

The State of Delaware

COVID-19 GHIP Benefit Plan Adjustments and FY21 ACA Preventive Care – Expanded Coverage *Updated*

December 14, 2020

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Today's discussion

- COVID-19 modified end date recommendations
- Today's action items

COVID-19 benefit plan changes

Modified end date recommendations

Benefit Plan	Change	Optional / Legislation	Cost (per 3 month extension)	Approval Date for Change	Start Date	Initial End Date	2 nd Extended End Date	Recommended Extension?
Medical	No member cost share for in-network, inpatient services related to treatment of COVID-19 or associated complications	Optional	\$0.2m-\$0.3m ¹	4/2/2020	4/2/2020	5/31/2020 - Highmark 6/1/2020 - Aetna	3/31/2021 – Highmark & Aetna	Yes(1)
EAP	Coverage for all SOD employees	Optional	\$16,800	3/18/2020	3/19/2020	6/30/2020	3/31/2021	Yes (2)
Medical	No member cost share for office visits (PCP, urgent care, ER) that result in either order or administration of COVID-19 test or for treatment of COVID-19 or associated health complications	FFCRA ²	— ³	3/18/2020	3/18/2020	End of federal mandate	3/31/2021 – Aetna & Highmark	Yes (3)
Medical	No member cost share for any telehealth visits	Optional	\$25,000 - \$37,000 (est.)	3/20/2020	3/20/2020	6/4/2020 – Aetna 6/15/2020 – Highmark	3/31/2021 – Aetna & Highmark	Yes (4)

- 1) Recommend extending for all members, across both Aetna and Highmark, through 3/31/2021. Highmark has announced extension through 3/31/2021 for fully insured business.
- 2) Recommend extending for all State employees through 3/31/2021 (\$16,800 per 3 months)
- 3) Recommend extending for all members, across both Aetna and Highmark, through 3/31/2021, and any time period following for which Aetna and Highmark fully-insured plans are extended. Highmark has announced extension through 3/31/2021; Aetna currently through 12/31/2020.
- 4) Recommend extending for all members, across both Aetna and Highmark, for all services (not only behavioral and mental health visits), through 3/31/2021. Highmark has announced extension through 3/31/2021 for full insured business. Aetna discontinued telehealth (except for behavioral health visits) on 6/4/2020.

¹ Based on estimated annual cost of \$0.7m - \$1.2m calculated for all medical plans, adjusted for 3 months of FY20.

² FFCRA = FamiliesFirst CoronavirusResponse Act.

³ Not valued separately – cost included in medical estimate for expanding in-network inpatient treatment of COVID-19 shown in recommendation 1 above.

The content on this slide has been updated by SBO based on content originally prepared by WTW and presented to the SEBC on 6/8/2020 and 9/14/20.

Action for Today's Meeting

- SEBC to vote on extension and/or adoption of updated recommended changes
- Recommended changes:
 - Extend EAP coverage for all State employees through 3/31/2021
 - Extend no member cost share for IP/OP admissions related to COVID-19, or office visits (PCP, urgent care, ER) that result in order or administration of COVID-19 test for all members through 3/31/2021 or end of federal mandate
 - Extend no member cost share for any telehealth visits through 3/31/2021
 - Extend no member cost share for in-network, inpatient services related to COVID-19 through 3/31/2021