



Thursday, October 1, 2020 – 1:00 PM
ZOOM Meeting

Human Resource Committee Agenda

- I. **Welcome and Introductions**Michael Bach, Chair

- II. **Pledge of Allegiance**

- III. **Action/Discussion Items**
 - 1. Employee Health and Welfare BenefitsBarry Martin, Page 2

- IV. **Other Administrative Matters**
(Items of urgency not meeting the seven-day guideline for review)

- V. **Public Comments**

- VI. **Adjournment**

Next Human Resource Committee Meeting – TBA



Action Item #1 Employee Health and Welfare Benefits

Background

As one of the most important resources at CareerSource Tampa Bay is its employees, it is critical to offer competitive benefits to attract and retain its top talent. As such, a significant amount of time has been invested in the review of the Organization's benefits to ensure the benefits offered are competitive with market and industry standards and are equitable among staff.

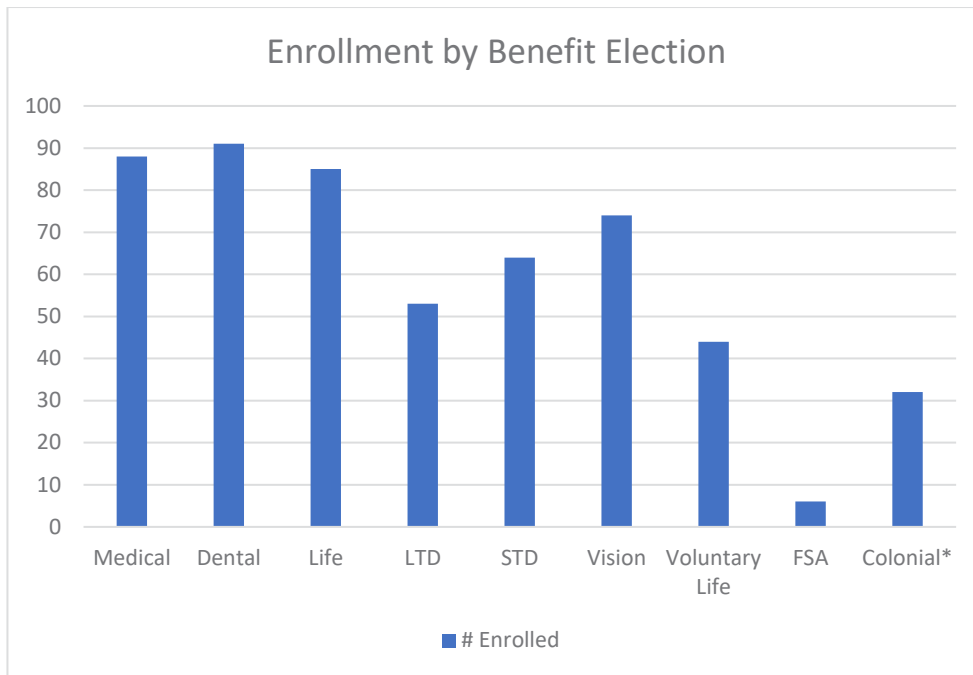
Key Events

- CSTB engaged Compensation Resources, Inc. (CRI) to perform a compensation and benefits analysis. CRI conducted a market analysis of CSTB's current salary structure, performed a staff survey, and reviewed the entity's benefit structure in comparison to the market.
- CareerSource Tampa Bay (CSTB) was found to be competitive with its overall benefits package. However, CRI recommended CSTB move to more of a traditional health plan offering.
- The Board approved the continuation of the current benefit stipend through the end of fiscal year December 31, 2020 at which time the Organization would transition to a more equitable traditional health plan structure which would coincide with open enrollment and the beginning of the new plan year.
- CSTB issued a solicitation for services for Benefit Brokers in June 2020. Based on staff review HUB international was selected as our new Benefit Broker. CSTB has been working with HUB on new potential plan designs.
- HUB is currently doing a full request for proposal in the marketplace to obtain the best pricing available for the organization.

Current Census

The current census at CSTB is 123 full-time employees with 88 enrolled (72%) in our employer sponsored medical plan. Participation in our supplemental plans (Life, Voluntary Life, STD, LTD and Colonial products) are strong. We had 96 enrolled (78%) for the 2020 benefit year.

Below is a chart representing employee 2020 benefit elections.



* Colonial includes Accident, Bridge, Cancer and Critical Illness supplemental insurance.

