

COLLIN COUNTY 2020 BENEFITS

2020 Presentation for FY2021 Budget

Fiscal Year 2019 Benefit Costs

(does not include stop loss reimbursements)

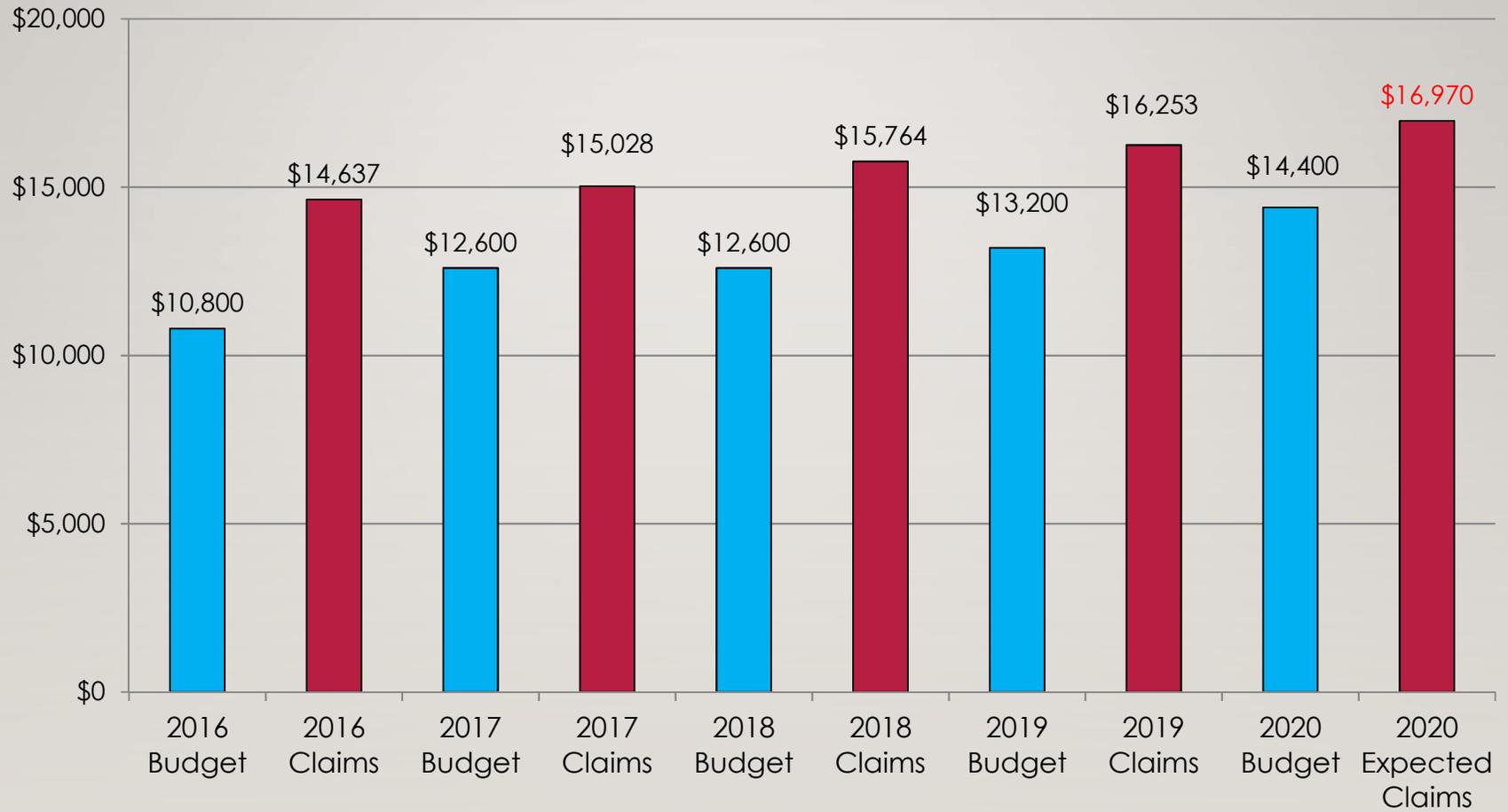
Medical and Prescription	2018 Costs	2019 Costs
Total Claims Cost	\$28,741,881	\$27,706,407
Employees Pay	\$3,191,093 (11%)	\$3,208,145 (12%)
County Pays	\$25,550,788 (89%)	\$24,498,262 (88%)
Average # of Covered Subscribers	1,470	1456

Employee Cost Share

	2015	2016	2017	2018	2019
Employee Pays	14%	14%	13%	11%	12%
Employer Pays	86%	86%	87%	89%	88%

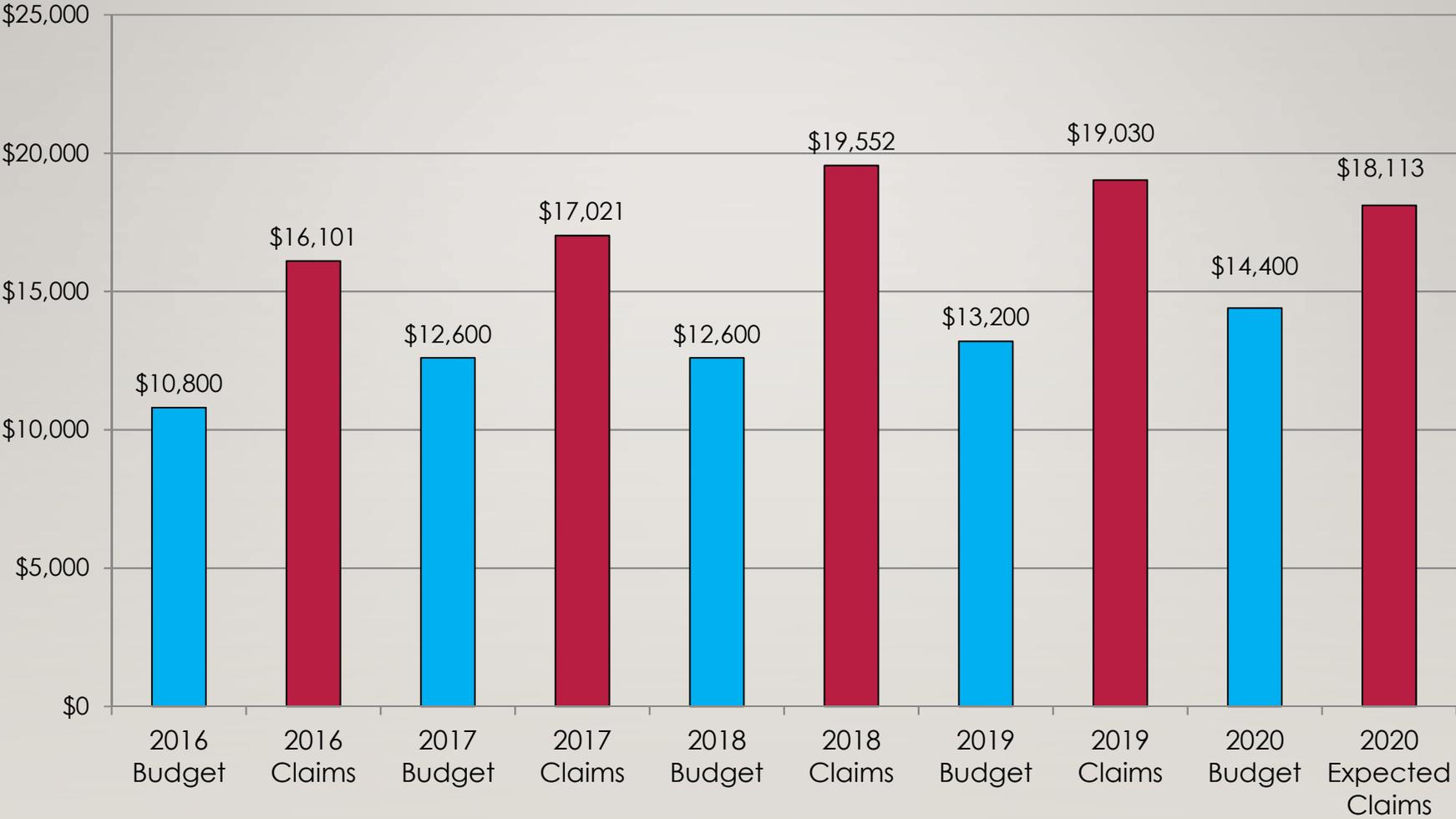
Fiscal Year Budget vs. Claims Per Employee

(with stop loss reimbursements)

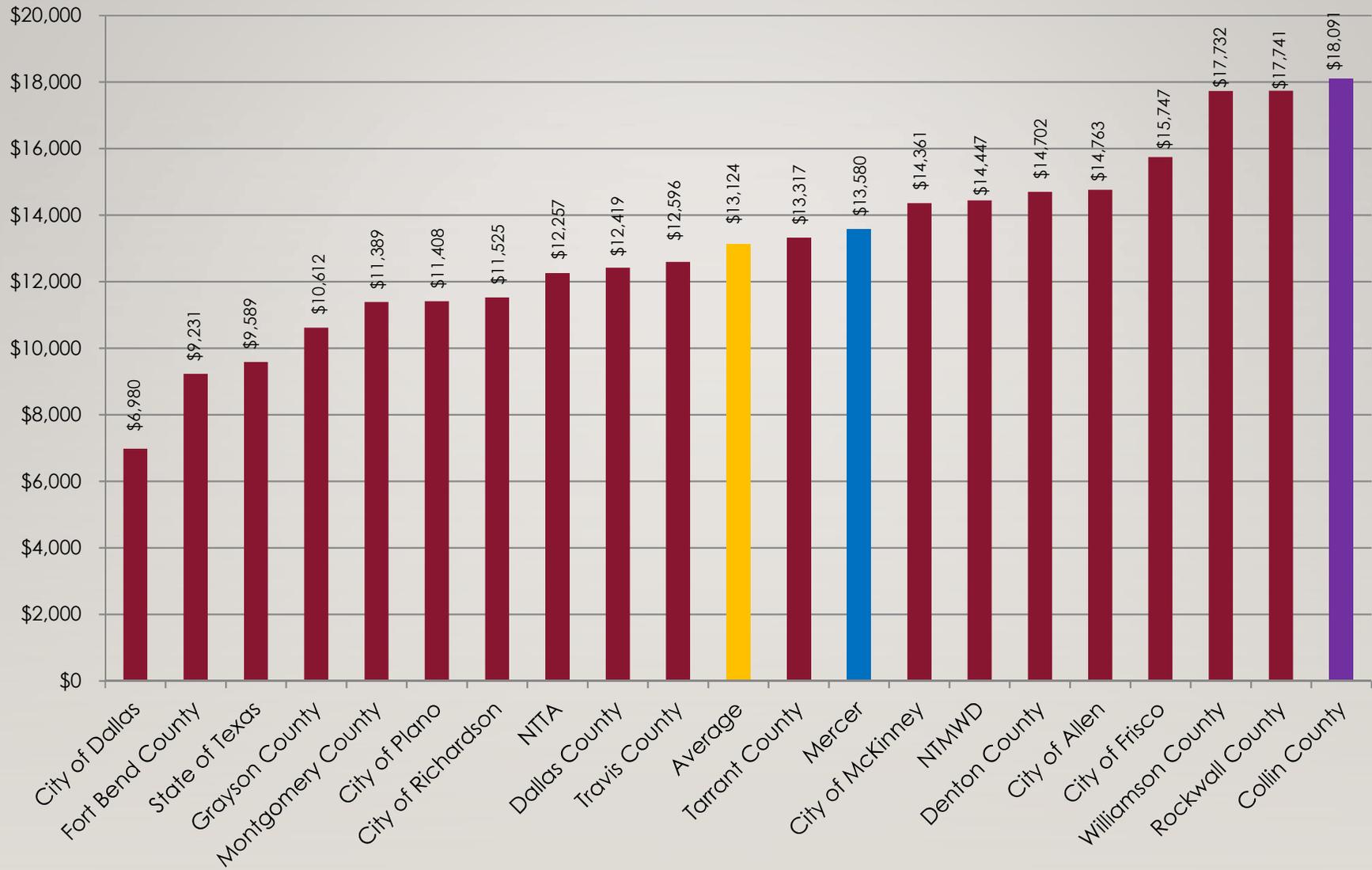


Fiscal Year Budget vs. Claims Per Employee

(without stop loss reimbursements)



