AGENDA

NOTICE POSTED: August 30, 2019 at 4:00 P.M.

To allow a public comment period on any agenda item prior to action.

Insurance Committee - Chaired by Councilman Brady Broussard, Jr.

1. To discuss the Group Medicare Advantage PPO offered by UMR.

Ordinance Committee - chaired by Councilwoman Terry Broussard.

1. To discuss amendments to the sign ordinance.

In accordance with the Americans with Disabilities Act, if you need special assistance, please contact Mayor Mark Piazza's office at 337-893-8550, describing the assistance that is necessary.



City of Abbeville Group Medicare Advantage PPO

August 16, 2019





UnitedHealthcare Retiree SolutionsServing retirees



A complete Medicare portfolio with a history of long-term rate stability

98% retention in Group Medicare Advantage over past 8 years

40+ years of Medicare experience Experience with over 3,000 plan sponsors







Terrebonne Parish

Consolidated Government

Tensas Basin Levee District





















4.4 million

Medicare Supplement members

4.5 million

Medicare Advantage members

4.9 million

Part D prescription drug plan members

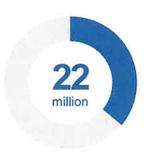
1 in 3

We are honored to serve one in three Medicare beneficiaries

*UnitedHealth Group Internal Membership Data and CMS.gov. 2Study is not endorsed by Medicare

The Medicare Advantage outlook is favorable





22 Million enrollees, or nearly 36% of all Medicare beneficiaries



3.4% increase in CMS funding for 2019



Independent research on value of MA



A bipartisan supermajority of Congress oppose any cuts to MA funding



Continued and growing savings in the group MA marketplace for our clients



MA plan on par with traditional FFS

What is Group Medicare Advantage PPO?



UnitedHealthcare Group Medicare Advantage PPO

- · National Service Area including all US counties
- · All willing Medicare Providers
- Non-differential PPO same benefits in and out-ofnetwork
- Decade of price stability and potential for significant plan sponsor savings (typically 20% - 50%)



Value to Employers

- · Maintain similar / equivalent benefits
- · Significantly reduced costs
- · Decreased administration
- Clinical and wellness engagement



Value to Retirees

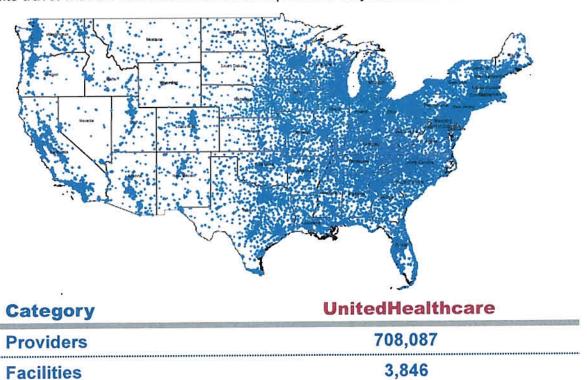
- · Little to no disruptions broad provider access
- One ID card
- · Maintain similar / equivalent benefits
- · Easy to understand

Group Medicare Advantage PPO



More than 708,000 contracted providers nationally

- Nationwide PPO solution covers all Medicare retirees regardless of where they live in United States including U.S. territories
- Custom "passive" PPO plan design with same benefits and retiree cost share in and out-of-network
- No referrals required to see a specialist & no PCP selection required to enroll
- Benefits travel with the retiree & the benefit experience stays the same across the U.S.



Benefit enhancements





HouseCalls



An innovative home assessment program complements a successful Group Medicare Advantage PPO program for retirees

Our Best in Class Solution



Our Nurse Practitioners are full time UnitedHealthcare employees



We are the largest private sector employer of Nurse Practitioners in the country with ~2,300



Most real time and holistic member view through the utilized tablet during the visit



All data is fully integrated with all other clinical programs

Benefits

Increases collaboration with member's PCP

Prevents complications

Identifies gaps in care

Enhanced care coordination

Increased adherence to care plan

Over 69% of visits result in a program referral

Over 6,600,000 visits completed since 2011 with a retiree satisfaction rate of 98%1

