



Health and Welfare

DENTAL BENEFIT CHANGES – OCTOBER 1, 2022



Dental Plan

DELTA HANDLES ALL DENTAL BENEFITS

- Delta Dental Premier and PPO Plans
 - Predeterminations
- Verification of Eligibility/Benefits
 - Claims Processing
- Explanation of Benefits (EOBs)
 - Customer Service
- \$2,000 annual maximum remains

Dental Plan

DENTAL/MEDICAL BENEFIT

- Surgical Dental treatment covered at 80%
- No longer subject to annual deductible
- \$5,000 annual surgical/dental maximum
- Separate from \$2,000 annual maximum

Dental Plan

DENTAL TREATMENT IN A HOSPITAL

- Prior approval by Case Manager required
- Individuals with a disability or handicap
- Approved Facility and Anesthesia services covered under Medical Benefit
- Dental services will still be considered under Dental Benefit





Health and Welfare

MEDICAL BENEFIT CHANGES – JANUARY 1, 2023



Medical Plan

DEDUCTIBLE INCREASE

- In Network - \$500/Individual
- Non-Network - \$1,000/Individual
- In Network Family Deductible - \$1,000
- Out of Network Family Deductible - \$2,000
- **In and Out Deductibles are not combined**

Medical Plan

CO-INSURANCE INCREASE

- In Network – 80% Fund/20% Patient
- Non-Network – 60% Fund/40% Patient
- **In and Out Co-Insurance are not combined**

Medical Plan

OUT OF POCKET MAXIMUMS

- In Network Max - \$3,000/Individual
- Family OOP Max - \$6,000/Family
- Non-Network Max - \$6,000/Individual
- Family OOP Max - \$12,000/Family





Health and Welfare

PHARMACY BENEFIT CHANGES – JANUARY 1, 2023



Pharmacy Plan

GENERIC CO-PAYMENT INCREASES

- **Less than 83-day fill**
 - 20% Copayment
- Retail - \$10 Minimum/\$25 Maximum
- Mail - \$25 Minimum/\$65 Maximum

Pharmacy Plan

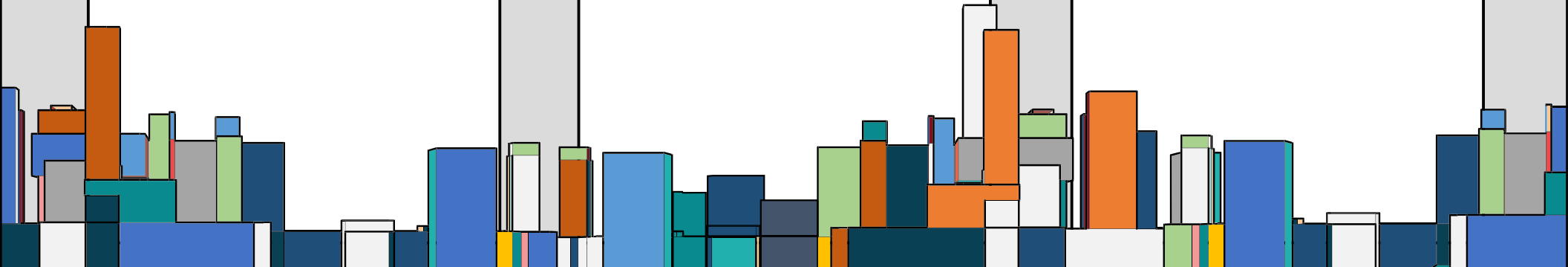
BRAND FORMULARY INCREASES

- **Less than 83-day fill**
 - 30% Copayment
- Retail - \$35 Minimum/\$65 Maximum
- Mail - \$70 Minimum/\$165 Maximum

Pharmacy Plan

BRAND NON-FORMULARY INCREASES

- **Less than 83-day fill**
 - 40% Copayment
- Retail - \$70 Minimum/\$140 Maximum
- Mail - \$80 Minimum/\$185 maximum





Health and Welfare

PHARMACY BENEFIT CHANGES – JANUARY 1, 2023



Pharmacy Plan

GENERIC CO-PAYMENT INCREASES

- More than 83-day fill
 - 20% Copayment
- Retail - \$25 Minimum/\$65 Maximum
- Mail - \$25 Minimum/\$65 Maximum

