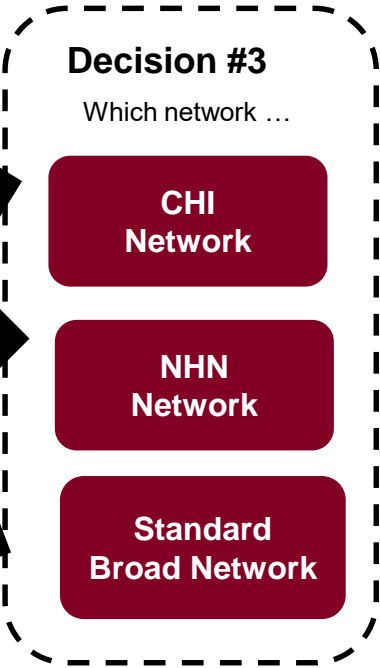
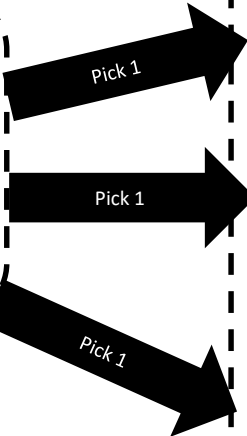
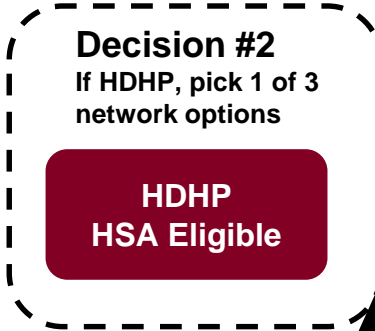
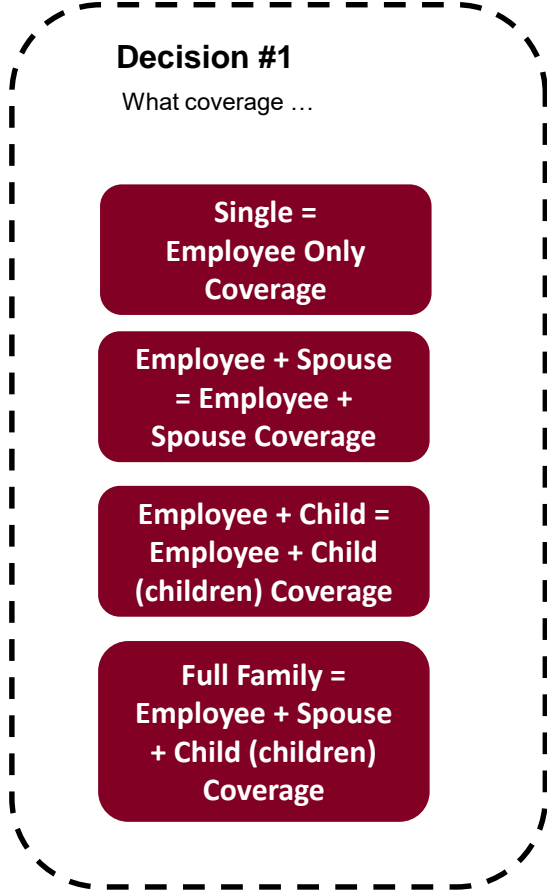
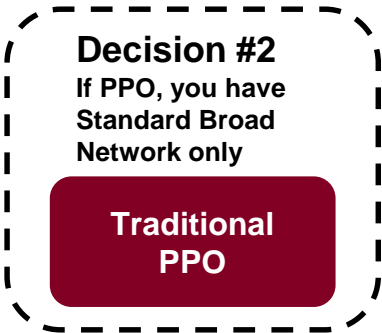