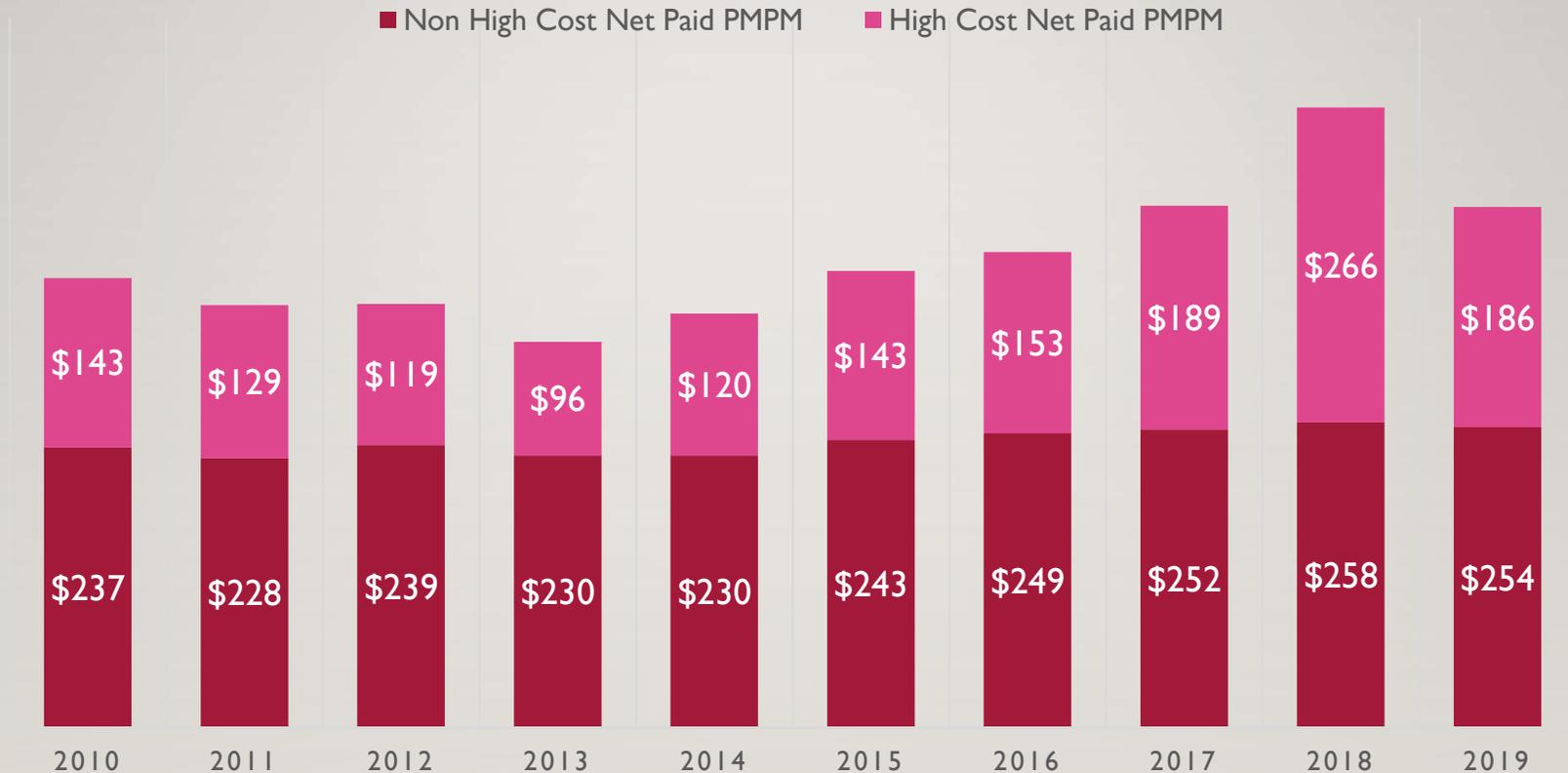
2019 Average Employer Premium Cost Per Employee Premium Plan



2019 Claims Information

- Utilization of medical benefits is 100%.
- Insured members averaged 3,499. For every insured employee we also cover an average of 1.41 dependents.
- Catastrophic cases are those that exceed \$50,000. 42% of our claims cost was due to high cost claimants, which is about 8% percent less than the prior year.
- 65 claims were over \$50,000 in 2019 (decrease of 11).
 - 40 claims were between \$50,000 and \$100,000 (increase of 4).
 - 25 claims were over \$100,000 (decrease of 15). Of those claims, 8 were over \$200,000 (decrease of 8).
- There was a 16% decrease in the average cost of a high cost claim compared to a 1.4% increase last year.

Medical Net Paid PMPM Historical Trend



- High Cost Net Paid PMPM is 30% higher than 10 years ago
- Non High Cost Net Paid PMPM is 7% higher than 10 years ago

Large Loss Claims Top Categories

<u>Condition</u>	<u>2019</u>	<u>2018</u>	<u>2017</u>
Circulatory			
Hardening of the arteries	5	5	1
Dysrhythmias/Myocardial Infarction	3	1	6
Other	1	2	4
Cancer (Neoplasms)			
Breast	6	8	3
Other	7	10	7
Musculoskeletal			
Disc Disorder/Back Pain	5	10	5
Arthritis/Osteoarthritis	0	7	0
Other	5	1	5
Digestive			
Crohn's Disease	2	0	0
Gallbladder	2	0	0
Other	4	3	2
Injuries and Poisoning			
Device/Implant Complications	2	4	1
Fractures	2	6	0
Other	0	1	2

Top Diagnosis Categories by Cost

<u>Diagnosis</u>	<u>Claimants</u>	<u>Dollars</u>	<u>Cost/Claimant</u>	<u>Catastrophic Dollars %</u>
Circulatory System	696 	\$2,321,097 	\$3,335 	65% 
Cancer	364 	\$2,219,486 	\$6,097 	72% 
Musculoskeletal System	1,126 	\$2,183,376 	\$1,939 	36% 
Digestive System	497 	\$1,996,949 	\$4,018 	56% 
Injuries and Poisonings	585 	\$1,384,344 	\$2,366 	48% 

Top Diagnosis Categories

- Circulatory system claims cost increased by 56%. We are 7% lower than our peer group. 65% of circulatory claim dollars were for high cost claims.
- Cancer claimants decreased by 1%, and the cost of cancer claims decreased by 42%. Our number of claimants is 11% lower than our peers, but our cost per claim is 4% higher. 72% of cancer claim dollars were for high cost claims.
- Musculoskeletal claimants increased by 8% and the cost of claims decreased by 33%. Our number of claimants is 5% higher than our peers, but our cost per claim is 16% lower. 36% of musculoskeletal claim dollars were for high cost claims.
- Digestive System claimants increased by 6% and the cost of claims increased by 38%. Our number of claimants is 2% less than our peers. 56% of digestive claim dollars were for high cost claimants.
- Injury and poisoning claimants increased by 2% and are 2% lower than our peer group. The cost of claims decreased by 42%. 48% of injury and poisoning claim dollars were for high cost claims.

Major Cost Drivers

- Circulatory System is the highest cost driver and spend increased 56% from last year.
- Cancer was the leading primary clinical cost driver last year and remains in the top five this year.
- Catastrophic cases (those over \$50,000) net paid PMPM decreased 28%. Net paid PMPM is 5% higher than the norm.
 - Cancer: 13 members / claims totaled \$1,747,952 (22% of total Catastrophic claims cost)
 - Circulatory: 9 members / claims totaled \$1,550,813 (20% of total Catastrophic claims cost)
 - Digestive System: 8 members / claims totaled \$1,133,834 (15% of total Catastrophic claims cost)
 - Injury and Poisoning: 4 members / claims totaled \$774,217 (10% of total Catastrophic claims cost)
 - Musculoskeletal: 11 members / claims totaled \$755,268 (10% of total Catastrophic claims cost)
 - Others: 20 members / claims totaled \$1,836,804 (24% of total Catastrophic claims cost)
- Those with more than \$50,000 in medical net payments represent 2% of claimants and 42% of medical costs.
- Net paid per ER visit increased 1% and is 32% higher than the norm.

Calendar Year Stop Loss

	2015	2016	2017	2018	2019
Stop Loss Fee	\$1,656,879	\$1,990,645	\$1,853,947	\$2,838,935	\$4,217,908
Stop Loss Reimbursement	\$1,451,234	\$2,208,293	\$4,100,743	\$5,183,448	\$3,959,561
Carrier Impact	12%	(11%)	(121%)	(83%)	6%

Pharmacy

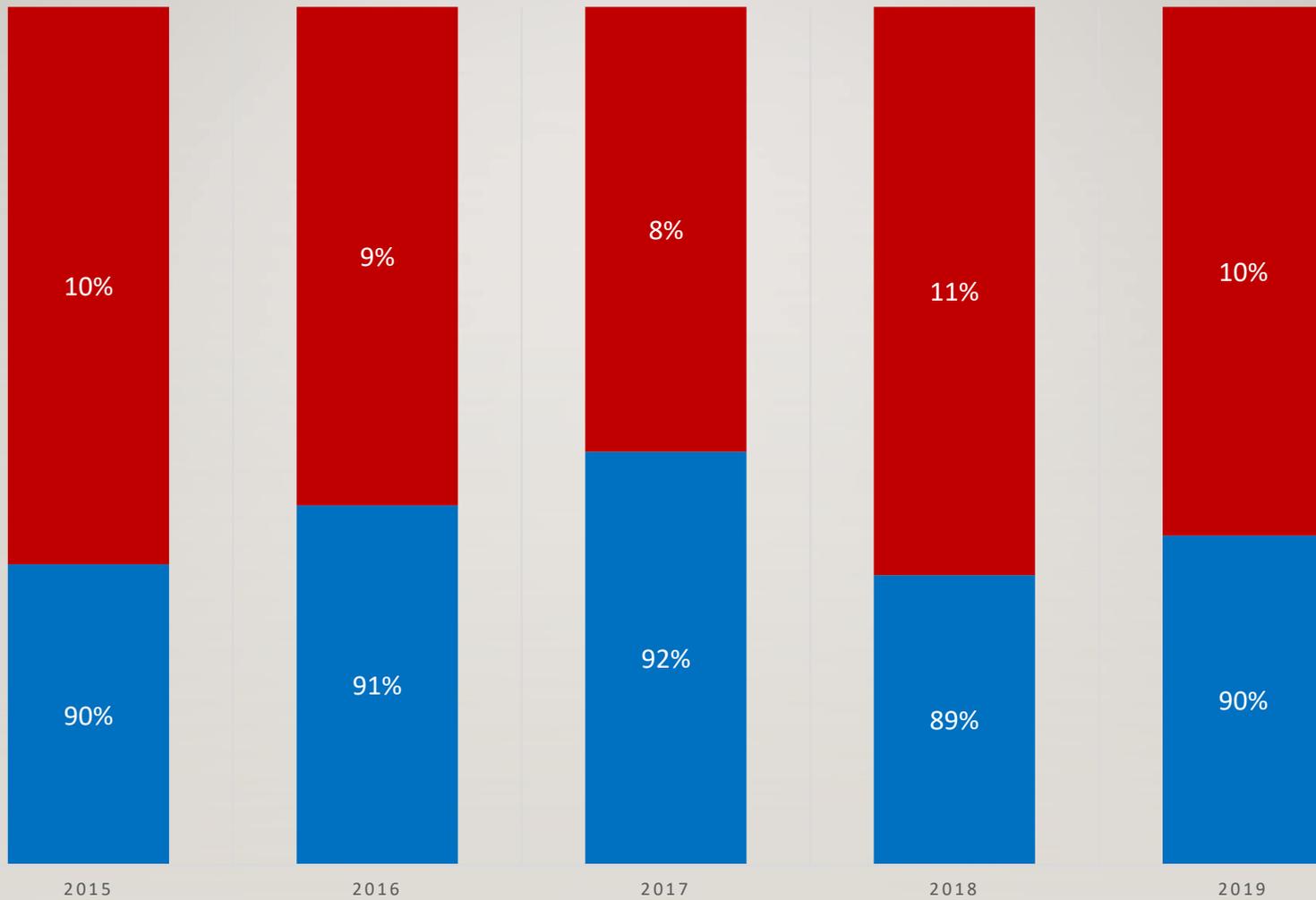
- Total pharmacy costs were \$6,004,285 for the year; 22% of total costs.
 - Total pharmacy cost increased 9%.
- Top 15 drugs cost Collin County \$2.2 million and comprise 42% of the county's pharmacy costs.
- Over the last five years:
 - Net paid per member per month decreased 5%.
 - Plan paid specialty per member per month increased 80%.
 - Plan paid non-specialty per member per month decreased 29%.
 - Plan paid per prescription decreased 14%.

Pharmacy

	2015	2016	2017	2018	2019
Total Spend	\$5,983,182	\$5,450,909	\$6,133,097	\$5,511,478	\$6,004,285
Change in Total Spend	12%	-9%	13%	-10%	9%
Employee Pays	\$598,200 (10%)	\$508,519 (9%)	\$507,947 (8%)	\$582,468 (11%)	\$592,451 (10%)
Employer Pays	\$5,384,982 (90%)	\$4,942,390 (91%)	\$5,625,150 (92%)	\$4,929,010 (89%)	\$5,411,834 (90%)

PHARMACY COST SHARE

■ Plan Paid ■ Employee Paid



Top 15 Prescriptions by Net Paid

Name of Prescription	Used to Treat	Tier	Members Using Prescription	Number of Prescriptions	Annual Cost of Prescription	Cost per Prescription
HUMIRA PEN*	Inflammatory Condition	2	9	68	\$406,387	\$5,976
STELARA*	Inflammatory Condition	2	5	16	\$267,383	\$16,711
TECFIDERA* (1)	Multiple Sclerosis	2	2	20	\$163,641	\$8,182
AUBAGIO*	Multiple Sclerosis	3	2	22	\$159,814	\$7,264
TAKHZYRO*	Blood Disorders	3	1	3	\$139,452	\$46,484
FIRAZYR* (2)	Blood Disorders	3	1	4	\$138,663	\$34,666
VICTOZA	Diabetes	2	30	175	\$138,247	\$790
OTEZLA*	Inflammatory Conditions	2	6	39	\$137,165	\$3,517
SPRYCEL*	Oncology	3	1	10	\$134,739	\$13,474
HUMALOG KWIKPEN	Diabetes	1	22	140	\$111,937	\$800
JARDIANCE	Diabetes	2	33	184	\$103,161	\$561
VYVANSE	ADHD	2	79	430	\$95,000	\$221
BASAGLAR KWIKPEN	Diabetes	1	24	183	\$92,878	\$508
NUTROPIN AQ NUSPIN 20*	Growth Hormone Deficiency	2	1	12	\$89,429	\$7,452
INVOKANA	Diabetes	2	22	162	\$83,350	\$515