HouseCalls Membership Data, 2017 UnitedHealthCare HouseCalls Member Survey Data

Member incentives promote healthy behavior



An innovative incentive program to reward good health behavior, such as:

Completing a HouseCall

Completing specific health care activities and screenings

2018 Results



611,917 wellness visits completed

534,218 rewards fulfilled

1.9M gaps in care closed



Results generated



wellness visit

Members who complete an Annual Wellness Visit:

Have higher Primary Care Physician match rates / Close more gaps in care

*UnitedHealth Group Internal data

Commitment to quality



100% of group MA PPO members have been in a 4+ Star plans since 2014

A quality bonus is paid to plans that have 4 Stars or higher





1.5 M

Closed gaps in care



270,000

HouseCalls completed



575,000

Members seeing an incentive PCP



880,000

Wellness rewards redeemed



506,000

Annual Wellness Visits



94%

Members affiliated with a PCP

^{*}UnitedHealth Group 2019 Internal data

Group Medicare Advantage PPO



- Dedicated Group Retiree Call Center: one-stop shopping
- Fully-integrated medical and pharmacy benefits eliminating the need for a standalone Rx plan
- Dedicated Group Medicare Advantage Service Model
 - single national network platform
 - o single nationwide plan design for all retirees
 - single ID card for medical/pharmacy
 - single claims and administrative platform



Advocate4Me ongoing support



Our customer service model, is designed to proactively help members increase the utilization of their preventative benefits and to serve as an extension of our overall clinical team

Focus on the member through technology

- Personalized member home screen
- Use of artificial intelligence to guide Advocates
- · Proactive identification of gaps in care
- Up to 14 next best action suggestions
- · Proactive pairing with ideal Advocate

Benefits Advocate

Senior Service Advocate

Clinical Advocate







Additional services provided

- · Appointments HouseCalls, Physician, Screenings
- · Social Advocacy connection to local resources
- · Outbound provider inquiry calls
- Financial advocacy payment plans & local resources

What we have delivered

- · 124,960 Gaps in Care closed
- · 79% have educational opportunity offered (nearly 2M)
- · 15% result in an appointment being scheduled
- · 96% overall satisfaction
- J.D. Power certified 3 years in a row*

UnitedHealthcare Group Retiree has been recognized by J.D. Power by providing "An Outstanding Customer Service Experience" for phone support.

^{*}J.D. Power 2016, 2017, and 2018 Certified Contact Center Program recognition is based on successful completion of an audit and exceeding a customer satisfaction benchmark through a survey of recent servicing interactions. For more information, visit www.idpower.com/ccc.



Account Management and Implementation



Your UnitedHealthcare Group Retiree Team



Strategic Account Executive

President

Executive Sponsor

Responsible for retiree relationship & execution

VP, Public Sector and Labor

Manages sales and client development teams

VP, Client Development, **Public Sector**

Manages overall sale and client development relationship

Service Account Management Team

Direct contact for any member issue



Implementation Manager

Leader of the implementation

Client Service Manager

Manages overall service experience

Legal Support	Clinical	Actuarial	Retiree Meetings Support
Regulatory	Customer service	Marketing	Claims
Underwriting	Communications	Financial and Product Services	Enrollment