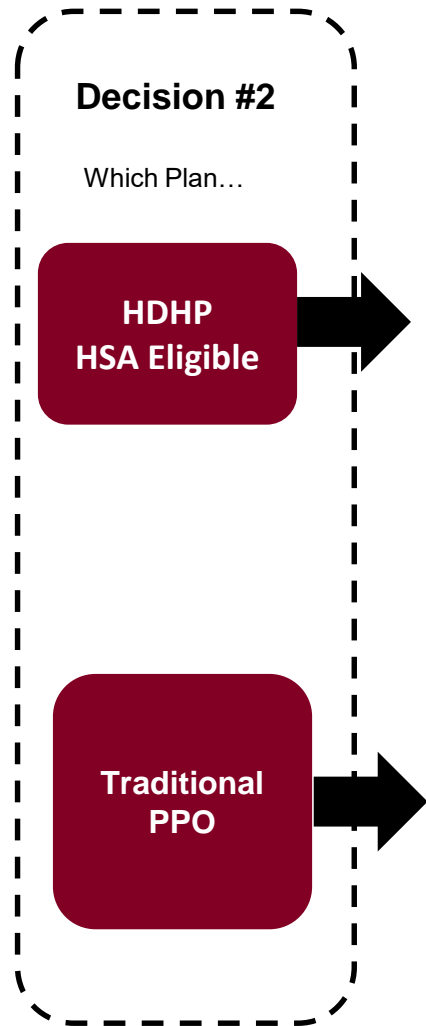
2020 Health Plan Decisions



OR



Decision #2: Pick a Plan



High Deductible Health Plan (HDHP):

- District contributes \$1,100 single coverage and \$2,200 to employee + child / employee + spouse / family coverage
- This plan means you will have to satisfy the plan deductible before the insurance plan pays anything
- You can contribute towards a Health Savings Account (HSA)
- Setting up an HSA allows you to set aside money pre-tax to pay for qualified medical expenses

Preferred Provider Organization (PPO):

- A network of Providers who have agreed to contracted rates for their services; called in-network providers
- Lower copays, deductibles & out of pockets if in-network providers are utilized
- Out-of-network benefits are still available for NON participating providers

Why Choose an HDHP Plan?

An HDHP plan works well for:

- Savers – want access to a Health Savings Account
- Low Utilizers of Health Care – "safety net" for medical emergencies but do not see a doctor that often
- Frequent Utilizers of Health Care – once you meet your deductible; plan pays 100%

Other advantages of HDHP:

- Lower premiums – The higher the deductible, the less you pay for coverage
- Premium savings can be set aside in a Health Savings Account for future expenses

Health Savings Account Advantages

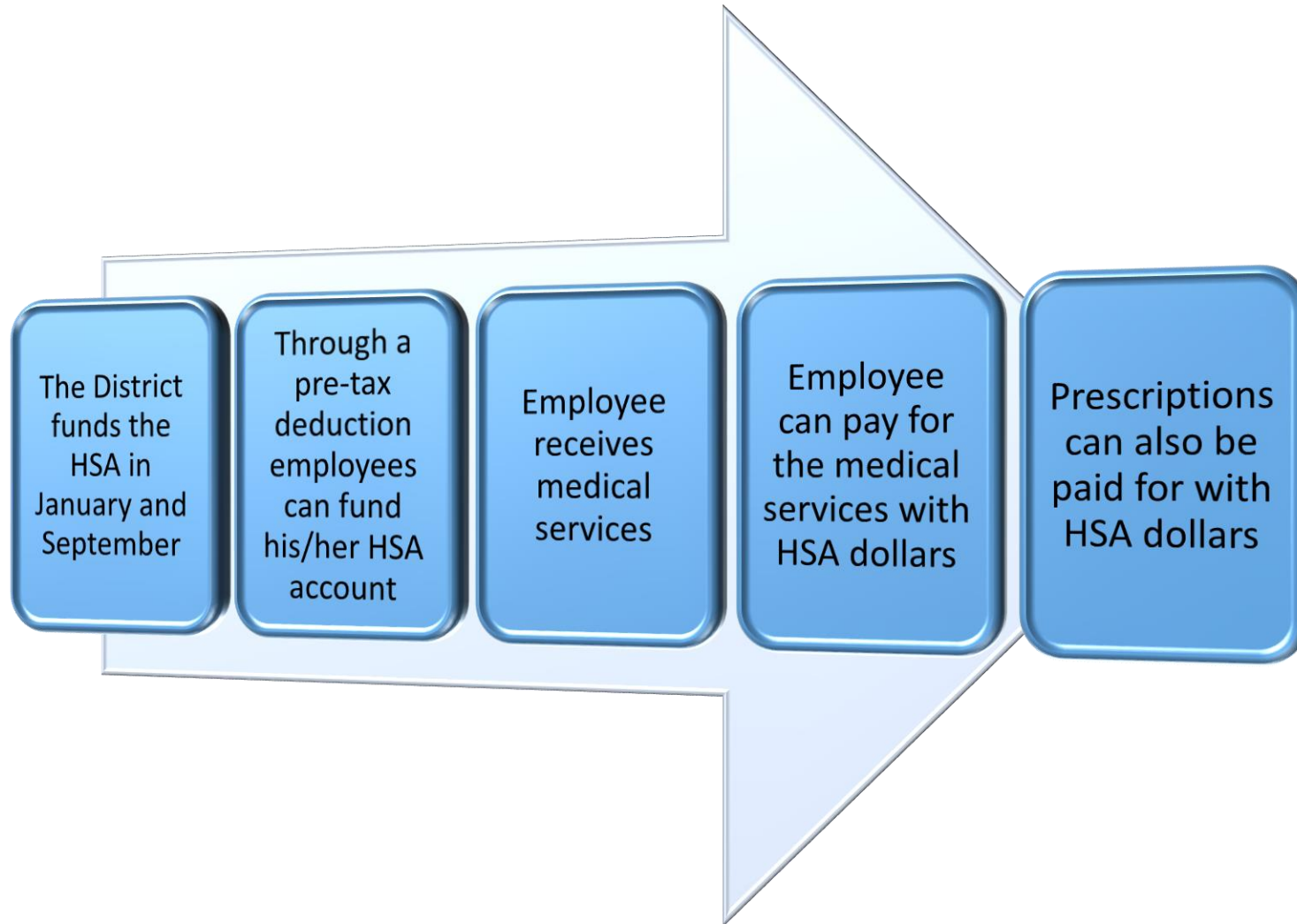
What is a Health Savings Account (HSA)?