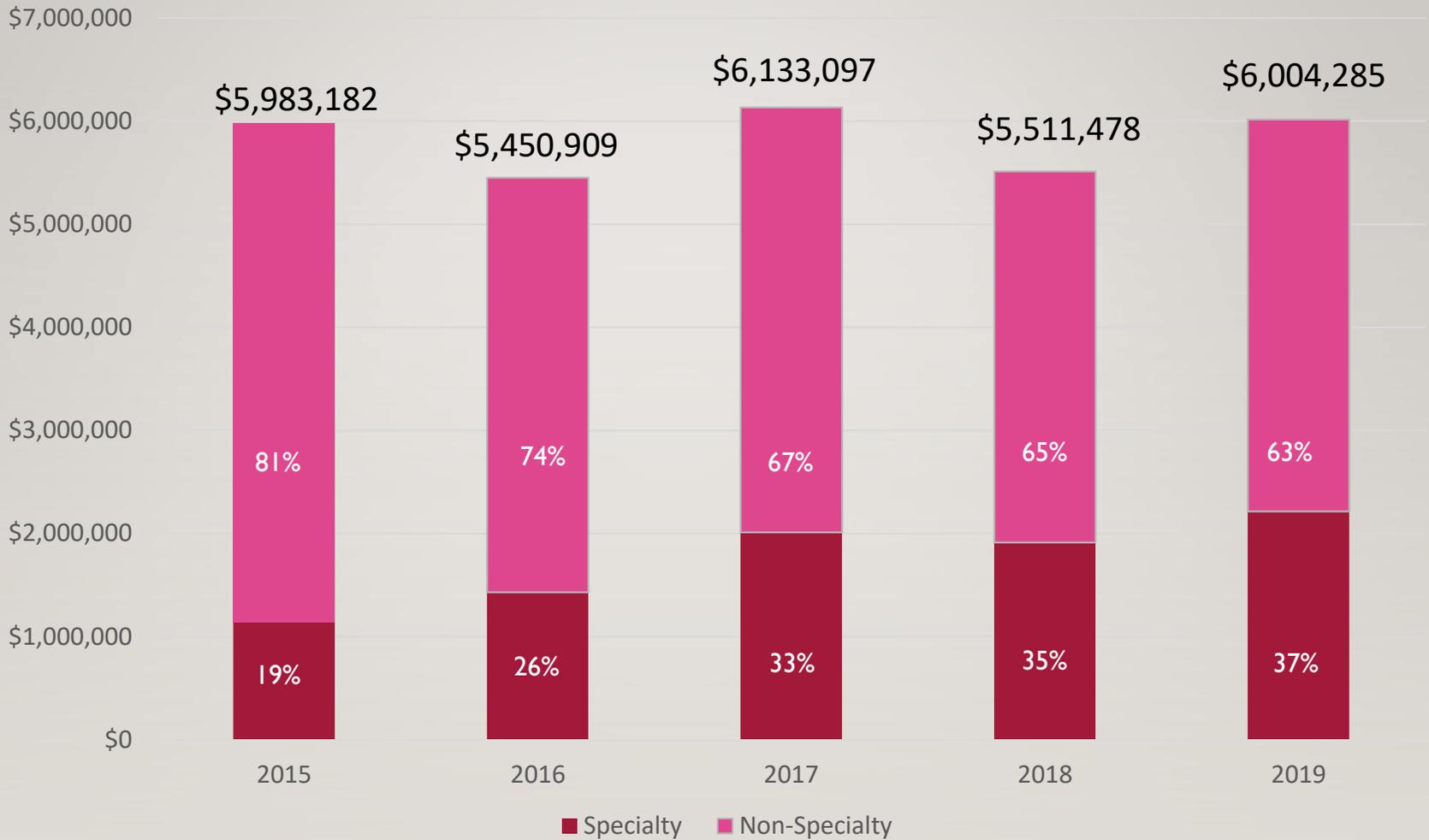
*Specialty Medications

- 1) TECFIDERA: Patent expired 04/19
- 2) FIRAZYR: Patent expired 07/19

Specialty Pharmacy

- Specialty drugs are generally defined as having one or more of the following characteristics:
 - Complex to manufacture, requiring special handling and administration
 - Costly both in total, and on a per patient basis (typically >\$600 per dose)
 - Taken by a relatively small portion of population who have rare and complex medical conditions
 - Requires ongoing clinical support
- The Mercer survey reported for 2019 that spending on specialty drugs is rising much faster than overall spending on pharmacy benefits. In 2019, annual average specialty drug cost per employee increased 10.5%.
- Specialty drug costs increased 15% (\$291,594 more).
 - 72 specialty utilizers represent 2% of total population and 40% of plan paid.
 - Specialty plan paid per RX is 10% lower than peer.
- Employees contributed only 1.6% of specialty drug costs in 2019.

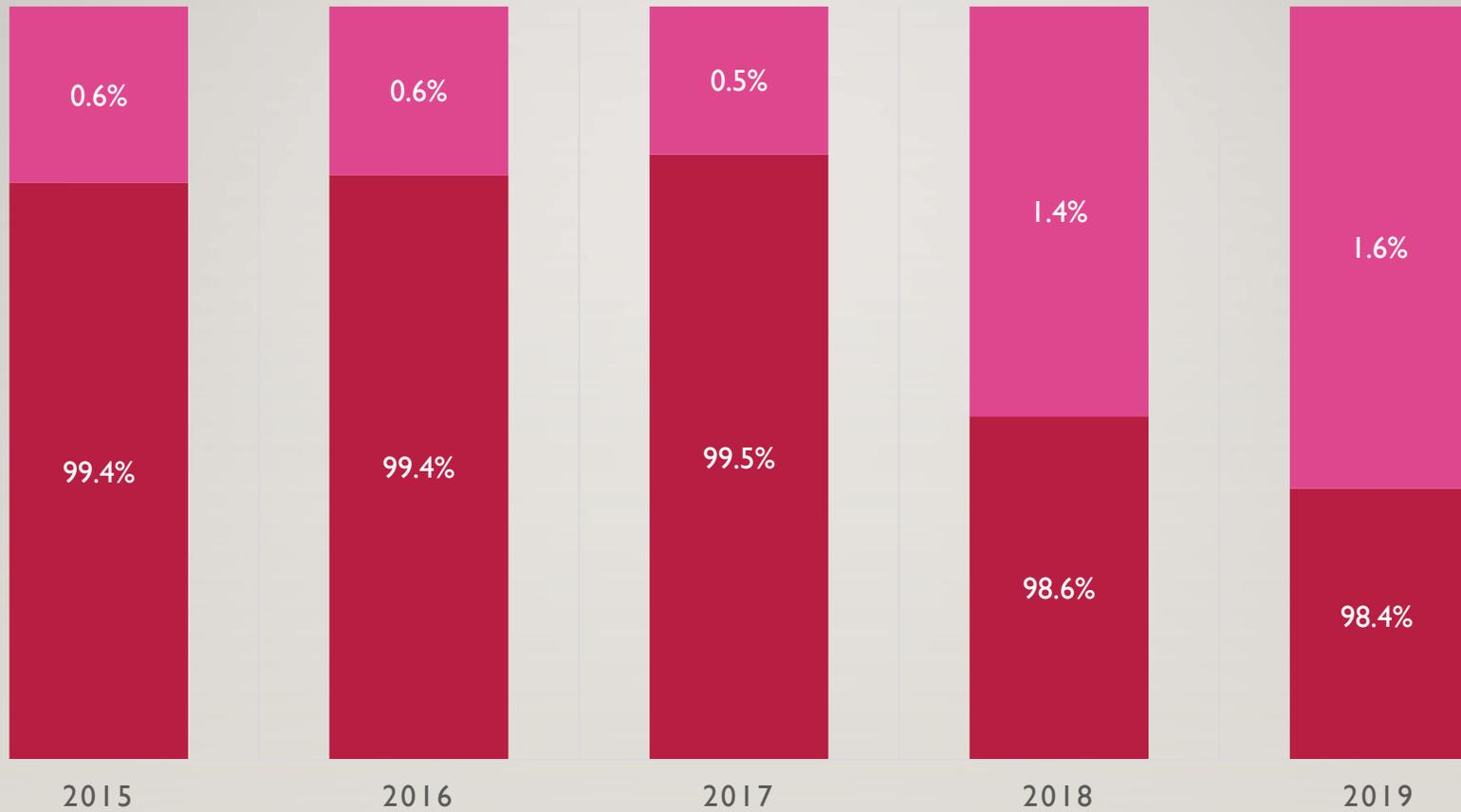
TOTAL PHARMACY COST



* Value pharmacy network added for plan year 2016

SPECIALTY PHARMACY COST SHARE

■ Plan Paid ■ Employee Paid



MEDICAL AND DENTAL
BENEFIT
COMPARISONS

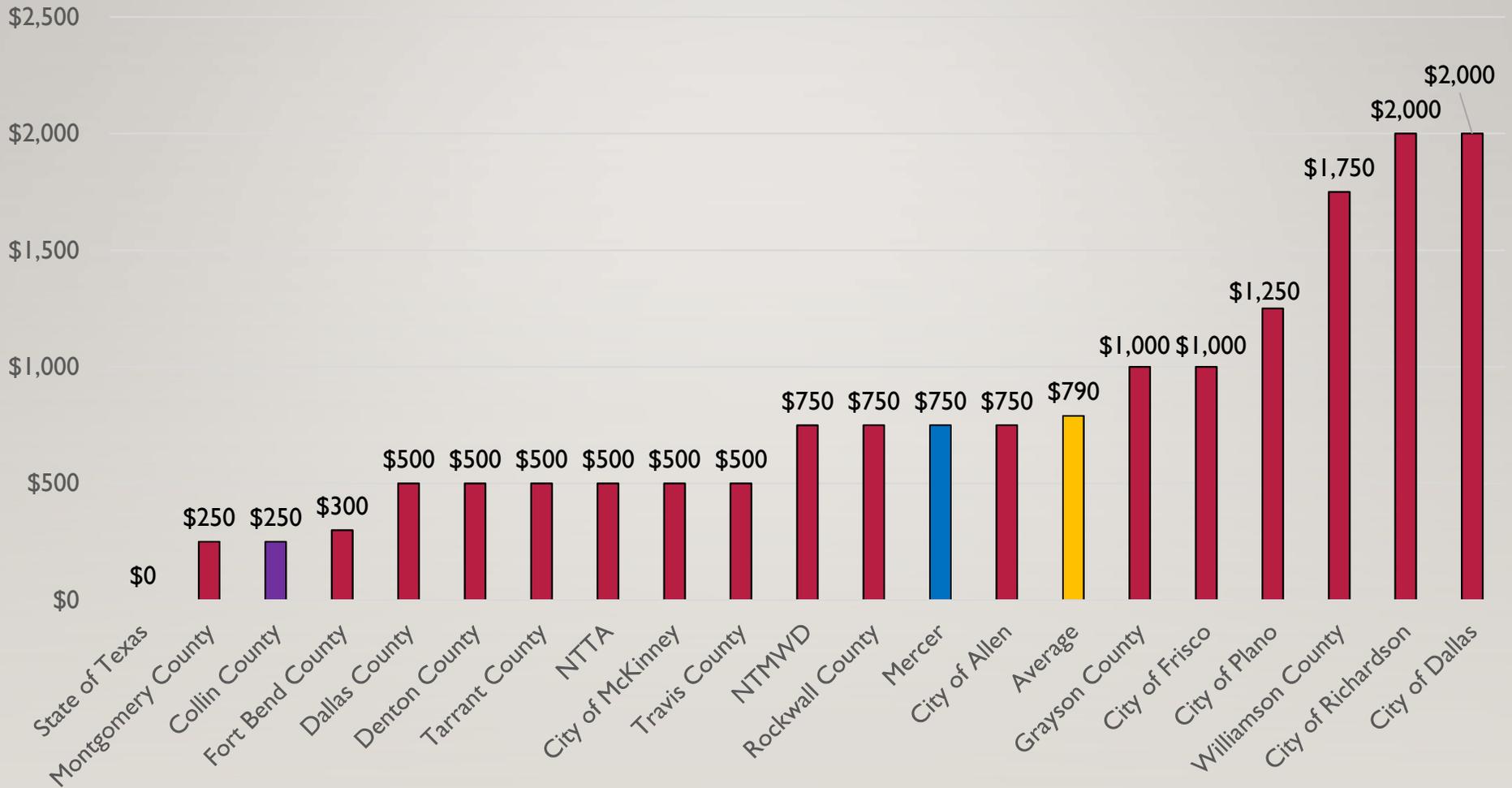


Medical Plan Benefit Comparison

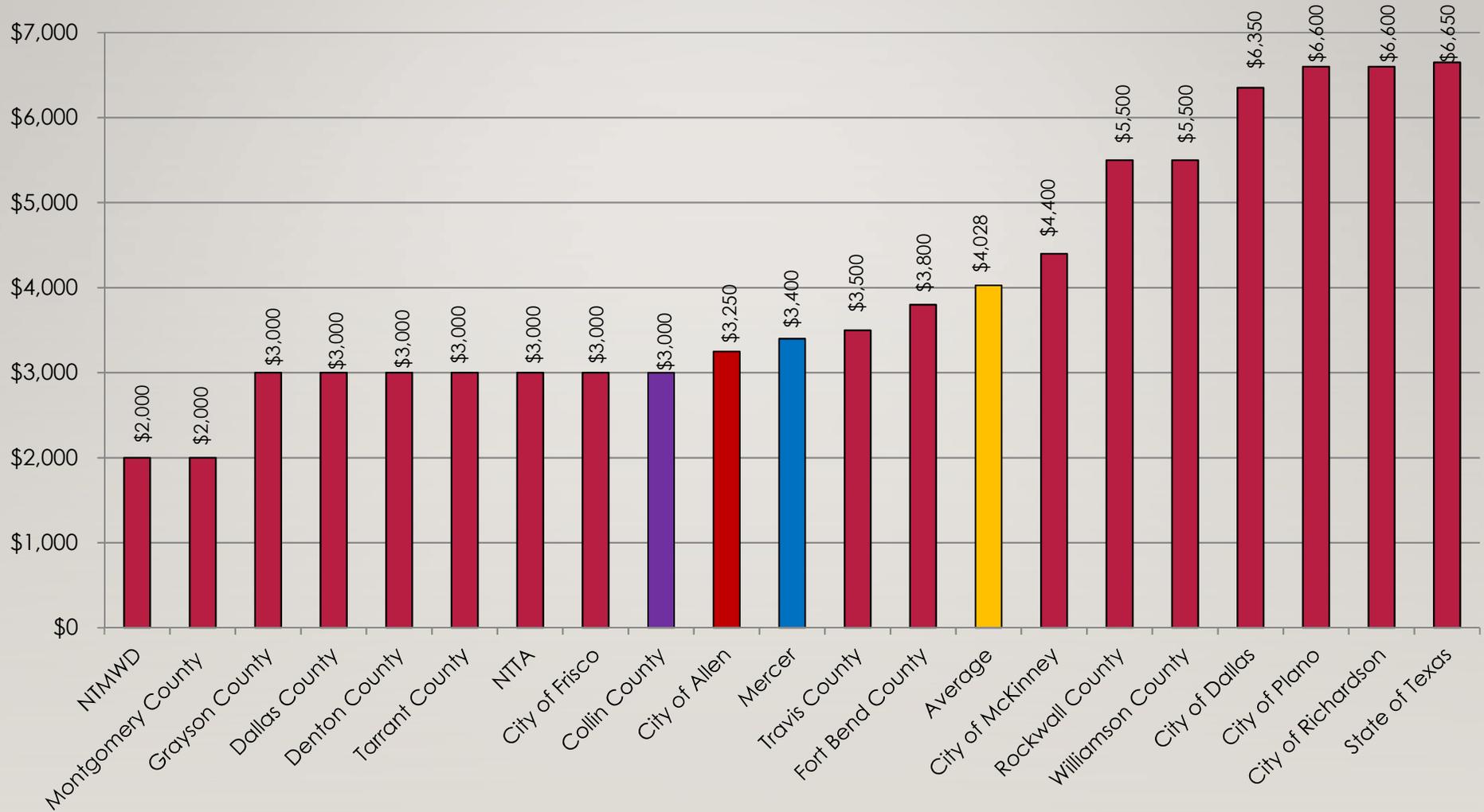
- **Deductibles:**
 - Our deductible is lower than the average. Our deductible is in the lower quartile although the state still has a zero deductible plan.
- **Out-of-Pocket Expenses:**
 - Our out-of-pocket maximum is equivalent to Dallas County, Denton County, Tarrant County, Grayson County, City of Frisco, and NTTA, but less than all other entities surveyed except Montgomery County and North Texas Municipal Water District.
- **Physician Co-Pay:**
 - The low physician co-pay for primary care physicians is meant to encourage use of primary physicians.
 - Average primary care physician cost is \$75.30 per member per month, a 3% decrease.
- **Specialist Co-Pay:**
 - We have one of the largest differentials between our physician co-pay and our specialist co-pay. This encourages members to see their primary care physician first.
 - Average specialist cost is \$242.93 per member per month, a 4% increase.
 - Average specialist cost is 223% more than primary care cost.
- **Percent of Services Paid:**
 - We have one of the lowest percentage paid (75%).
 - In-patient hospital stays and outpatient surgeries are covered at 100% after applicable co-pay and deductibles.

