# Coordination of Benefits (COB) State Analysis

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### Background

- Question: How do other states provide health benefits to retirees who are enrolled in Medicare?
  - What types of plans are offered?
  - What benefits are covered?
  - What are the premiums, and do states contribute toward costs?
- Methodology: Milliman completed an analysis of all 50 states using their proprietary data library for health plan benchmarking, the Milliman Atlas of Public Employer Health Plans
- Results: There is great variability in whether and how states supplement Medicare coverage for retirees
  - Washington is the only state that offers every plan type



## Plan Options for Retiree Health Coverage

- Employers have several options for offering health benefits to retirees who are enrolled in Medicare:
  - Medical
    - Coordination of coverage with original Medicare
    - Medicare Advantage (MA)
    - > Medicare Supplement
  - ▶ Pharmacy
    - Medicare Part D: standalone or integrated with medical
    - Standard drug coverage: integrated with medical; creditable or non-creditable



## Benefit Provisions & Premium Contribution Strategies

#### Benefits vary widely by state and by plan

- ► HMO vs. PPO
- ▶ Deductibles, out-of-pocket limits, cost-share (coinsurance and copays), visit limits, etc.
- Covered benefits
- Some states do not offer any plans to public retirees

### States vary widely in the amount of premium charged to public retirees

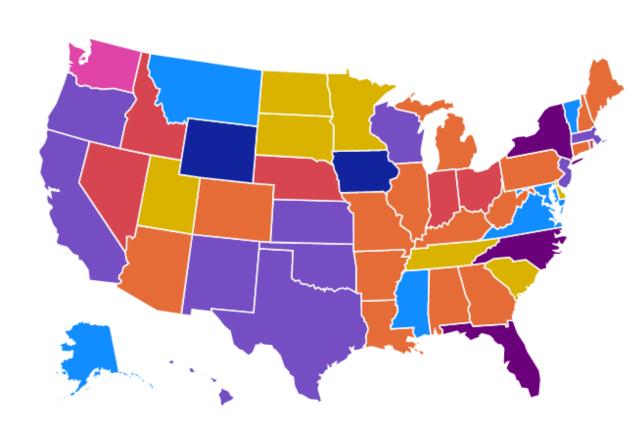
- ► Fixed dollar or fixed percentage, regardless of what plan a retiree selects most common (including Washington)
- Variable contribution amount based on years of service
- No contribution



### **Summary of Plan Options by State**

#### Plan Type

- Coordination 6
- Coordination + Medicare Supplement 2
- MA 15
- MA + Coordination 3
- MA + Coordination + Medicare Supplement 1
- MA + Medicare Supplement 10
- Medicare Supplement 7
- None 6





### Summary of Plan Options by State (cont.)

- Number of plans offered\*:
  - Average 4 plans
  - Range of 1 to 20 plans
    - More plans correlated with larger retiree population and/or regional availability
- Funding status
  - 20 states have only fully-insured plans (MA, Medicare Supplement)
  - ▶ 13 states have only self-insured plans (COB, Medicare Supplement)
  - ▶ 11 states have both fully-insured and self-insured plans
  - 6 states offer no plans for Medicare eligible retirees



<sup>\*</sup>Excludes 6 states that do not offer plans and grandfathered plans (i.e., plans that are not offered to new retirees)

# Summary of Premium Contributions by State

Total 2023 monthly premium by plan type (before employer contribution, if any)

	Medicare Advantage	Medicare Supplement	Coordination of Benefits
Median	\$200	\$411	\$462
Minimum	\$0	\$96	\$213*
Maximum	\$625	\$660	\$699

Total premiums unavailable for NY, PA and GA Benefit coverage levels vary significantly

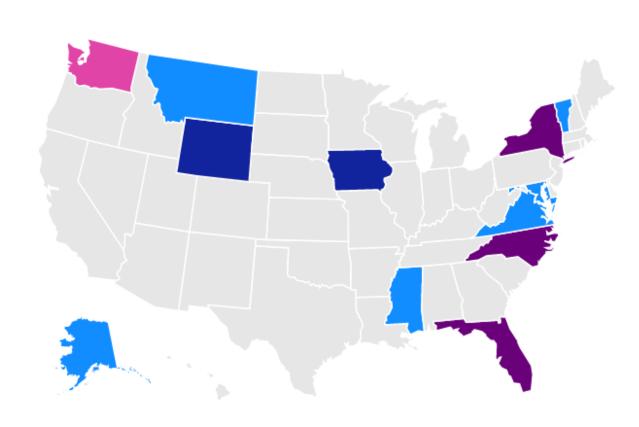
\*Lowest cost plan does not include prescription drug coverage