Current Plan Options

Plan Feature	Cigna Base Plan	Cigna Bronze Plan	Cigna Silver Plan	Cigna Gold Plan
Calendar Year Deductible	In-Network/Out-of-Network**	In-Network/Out-of-Network**	In-Network/Out-of-Network**	In-Network Only
Individual	\$6,350 / \$10,000	\$5,000 / \$10,000	\$2,000 / \$4,000	\$500
Family	\$12,700 / \$20,000	\$10,000 / \$20,000	\$4,000 / \$8,000	\$1,000
Calendar Year Out-of-Pocket Maximum				
Individual	\$6,350 / \$12,700	\$6,350 / \$15,000	\$5,000 / \$10,000	\$3,000
Family	\$12,700 / \$25,400	\$12,700 / \$30,000	\$10,000 / \$20,000	\$6,000
Coinsurance (you pay)	0%* / 20%*	30%* / 50%*	20%* / 40%*	20%*
Physician Services				
Primary Care Office Visit	0%* / 20%*	\$50 / 50%*	\$40 / 40%*	\$20
Specialist	0%* / 20%*	\$70 / 50%*	\$60 / 40%*	\$35
Preventive Care				
Office visit	No Charge / 20%*	No Charge / 50%*	No Charge / 40%*	No Charge
Immunizations	No Charge / 20%*	No Charge / 50%*	No Charge / 40%*	No Charge
Mammogram	No Charge / 20%*	No Charge / 50%*	No Charge / 40%*	No Charge
Hospital Services				
Inpatient	0%* / 20%*	30%* / 50%*	20%* / 40%*	20%*
Outpatient	0%* / 20%*	30%* / 50%*	20%* / 40%*	20%*



Diagnostic X-rays/Lab

Physician Office	0%* / 20%*	No Charge / 50%*	No Charge / 40%*	No Charge
Outpatient Hospital/Fax	0%* / 20%*	No Charge / 50%*	No Charge / 40%*	No Charge
Major Diag (MRI, CT)	0%* / 20%*	30%* / 50%*	20%* / 40%*	\$100

Emergency Services

Emergency Room	0%* / 0%*	\$200 / \$200	\$200 / \$200	\$100
Urgent Care	0%* / 20%*	\$75 / 50%*	\$75 / 40%*	\$50
Ambulance	0%* / 0%*	30%* / 30%*	20%* / 20%*	20%*

Prescription Drugs

Retail (31-day supply)	0%* / 0%*	\$20 / 50%	\$15 / 40%	\$15
Generic - Tier 1	0%* / 0%*	\$40 / 50%	\$35 / 40%	\$35
Formulary—Tier 2	0%* / 0%*	\$70 / 50%	\$60 / 40%	\$50
Non-Formulary Tier 3				

Mail Order (90 day supply)

Generic - Tier 1	0%* / Not Covered	\$50 / Not Covered	\$35 / Not Covered	\$35
Formulary—Tier 2	0%* / Not Covered	\$110 / Not Covered	\$95 / Not Covered	\$95
Non-Formulary Tier 3	0%* / Not Covered	\$200 / Not Covered	\$170 / Not Covered	\$140

Employee Per Payroll Deduction (24 Pay Periods)

Employee Only	\$245.30	\$323.45	\$347.39	\$393.79
Employee & Spouse	\$586.12	\$772.86	\$830.00	\$940.95
Employee + Child(ren)	\$463.62	\$611.33	\$656.52	\$744.29
Employee + Family	\$741.78	\$978.13	\$1,050.44	\$1,190.85


*After Calendar Year Deductible

**Out-of-Network benefits are subject to balance billing, Doctors not contracted with Cigna can charge over the plan's allowable amount.


[Potential Future Benefit Plan Options for 2021](#)