Premium Medical Plan Deductibles

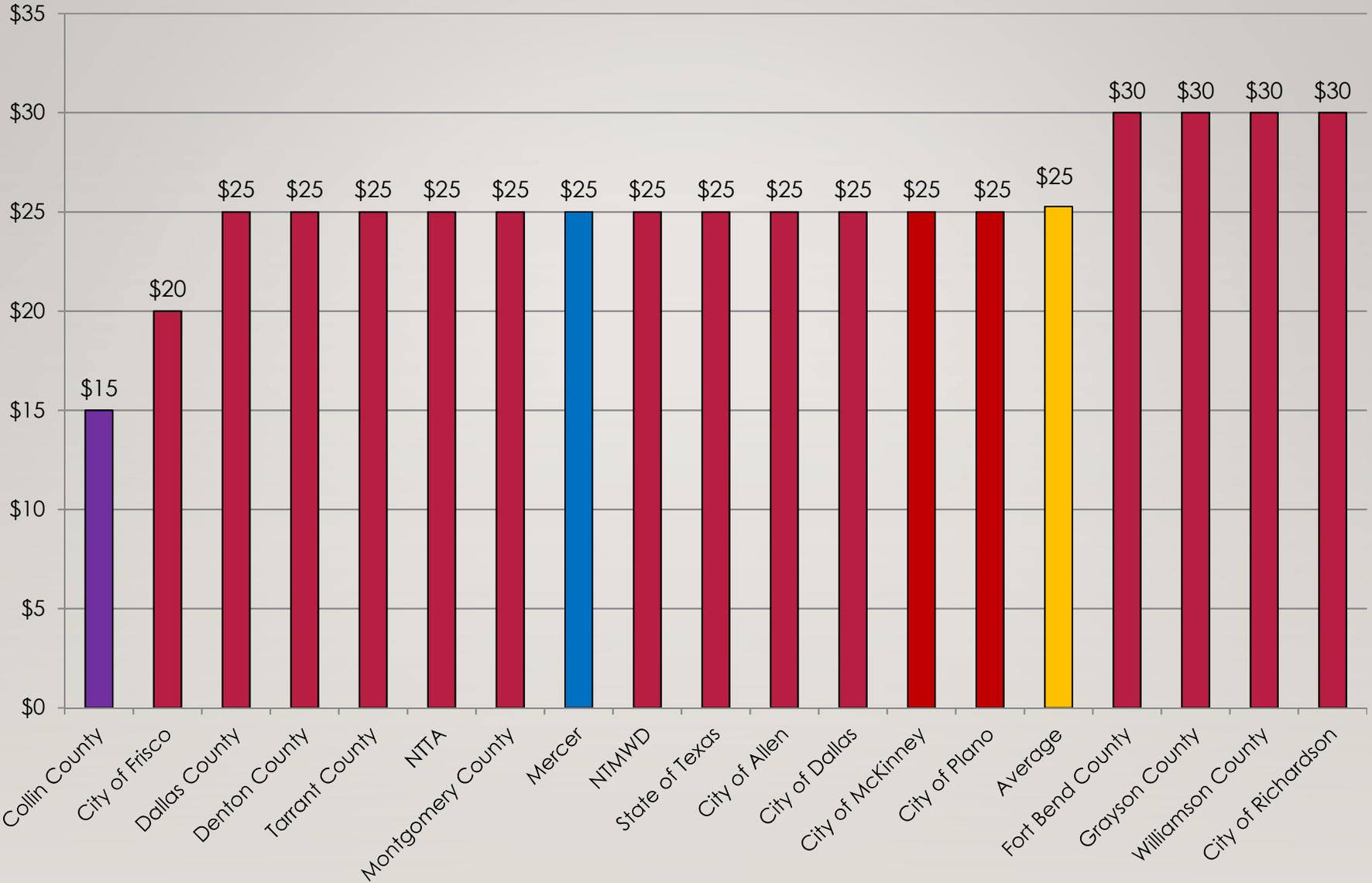
Deductibles



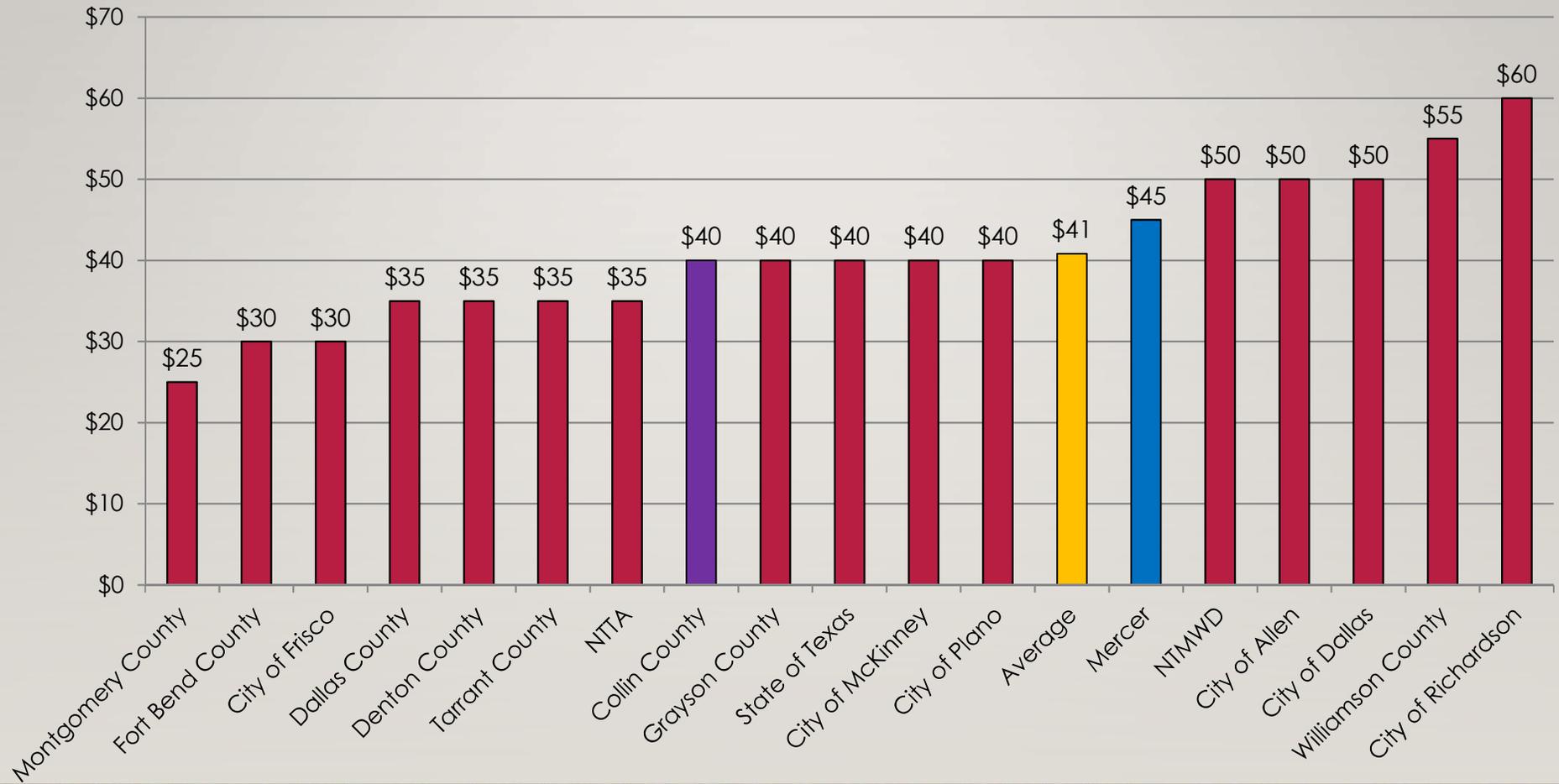
Premium Medical Plan Out-of-Pocket Expenses – In-Network



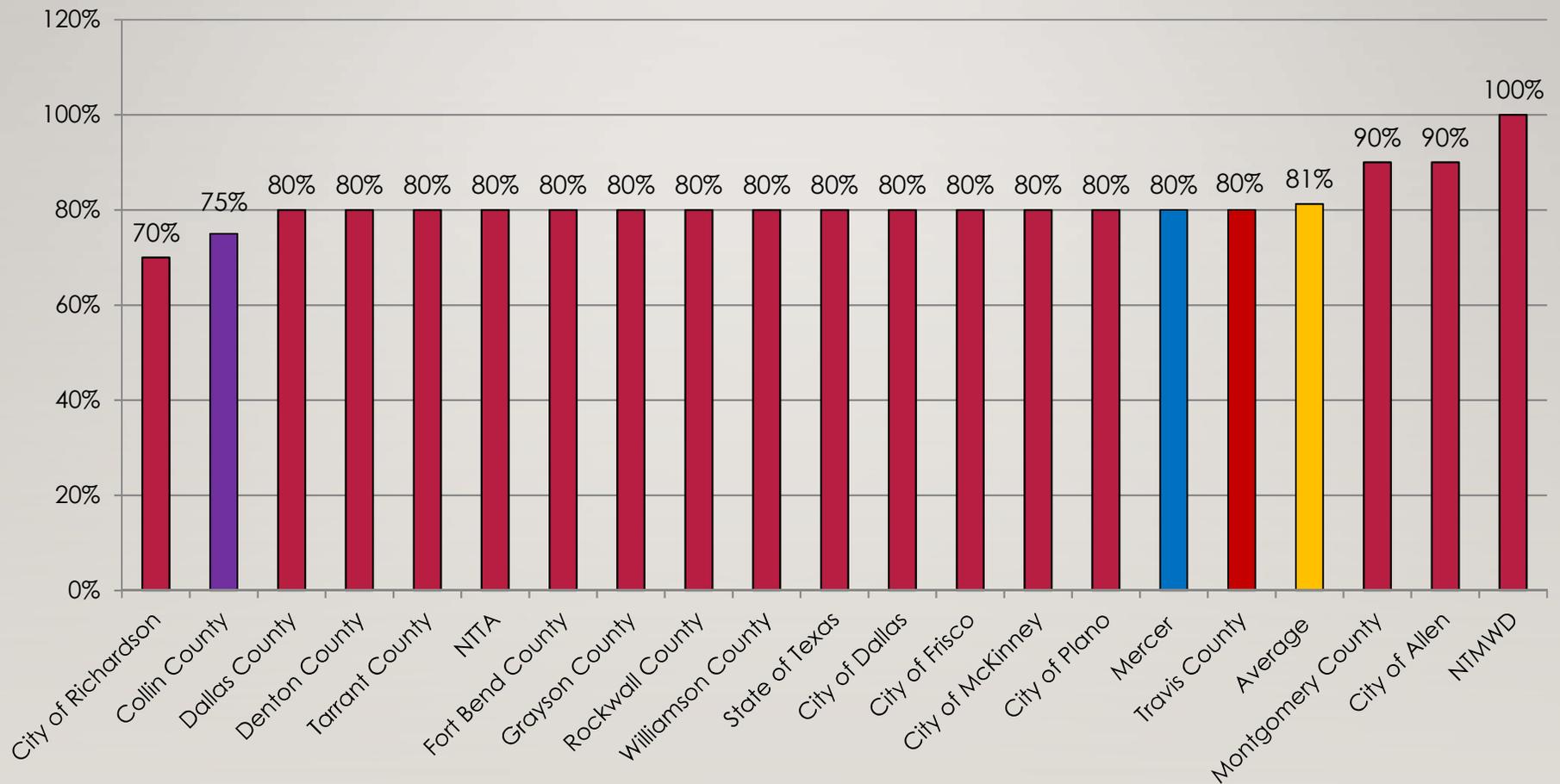
Premium Medical Plan Primary Care Physician Co-Pay



