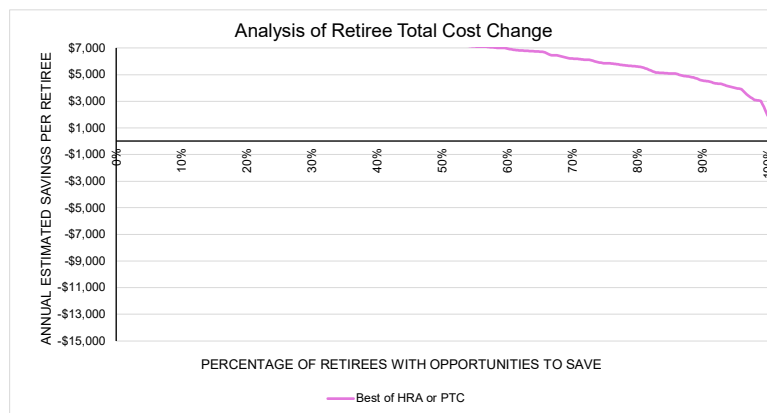
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## High COS

## Retiree savings analysis

## All utilizers moving to the Pre-Medicare individual marketplace, first year (2024)



KEY STATS: Pre-Medicare Ret/Dep \$12,000/\$12,000 Annual HRA

Impact Assuming No PTCs		Impact with PTC	
Avg Loss	\$0	Avg Loss	\$0
Avg Win	\$6,883	Avg Win	\$7,220
% Loss	0.00%	% Loss	0.00%
% Win	100.00%	% Win	100.00%
% Neutral	0.00%	% Neutral	0.00%

**Loss: retiree savings less than \$0**

**Win: retiree savings more than +\$0**

## Key Takeaway:

Up to **100%** of retirees can "win" financially if they select the "best choice" marketplace plan, compared to the current group plan

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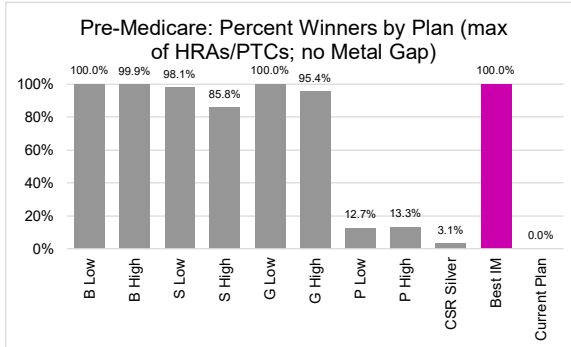
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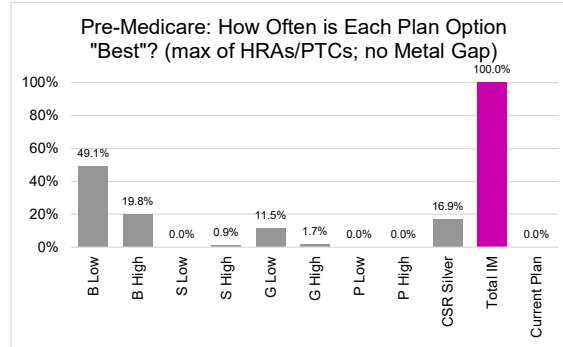
## High COS

## Retiree savings analysis

All utilizers first year (2024) – base HRA of \$12,000



The % of winners that would be generated by each plan individually



The % of winners produced by each plan based on optimal outcomes

**Key takeaway:** retirees can "win" financially under many different individual marketplace options, illustrating the tangible value of choice

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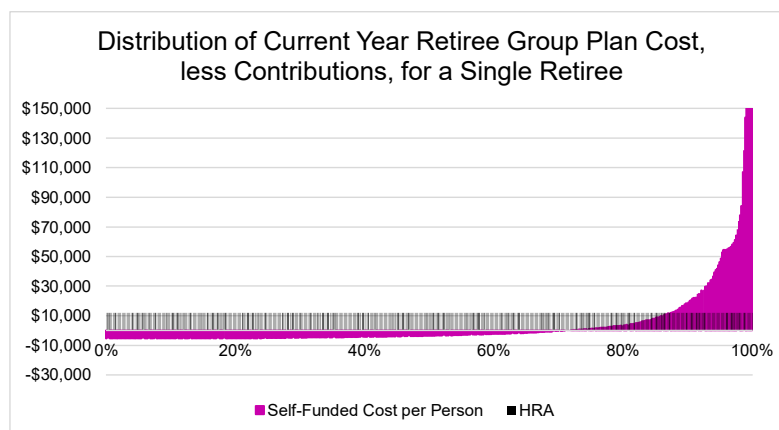
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## Pre-Medicare employer risk avoidance - first year (2024)



- Employer retains unlimited downside risk of large claims in current design
- HRA/marketplace eliminates risk

Upside risk (favorable/positive outcomes) under the group plan are limited to retiree premium level.