See next three pages



		Plan Design Option A		
		Option A		
CareerSource Tampa Bay		Option 1	Option 2	Option 3
MEDICAL		Base HDHP	Buy-Up HDHP	PPO
1/1/2021				
In Network Benefits				
Policy Year Maximums				
Deductible				
Individual		\$3,000	\$2,000	\$1,000
Family		\$6,000	\$4,000	\$2,000
Coinsurance				
		20%	10%	20%
Out of Pocket				
Individual		\$5,000	\$4,000	\$3,500
Family		\$10,000	\$8,000	\$7,500
Out of Pocket Max includes: ded, coins, copays				
Hospital Services				
Inpatient Hospital Services		20% after ded	10% after ded	20% after ded
Outpatient Surgery		20% after ded	10% after ded	20% after ded
Emergency Room		20% after ded	10% after ded	\$200
Urgent Care Center		20% after ded	10% after ded	\$75
Physician Services				
Preventive Care		100%, ded waived	100%, ded waived	100%, ded waived
Primary Care Physician (PCP)		20% after ded	10% after ded	\$20
Specialist		20% after ded	10% after ded	\$40
PCP Required?				
		No	No	No
Diagnostic				
X-Rays and Diagnostic Lab		100%, ded waived	100%, ded waived	100%, ded waived
Advanced Imaging		20% after ded	10% after ded	20% after ded
Prescriptions				
Tier 1		20% after ded	10% after ded	\$15
Tier 2		20% after ded	10% after ded	\$35
Tier 3		20% after ded	10% after ded	\$60
Mail Order Rx (90 days)		20% after ded	10% after ded	\$35 / \$95 / \$170
Lifetime Maximum Benefit				
		Unlimited	Unlimited	Unlimited
HSA Compatible				
		Yes	Yes	No
Out of Network Benefits				
Deductible				
		\$6,000/\$12,000	\$4,000/\$8,000	\$2,000/\$4,000
Coinsurance				
		40%	40%	40%
Out of Pocket				
		\$12,000/\$24,000	\$8,000/\$16,000	\$7,000/\$15,000



		Plan Design Option B		
		Option B		
CareerSource Tampa Bay		Option 1	Option 2	Option 3
MEDICAL		Base HDHP	Mid HDHP	Buy-Up HDHP
1/1/2021				
In Network Benefits				
Policy Year Maximums				
Deductible				
Individual		\$5,000	\$2,500	\$1,500
Family		\$10,000	\$5,000	\$3,000
Coinsurance		20%	10%	0%
Out of Pocket				
Individual		\$6,350	\$5,000	\$3,500
Family		\$12,700	\$10,000	\$7,500
Out of Pocket Max includes:		ded, coins, copays	ded, coins, copays	ded, coins, copays
Hospital Services				
Inpatient Hospital Services		20% after ded	10% after ded	0% after ded
Outpatient Surgery		20% after ded	10% after ded	0% after ded
Emergency Room		20% after ded	10% after ded	0% after ded
Urgent Care Center		20% after ded	10% after ded	0% after ded
Physician Services				
Preventive Care		100%, ded waived	100%, ded waived	100%, ded waived
Primary Care Physician (PCP)		20% after ded	10% after ded	0% after ded
Specialist		20% after ded	10% after ded	0% after ded
PCP Required?		No	No	No
Diagnostic				
X-Rays and Diagnostic Lab		100%, ded waived	100%, ded waived	100%, ded waived
Advanced Imaging		20% after ded	10% after ded	0% after ded
Prescriptions				
Tier 1		20% after ded	10% after ded	0% after ded
Tier 2		20% after ded	10% after ded	0% after ded
Tier 3		20% after ded	10% after ded	0% after ded
Mail Order Rx (90 days)		20% after ded	10% after ded	0% after ded
Lifetime Maximum Benefit		Unlimited	Unlimited	Unlimited
HSA Compatible		Yes	Yes	No
Out of Network Benefits				
Deductible		\$10,000/\$20,000	\$5,000/\$10,000	\$2,000/\$4,000
Coinsurance		40%	40%	40%
Out of Pocket		\$12,700/\$25,400	\$10,000/\$20,000	\$7,000/\$15,000