The implementation experience





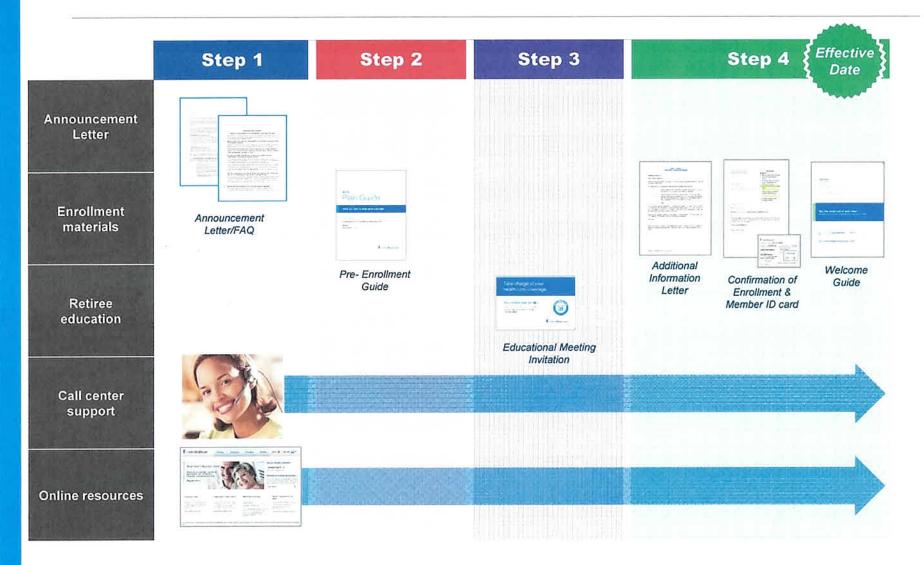
City of Abbeville implementation phases and ongoing support

Plan / Define	Design / Verify	Set-up / Test	Announce	Educate / Enroll	Support
Define requirements	Determine data needs and reporting	Eligibility file loads	Employer announcement communications	Support open enrollment meetings	Pre- and post go live support
Plan design	requirements	Technical testing	O Fllt	Brasida avalence	Issue and
Communications	Billing	of billing, claims, and call center systems	Open Enrollment meetings	 Provide employer enrollment/call center reporting 	resolution management
 Project plan 	Eligibility rules				 Performance
development/		 Quality control 		Enrollment	Tracking
management	 Retiree meeting 			confirmation	
	dates/locations	 Readiness of 			 Renewal support
Contact list		customer service		Generate ID	for group
development		center		cards and Welcome Kits	products

Over the last three years, we have successfully implemented our Medicare Advantage plans for *over 110 employers and over 1.1 million retirees*

The retiree experience pre-enrollment





UnitedHealthcare Group Medicare Advantage PPO differentiators





- Customized medical benefits all in one plan that are easy to understand
- One ID card for medical all the rights and privileges of Traditional Medicare (no need to show red, white and blue Medicare card)



- All eligible retirees can join the plan regardless of where they live in U.S.
- Freedom of choice to access both contracted providers and Medicare providers that accept the plan on a national basis



 Clinical programs to support those with chronic conditions such has diabetes or heart failure



- HouseCalls and Member Rewards
- Additional benefits not typically covered by Medicare or supplement plans
- The Group Medicare Advantage PPO plan travels with the retiree and allows the retiree to access services throughout the U.S. and all U.S. territories with no referrals



- Thank you -





UnitedHealthcare Group Medicare Advantage PPO Preliminary Rates 1/1/2020 - 12/31/2020 Prepared for City of Abbeville

UnitedHealthcare Group Medicare Advantage PPO	Rate Components	Option 1 Medical Plan 1M Rx Plan C13 (Custom Catastrophic)
Medical with Part D Prescription Drug	Net Premium	\$225.29
National Service Area	ACA Insurer Fee	\$0.00
Membership Quoted: 42 Rates are Per Member Per Month	Total Premium	\$225.29

