



# Consortium Connection

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## The Consortium's Response to COVID-19

Please follow COVID-19 health and safety guidelines issued by the Health Department to protect yourself and your community. The Consortium has implemented the following policies due to the COVID-19 pandemic:

- Waived all co-pay or co-insurance fees related to COVID-19 testing or care through May 31st, 2020;
- Waived prescription renewal limitations;
- Waived co-pays on all Telemedicine visits, regardless of diagnosis, through May 31st, 2020; and

- Members with high deductible health plans will not be responsible for co-payments, co-insurance, and deductibles for COVID-19 related testing even if the deductible has not been met. Individuals with High Deductible Health Plans that cover these costs may continue to contribute to a Health Savings Account.

COVID-19 testing and diagnoses costs to the Consortium are \$8,200 year-to-date. See the graphic below about COVID testing among our subscribers.

### COVID-19: January 2020 – March 2020



Unique Number of Members Tested	Number of Tests	Members Diagnosed with COVID-19	Total Unique Members
20	20	2	20

Mailing information will go here.

# We are the Consortium

*Our mission: An efficient inter-municipal cooperative that provides high-quality, cost-stable health insurance for our members and their employees and retirees*

By choosing in-network (BCBS) care providers and services, our subscribers saved the Consortium and themselves \$37 million last year. “In-network” includes both local providers in the Excellus network and BlueCard providers that are in other Excellus networks. 97.2% of 2019 claims expenses were in-network.

The 2019 average out-of-pocket cost per subscriber was \$551, which is 27% lower than the average for Excellus

Average Cost Per Visit (data from Excellus)			
Office	Emergency Room	Urgent Care	Telemedicine
\$125	\$1,448	\$278	\$40

Central New York customers book of business.

Of course, there is always room for improvement in our health care choices. Overall, there was a 6% increase in the number of subscribers using the Emergency Room for non-emergency situations, which is a very expensive way to access health care (see table above).



## EMERGENCY ROOM VS. URGENT CARE

### Understanding the difference

For injuries that need immediate attention, but are not serious or life threatening, consider going to an urgent care facility. With urgent care, you get the immediate care you need, often without the wait or rush that can come when the emergency room is busy. Plus, it usually costs much less than the Emergency Room.

#### Urgent care is ideal for:

- Minor cuts, bruises or burns
- Broken bones, muscle strains or sprains
- Sore throat, cold and flu treatment
- Ear infections

#### Go to the emergency room immediately for:

- Any life threatening injury
- Behavioral conditions that endanger the person or others
- Serious problems with a person's bodily functions
- Loss of limb, puncture wounds or deep cuts

## Labor Lens

### Our Governance: Municipalities and Labor Working Together

#### New Joint Committee Chair

The Consortium is pleased to welcome Jim Bower as the new Chair of the Joint Committee on Plan Structure and Design.

Jim says of his vision as Joint Committee Chair: “My goal is to strengthen labor’s voice and increase the operational efficiency of the committee. I would like to promote a cooperative working environment that contributes to efficient, cost-effective healthcare for members and municipalities. The Joint Committee provides a forum where labor and management can come together to

provide mutually beneficial solutions regarding plan benefit structure and design. This results in the best coverage for the most economical cost. Regarding governance, the relationship between management and labor provides necessary checks and balances that result in a stable, competitive product that drives Consortium growth.”



Jim Bower, our new Joint Committee Chair

Jim began attending the Joint Committee as the labor representative for the bargaining unit at Bolton Point Water System, UAW Local 2300, since the committee’s inception in 2011. Jim was elected by his peers of the Joint Committee to the Board of Directors in 2016. In addition, Jim has served on various Consortium committees such as Own Your Own Health, Governance Structure, and the Prescription Benefit Manager RFP committee.



## Blue4U Wellness Program Update

Subscribers on metal plans (Platinum, Gold, Silver, Bronze) have a free wellness benefit called Blue4U. Blue4U is also available to employees of the Tompkins County Incentive Plan Program. This program includes biometric screening of key markers for chronic diseases—which often go undetected—as well as counseling and wellness training.

This year, the Consortium held five worksite Blue4U screenings. A sixth was cancelled due to the pandemic, which had 37 subscribers pre-registered. This screening will be rescheduled.

In addition, there were six Urgent Care Center labs available for Blue4U screenings Ithaca, Fairmount, Geneva, Auburn, Johnson City, and Big Flats. To date, 125 subscribers have participated in the Blue4U program, which will be available again in 2021. Watch this newsletter and information from your benefits manager in January.



## Welcome Debra Meeker

We are pleased to announce that we have hired a new Administrative Computer Assistant, Debra Meeker. Debra has significant administrative support experience, including her evening job supporting TC3's Ithaca Extension Center. Debra also has a good understanding of insurance, as she is a licensed independent insurance agent that represents AFLAC. Debra's insurance background coupled with her administrative experience make her a great addition to the Consortium.



Debra Meeker, our new Administrative Computer Assistant

Although we are currently working remotely, Debra is already contributing to the support of the Consortium at a significant level. Please be on the lookout for emails and other information sent out under her signature. Welcome, Debra!

