

Benefits You Can Trust

Employee Benefits Matter!

Presenters:

Mark Broth, Attorney, Drummond Woodsum
David Salois, Member Relations Representative
Andrew Struth, Benefits Advisor



AGENDA

- Welcome
- Future of Health Care
- Labor Trends
- Why Employee Benefits Matter
- Benefit Considerations
- Wellness Programs
- Win-Win Strategies

GET TO KNOW HEALTHTRUST!

Who is HealthTrust?

A nonprofit, public risk pool dedicated to serving our Members – New Hampshire's schools, towns, cities, counties and other public entities.

- *Exceptional service with a personal touch*
- *More than 70,000 NH public sector workers and their family members choose HealthTrust for their coverage*

Our Board of Directors Represents You



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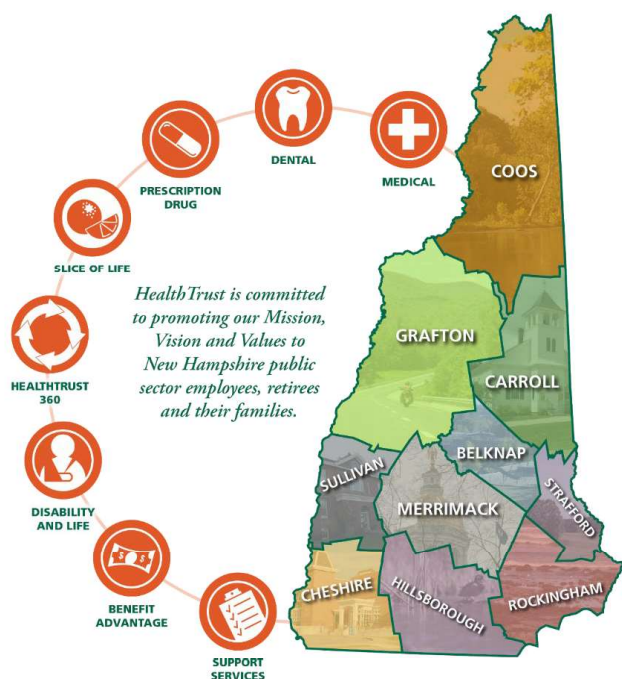
JILL SHEING
HR Payroll Coordinator,
Strafford County



CATHY ANN STACEY
Register of Deeds,
Rockingham County



SARAH TRAHAN
Social Studies Teacher,
Winnacunnet High School



HealthTrust's Mission, Vision and Values form the foundation of all we do. We are proud to be New Hampshire communities' most trusted partner in achieving optimum health through a culture of wellness. By helping to keep our public sector employees and their families healthy, **HealthTrust** strives to make New Hampshire a better place to live and work – and that's a goal we share with all our Members.

Mission

To provide high quality, cost-effective, employee benefit products and services for public employers and employees in New Hampshire in order to reduce costs through pooling strategies with a commitment to education, health promotion and disease prevention.

Vision

New Hampshire communities' most trusted partner in achieving optimum health through a culture of wellness.

Values

Integrity • Service • Innovation • Collaboration

FUTURE OF HEALTHCARE



FUTURE OF HEALTHCARE

Future of HealthCare:

- National Trend is increasing
- Groups transitioning to higher deductible health plans
- Increase in Consumerism
- Growth of Telehealth
 - Medical
 - Behavioral
- Increased availability of Digital Tools and resources
- Connected Care



FUTURE OF HEALTHCARE



- Healthcare premiums continue to grow faster than employees' pay
- Affordability for employers and employees still a major issue
- Trend is largest component of annual cost projection
 - Trend is an estimate of the amount that medical costs and utilization will increase

MEDICAL INFLATION: THE NATIONAL & LOCAL PICTURE



- Healthcare trend rates over the last five years
 - National average: 5%
 - HealthTrust average: 4.7%
- 2022 – 2023 Trend Forecast
 - Nationally: 5% - 7%
 - HealthTrust: 6.2% (6.1% Medical; 6.5% Prescription Drugs)

THE GREAT RESIGNATION

Labor Trends – Why Completing the Employee Benefit Package Matters!