Stipulations Group Medicare Advantage PPO

- This is a preliminary quote effective 1/1/2020 12/31/2020. The situs state is Louisiana.
- While we make every effort to honor the rates quoted (notwithstanding the other quote stipulations below), we reserve the right to change these
 preliminary rates and/or the plan designs quoted based on the final call letter from CMS and the actual National average Part D bid for 2020.
- To ensure proper claim adjudication effective 1/1/2020, it is imperative that we have final 1/1/2020 plan design decisions from employers as soon as possible. Final decisions received after 11/1/2019 could be problematic in terms of claim adjudication on 1/1/2020.
- These rates are quoted on a full replacement basis.
- This quote assumes that the employer pays 100% of the premium.
- If members who have previously opted out are to be allowed back into the plan, then this fact must be disclosed at the time of quote.
- If the enrollment were to change by more than +/- 10% from the submitted census, we reserve the right to adjust the rates.
- Please note the following with regard to the drug coverage on these MA-PD products:
 - We reserve the right to change our Part D formulary for calendar year 2020. We also reserve the right to change our pharmacy benefit
 manager and/or our pharmacy network for calendar year 2020.
 - There is a specific, Part D drug formulary that applies to all of our MA-PD plan offerings.
 - ~ All Part D prescription drug coverage is considered to be creditable, therefore Creditable Coverage Notices are not required.
- UnitedHealth Group will hold the rate(s) and plan design(s) through 12/31/2020 unless: (i) changes are made to existing regulations or any
 new legislation, assessments, taxes, etc. that would impact the administration or program costs of the Medicare Advantage and Part D plans;
 (ii) there is a change in the methodology used to calculate CMS payments including any changes due to EGWP bid waiver; (iii) there are any plan design
 changes required by the applicable regulatory authority (i.e. mandated benefits); and (iv) as otherwise permitted in our contract.
- Quote assumes \$11.00 PMPM commission level.
- 0 Pre-65 Medicare eligible retirees are included.

UnitedHealthcare Group Medicare Advantage PPO

Option 1 Medical Plan 1M Rx Plan C13 (Custom Catastrophic)

Description	In-Network Services	Out of Network Services
Annual Medical Deductible	- The Party should be the Party -	one
Is Annual Medical Deductible combined for IN and OUT of network?	N/A	
	\$0	
Annual Medical Out-of-Pocket Maximum	Yes	
Is Annual Medical Out-of-Pocket Maximum combined for IN and OUT of network?		
PHYSICIAN SERVICES		60
Primary Care Physician Office Visit (includes Non-MD office visits)	\$0	\$0 \$0
Specialist Office Visit	\$0	
Virtual Office Visit	\$0	\$0 N/A
Virtual Office Visit with Preferred Providers: Doctor on Demand or AmWell	\$0	N/A
Telemedicine	\$0	\$0
INPATIENT SERVICES	20	#0
Inpatient Hospital Stay - Per Admit	\$0	\$0
Skilled Nursing Facility Care - Prior Hospital Stay Requirement Waived	Yes	Yes
Skilled Nursing Facility Care - Benefit Period (In days)		days
Skilled Nursing Facility Care - Co-Pay Per Day	\$0	\$0
Inpatient Mental Health in a Psychiatric Hospital - Lifetime Max		days
Inpatient Mental Health in a Psychiatric Hospital - Per Admit	\$0	\$0
OUTPATIENT SERVICES		60
Outpatient Surgery	\$0	\$0
Outpatient Hospital Services	\$0	\$0
Outpatient Mental Health/Substance Abuse (Individual Visit)	\$0	\$0
Outpatient Mental Health/Substance Abuse (Group Visit)	\$0	\$0
Partial Hospitalization (Mental Health Day Treatment) per day	\$0	\$0
Comprehensive Outpatient Rehabilitation Facility (CORF)	\$0	\$0
Occupational Therapy	\$0	\$0
Physical Therapy and Speech/Language Therapy	\$0	\$0
Cardiac/Pulmonary Rehabilitation	\$0	\$0
Kidney Dialysis	\$0	\$0
MEDICARE-COVERED SPECIALIST VISITS		
Chiropractic Visit (Medicare-covered)	\$0	\$0
Podiatry Visit (Medicare-covered)	\$0	\$0
Eye Exam (Medicare-covered)	\$0	\$0
Eyewear (Medicare-covered Frames and Lenses after cataract surgery)	\$0	\$0
Hearing Exam (Medicare-covered)	\$0	\$0
Dental Services (Medicare-covered)	\$0	\$0
AMBULANCE/EMERGENCY ROOM/URGENT CARE		
Ambulance Services	\$0	\$0
Ambulance Copay Waived if Admitted ?	No	No
Emergency Room (Includes Worldwide Coverage)	\$0	\$0
Emergency Room Copay Waived if Admitted within 24 hours ?	Yes	Yes
Urgently Needed Care (Includes Worldwide Coverage)	\$0	\$0
Urgent Care Copay Waived if Admitted within 24 hours ?	Yes	Yes
PART B DRUGS AND BLOOD		
Part B Drugs - Immunosuppressives, Anti-nausea, Inhalation Solutions,		00
Hemophilia Clotting Factors, Antigens, Outpatient Injectable Medications	\$0	\$0
Administered in a Physician's Office	60	60
Chemotherapy Drugs	\$0	\$0
Blood	\$0 Yes	\$0 Yes
Blood 3 pint deductible waived ?	Yes	res
DURABLE MEDICAL EQUIPMENT (DME) AND SUPPLIES	CO	\$0
Durable Medical Equipment	\$0	\$0
Prosthetics	\$0	\$0
Orthotics	\$0	
Diabetic Shoes and Inserts	\$0	\$0
Medical Supplies	\$0	\$0
Diabetes Monitoring Supplies	\$0	\$0
Insulin Pump & Supplies	\$0	\$0