Premium Medical Plan Specialist Co-Pay



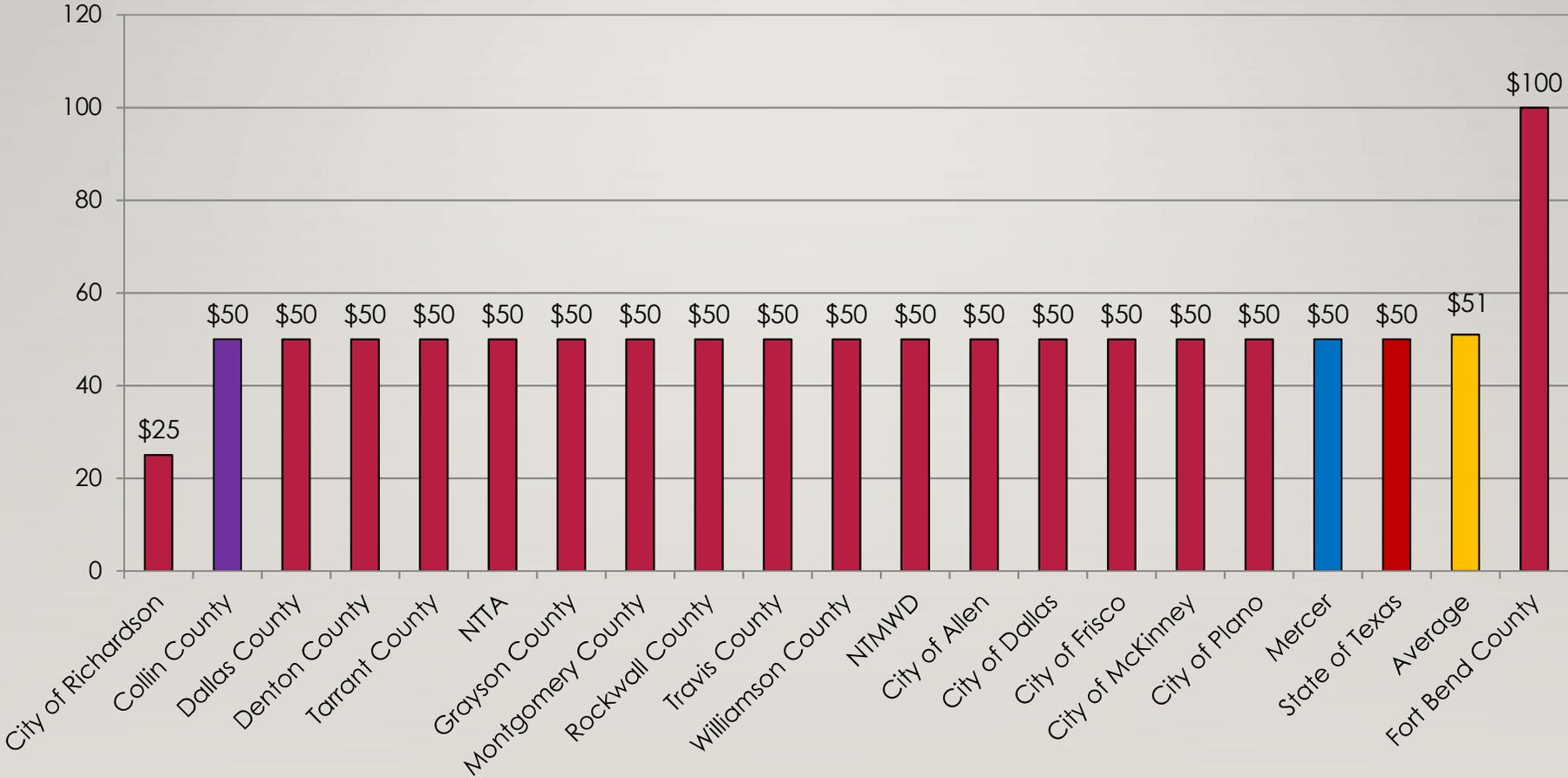
Premium Medical Plan Co-Insurance % Paid – In-Network



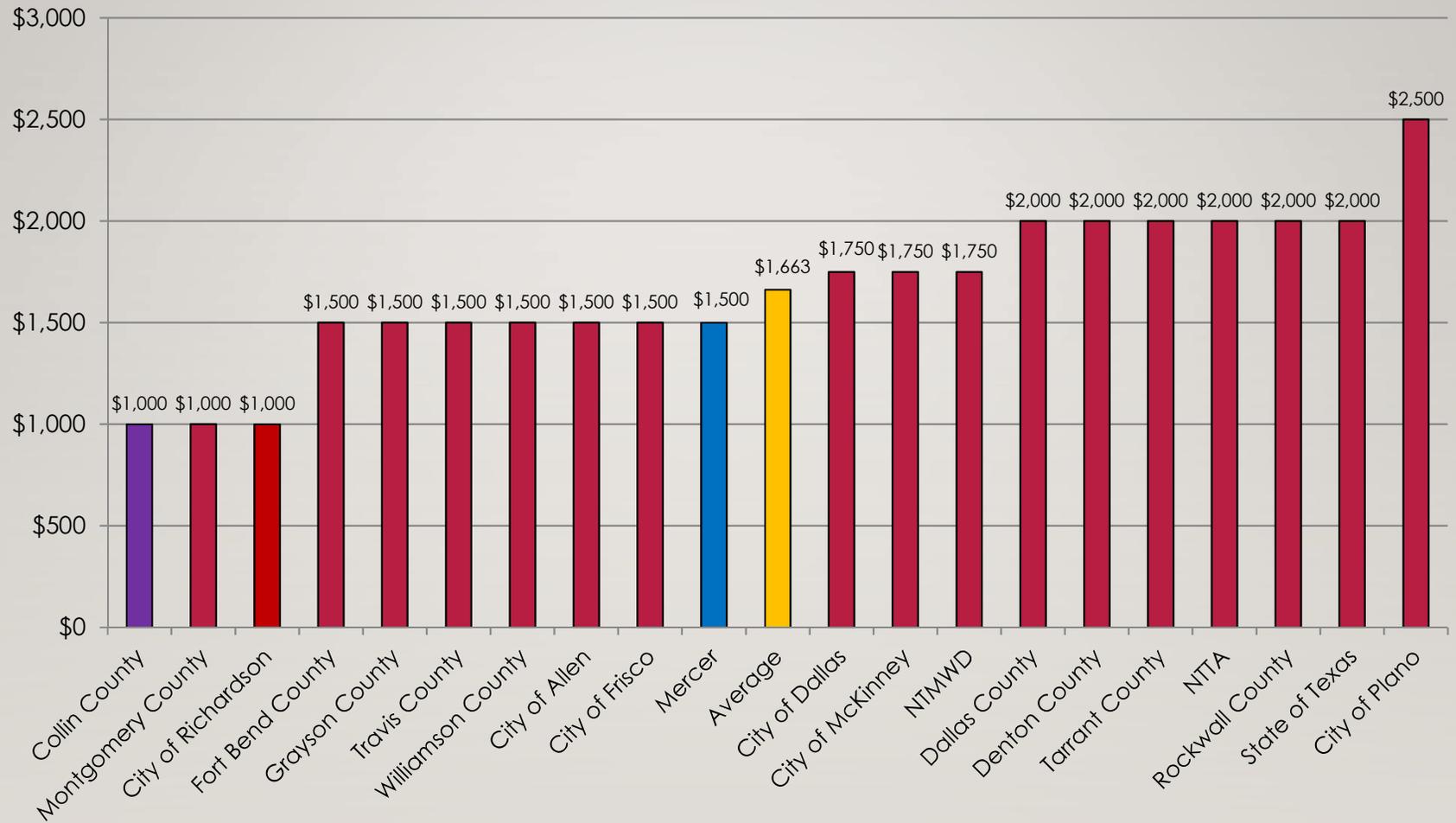
Dental Plan Benefit Comparison

- Our dental plan deductible of \$50 is consistent with our counterparts.
- Our dental plan maximum (\$1,000) is lower than the majority of our counterparts. 107 of 1,485 employees (7%) used the maximum level of benefits.

Dental Plan Deductibles

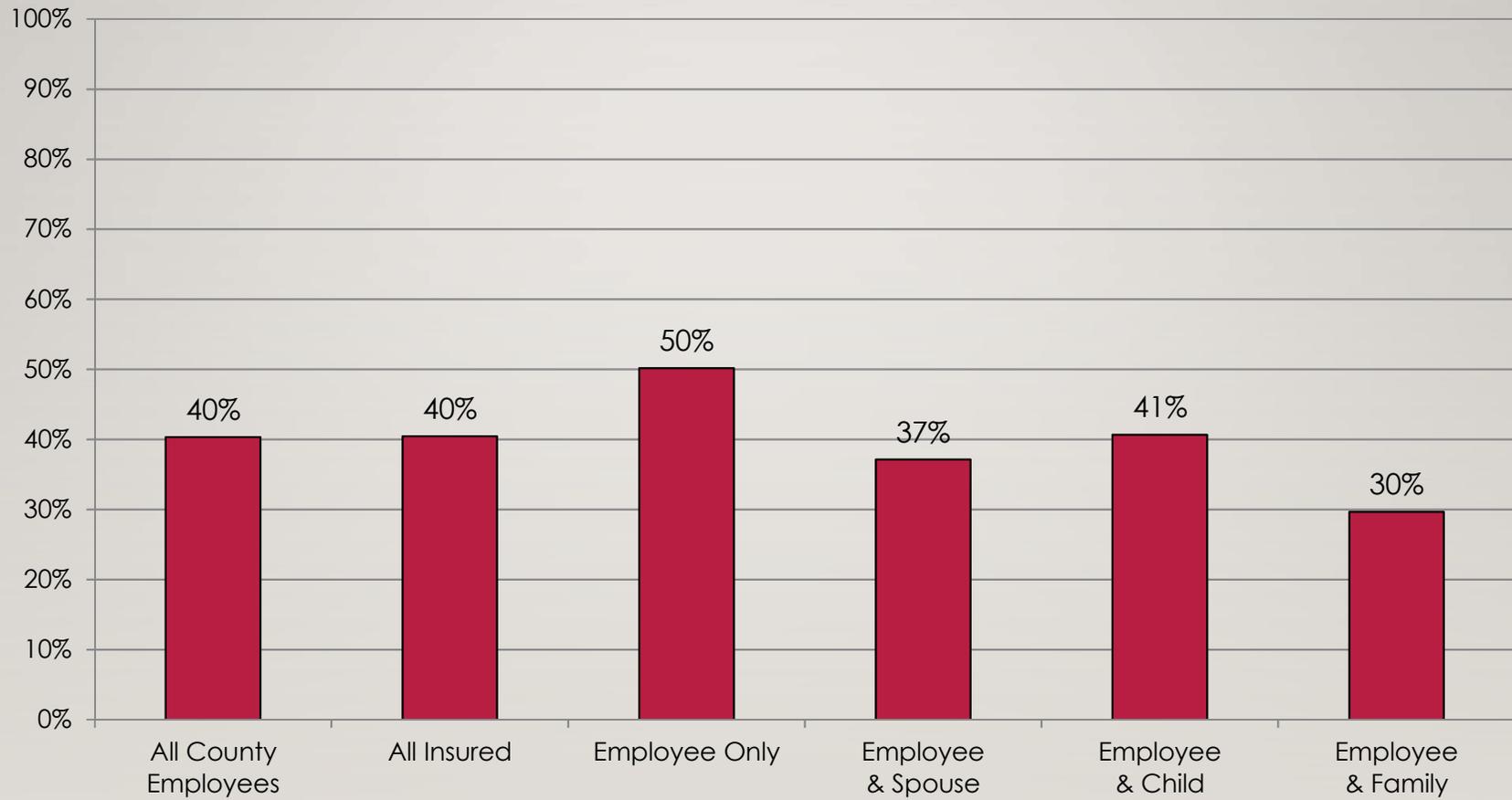


Dental Plan Maximums



MEDICAL AND DENTAL EMPLOYEE PREMIUM COMPARISONS

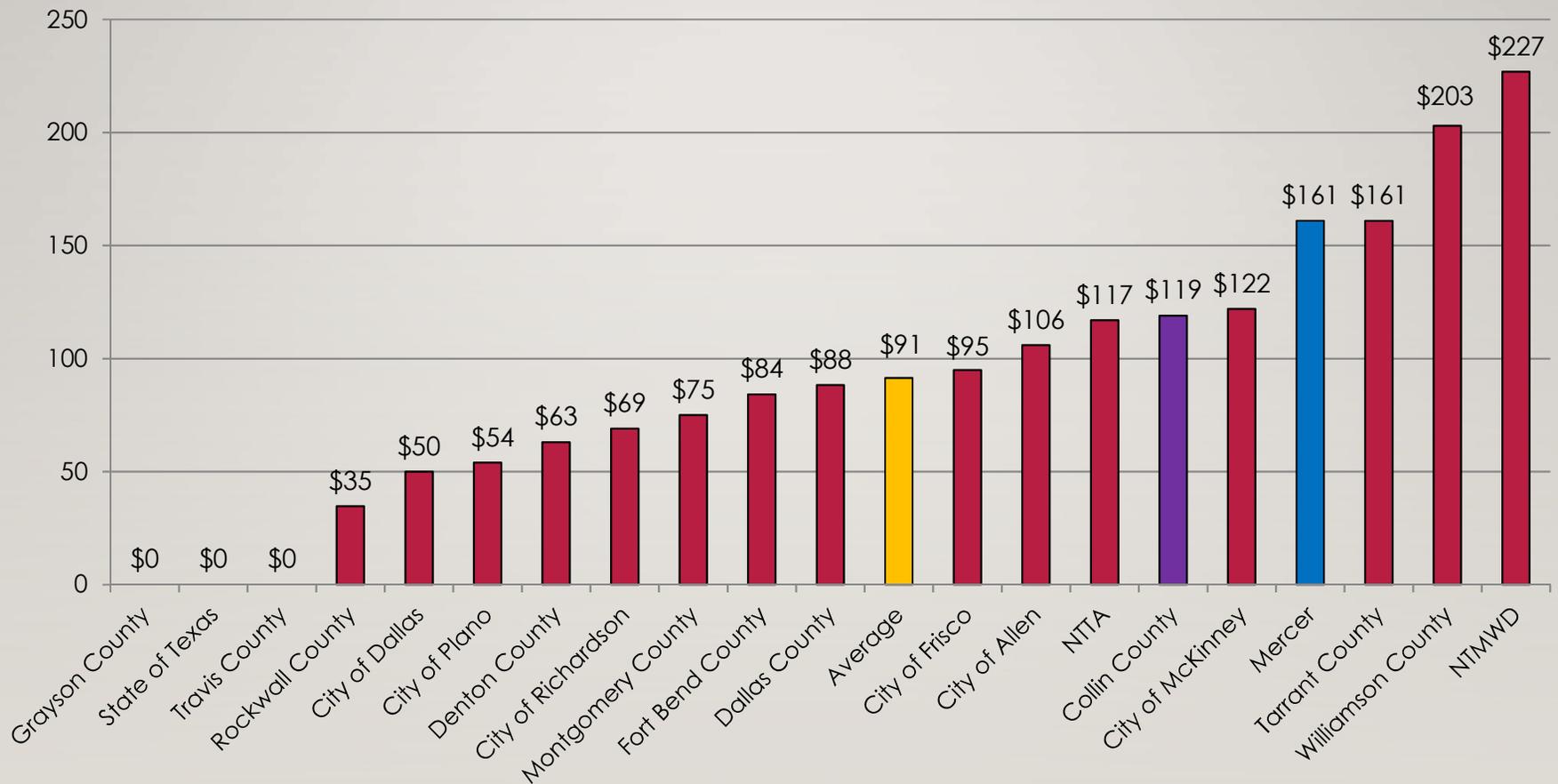
Percentage of Employees with Salaries Under \$50,000