**Key takeaway:** City of Smyrna is shouldering the risk of claims' exceeding budget; said burden could turn catastrophic in any given year

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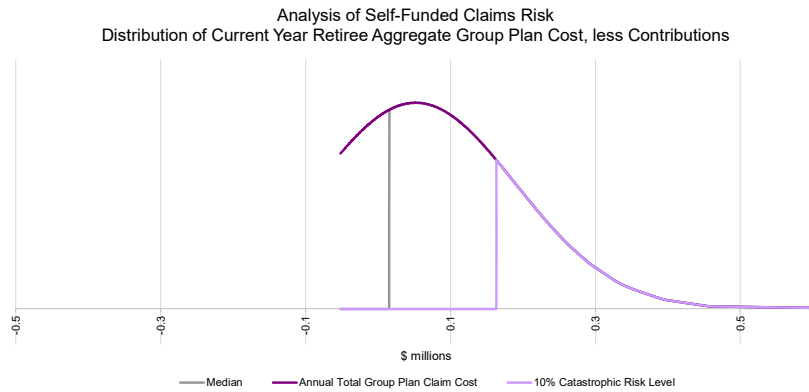
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## Employer risk avoidance (cont.)



Under the current employer group plan, there is a

**10%** chance of  
"catastrophic" claims  
experience exceeding  
**\$166 Thousand**

**The individual  
marketplace eliminates  
claims risk.**

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## Appendix

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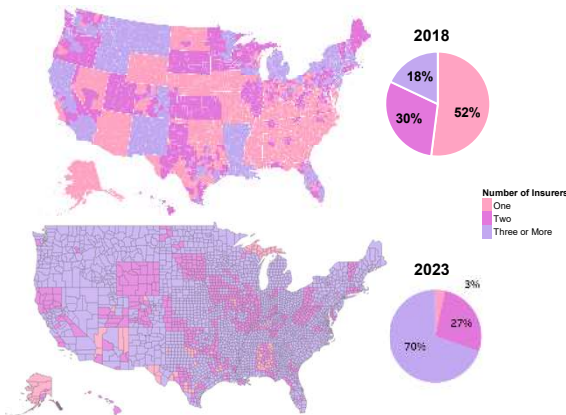
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## The ACA offers choice and premium stability

From 2018 to 2023, the percentage of counties with three or more carriers increased from 18% to 70%.

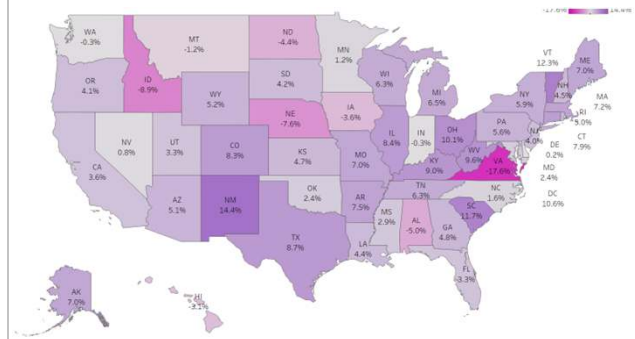


Sources: Kaiser Family Foundation, 2018; Vericred, 2023

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Enrollment is at an all-time high (16.3M signups for 2023), a 13% increase (1.9M members) over 2022

Further, the nationwide national weighted average rate increase in 2023 compared to 2022 was ~4%.



Source: ACASignups.net, Benchmark premium (second lowest cost silver plan), years 2022 to 2023

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## Value of Metal Gap plans

Supplemental insurance coverage for individuals and families

- Supplemental insurance can pay a cash benefit for a covered accident, illness or hospital stay.
- Policy pays the policyholder. Funds can be used to assist with co-pays, deductibles, durable equipment and treatments not covered by medical insurance.
- Bundling a supplemental insurance plan with a Bronze ACA plan can save a retiree up to \$500 a month in premium over a Gold ACA plan.
- No network restrictions with supplement insurance plans.
- HRA funds can't be used to reimburse for Supplemental Insurance premiums.



