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On February 27, 2019, the school board approved AETNA to continue as the health care provider for the 2019-20 benefit plan year. Comal ISD continues to be fully insured under AETNA and the new plans are NOT part of the TRS Active Care system.

ARE THERE CHANGES TO THE HEALTH PLANS?

Plan designs will remain the same with the exception of Emergency Room Copays and Coinsurance. Copays for ER visits will increase to \$300 and the co-insurance will match the plan design. During the first three months of the 2018-19 Benefit Year, 10% of medical costs were due to Emergency Room Visits.

TWO NETWORK OPTIONS WILL CONTINUE TO BE OFFERED:

Aetna Whole Health (Baptist ACO) – A regional network in the Baptist Health System. MedFirst and HealthTexas Primary Care Clinics, Resolute Hospital in New Braunfels and Baptist Hospital, North Central Baptist, North East Baptist, Mission Baptist are in the network. A growing group of primary care physicians, specialists and other facilities are in the network throughout San Antonio and New Braunfels.

Elect Choice – A broad network which closely mirrors other carriers. A national choice of hospitals, clinics, physicians, pharmacies, and other providers.

ARE PREMIUMS INCREASING FOR 2019-20?

Premium increases range from 0% to 8.5% overall. Nationwide, premiums are continuing to increase annually on an average of 9-10% per year. An effort was made to keep the increase as low as possible for the highest percentage of employees possible. Over 60% of employees will see a 0-1% increase in their premiums for next year. The most popular plan, The Low EPO on the Elect Choice network has a 1% overall increase. This will result in a \$5 - \$15 dollar per month change in premium, depending on the coverage choice - Employee Only, Employee/Spouse, Employee/Children or Employee/Family.

WHY ARE PREMIUMS LOWER FOR THE BAPTIST HEALTH SYSTEM (ACO) PLANS?

Aetna is continuing to help us find ways to lower the cost of care to our employees. The Aetna Whole Health System is a team approach of doctors, specialists and hospitals ready to coordinate your care. The focus is to stay on top of your health care, head off problems before they occur and save you money. The coverage area includes Bexar, Kendall, Comal and Guadalupe counties and offers a range primary care, urgent care, pediatricians, OB/GYN and hospitals to meet your needs.

Plan Designs (ER change only):

❖ **EPO LOW PLAN (Elect Choice or Aetna Whole Health Network)**

- ❖ Calendar Year deductible \$4500/\$9000
- ❖ Coinsurance responsibility 30%
- ❖ Out of Pocket Maximum \$6600/\$13200
- ❖ \$30 PCP Copay/\$60 Specialist Copay/Urgent Copay \$75
- ❖ ER Co-Pay \$300 Co-pay+30% of the cost not to exceed plan out of pocket maximum
- ❖ \$15/\$45/\$80 Pharmacy Copays

❖ **EPO MID PLAN**

- ❖ Calendar Year deductible \$3000/\$6000
- ❖ Coinsurance responsibility 30%
- ❖ Out of Pocket Maximum \$5000/\$10000
- ❖ \$30 PCP Copay/\$60 Specialist Copay/Urgent Co-Pay \$75
- ❖ ER Co-Pay \$300 Co-pay+30% of the cost not to exceed plan out of pocket maximum
- ❖ \$15/\$45/\$80 Pharmacy Copays

❖ **PPO HIGH PLAN**

- ❖ Calendar Year deductible \$1500/\$3000
- ❖ Coinsurance responsibility 20%
- ❖ Out of Pocket Maximum \$4000/\$8000
- ❖ \$30 PCP Copay/\$60 Specialist Copay/Urgent Co-Pay \$75
- ❖ ER Co-Pay \$300 Co-pay+20% of the cost not to exceed plan out of pocket maximum
- ❖ \$15/\$45/\$80 Pharmacy Copays

❖ **EPO HD/H S A PLAN (Elect Choice or Aetna Whole Health Network)**

- ❖ Calendar Year deductible \$5000/\$10000
- ❖ Co-insurance Responsibility 100%
- ❖ Out of Pocket Maximum \$6000/\$12000
- ❖ ER Visits are subject to the deductible