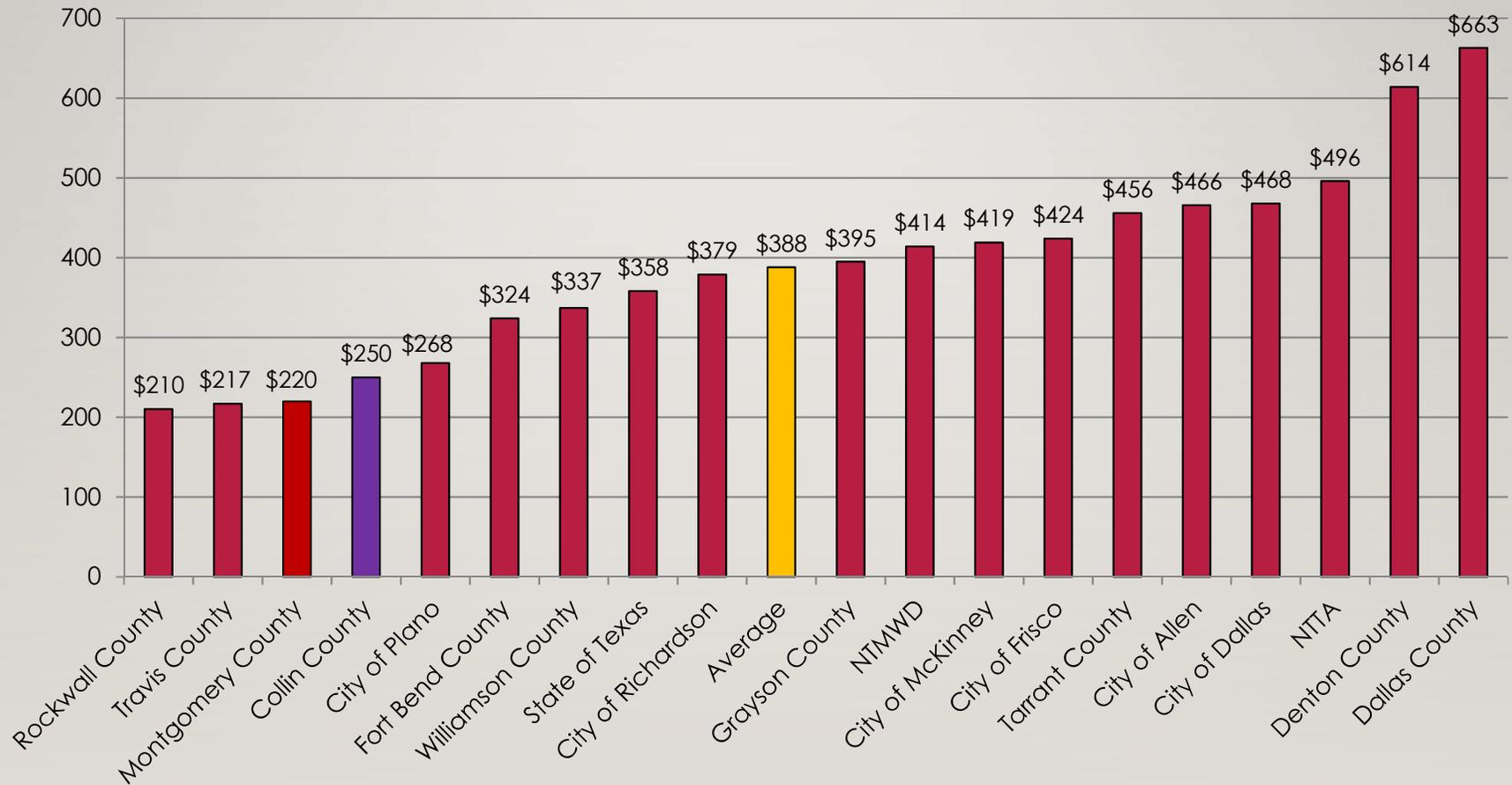
Medical Plan Employee Premium Comparison Summary

- Collin County's Employee Only contribution is above the average.
- Employee/Spouse and Employee/Family premiums are in the lowest quartile.
- Employee/Children premiums are in the second lowest quartile.

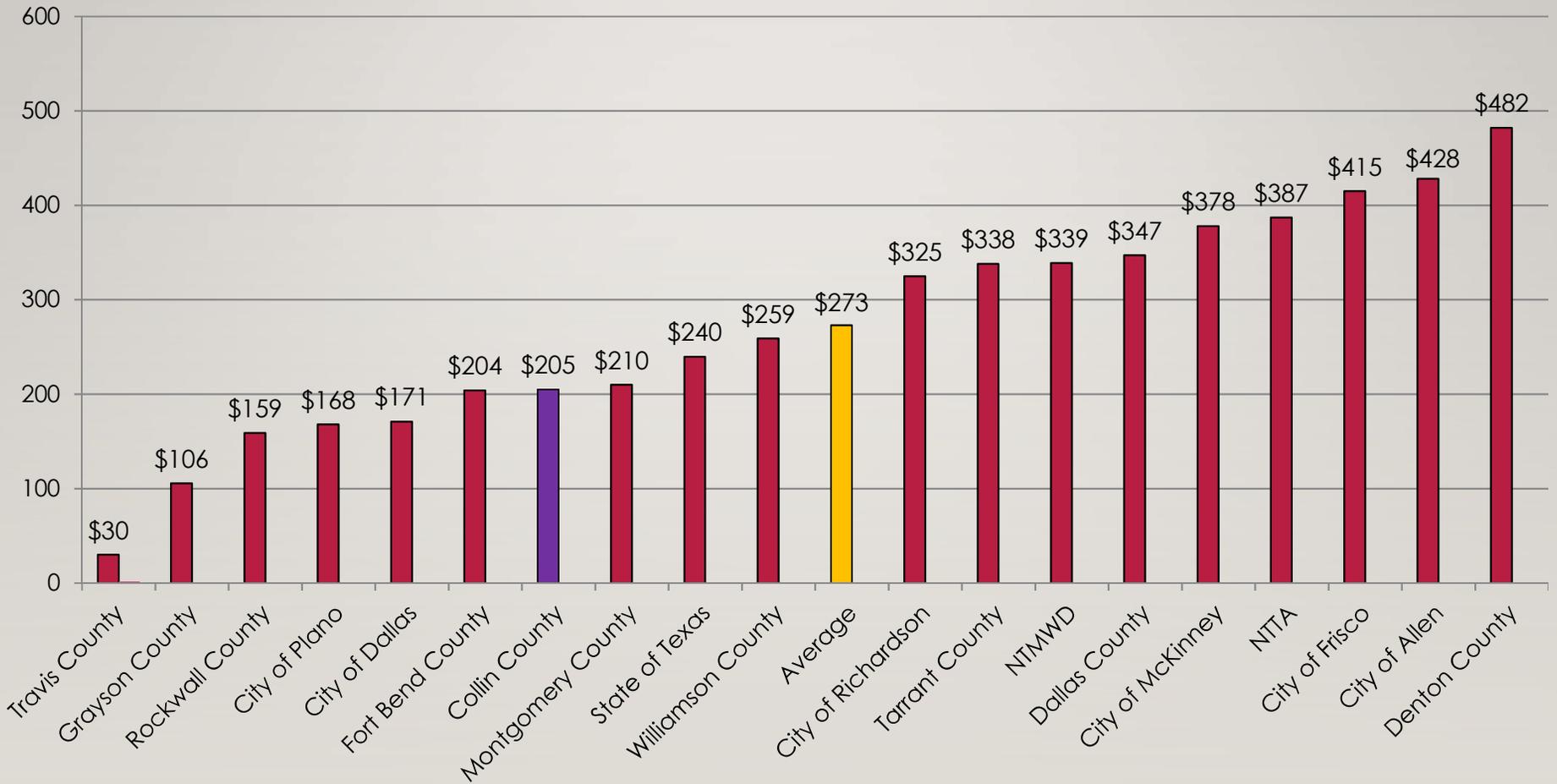
Premium Medical Plan Employee Only Coverage Cost/Month



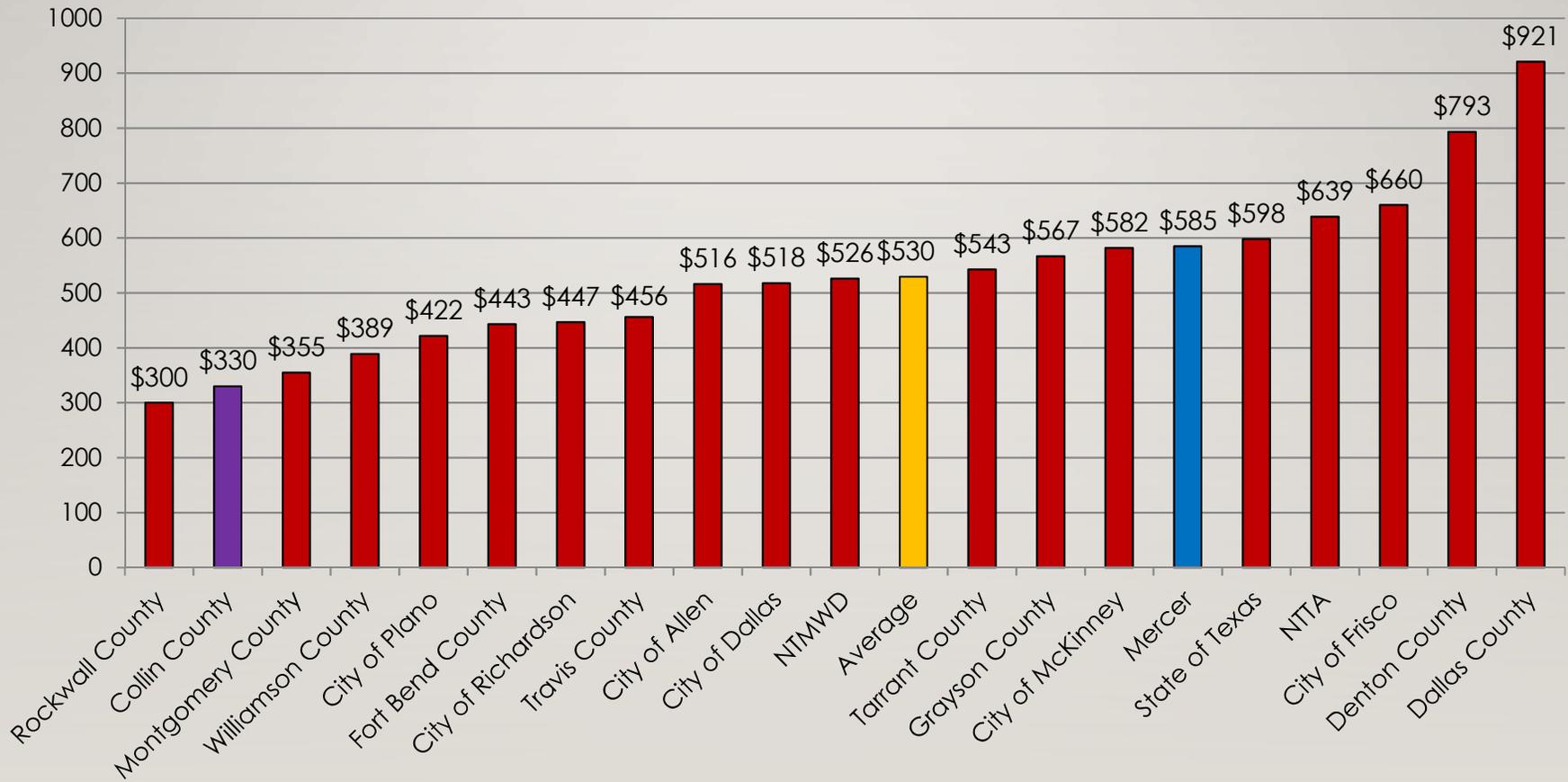
Premium Medical Plan Employee & Spouse Coverage Cost/Month