- An HSA is an account owned by an individual used to pay for current and future medical expenses
- HSAs are used in conjunction with a High Deductible Health Plan (HDHP)

HSA Advantages

- Millard contributes FREE money to an HSA for you, if eligible. 2/3 in January and 1/3 in September. The single annual District contribution is \$1,100 and any of the three family levels is \$2,200
- HSAs are a triple tax advantage
 - Employee contributions are pre-tax
 - You are not taxed when you purchase eligible items
 - AND you are earning interest tax free
- You do not have to submit receipts for approval but you do want to keep them to prove you are spending HSA funds on eligible expenses in case you are audited by the IRS
- Funds left over at the end of the calendar year rollover, you do not lose them
- The money in your HSA account is yours even if you retire or leave employment

How Does the HDHP/HSA Work?



- HSA dollars in account may be withdrawn to pay for services applied to the deductible and other qualified expenses.
- HSA funds can also be used for non-health plan expenses such as orthodontia and eye glasses
- Through the HSA Bank web portal you can keep track of expenses and print tax forms easily

Who is Eligible for an HSA?

- Must be covered by a High Deductible Health Plan (HDHP).
- Cannot be enrolled in Medicare or Tricare
- Cannot have other medical coverage under a non-qualified HDHP plan.
- Cannot be claimed as a dependent on someone else's tax return
- Spouse cannot participate in a traditional Flexible Spending Account (FSA) or Health Reimbursement Account (HRA)

NOTE:

Neither you or your employer can contribute to an HSA if any of these apply.

Why Choose a PPO Plan?

- The Traditional PPO plan may be a choice for people willing to have larger deductions from their paychecks for premium in exchange for lower out-of-pocket costs.
- If you or your family utilize medical/prescription drug benefits frequently or have chronic/serious health conditions. Your deductible is lower and you have copayments for prescription drugs.
- The Traditional PPO plan will have higher premiums.