#### **States with Coordination Plan(s)**

#### Plan Type

- Coordination
- Coordination + Medicare Supplement
- MA
- MA + Coordination
- MA + Coordination + Medicare Supplement
- MA + Medicare Supplement
- Medicare Supplement
- None





#### **Types of Coordination Plans**

- There are several ways that plans can design COB provisions for retirees who have Medicare as primary
  - ► Carve-out: Benefits costs are determined based on total plan eligible charges assuming no Medicare payment, less the amount of Medicare payment
  - ▶ Maintenance of Benefits (MOB): Subtracts Medicare payments from total plan eligible charges, then applies the plan's benefit limits and cost-sharing provisions to the remaining charges
  - ► Coordination of Benefits (COB): Medicare is treated as primary carrier and plans pay all amounts not covered by Medicare up to the amount that would be paid in the absence of Medicare
    - Only 6 states have COB plans: Florida, Mississippi, Montana, Virginia, Washington, and Wyoming



### Types of Coordination Plans (cont.) Illustration

	Carvo out	Maintenance of	<b>Coordination of</b>
	Carve-out	Benefits	Benefits
Provider billed	\$200	\$200	\$200
Plan allowed amount	\$100	\$100	\$100
Plan normal benefit	\$85	\$85	\$85
Medicare pays	\$80	\$80	\$80
Plan pays	\$5	\$17	\$20
Member cost-share	\$15	\$3	<b>\$0</b>



### **COB Benefits Comparison**

	Medical	Pharmacy	Vision Hardware	Hearing aids	State Premium Contribution
Florida	СОВ	Standard	Offered separately	Not covered	No
Mississippi	СОВ	None	Offered separately	Not covered	No
Montana	СОВ	Part D	Offered separately	Not covered*	No
Virginia	СОВ	Part D	Offered separately	Included in medical**	No
Washington	СОВ	Standard	Included in medical	Included in medical	Yes
Wyoming	СОВ	Part D	Offered separately	Not covered	Yes

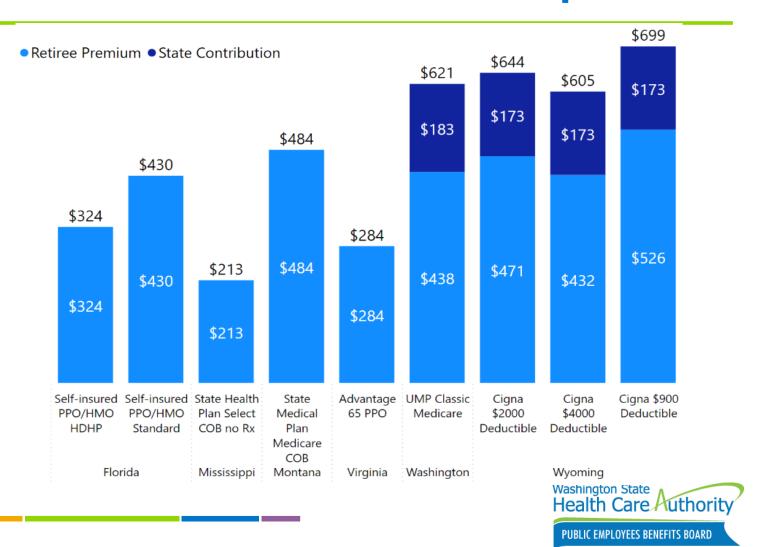
<sup>\*</sup>Hearing aids (for dependent children under age 19, and medically necessary cochlear implants, per medical policy)

Other covered services and benefit design features, including member cost-shares (deductibles, co-insurance/copay, out-of-pocket limits), are not easily comparable across states due to differences in COB provisions and plan administration.



<sup>\*\*\$40</sup> copayment for one hearing test every 48 months; up to \$1200 limit for hearing aids and/or supplies every 48 months

### **2023 COB Premium Comparison**



### Summary

There is extensive variability in state sponsored retiree health coverage:

- Plan options
  - Most states offer at least one health plan for retirees who are enrolled in Medicare
  - WA is the only state that offers all plan types MA, Medicare Supplement, and COB
- Benefits
  - There is a broad range of cost-shares and supplemental benefits
  - UMP offers very rich benefits (hearing aids, routine vision, prescription drugs, little to no member cost-share for medical services), which contributes to a higher premium
- State contribution
  - Many states (~2/3) subsidize retiree premiums, but only 2 of out the 6 states with COB plan(s) provide any subsidy (WA and WY)

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### **Questions?**

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