### Benefits:

- Retiree peace of mind
- Limits on retiree cost outlay
- Ability for retirees to enroll in lower premium (Bronze) plans while reducing risk of significant cost due to accident or critical illness



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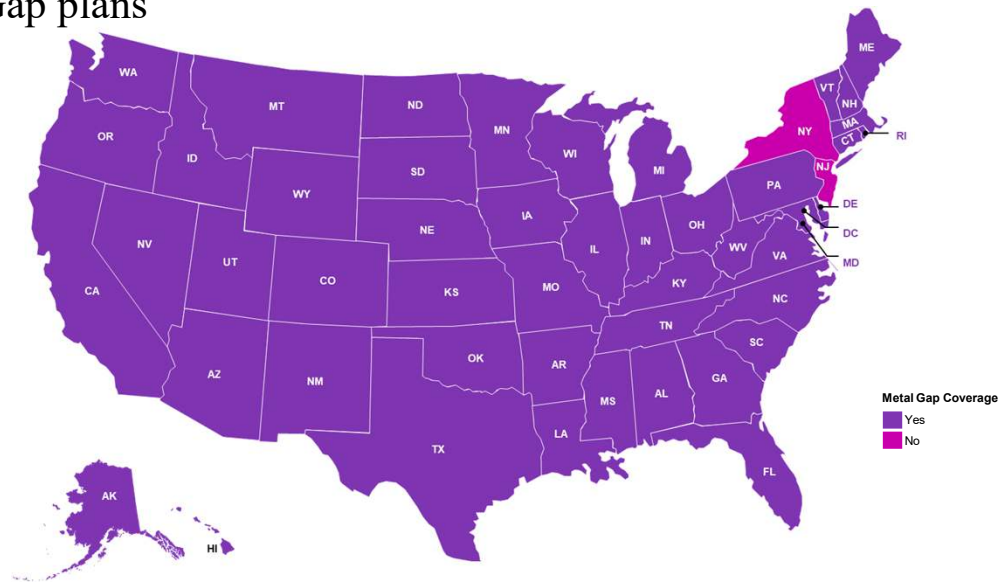
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## Metal Gap plans

### Footprint



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## Pre-Medicare insight

### Key differentiators between Pre-Medicare and Medicare Retiree experience

#### Pre-Medicare Enrollment

- Family plan enrollment available
- 4 plans: Platinum, Gold, Silver and Bronze
- Annual enrollment: Nov. 1 – Dec. 15
- Choice of employer HRA or Federal Subsidy — **cannot** have both

#### Medicare Enrollment

- Individual enrollment only
- Medigap, Medicare Advantage and Rx
- Annual enrollment: Oct. 15 – Dec. 7
- Employer HRA and Federal Subsidy — **can** have both

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## Federally-funded subsidy payments – pre-65 retirees

What they are and how they work

Two types available to enrolled individuals meeting certain requirements:

1. Federal premium tax credits (PTCs)
2. Cost-sharing reductions (CSRs)

PTCs financed through permanent appropriations authorized under the federal tax code as set forth by the ACA<sup>1</sup>

Financing of CSRs not directly addressed in the ACA; this omission has been a source of controversy for several years across multiple administrations<sup>2</sup>

Enrolled individuals can also receive subsidies from their former employers, however if received, such individuals are prohibited from receiving federal subsidies (“either-or” provision)

1. <https://sfp.fas.org/crs/misc/R44425.pdf>

2. <https://sfp.fas.org/crs/misc/R44425.pdf>



**for pre-Medicare retirees**

## Introducing Via Benefits

Via Benefits provides no-cost professional assistance in finding health insurance coverage that works for you. Our comparison tool makes it simple to evaluate plans, and our licensed benefit advisors are available to help you explore your options. Via Benefits is not an insurance carrier. We're a service offering guidance and access to a wide selection of Medicare and Individual and Family Plans. Our services are complimentary to you.



### Unbiased Advocacy

Via Benefits is here to assist you before and after enrolling in coverage.