❖ **ADVANTAGE CARE PLAN (Elect Choice or Aetna Whole Health Network)**

- ❖ Calendar Year deductible \$2000/\$4000
- ❖ Coinsurance responsibility 50%
- ❖ Out of Pocket Maximum \$6500/\$13000
- ❖ ER Co-Pay \$300 + 50% of the cost not to exceed plan out of pocket maximum
- ❖ \$0 PCP Copay/ \$90 Specialist Copay/\$50 Urgent Copay
- ❖ \$5/\$50/\$100/\$250 Pharmacy Copays

EPO – Exclusive Provider Organization
PPO – Preferred Provider Organization
ACO – Accountable Care Organization

**WHAT ARE THE PROPOSED CHANGES IN MONTHLY PREMIUMS FOR THE
AETNA WHOLE HEALTH - BAPTIST HEALTH SYSTEM (ACO) NETWORK 2019-
2020?**

ACO LOW	CURRENT RATE		19-20 RATE – 1% OVERALL	
	TOTAL PREMIUM	EMPLOYEE PAYS	TOTAL PREMIUM	EMPLOYEE PAYS
EMPLOYEE ONLY	\$520.00	\$130.00	\$525.00	\$135.00
EMPLOYEE/SPOUSE	\$1163.00	\$773.00	\$1175.00	\$785.00
EMPLOYEE/CHILDREN	\$787.00	\$397.00	\$795.00	\$405.00
FAMILY	\$1424.00	\$1034.00	\$1438.00	\$1048.00

ACO ADVANTAGE	CURRENT RATE		19-20 RATE – 1% OVERALL	
	TOTAL PREMIUM	EMPLOYEE PAYS	TOTAL PREMIUM	EMPLOYEE PAYS
EMPLOYEE ONLY	\$501.00	\$111.00	\$506.00	\$116.00
EMPLOYEE/SPOUSE	\$1121.00	\$731.00	\$1132.00	\$742.00
EMPLOYEE/CHILDREN	\$759.00	\$369.00	\$767.00	\$377.00
FAMILY	\$1373.00	\$983.00	\$1387.00	\$997.00

ACO HDHP	CURRENT RATE		19-20 RATE – 0% OVERALL	
	TOTAL PREMIUM	EMPLOYEE PAYS	TOTAL PREMIUM	EMPLOYEE PAYS
EMPLOYEE ONLY	\$461.00	\$71.00	\$461.00	\$71.00
EMPLOYEE/SPOUSE	\$1028.00	\$638.00	\$1028.00	\$638.00
EMPLOYEE/CHILDREN	\$699.00	\$309.00	\$699.00	\$309.00
FAMILY	\$1259.00	\$869.00	\$1259.00	\$869.00

**Comal ISD pays \$390.00 per month per employee on the health plan. Total premium minus \$390.00 equals premium paid by the employee.

WHAT ARE THE PROPOSED CHANGES IN MONTHLY PREMIUMS FOR THE ELECT CHOICE NETWORK 2019-2020?

LOW	CURRENT RATE		19-20 RATE – 1% OVERALL	
	TOTAL PREMIUM	EMPLOYEE PAYS	TOTAL PREMIUM	EMPLOYEE PAYS
EMPLOYEE ONLY	\$551.00	\$161.00	\$557.00	\$167.00
EMPLOYEE/SPOUSE	\$1232.00	\$842.00	\$1244.00	\$854.00
EMPLOYEE/CHILDREN	\$834.00	\$444.00	\$842.00	\$452.00
FAMILY	\$1508.00	\$1118.00	\$1523.00	\$1133.00