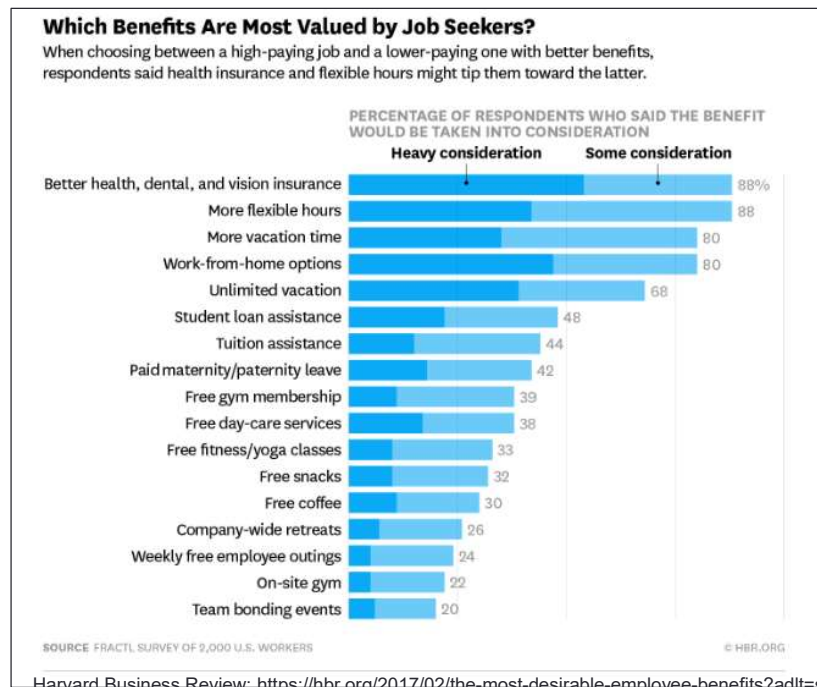


Mark T. Broth, Attorney

DrummondWoodsum
ATTORNEYS AT LAW

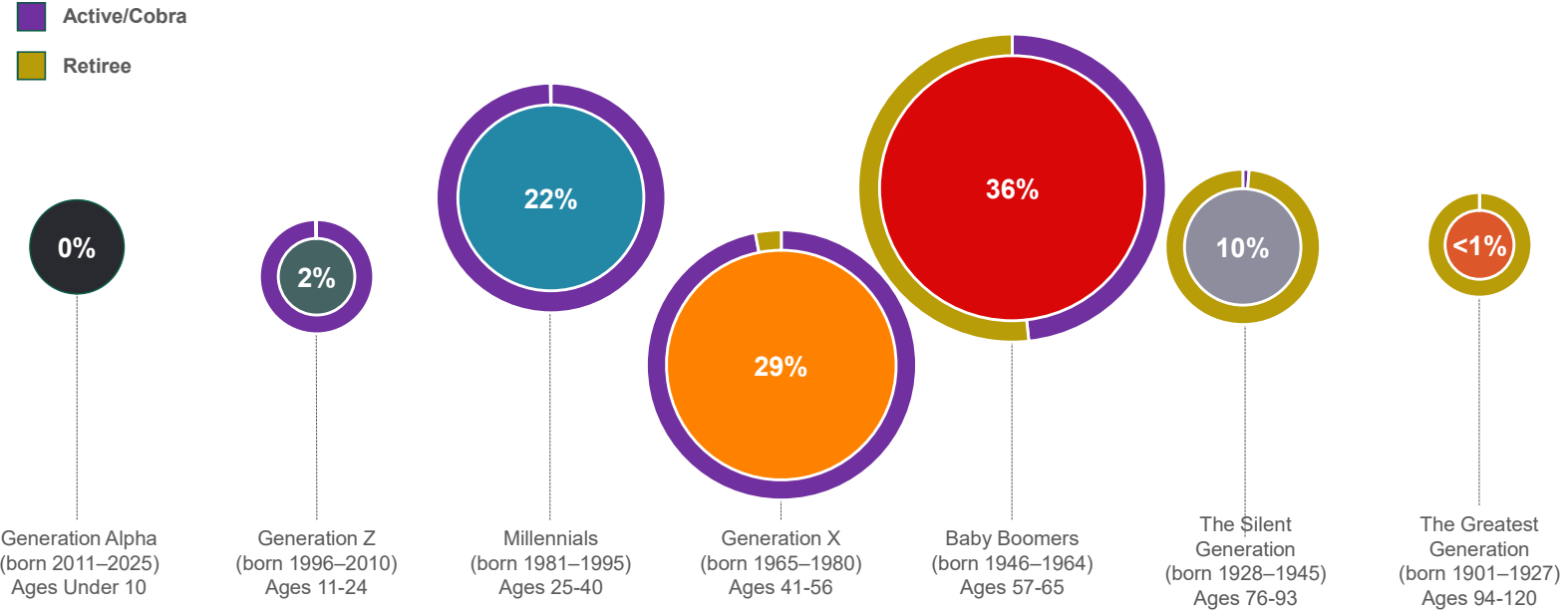
WHY EMPLOYEE BENEFITS MATTER

- Prospective Employees are looking past higher pay for better benefits.
- Health Coverage is the most costly benefit provided to an employee.
- Consider strategies for offsetting deductible exposure for employees.
- Providing employees access to benefit resources helps keep them informed.
- Investing in your benefits and wellness programs is investing in your employees



Harvard Business Review: <https://hbr.org/2017/02/the-most-desirable-employee-benefits/> adlt=strict

HEALTHTRUST MEDICAL POPULATION BY GENERATIONS ENROLLEES



*Based on HealthTrust Enrollee population as of 8/1/2022

BENEFIT CONSIDERATIONS



CONSIDERATIONS

Medical and Prescription Benefits

- Providing comprehensive, quality and affordable benefits shows your employees you are invested in their overall health and future.
- Offering choices for employees gives them control and flexibility.
- Medical plans pay for all or a portion of healthcare expenses if an employee or their family members become ill or injured.
- They also provide coverage for preventive care services, such as routine physical exams, screenings and immunizations.
- Two common types of comprehensive plans to consider are Health Maintenance Organizations (HMOs) and High Deductible Health Plans (HDHPs). These plans generally cost the least while still providing comprehensive coverage for employees and their family members.



MEDICAL PLANS



Health Maintenance Organization (HMO) Plans

- HMO plans are easy-to-use and generally offer the least in out-of-pocket costs for individuals.