Premium Medical Plan Employee & Child(ren) Coverage Cost/Month



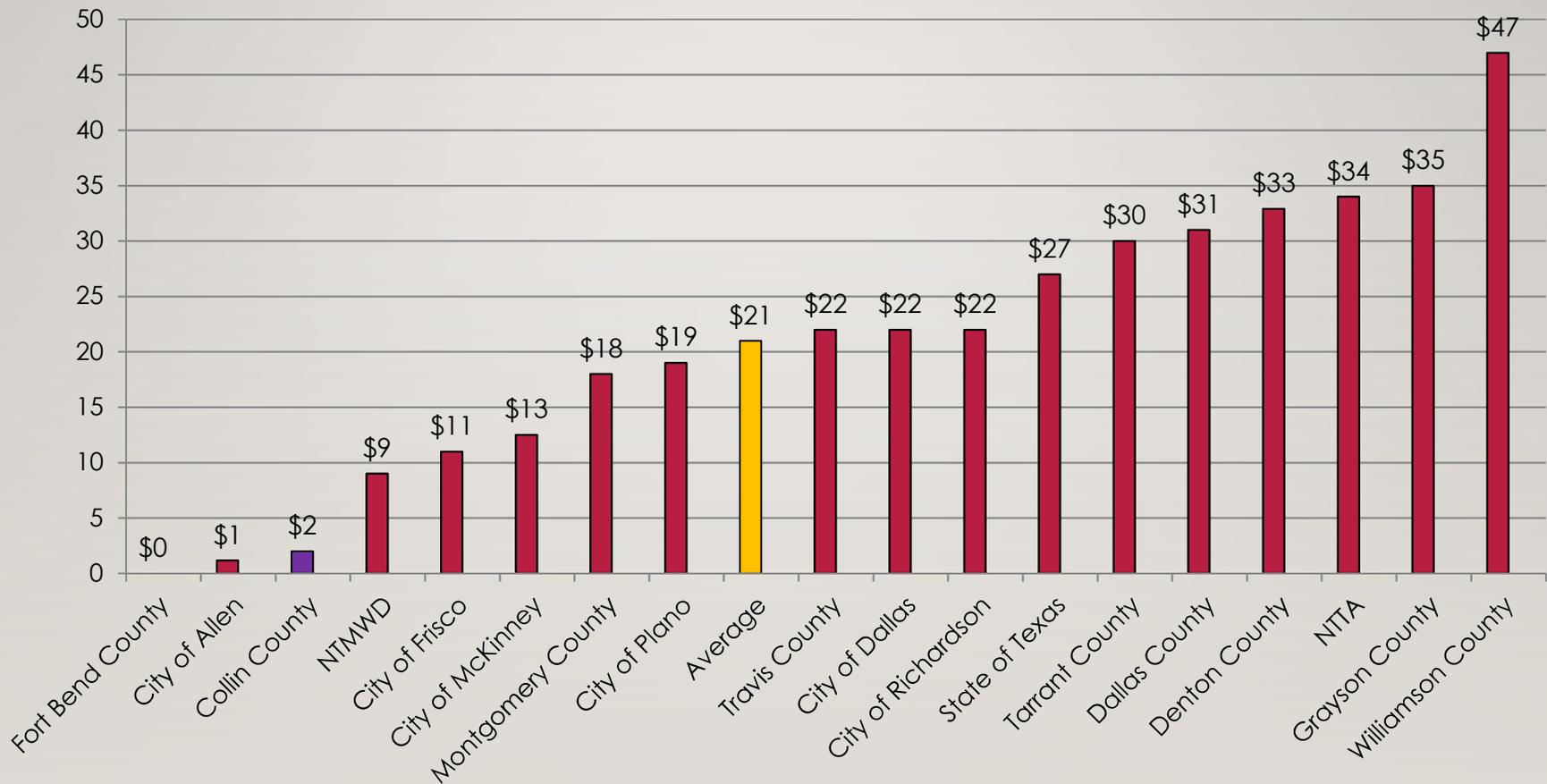
Premium Medical Plan Employee & Family Coverage Cost/Month



Dental Plan Employee Premium Comparison Summary

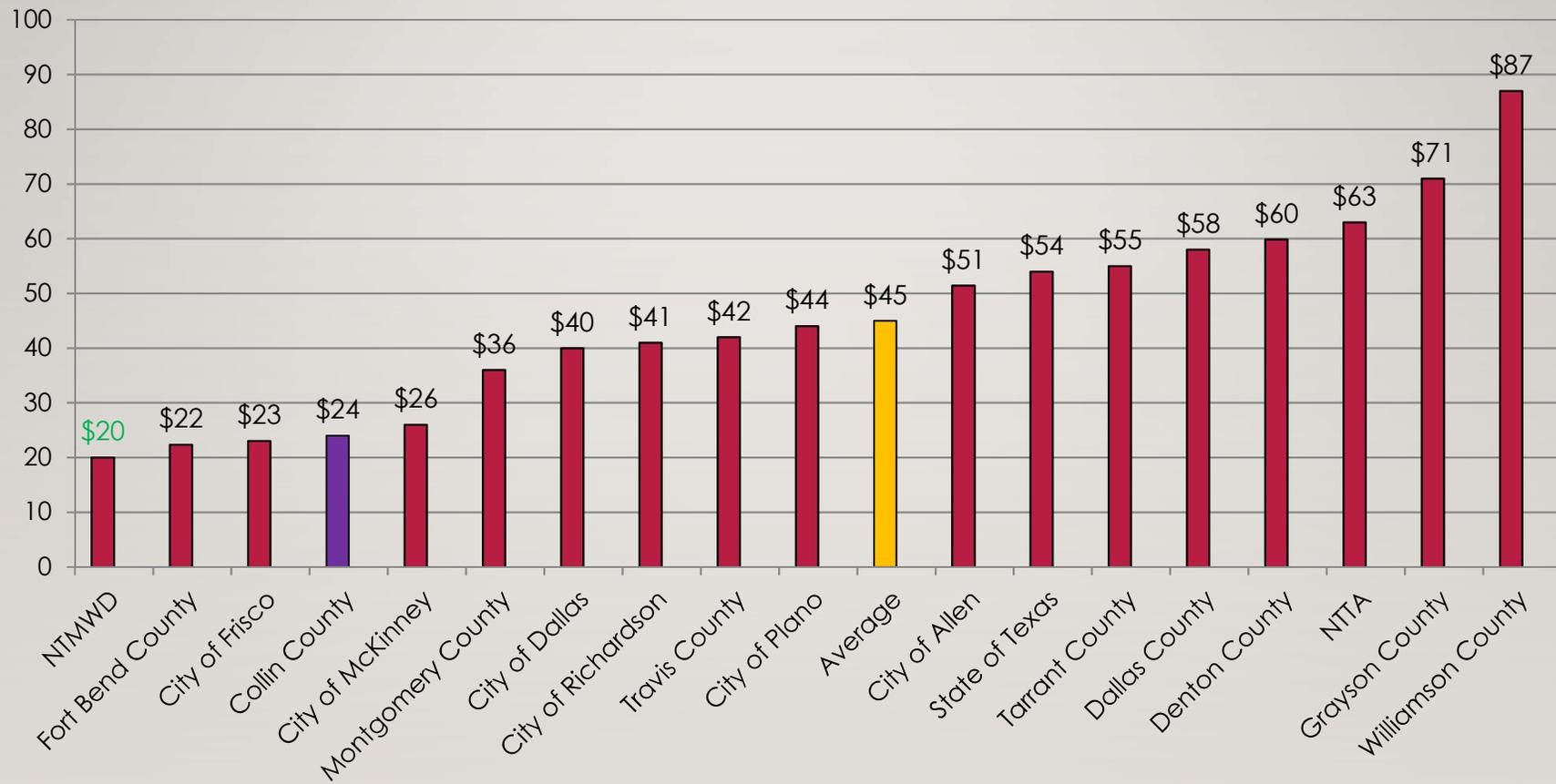
- Collin County is one of two surveyed entities with a 2-tier premium design. A majority of plans have a 4-tier premium design.
- Both premium tiers (employee only and employee & family) are in the lowest quartile for premium payment.

Dental Plan Employee Only Coverage Cost/Month



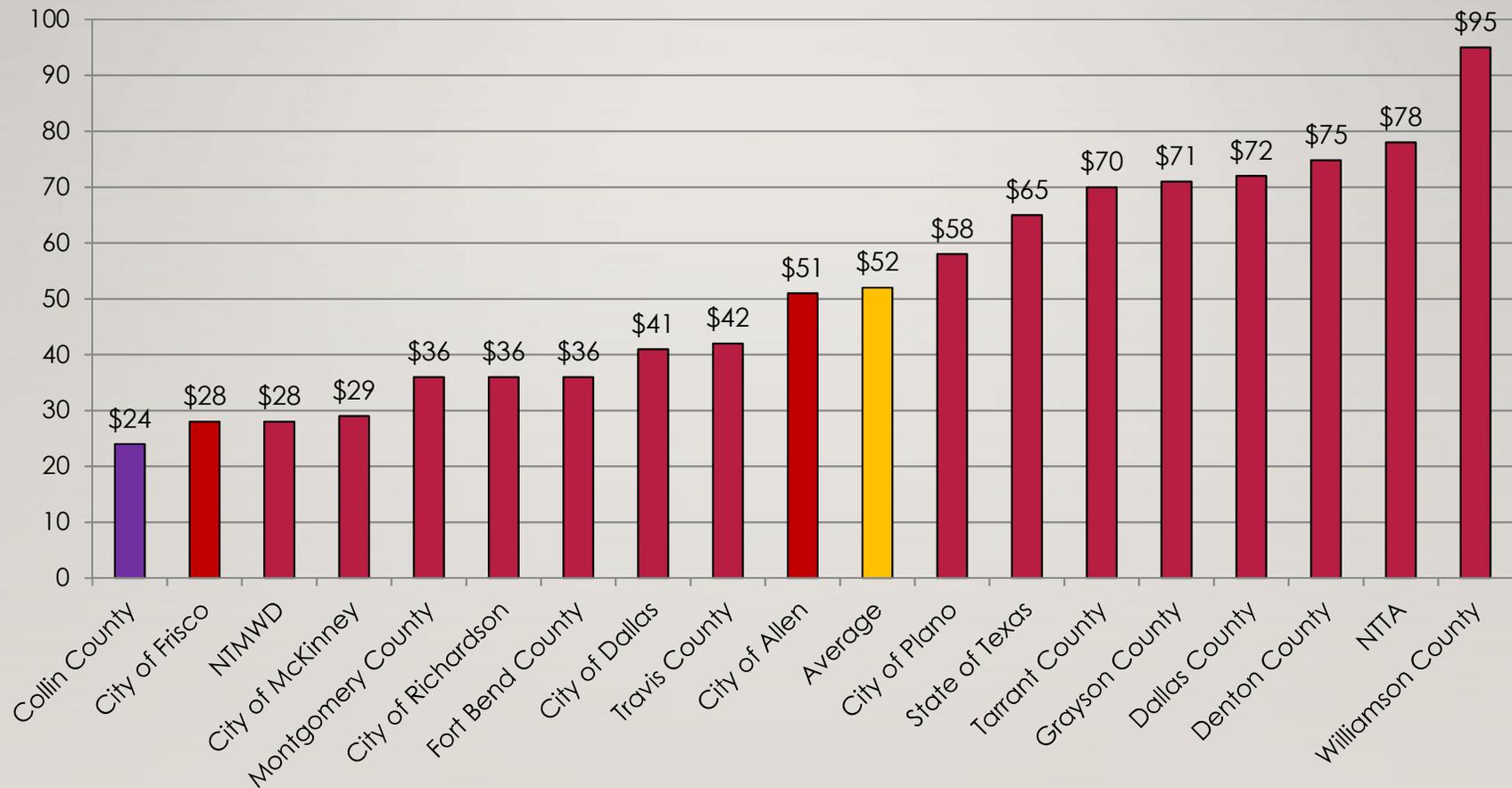
Dental Plan

Employee & Spouse Coverage Cost/Month

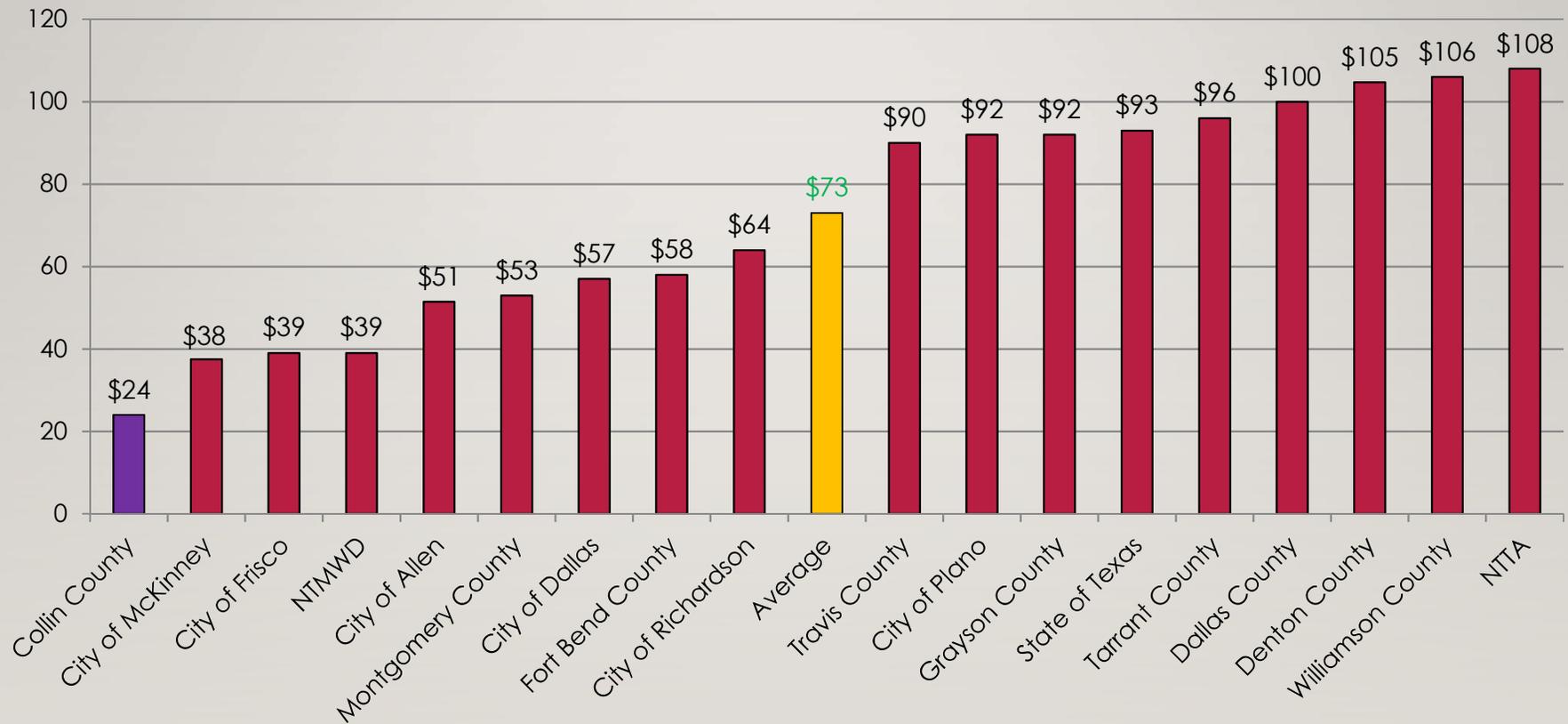


Dental Plan

Employee & Child(ren) Coverage Cost/Month



Dental Plan Employee & Family Coverage Cost/Month



MEDICAL PLAN PREMIUM
AND
ENROLLMENT INFORMATION

2019 Active Employee Monthly Insurance Plan Rates and Enrollment*

Medical Coverage Level	Advantage Premium Discount EE Cost	Advantage Standard Premium EE Cost	Advantage Premium Surcharge EE Cost	Advantage Plus Premium Discount EE Cost	Advantage Plus Standard Premium EE Cost	Advantage Plus Premium Surcharge EE Cost
EE Only	\$65 (113)	\$90 (69)	\$90 (76)	\$94 (211)	\$119 (31)	\$144 (52)
EE & Spouse	\$160 (29)	\$185 (12)	\$210 (21)	\$225 (97)	\$250 (10)	\$275 (33)
EE & Child(ren)	\$120 (66)	\$145 (14)	\$170 (18)	\$180 (134)	\$205 (9)	\$230 (27)
EE & Family	\$220 (90)	\$245 (17)	\$270 (55)	\$305 (189)	\$330 (17)	\$355 (70)
Total	298	112	170	631	67	182