**98% Satisfaction Rate**



### Insurance Simplified

Via Benefits offers a wide array of Medicare and Individual and Family Plans.

**2.1 Million Total Policy Holders**



### Plan Selection

Locate a match from national and local insurance carriers to meet your health and financial needs.

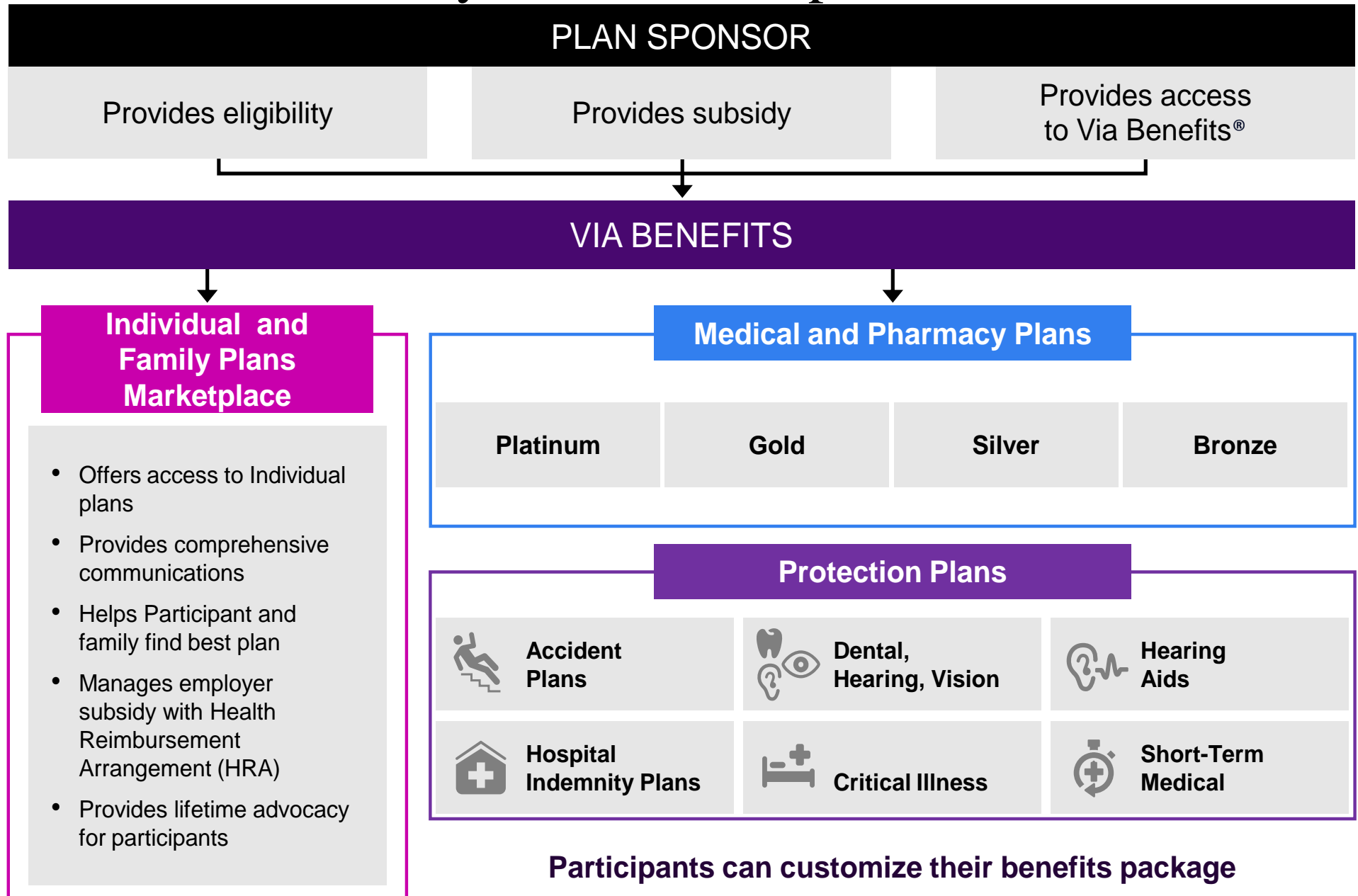