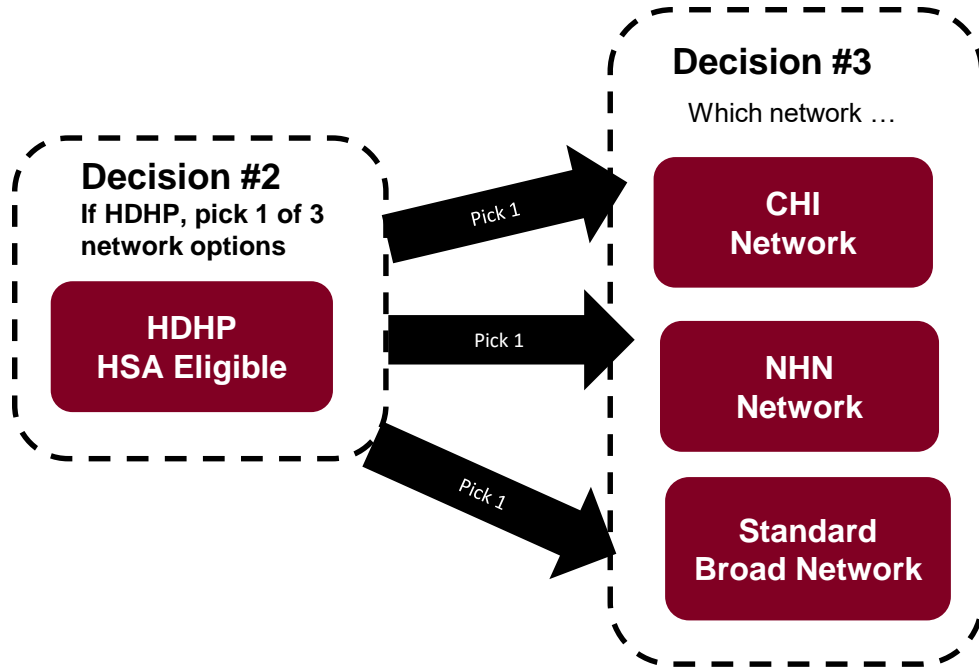
Importance of Using In-Network/Participating Providers

Using in-network providers leads to cost savings.

You benefit in two ways:

- **Reduced out-of-pocket costs:** In-network providers have agreed to discount or reduce their fees for you as a plan member. An out-of-network provider doesn't have an agreement with the insurance company – and so you may be responsible for a portion of the out-of-network doctor's or hospital's billed charges.
- **No balance billing:** An out-of-network provider may bill you – called "balance billing" – for the difference between the provider's billed charge and the amount paid by the insurance company.

Decision #3: If you picked the HDHP Option, you need to select a Network



Overview of Network Options

- Includes CHI & Children's Hospital
- Includes Nebraska Health, Methodist Hospital and Children's
 - CHI & NHN specific discounts; overall 8%-10% better discounts than Standard Broad Network
- Wide area Network incorporating all Aetna in network providers; not restrictive to a single health system

aetna[®]



Aetna Whole Health – CHI Health Accountable Care Network

Led by your primary care doctor, your care team's goal is to:

- Help keep you healthy or improve your health
- Better coordinate your care
- Spot problems and build personalized care plans to treat you
- Encourage you to play an active and informed role





Aetna Whole HealthSM - CHI Health's network



800+ primary care doctors



28 acute care hospitals



21 priority care / urgent care centers



4500+ specialists



14 quick care locations

A more limited network does restrict which doctors will be covered for in-network services

However, there are significant potential benefits of choosing a limited network:

- 1 HDHP Deductibles are lower in the CHI Network option & premiums may be lower.
- 2 Access to medical records and the ability to schedule appointments online.
- 3 Costs of medical procedures may be lower because of cost containment within a single network.
- 4 Population coaches to assist in managing your health and chronic conditions.
- 5 24/7 virtual care visits by phone or video

If you already see a doctor in the CHI network or would be willing to switch to a CHI doctor this plan might work for you.

[Click here to find an in-network provider](#)

CHI Health Accountable Care Network Coverage Area



+ Hospitals ● Primary care offices ● Urgent care facilities ■ Quick Care facilities



Omaha and Council Bluffs:

- 201 CHI PCPs
- 751 CHI Specialists
- 254 Independent PCPs
- 1,031 Independent Specialists
- 5 CHI Hospitals

NEBRASKA
HEALTH
NETWORK



Millard Public Schools is partnering
with NHN to create a comprehensive
insurance network for employees



Comprehensive Care Options:



NEBRASKA HEALTH NETWORK



**A more limited network
does restrict which doctors
will be covered for
in-network services**

Led by the physicians and health systems of your community.