Pharmacy Plan

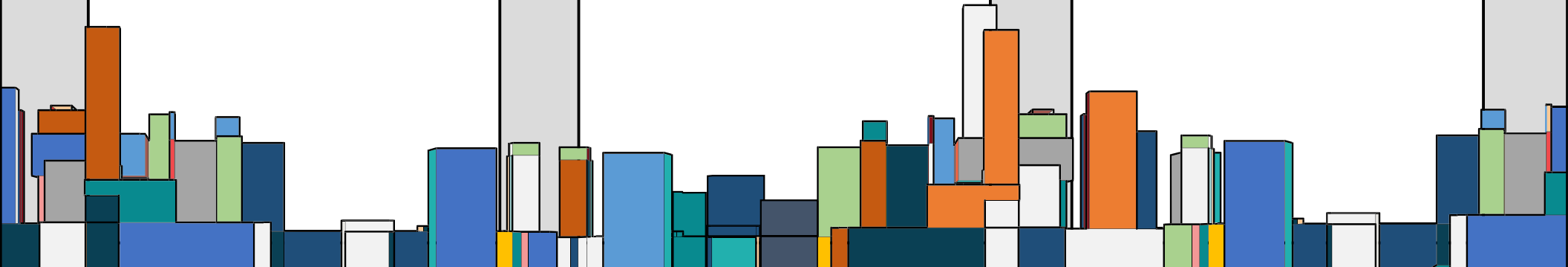
BRAND FORMULARY INCREASES

- More than 83-day fill
 - 30% Copayment
- Retail - \$70 Minimum/\$165 Maximum
- Mail - \$70 Minimum/\$165 Maximum

Pharmacy Plan

BRAND NON-FORMULARY INCREASES

- More than 83-day fill
 - 40% Copayment
- Retail - \$80 Minimum/\$185 Maximum
- Mail - \$80 Minimum/\$185 maximum





Health and Welfare

PHARMACY BENEFIT CHANGES – JANUARY 1, 2023



Pharmacy Plan

SPECIALTY MEDICATIONS

- Only available in 30-day fills
- Most specialty medications are only available through Accredo Specialty Pharmacy
 - Prior Authorization is required
- 20% Co-Payment up to \$200 Maximum



Pharmacy Plan

WEIGHT LOSS MEDICATIONS

- Saxenda and Wegovy are covered eff 9/1/22
- Prior Authorization Required through ES
 - Follows Brand Medication Pricing



Pharmacy Plan

PHARMACY OUT OF POCKET MAXIMUMS

- \$6,000 Individual Maximum
- \$12,000 Family Maximum





Health and Welfare

VISION/HEARING/ELIGIBILITY BENEFIT CHANGES – JANUARY 1, 2023

Vision Plan

NO OUT OF NETWORK COVERAGE

- Must use **EyeMed** or **Union Eyes** ONLY
 - Exam, Frames, Lenses, Contacts
 - 1 every 12 Months
- (Contacts and Frames) or (Frames and Lenses)



Hearing Plan

NO OUT OF NETWORK COVERAGE

- Must use TruHearing Network Provider ONLY
 - 100% coverage - \$4,000 maximum
 - 36-month benefit period
 - 36-month warranty



Eligibility

- Self Payments are allowed for a maximum of 10 contribution quarters, including SASMI payments
- 2 Quarter lookback increased from 600 hours to 700 hours





Health and Welfare

MEDICARE/THERAPY BENEFIT CHANGES – JANUARY 1, 2023

Therapy coverage

CASE MANAGEMENT APPROVAL FOR THERAPY

- Physical, Occupational, Speech
- Auth should begin at start of treatment
 - Maximums no longer apply
- Only approved benefits will be covered



Medicare

CLASS D COVERAGE

- Disabled Retirees eligible for Medicare will no longer have Class D coverage options
- Must go directly to Class C HRA only coverage
 - Effects members who retire after 1/1/23
 - Members currently under Class D are not affected by this change



Class C and Wellness Center

TRIAL PERIOD FOR UWC USE

- Class C and CS individuals will have a 1-year trial period to use the UWC in 2023
- One-time Open enrollment during Fall 2023 for continued coverage 1/1/2024
- Reduced HRA benefit for those that chose continued UWC access
 - \$1,500/year member
 - \$1,200/year spouse & dependents