**1,000+ Number of Plans**

## The Insurance You Need, and Even More Services You'll Like

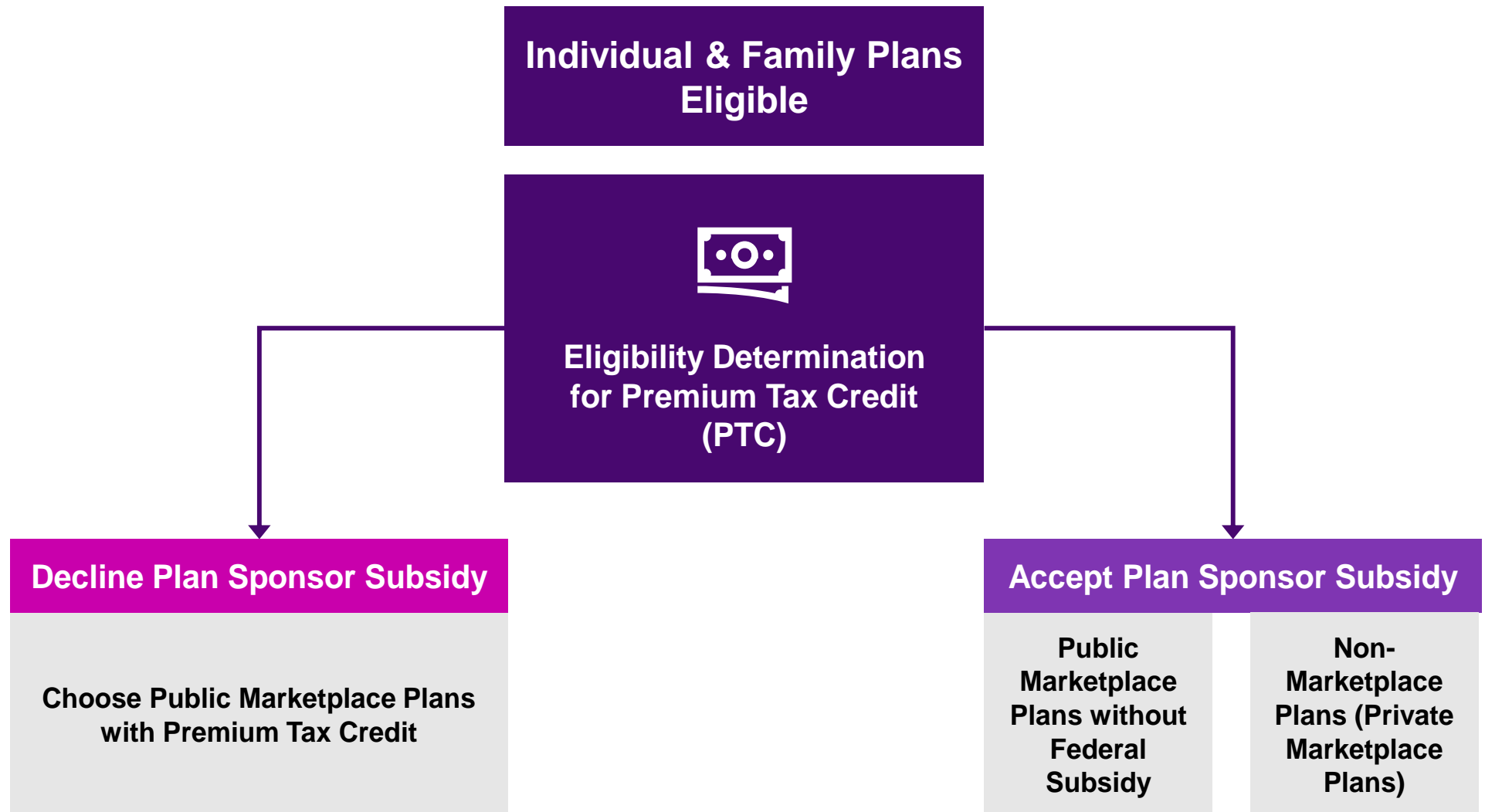
Via Benefits offers the following services you can enjoy year-round:

- Personalized assistance with professional advisors whenever you need it
- Support for an annual coverage checkup
- Decision support tools and information available online 24/7