[Click here
to find an
in-network
provider](#)

- 1 More than **1,700** primary care and specialty physicians, **11** urgent care centers, more than **70** clinics and **8** hospitals.
- 2 HDHP Deductibles are lower in the NHN Network option.
- 3 Premiums may be lower.
- 4 In a preferred network like NHN, **you save money when you keep your care within the network.**
- 5 Proactive management of care to ensure you are current on preventive screenings, are actively taking your medication,


**However, there is
potential for
significant benefits
of choosing a limited**

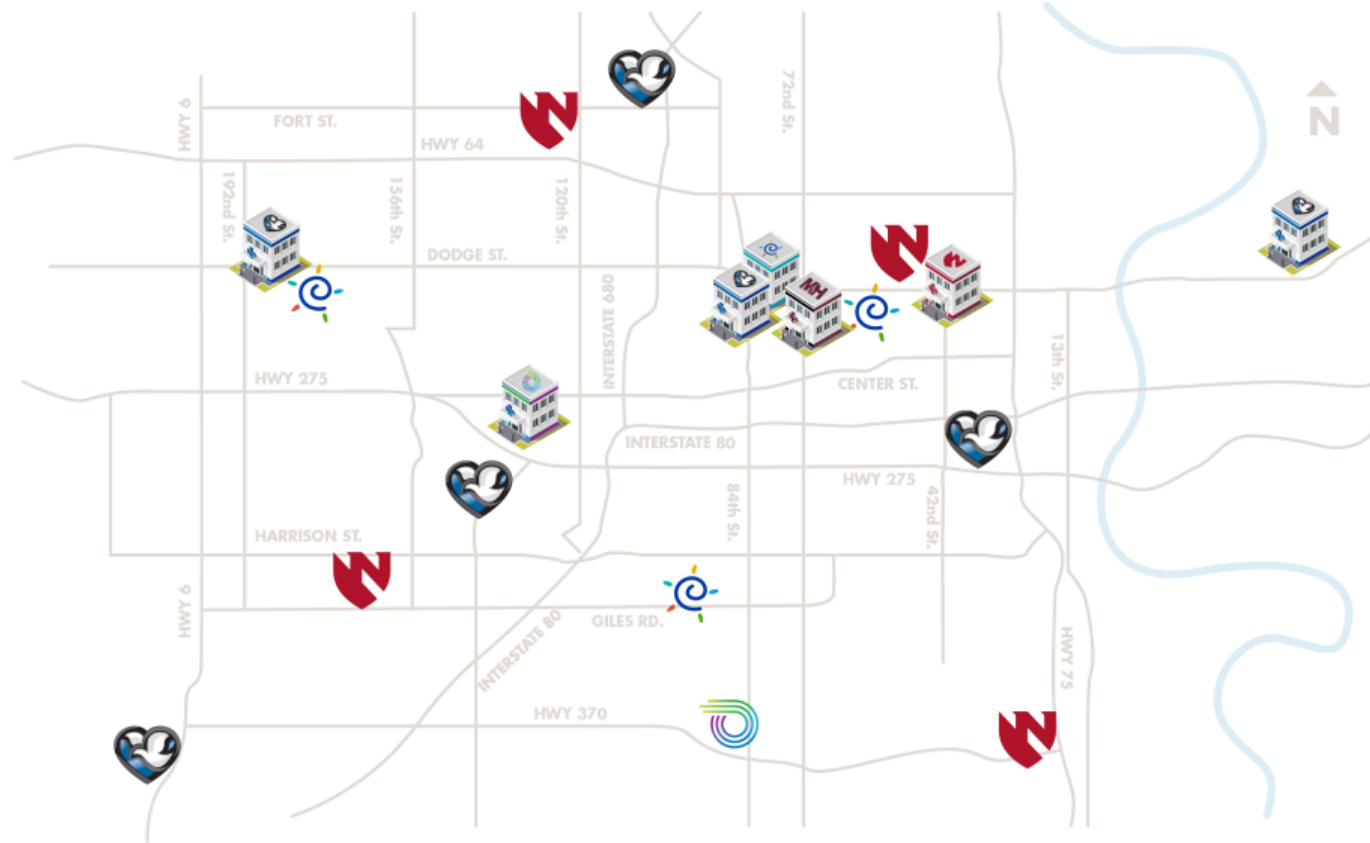
*Nebraska Health Network unites two leading health systems in Omaha – Methodist Health and Nebraska Medicine. NHN includes **Children’s Hospital and Physicians, Methodist Women’s Hospital, Midwest Surgical Hospital, OrthoNebraska**, to list a few. NHN also includes many leading independent physician groups.*

If you already see a doctor in the NHN network or would be willing to switch to a NHN doctor this plan might work for you.