Plan Design Option C

CareerSource Tampa Bay MEDICAL 1/1/2021	Option C		
	Option 1 HDHP	Option 2 Base PPO	Option 3 Buy-Up PPO
In Network Benefits			
Policy Year Maximums			
Deductible			
Individual	\$2,500	\$2,000	\$750
Family	\$5,000	\$4,000	\$1,500
Coinsurance	20%	20%	10%
Out of Pocket			
Individual	\$5,000	\$4,000	\$3,000
Family	\$10,000	\$8,000	\$6,000
Out of Pocket Max includes:	ded, coins, copays	ded, coins, copays	ded, coins, copays
Hospital Services			
Inpatient Hospital Services	20% after ded	20% after ded	10% after ded
Outpatient Surgery	20% after ded	20% after ded	10% after ded
Emergency Room	20% after ded	20% after ded	\$200
Urgent Care Center	20% after ded	20% after ded	\$75
Physician Services			
Preventive Care	100%, ded waived	100%, ded waived	100%, ded waived
Primary Care Physician (PCP)	20% after ded	20% after ded	\$25
Specialist	20% after ded	20% after ded	\$40
PCP Required?	No	No	No
Diagnostic			
X-Rays and Diagnostic Lab	100%, ded waived	100%, ded waived	100%, ded waived
Advanced Imaging	20% after ded	20% after ded	10% after ded
Prescriptions			
Tier 1	20% after ded	20% after ded	\$15
Tier 2	20% after ded	20% after ded	\$35
Tier 3	20% after ded	20% after ded	\$60
Mail Order Rx (90 days)	20% after ded	20% after ded	\$35 / \$95 / \$170
Lifetime Maximum Benefit	Unlimited	Unlimited	Unlimited
HSA Compatible	Yes	Yes	No
Out of Network Benefits			
Deductible	\$5,000/\$10,000	\$4,000/\$8,000	\$1,500/\$3,000
Coinsurance	40%	40%	40%
Out of Pocket	\$10,000/\$20,000	\$8,000/\$16,000	\$6,000/\$12,000



			Current / Renewal Dental			
			Cigna Base PPO		Cigna High PPO	
			In-Network		In-Network	
Deductible						
Individual			\$50		\$25	
Family			\$150		\$75	
Deductible waived for Preventive			In & Out of Network		In & Out of Network	
Coinsurance						
Class 1 (Preventive)			Covered at 100%		Covered at 100%	
Class 2 (Basic)			80% After Ded.		80% After Ded.	
Class 3 (Major)			50% After Ded.		50% After Ded.	
Calendar Year Max			\$1,000		\$1,500	
Endo & Perio Benefit			Basic		Basic	
Ortho Max			Not Covered		\$1,500	
Waiting Period			Late Entrant (50% Class 3)		Late Entrant (50% Class 3&4)	
Deductible			Out of Network		Out of Network	
Individual			\$50		\$25	
Family			\$150		\$75	
Coinsurance						
Class 1 (Preventive)			Covered at 100%*		Covered at 100%*	
Class 2 (Basic)			70% After Ded.		70% After Ded.	
Class 3 (Major)			40% After Ded.		40% After Ded.	
Calendar Year Max			\$1,000		\$1,500	
Reimbursement			90th U&C		90th U&C	
Ortho Max			N/A		\$1,500	
Rate Guarantee						
Rates			Cigna Base PPO		Cigna High PPO	
	Base	High				
Employee	36	26	\$25.04	\$26.29	\$35.04	\$36.79
Employee + Spouse	0	3	\$56.03	\$58.83	\$78.40	\$82.32
Employee + Child(ren)	4	12	\$50.07	\$52.57	\$75.01	\$78.76
Family	5	2	\$82.27	\$86.38	\$122.51	\$128.64
Estimated Monthly Premium			\$1,513	\$1,589	\$2,291	\$2,406
Percentage Change from Current			4.99%		5.00%	
Dollar Change from Current			\$76		\$0	



Funding Options:

All Health and Welfare Benefit plans have been competitively bid in the open market to secure the best possible rates for CSTB. Funding strategies and determinations will be based on the bids received.

Medical, Dental & Vision

- When competitive plan pricing is finalized, CSTB leadership will determine the Employer contribution to each health plan offering. It is the goal of CSTB to make health care affordable to our employees and families by offering affordable rates and making an Employer contribution to a Health Savings Account (HSA) should an employee enroll into a High Deductible Health Plan offering. An example of a funding strategy would be to fully-fund a base plan for Medical, Dental and Vision and then offer buy-up plans where an Employee contribution will be required. We will be working with HUB International to finalize plan options and funding strategies once bids are received.

LTD/STD

- CSTB offers a PTO leave policy plan where vacation and sick time is combined. When reviewing the bids received, we will look at the feasibility of fully-funding STD and evaluate the ER funding portion of the LTD policy.

Other offerings

- Life Insurance – Employee Funded
- Flex Spending account – Employee Funded
- Health savings account with employer contribution
- 5% Non-elective 401k contribution

Recommendation

Recommend approval of the three health plan offerings proposed by CSTB staff for the 2021 Plan Year and other ancillary plan offerings.



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