UnitedHealthcare Group Medicare Advantage PPO

Option 1 Medical Plan 1M Rx Plan C13 (Custom Catastrophic)

	TXT Iair C13 (Custom Catastrophic)		
Description	In-Network Services	Out of Network Services	
HOME HEALTHCARE AGENCY & HOSPICE			
Home Health Services	\$0	\$0	
Hospice (Medicare-covered)	\$0	\$0	
PROCEDURES			
Clinical Laboratory Services	\$0	\$0	
Outpatient X-ray Services	\$0	\$0	
Diagnostic Procedure/Test (includes non-radiological diagnostic services)	\$0	\$0	
Diagnostic Radiology Service	\$0	\$0	
Therapeutic Radiology Service	\$0	\$0	
PREVENTIVE SERVICES (MEDICARE-COVERED)			
Cardiovascular Screenings	\$0	\$0	
mmunizations (Flu, Pneumococcal, Hepatitis B Vaccines)	\$0	\$0	
Pap Smears and Pelvic Exams	\$0	\$0	
Prostate Cancer Screening	\$0	\$0	
Colorectal Cancer Screenings	\$0	\$0	
Bone Mass Measurement (Bone Density)	\$0	\$0	
Mammography	\$0	\$0	
Diabetes - Self-Management Training	\$0	\$0	
Medical Nutrition Therapy and Counseling	\$0	\$0	
Annual Wellness Exam and One-time Welcome-to-Medicare Exam	\$0	\$0	
Smoking Cessation Visit	\$0	\$0	
Abdominal Aortic Aneurysm (AAA) Screenings	\$0	\$0	
Diabetes Screening	\$0	\$0	
HIV Screening	\$0	\$0	
Screening and Behavioral Counseling Interventions in Primary Care to Reduce Alcohol Misuse	\$0	\$0	
Screening for Depression in Adults	\$0	\$0	
Screening for Sexually Transmitted Infections (STIs) and high intensity Behavioral	\$0	\$0	
Counseling to prevent STIs (Medicare-covered) ntensive Behavioral Therapy to reduce Cardiovascular Disease Risk (Medicare-	\$0	\$0	
covered)	422		
Screening and Counseling for Obesity	\$0	\$0	
Glaucoma Screening	\$0	\$0	
Kidney Disease Education	\$0	\$0	
Dialysis Training	\$0	\$0	
Hepatitis C Screening	\$0	\$0	
ung Cancer Screening	\$0	\$0	
ADDITIONAL BENEFITS/PROGRAMS (Non Medicare-covered)			
Routine Podiatry	\$0	\$0	
Routine Podiatry - Number of visits per year		Visits	
Routine Eye Exam Refraction - every 12 months	\$0	\$0	
Routine Hearing Exam for Hearing Aids - every 12 months	\$0	\$0	
Hearing Aid Allowance		5500	
Benefit per ear or combined	Combined		
f of Hearing Aids	Unlimited		
Hearing Aid period in months		Months	
Annual Routine Physical Exam	\$0	\$0	
WELLNESS / CLINICAL PRO	OGRAMS		
Fitness Program	Included		
Caregiver	Included		
NurseLine	Included		
Access Support	Included		
Condition Management - Chronic Heart Failure (CHF)	Included		
Condition Management - Coronary Artery Disease (CAD) / Diabetes	Included		
Condition Management - End Stage Renal Disease (ESRD)	Included		
		cluded	
	Included		
Group Retiree Case Management		cluded	
Group Retiree Case Management Advanced Illness Care Management	Inc		
Group Retiree Case Management Advanced Illness Care Management Preferred Diabetic Supply Program Hi Health Hearing Aid Discount Program. Please note: Not available in American Samoa, Guam, Northern Mariana Islands and Puerto Rico	Inc Inc	cluded cluded cluded	