Our previous Administrative Assistant, Brittni Griep, has moved to the Tompkins County Legislature team and is transitioning away from supporting the Consortium. We are thankful to the Tompkins County Legislature for allowing Brittni to work with us as we transition to new support staff. We appreciate Brittni's help in establishing our Consortium office and defining this newly created position. We are grateful for her service. Thank you Brittni!

## Free Preventative Health Care from Excellus BCBS

Preventive care can help you stay healthy and reduce your risks for certain illnesses. The following preventive services are covered in full by your Consortium insurance plan:

- Annual Adult Physical Examinations
- Family Planning and Reproductive
- Well-Woman Examinations
- Well-Baby and Well-Child Care Health Services
- Bone Mineral Density Measurements
- Adult Immunizations or Testing
- Mammograms

*“There is always room for improvement in our group’s usage of these free wellness benefits.”*

As for adults, 74% of women aged 50-74 in our group received a breast cancer screening. 63% of women aged 21-64 received a cervical cancer screening, and 57% of subscribers over 50 received a colon cancer screening. Remember, early detection increases the chances of a cure and reduces treatment costs.

Visit the Preventive Health section of [ExcellusBCBS.com](http://ExcellusBCBS.com) to learn more about these and other services available to you.

There is always room for improvement in our group's usage of these free wellness benefits. In 2019, 78% of children under 15 months received their well child exams, 88% of children up to age six. All children's development should be checked regularly at well visits.

For more information about your benefit plan, please visit us online at

[HealthConsortium.net](http://HealthConsortium.net)

# Wellness

Wellness is preventative health care that promotes health and prevents disease.

## Medicare Basics: Part 2



The last *Consortium Connection* (March 2020) discussed Basic Medicare Part A (Hospital Insurance), Part B (Medical Insurance), and Part D (Prescription Drug Coverage). Extra health insurance options also exist that provide more coverage for Medicare-eligible subscribers.

The Consortium offers **Medicare Supplemental** coverage to assist subscribers with deductible and co-insurance costs. Our Medicare Supplement, like all other health insurance plans, pays secondary **coverage** on any claim where the subscriber is enrolled in Medicare, which is always the primary payer. Medicare Supplement has a prescription benefit attached so you will NOT want to sign up for optional Part D.

Some municipal employers offer health insurance to retirees over 65 that continues the plan covering active employees. This is called a **“wrap-around” plan**. You receive the same benefit coverage you had when actively employed, including prescription benefits. Wrap-around plans recognize Medicare as primary and wrap their coverage around the basic Medicare benefits. Like Medicare Supplements, wrap-around plans have a prescription benefit attached so you will NOT want to sign up for optional Part D.

There is yet another option, **Part C (also known as Medicare Advantage)**. Medicare Advantage is an “all-in-one” alternative to basic Medicare. These “bundled” plans include Part A, Part B, and usually Part D. Like Medicare Supplement and a wrap-around plan, Medicare Advantage plans have lower out-of-pocket costs to the subscriber than basic Medicare. Medicare Advantage plans are products sold by private insurance companies. In most cases, you’ll need to use doctors which are in that plan’s network. Many Medicare Advantage plans offer extra benefits that basic Medicare doesn’t cover—like vision, hearing, dental, and more. Medicare Advantage plans are subsidized by the federal government which explains why these plans have lower premiums than any other additional option to Medicare.

**Medicare.gov**  
The Official U.S. Government Site for Medicare

## Upcoming Open Meetings

At this time, all meetings are planned to be via Zoom. If you would like to observe, please contact [consortium@tompkins-co.org](mailto:consortium@tompkins-co.org) and we will forward connection links and phone numbers.

### Board of Directors

June 25, August 27, and September 24 (6 PM)

### Joint Committee on Plan Structure and Design

June 4, July 2, August 6 and September 3 (1:30 PM)

You can find times and dates of our other committees on the Events section of our website: [www.healthconsortium.net](http://www.healthconsortium.net)

## Weathering the Storm with Strong Financials

The Consortium ended 2019 with an unexpected growth in assets: a net income of \$4.4 million! Because the Consortium added eight new municipal partners in 2019, our premium revenues increased 19% while claims expenses were 10% under budget. In addition, the Consortium’s investment income significantly increased in 2019, ending up 115% over budget. These differences explain the good year end results.

The Board used this additional revenue to 1) hold premium rate increase at 5% for 2020, 2) increase our Rate Stabilization Reserve to manage future premium rate increases, and 3) increase our Catastrophic Claims Reserve to backstop the Board decision to increase our Stop-Loss insurance deductible. Stop-Loss insurance protects the Consortium for claims that total more than the deductible, and increasing the Stop-Loss deductible has reduced its premium by nearly \$400,000 for 2020.

With the uncertainty of the pandemic now upon us, having a strong financial foundation ensures reliable health insurance protection for our subscribers.

### The Consortium Connection

To receive this quarterly newsletter electronically, email a request to [consortium@tompkins-co.org](mailto:consortium@tompkins-co.org)

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