MID	CURRENT RATE		19-20 RATE – 8.5% OVERALL	
	TOTAL PREMIUM	EMPLOYEE PAYS	TOTAL PREMIUM	EMPLOYEE PAYS
EMPLOYEE ONLY	\$607.00	\$217.00	\$659.00	\$269.00
EMPLOYEE/SPOUSE	\$1357.00	\$967.00	\$1472.00	\$1082.00
EMPLOYEE/CHILDREN	\$919.00	\$529.00	\$997.00	\$607.00
FAMILY	\$1661.00	\$1271.00	\$1802.00	\$1412.00

HIGH	CURRENT RATE		19-20 RATE – 8.5% OVERALL	
	TOTAL PREMIUM	EMPLOYEE PAYS	TOTAL PREMIUM	EMPLOYEE PAYS
EMPLOYEE ONLY	\$703.00	\$313.00	\$763.00	\$373.00
EMPLOYEE/SPOUSE	\$1573.00	\$1183.00	\$1707.00	\$1317.00
EMPLOYEE/CHILDREN	\$1065.00	\$675.00	\$1156.00	\$766.00
FAMILY	\$1925.00	\$1535.00	\$2089.00	\$1699.00

ADVANTAGE	CURRENT RATE		19-20 RATE – 8.5% OVERALL	
	TOTAL PREMIUM	EMPLOYEE PAYS	TOTAL PREMIUM	EMPLOYEE PAYS
EMPLOYEE ONLY	\$530.00	\$140.00	\$575.00	\$185.00
EMPLOYEE/SPOUSE	\$1188.00	\$798.00	\$1289.00	\$899.00
EMPLOYEE/CHILDREN	\$804.00	\$414.00	\$872.00	\$482.00
FAMILY	\$1454.00	\$1064.00	\$1578.00	\$1188.00

HDHP	CURRENT RATE		19-20 RATE – 8.5% OVERALL	
	TOTAL PREMIUM	EMPLOYEE PAYS	TOTAL PREMIUM	EMPLOYEE PAYS
EMPLOYEE ONLY	\$488.00	\$98.00	\$529.00	\$139.00
EMPLOYEE/SPOUSE	\$1089.00	\$699.00	\$1182.00	\$792.00
EMPLOYEE/CHILDREN	\$740.00	\$350.00	\$803.00	\$413.00
FAMILY	\$1334.00	\$944.00	\$1447.00	\$1057.00

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WHAT ARE NEAR-SITE CLINICS AND WHO CAN USE THEM?

Any member of the Comal ISD health insurance plan, regardless of network choice, may take advantage of a Near-Site Clinic system. Routine Office Copays are \$5 and they have made a commitment to make same or next-day appointments for those needing care due to an acute illness. HealthTexas and MedFirst Clinics across San Antonio and New Braunfels are part of this Near-Site Clinic system. For location information, see the Benefits page of the Comal ISD website.

WHAT IS TELADOC?

Teladoc is access to non-emergency care that makes life a little bit easier. Through Teladoc you can connect with a licensed doctor by phone or video, skipping long waits and lines you'd experience at an ER or Urgent Care Center and bypass the hefty medical bills you might receive for going to an ER for a non-emergency. Copays are \$40. Common treatments that Teladoc can help with are Respiratory Infections, Allergies, Bronchitis, Cold and Flu symptoms, Skin problems and Sinus problems. **It is highly recommended that you go ahead and set up your Teladoc account in advance which will save you time if you do have to call or log-in due to an illness.**

ARE OFFICE CO-PAYS INCREASING FOR PRIMARY CARE AND/OR SPECIALIST VISITS ON THE EPO LOW, EPO MID, AND/OR HIGH PPO PLANS?

They will remain the same. Primary Physician: \$30 co-pay/\$0 co-pay for covered dependents under age 19. Specialist: \$60 co-pay. Dependent co-pay may need to be paid to some doctors, then reimbursed through the claims process. Advantage Plan offers \$0 copay for Primary Care Physician, \$90 copay for Specialists

ARE OFFICE CO-PAYS INCREASING FOR URGENT CARE AND/OR ER VISITS ON THE EPO LOW, EPO MID, AND/OR HIGH PPO PLAN?