UnitedHealthcare Group Medicare Advantage PPO

Option 1 Medical Plan 1M Rx Plan C13 (Custom Catastrophic)

Description	In-Network Services	Out of Network Services
Outpatient Prescription D	rug Coverage	
Prescription Drug Plan	Standard Plan C13 (Custom Catastrophic)	
Part D Gap Coverage	Full Gap Coverage	
Formulary	Standard Formulary H	
Bonus Drug List	Standard List U	
Formulary Edits (step therapy, quantity limits, prior authorization)	Standard: Edits On	
Rx Deductible	None	
Part D Retail Copay (up to a 30 day supply) Note: 90 day retail supply is available for 3X copay amount		
Tier 1: Generic	\$10	
Tier 2: Preferred Brand	\$20	
Tier 3: Non-Preferred Brand	\$35	
Tier 4: Specialty Tier	\$35	
Part D Preferred Mail Order Copay (up to a 90 day supply)		
Tier 1: Generic	\$20	
Tier 2: Preferred Brand	\$40	
Tier 3: Non-Preferred Brand	\$70	
Tier 4: Specialty Tier	\$70	
Initial Coverage Limit	\$4,020	
TrOOP Threshold	\$6,350	
Catastrophic Coverage over TrOOP		
Custom: Lesser of CMS standard Catastrophic copays (shown below) and Initial Coverage Limit (ICL) copays (shown above)	Custom	
Copay for generics	\$3.60	
Copay for all other drugs	\$8.95	
OR Coinsurance	5%	

UnitedHealthcare Group Medicare Advantage ® plans are offered by United HealthCare Insurance Company and its affiliated companies, Medicare Advantage Organizations with a Medicare contract. Limitations, copayments and coinsurance may apply. Benefits may vary by employer group.

By group's acceptance of this proposal or upon group's first premium payment, whichever occurs first, Group represents to UnitedHealthcare that it offers employment-based retiree coverage as that term is defined in 42 CFR 422.106(d)(5) and that it will only enroll individuals with the status of a retired participant, or spouse or dependent of a retired participant, in the group's employment-based group plan.

Amend Sec. 5-232 Definitions to include:

Promotional Sign: A sign which is used for a temporary period of time by a business to advertise or promote a business activity and is not permanently affixed to a structure or the ground. Promotional Signs include, but are not limited to: blade signs, banners, balloons, feather flags, inflatables, air dancers, inflatable tubes, and pennants.

Enact Sec. 5-287 to read as follows, to-wit:

Sec. 5-287, Promotional Signs.

Business locations shall be permitted an unlimited number of Promotional Signs, as defined in Sec. 5-232 hereof, provided that:

- (1. The total area of all Promotional Signs shall not exceed one square foot for each linear foot of city street, or state highway, frontage at the business location; and
- (2. No single Promotional Sign shall exceed 27 square feet; and
- (3. Promotional Signs shall be spaced an average of 50 feet apart; and
- (4. A business location may display Promotional Signs for no more than a 30 day period, no more than 4 times per calendar year, and
- (5. The Promotional Signs may not be placed on the public right of way or in a sight triangle; and.
- (6. The business location seeking to display a Promotional Sign shall apply for an annual permit as required by Sec. 5-265, hereof, at least 30 days prior to the initial display of same, then on or before the 31st day December to renew the permit. There shall be no charge for the issuance or renewal of the permit.
- (7. For the purpose of this section the term business location shall mean the street address of a single-occupant property or the street address of the facility where multiple business are located.