NETWORK COVERAGE AREA

-  More than **1,700** primary care and specialty physicians
-  **11** urgent care centers
-  More than **70** clinics
-  **Eight** hospitals



Millard's plan includes Methodist, Nebraska Medicine, Children's Hospital and Physicians, Midwest Surgical Hospital, OrthoNebraska and many leading independent physician groups

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- **Council Bluffs**
933 E. Pierce Street
Council Bluffs, IA 51503
- **Gretna**
11946 Standing Stone Drive
Gretna, NE 68028
- ✚ **Methodist Hospital**
8303 Dodge Street
Omaha, NE 68114
- ✚ **Methodist Women's Hospital**
707 N. 190th Plaza
Omaha, NE 68022
- ✚ **Methodist Jennie
Edmundson Hospital**
933 E. Pierce Street
Council Bluffs, IA 51503
- **Millard**
5908 S. 142nd Street
Omaha, NE 68137
- **Northwest Omaha**
10710 Fort Street
Omaha, NE 68134
- **South Omaha**
3353 L Street
Omaha, NE 68107



- **Bellevue Medical Center**
2510 Bellevue Medical
Center Drive, Suite 200
Bellevue, NE 68123
- **Chalco Health Center**
8343 S. 168th Ave.
Omaha NE 68136
- **Eagle Run Health Center**
3685 N. 129th Street
Omaha, NE 68164
- **Midtown Health Center**
139 S. 40th Street
Omaha NE 68131
- ✚ **Nebraska Medical Center**
4350 Dewey Ave.
Omaha, NE 68105
- **Plattsmouth Care Center**
1938 E. HWY 34
Plattsmouth, NE 68048



- **Dundee**
4825 Dodge Street
Omaha, NE 68132
- **Val Verde**
9801 Giles Road, Suite 1
La Vista, NE 68128
- **West Village Pointe**
110 N. 175th Street
Suite 1000
Omaha, NE 68118
- ✚ **Children's Hospital and
Medical Center**
8200 Dodge Street
Omaha, NE 68114



- **Orthopaedic Urgent Care**
2725 S. 144 Street
Suite 110
Omaha, NE 68144
- **Orthopaedic Urgent Care**
754 Gold Coast Drive
Suite 105
Papillion, NE 68046
- ✚ **OrthoNebraska Hospital**
2808 S. 143rd Plaza
Omaha, NE 68144



- ✚ **Midwest Surgical Hospital**
7915 Farnam Drive
Omaha, NE 68114



- ✚ **Hospital**
- **Urgent/Immediate Care**



Out of Network Dependents for both CHI & NHN

You have options — and they do, too

If you have children going to school in another state or country, or a dependent that travels frequently for work, you can still enroll in either the CHI or NHN network and have coverage for those dependents:

- **Out-of-network option:** If your dependents live outside of the Aetna Whole Health network, but within another Aetna® network, they may still be able to see doctors in the Aetna network where they live.
- **Out-of-area option:** If your dependents live outside of the Aetna Whole Health network or any similar Aetna network, they may still get access to one of our national preferred provider networks.

Just keep these points in mind

- Employees should let MPS Human Resources know within 30 days when their dependent moves out of or back into the CHI or NHN service area.
- The dependent will get their own member ID card – so they won't appear on their family's ID Card.
- Aetna will track the dependent's deductibles and cost shares based on their plan design, not the employee's.
- There is not a separate premium charged for dependents outside of the employee's premium for dependents on an out-of-area option.

Why Choose CHI or NHN?

Better Discounts than the Broad / Standard Network

- Savings to **YOU** and Millard
- Save **8%** to **10%** off services compared to the board / standard network

You'll have better coordinated care staying within a single health system - CHI or NHN

- Improves efficiencies
- Provides a better patient experience

If you're already utilizing CHI or NHN for your healthcare needs - why not?

Example of a Covered Service and how the Discount Affects You *

No Insurance:

- Employee Pays Full Price - \$300.00

With Insurance Discounted Rate:

- Standard HDHP \$200.00
- NHN HPN \$186.00
- CHI ACO \$180.00

HSA Rollover

If you fully fund your HSA, you will still have funds remaining to save for next year and future needs

* These figures below are an estimate only, each individual service type will vary in cost.