*As of December 2019

Advantage Plan Premium History for Full Time Employees

Plan	Medical Coverage Level	2012	2013	2014	2015	2016	2017	2018	2019	2020
Advantage Premium Discount (Wellness Physical)	EE Only	\$0	\$82	\$65	\$65	\$65	\$65	\$65	\$65	\$65
	EE & Spouse	\$160	\$160	\$160	\$160	\$160	\$160	\$160	\$160	\$160
	EE & Child(ren)	\$120	\$120	\$120	\$120	\$120	\$120	\$120	\$120	\$120
	EE & Family	\$220	\$220	\$220	\$220	\$220	\$220	\$220	\$220	\$220
Advantage Standard Premium (New Hire)	EE Only	\$25	\$107	\$90	\$90	\$90	\$90	\$90	\$90	\$90
	EE & Spouse	\$185	\$185	\$185	\$185	\$185	\$185	\$185	\$185	\$185
	EE & Child(ren)	\$145	\$145	\$145	\$145	\$145	\$145	\$145	\$145	\$145
	EE & Family	\$245	\$245	\$245	\$245	\$245	\$245	\$245	\$245	\$245
Advantage Premium Surcharge (No Wellness Physical)	EE Only	\$50	\$132	\$90	\$90	\$90	\$90	\$90	\$90	\$90
	EE & Spouse	\$210	\$210	\$210	\$210	\$210	\$210	\$210	\$210	\$210
	EE & Child(ren)	\$170	\$170	\$170	\$170	\$170	\$170	\$170	\$170	\$170
	EE & Family	\$270	\$270	\$270	\$270	\$270	\$270	\$270	\$270	\$270

Advantage Plus Plan Premium History for Full Time Employees

Plan	Medical Coverage Level	2012	2013	2014	2015	2016	2017	2018	2019	2020
Advantage Plus Premium Discount (Wellness Physical)	EE Only	\$25	\$94	\$94	\$94	\$94	\$94	\$94	\$94	\$94
	EE & Spouse	\$225	\$225	\$225	\$225	\$225	\$225	\$225	\$225	\$225
	EE & Child(ren)	\$180	\$180	\$180	\$180	\$180	\$180	\$180	\$180	\$180
	EE & Family	\$305	\$305	\$305	\$305	\$305	\$305	\$305	\$305	\$305
Advantage Plus Standard Premium (New Hire)	EE Only	\$50	\$119	\$119	\$119	\$119	\$119	\$119	\$119	\$119
	EE & Spouse	\$250	\$250	\$250	\$250	\$250	\$250	\$250	\$250	\$250
	EE & Child(ren)	\$205	\$205	\$205	\$205	\$205	\$205	\$205	\$205	\$205
	EE & Family	\$330	\$330	\$330	\$330	\$330	\$330	\$330	\$330	\$330
Advantage Plus Premium Surcharge (No Wellness Physical)	EE Only	\$75	\$144	\$144	\$144	\$144	\$144	\$144	\$144	\$144
	EE & Spouse	\$275	\$275	\$275	\$275	\$275	\$275	\$275	\$275	\$275
	EE & Child(ren)	\$230	\$230	\$230	\$230	\$230	\$230	\$230	\$230	\$230
	EE & Family	\$355	\$355	\$355	\$355	\$355	\$355	\$355	\$355	\$355

ADDITIONAL INFORMATION



Plan Demographics*

	Advantage Medical Plan	Advantage Plus Medical Plan	Total
Total Enrolled	580	880	1460
Gender			
Male	317 (42%)	436 (58%)	753 (52%)
Female	263 (37%)	444 (63%)	707 (48%)
Salary Level			
Under \$50,000	305 (52%)	286 (48%)	591 (40%)
Over \$50,000	275 (32%)	594 (68%)	869 (60%)
Age			
30 and younger	164 (66%)	84 (34%)	248 (17%)
31 – 40	162 (52%)	152 (48%)	314 (21%)
41 – 50	132 (31%)	292 (69%)	424 (29%)
51 – 60	97 (28%)	249 (72%)	346 (24%)
61 +	25 (20%)	103 (80%)	128 (9%)

*As of December 2019

Employee Contribution Percentage Survey

	% Paid by Employee for Employee Coverage	% Paid by Employee for Employee & Spouse Coverage	% Paid by Employee for Employee & Child Coverage	% Paid by Employee for Family Coverage
City				
City of Allen	14%	27%	30%	22%
City of Dallas	9%	41%	17%	34%
City of Frisco	9%	21%	24%	27%
City of McKinney	16%	25%	25%	23%
City of Plano	10%	18%	16%	20%
City of Richardson	7%	27%	25%	30%
Average	11%	27%	23%	26%
County				
Collin County	10%	11%	10%	13%
Dallas County	10%	36%	23%	27%
Denton County	5%	27%	27%	27%
Fort Bend County	10%	29%	20%	34%
Grayson County	0%	25%	10%	29%
Montgomery County	7%	18%	17%	26%
Rockwall County	3%	10%	10%	11%
State of Texas	0%	26%	20%	31%
Tarrant County	17%	23%	23%	23%
Travis County	0%	14%	3%	19%
Williamson County	28%	18%	16%	14%
NTMWD	25%	25%	24%	24%
NTTA	12%	25%	25%	25%
Average	10%	22%	18%	23%
Private	25%			

Changes in Benefits

■ 2019 Changes

- Cancer Support Services (added 01/01/2019 no cost to the county)
- Pharmacy: Specialty medication must be filled through Briova
- TMJ: Removed lifetime maximum
- Infertility: Increased lifetime maximum to \$20,000
- Acupuncture: Allow 26 visits per year under Advantage Plus
- Chiropractic Visits: Allow 26 visits per year under Advantage Plus
- Lasik: Removed lifetime maximum limit
- Advantage Plus Vision: \$500 maximum on materials implemented
- Sleep Apnea: Remove lifetime limit and treat CPAP as durable medical equipment

■ 2020 Changes

- Pharmacy
 - 90-day retail option
 - Third month discount moved from mail order to retail
 - \$10 mailing fee added for mail order (effective 3/1/2020)

On-Site Nurse

- The Nurse Liaison engaged in 156 individual sessions. The top 3 activity types were:
 - Targeted Outreach
 - Individual Coaching
 - Claims Benefits Inquiry
- The Nurse Liaison primarily focused on UHC Resources & Tools, discharge Follow Up, General Health/Wellness and Medication Management/Review.
- The Nurse Liaison held 21 group sessions. Topics included:
 - Onsite Role Promotion
 - Health and Wellness Education
 - Benefits/UHC Clinical Program Education

Diabetes

- 1 out of 10 enrolled members are diabetic.
 - 339 enrolled members have diabetes.
 - 166 of those individuals have multiple risk factors including hypertension, high cholesterol, and heart disease.

- Diabetes with complications
 - Number of claimants has increased 9%.
 - Claims paid per member per month has decreased 29%. We are 59% lower than our peers.

- Diabetes without complications
 - Number of claimants has increased 1%.
 - Claims paid per member per month has decreased 10% and is 17% lower than peers.

2019 Trends

- Medical net paid per member per month decreased 14%.
 - Although there was a 5% increase in the average length of hospital stay, admissions decreased by 26%.
 - Outpatient surgeries only decreased by 2%, but the net paid per surgery decreased by 9%.
- Catastrophic cases decreased in frequency and severity.
 - 13% decrease in number of cases.
 - Almost 28% decrease in plan cost.
 - Represent 2% of all claimants and 42% of total medical costs.
- Chronic conditions contributed to the trend.
 - Although the net paid per member month for circulatory conditions increased 56% and digestive conditions increase 38%, the other top ten categories experienced decreases.
 - Most notable, the net paid per member per month decreased for the following conditions:
 - Cancer –decreased 42%
 - Musculoskeletal –decreased 32%
 - Injuries and Poisonings –decreased 42%

Retiree Insurance

- Employers are required to report employer contributions to retiree benefits on their CAFR as a liability due to GASB rules.
- Retiree costs increased from 2018 to 2019 by an average of 151%.
- Collin County charges the actuarial cost for all retirees that elected coverage after 05/31/2010.
 - Retiree insurance costs are based on retirees claim experience only.
 - There is an adverse impact, because the only employees taking the insurance are those that have a greater need for the coverage.

Monthly Premium	Employee Only	Employee/ Spouse	Employee/ Child(ren)	Employee/ Family
2019	\$18,124.66	\$36,249.18	\$32,624.12	\$42,593.00
2018	\$7,208.87	\$14,417.68	\$12,975.85	\$16,940.86

- In 2019, there were no new enrollments in retiree medical coverage.
 - A total of one retiree was enrolled in medical insurance as of 12/1/2019.

AFFORDABLE CARE ACT

Affordable Care Act

- Collin County's Advantage plan meets affordability and coverage requirements; must re-evaluate annually.
 - A plan is considered affordable if employee costs are less than \$101.79 a month. The Advantage plan is currently \$90 a month.
 - Minimum coverage requires a plan to cover 60% of health care costs. The Advantage plan covers 80% of health care costs.
- In-network deductibles and co-pays, and prescription costs apply to annual out-of-pocket expense limits.
- Benefit changes including:
 - Add additional dependents – children to age 26
 - No waiting period longer than 90 days
 - Coverage of essential benefits
 - First dollar coverage of preventive care benefits (no cost sharing)
 - Regulated appeals process
 - Complying with ACA definition of full-time employee
 - No lifetime maximum
 - Limitation on retroactively stopping coverage
 - In-network deductibles, co-pays, and prescription costs apply to out-of-pocket maximum
 - Cover certain clinical trials
- Additional reporting requirements including employee communication and extensive W-2 requirements.

Affordable Care Act

- Additional Fees
 - PCORI – \$2.45 per covered member fee for 2019. Payment will be made in July 2020 for \$6,573.35. This fee was set to be discontinued as of 2019. The SECURE Act was passed on 12/20/2019 extending the fee for 10 years.
- Cadillac Tax: Implementation was set for 2022, but has since been repealed. It no longer exists and will never take effect.
- 1094/1095 IRS Tax Forms
 - Forms mailed to employees; transmitted to IRS.
 - CSCD employees, whose medical benefits are provided through ERS, are included in Collin County's IRS transmittals.
 - State (ERS) distributes the 1095-b (shows medical coverage).
 - Collin County distributes the 1095-c (shows coverage was offered).
 - State does not provide information to us.
 - Subject to penalties of up to \$270 per return with a maximum penalty of \$3,275,500.

WELLNESS

Wellness

- To receive the \$200 wellness payment and the \$25 monthly insurance discount, eligible employee's must complete:
 - Annual physical
 - Cholesterol screening
 - Well man/woman examination
 - Physician-identified body mass index (BMI) information
 - The UHC online health assessment
- Our wellness program is currently ACA and HIPAA compliant as it is participatory, not contingent upon achieving a particular health status, and incentives are below the maximum allowable threshold.
- Per UnitedHealthcare, Collin County had one of the highest wellness utilization of their book of business.

2019 BMI Statistics

Category	BMI	Employee		Spouse		Total	
		Counts	% of Total	Counts	% of Total	Counts	% of Total
Underweight	Below 18.5	4	.4%	3	0.6%	7	0.4%
Normal	18.5 - 24.9	192	17%	88	18%	280	18%
Overweight	25.0 - 29.9	348	31%	166	35%	514	32%
Obese	30+	566	51%	222	46%	788	50%
Total		1110		479		1589	

Collin County, Texas, and U.S. BMI Comparison

Category	BMI	U.S. 2018	Texas 2018	Collin County 2019	Difference U.S.	Difference Texas
Underweight	Below 18.5	2%	1%	0.4%	-1.6%	-0.6%
Normal	18.5 - 24.9	32%	29%	18%	-14%	-11%
Overweight	25.0 - 29.9	35%	35%	32%	-3%	-3%
Obese	30+	31%	35%	50%	19%	15%

CHANGES FOR CONSIDERATIONS

Medical Plan Design Considerations

- \$15 co-pay for mental health office visits for both in-network and out-of-network for Advantage and Advantage Plus

Pharmacy Considerations

- Add a \$100 deductible for prescriptions. Prescriptions less than \$100 will not be subject to the deductible.
- Remove the third-month discount from 90-day retail prescriptions.