- A Primary Care Provider (PCP) must be selected from the network and coordinates the majority of an individual's care, ensuring consistency and continuity of care.
- On a HealthTrust HMO plan, individuals can choose a PCP from a network of providers throughout the six New England states. (CT, MA, ME, NH, RI, VT) As long as network providers are utilized, no referrals are needed. Referrals are required for out-of-network care.

Site of Service (SOS) HMO Plans

- **The difference:** These plans encourage medical consumerism by offering a preferred cost-effective network for medical labs, radiology services and certain outpatient surgeries potentially avoiding deductible expenses.
- Individuals may still use the provider of their choice within the network and the cost is subject to their deductible.

MEDICAL PLANS CONT.

Preferred Provider Organization (PPO)

- PPO health plans offer a broad network of providers and do not require a Primary Care Provider (PCP) or referrals to see specialists.
- PPO plans generally provide both in-network and out-of-network benefits. Out-of-pocket costs are usually higher and subject to deductible and/or coinsurance when out-of-network providers are utilized.

High Deductible Health Plan (HDHP)

- HDHP plans allow access to care from any provider however the costs are lower if the individual sees network providers.
- All covered medical *and* prescription expenses, with the exception of in-network preventive care services, are subject to the deductible and/or coinsurance.
- Once the deductible and/or coinsurance maximums are satisfied, all covered medical and prescription expenses are paid in full.
- HDHP plans qualify to be used in conjunction with a Health Savings Account (HSA).