Urgent Care Visits will remain at \$75 per visit. Emergency Room Copays are increasing to \$300 + coinsurance to match the plan, not to exceed the annual out of pocket maximum. The Advantage Plan offers Urgent Care Visits for \$50 copay.

ARE THE DEDUCTIBLES CHANGING ON THE CURRENT PLANS?

There is no increase to the deductibles. The deductibles still run on the calendar year: January 1 through December 31.

ARE PRESCRIPTION CO-PAYS INCREASING ON THE CURRENT PLANS?

The prescription co-pays will remain \$15/\$45/\$80 on the Low/Mid/High Plans.

The Advantage plan offers a different plan for prescriptions. There is a 4 Tier drug plan as opposed to a 3 Tier plan. Drugs are \$5/\$50/\$100/\$250. Tier 4 drugs are Specialty drugs and not available with 90-day mail order.

IS PREVENTIVE CARE STILL COVERED AT 100%?

Yes. Wellness visits and preventive care is still covered at 100% on all plans.

HOW DO I SEARCH FOR A PROVIDER?

You can search online at www.docfind.com. To search for a provider in the AETNA Whole Health Plans, chose (TX) Aetna Whole Health – Baptist Health System & Health Texas Medical Group – Elect Choice. To search for a provider in the Aetna Elect Choice Plan, look under Aetna Open Access Plans and choose Elect Choice EPO (Open Access) .

Once an employee creates a log in with the AETNA Navigator tool, DocFind services will be tailored to the employee’s plan selection. When searching for a Pharmacy, use the AETNA National Pharmacy Network. All plans have the same access to pharmacies in the AETNA system.

ARE THERE CHANGES TO THE DENTAL PLAN?

On February 27, 2019 the School Board approved the plan to continue with [Lincoln Financial as the Dental Insurance provider](#). It has been 4 years since Dental Insurance Premiums have had an increase. Due to rising costs the dental premiums will have an increase of 7.5% as reference below. Employees will experience a \$2 - \$9 increase per month depending on the plan choice.

	LOW DENTAL PLAN		HIGH DENTAL PLAN	
	CURRENT	RENEWAL	CURRENT	RENEWAL
EMPLOYEE ONLY	\$25.00	\$27.00	\$41.00	\$44.00
EMPLOYEE/SPOUSE	\$38.00	\$40.00	\$65.00	\$70.00
EMPLOYEE/CHILDREN	\$53.00	\$57.00	\$89.00	\$96.00
FAMILY	\$74.00	\$79.00	\$128.00	\$137.00

ARE THERE ANY CHANGES IN OUR OTHER BENEFITS?

There are no changes to the Superior Vision Plan, Lincoln Critical Illness, Allstate Cancer, The Standard Disability, Texas Life Permanent Insurance or Lincoln Financial Voluntary Term Life Insurance plans.

There is one major change to the Allstate Accident plan. [The Outpatient Physician’s benefit is changing to \\$50 per visit](#). Previously this benefit was \$100 per visit. The limits remain the same – 2 per person with a maximum of 4 per family.

WHAT CAN I DO TO SAVE MONEY AND MAKE SMART DECISIONS?

USE THE TOOLS AVAILABLE TO YOU ON THE AETNA NAVIGATOR WEBSITE

- ❖ Find plan details, like out-of-pocket costs and what's covered
- ❖ Chat with a virtual assistant to find a doctor, estimate costs, or ask questions about claims, ID cards and more.
- ❖ Get an ID card – print one out in seconds, or request a new one by mail.
- ❖ Enroll in RX Home Delivery mail order pharmacy
- ❖ Get help using medicine safely.
- ❖ Use AETNA Specialty Pharmacy medicine and support services if you take specialty medication for conditions like MS, RA or Cancer. Provides training on self-injections or coping with side effects or other issues.
- ❖ Find a nearby pharmacy or one while traveling.
- ❖ Use the cost estimator on the Price-A-Drug tool. Compare name-brands with generics.
- ❖ Try a TELE-DOC Visit. In many cases providers can diagnose and prescribe medications without you having to be physically present for an office visit.