# Individual & Family Plans Marketplace Mechanics



# Individual & Family Plans Participant Enrollment Flow





# Key Communication and Change Activities (IFP)

Plan and Engage Stakeholders	Announce and Educate	Enroll	Ongoing Support
September - October	October – November	November - December	January 2024
<p><b>September</b></p> <ul style="list-style-type: none"> <li>• Inform and Educate Leaders and HR so they can actively support the change <ul style="list-style-type: none"> <li>– Share other clients who have made this change to minimize concern</li> <li>– Explain the impacts on Participants (e.g., cost, choice, personal support)</li> </ul> </li> <li>• Potential Stakeholders <ul style="list-style-type: none"> <li>– Public Relations</li> <li>– Active Employees</li> <li>– Influential Participants</li> <li>– Benefits Center</li> </ul> </li> <li>• Approve Communication Matrix</li> </ul>	<p><b>10/27/2023</b></p> <ul style="list-style-type: none"> <li>• Communicate the decision and action steps</li> <li>• Provide context to ease Participant concerns</li> <li>• Encourage Participants to contact Via Benefits</li> <li>• Emphasize ease, simplicity of when working with Via Benefits</li> <li>• Reinforce Via Benefits has a long and successful history of helping Participants satisfactorily make selections</li> <li>• Via Benefits Service Center opens to new population</li> </ul> <p><b>Introducing to Via Benefits</b></p> <p><b>11/01/2023</b></p> <ul style="list-style-type: none"> <li>• Encourages participants to create a online account, update Rx, Doctors etc.</li> <li>• Complete a pre-enrollment consultation</li> <li>• On Demand Video Educational Library</li> <li>• Includes funding information (if applicable)</li> </ul>	<p><b>November 1 – December 15</b></p> <ul style="list-style-type: none"> <li>• Enrollment Period</li> <li>• Enrollment Support Through Via Benefits Service Center and website</li> </ul> <p><b>November – December</b></p> <ul style="list-style-type: none"> <li>• Non-Responder Emails and Postcard;</li> <li>• Selection Confirmation Letter</li> </ul>	<p><b>Funding</b></p> <ul style="list-style-type: none"> <li>• Funding Communications</li> <li>• Funding Educational on demand Video reminder post card</li> </ul> <p><b>Lifetime Support</b></p> <p><b>Participant Newsletters (Spring and Fall)</b></p>

# 2023 Open Enrollment Period (OEP)



**ENROLL DURING OEP**

Nov. 1 – Dec. 15, 2023

**COVERAGE IS EFFECTIVE**

Jan. 1, 2024

# Individual & Family Plans Enrollment Process

Guided Assistance from the Certified and Licensed Via Benefits Care Team



# Difference Between Marketplace and Non-Marketplace Plans



## Health Insurance Marketplace

Health Insurance Marketplace purchased through the government-created marketplaces, like the federal marketplace (Healthcare.gov) or a state marketplace.



## Directly from insurance carrier

Can be purchased in different ways. You can go directly to a health insurance company (like Blue Cross Blue Shield, for example) or you can purchase these plans through a broker.

# Key Participant Enrollment Provisions

## Medicare vs Individual & Family Plans

Medicare	Individual & Family Plans
<b>Individual enrollment only</b> (no family plans).	<b>Family plan enrollment available.</b>
<b>All enrollments completed through Via Benefits.</b>	<b>Limited footprint: Via Benefits</b> may not be able to complete enrollment in all states.
<b>Participants may enroll</b> up to the last day of the month and have coverage effective the first of the following month.	<b>Enrollment dates:</b> Participants must enroll by the 15 <sup>th</sup> of the month to have coverage effective the first of the following month.
<b>Enrollment deadline:</b> Participants must have an SEP or enroll during the annual OE period, October 15 – December 7.	<b>Enrollment deadline:</b> Participants must qualify for an SEP to enroll or enroll during the annual OE period, November 1, through January 31 (must enroll by 12/15 to have coverage 1/1).
<b>Enrollment requirement</b> to enroll into a medical plan.	<b>No enrollment requirement possible:</b> Opt-in to the HRA is required to activate account. Participants will remain eligible for IFP funding until they turn 65. At that point, they become subject to all Medicare rules.
<b>Reimbursement Process:</b> Manual and Auto reimbursement options available.	<b>Reimbursement Process:</b> Manual claims submission only (manual or recurring claim form submitted via fax, mail, online).
<b>HRA deadlines may apply.</b>	<b>HRA deadlines are not applicable.</b>