

PUBLIC SECTOR HEALTHCARE GROUP

2022 Program Overview



PSHCG

Public Sector Healthcare Group (PSHCG) is an association of like-minded political entities who know the value of employee benefits.

WHO WE ARE

PUBLIC SECTOR HEALTHCARE GROUP

Public Sector Healthcare Group (PSHCG) is an association of Colorado political subdivisions operating under the Colorado Joint Powers Authority statute, to purchase employee benefits on a larger scale. By pooling resources with like-minded employers, your agency is part of a large and stable risk pool.

PSHCG was originally formed by 4 founding member agencies near Elizabeth Colorado, who sought to create a program that controlled healthcare spend and mitigate unpredictable renewal increases. PSHCG has now grown statewide, providing employee benefits to more than 60 political subdivisions and 3,500 members. PSHCG continues this grassroots effort today, to grow mindfully throughout the State of Colorado partnering with agencies who also recognize the value of our program.

Through this association, your agency leverages a large employer benefits experience, including excellent products, exceptional service, transparency in costs, and rate stability.

MISSION & PURPOSE

PUBLIC SECTOR HEALTHCARE GROUP

Public Sector Healthcare Group's mission is to help you attract and retain valuable employees with a superior and stable benefits program. The primary goal of controlling healthcare costs and curbing renewal increases has been met, with an average annual medical renewal increase of 4.5%.

We strive to be different than other health plans. And here's how...

- **Structure and Autonomy:** All decisions are made by our member agencies, serving on one of two committees.
- **The elected 5 seat Executive Committee** includes members who are interested in meeting more frequently, to evaluate and propose new programs and services.
- **The Operating Committee** is responsible for approving every decision made by the group. This all-inclusive committee provides a platform of transparency and collaboration, but more importantly acts as a sounding board for local/regional concerns.
- **Service:** Your dedicated service team is available to work directly with you and your members to answer questions and resolve issues. This personalized service is what every employer who invests in a benefits program deserves, regardless of size.
- **Flexibility:** Our member agencies get to choose between a variety of medical plans and fully customize their offerings. In addition, our ancillary products such as Dental, Vision, Life, and Disability are voluntary. This flexibility allows you the ability to tailor your benefits package to best suit your philosophy and budget.
- **Rate Tiers:** Your agency fits into one of our 4 simple regionalized rate tiers, regardless of claims utilization. Pooling your claims and not being held accountable for your claims, provides the peace of mind that small employers want and need.

CONSULTING TEAM

MEET YOUR CONSULTING SERVICE TEAM

RMIC and Benefits Broker were chosen as the Employee Benefits Consulting Firms for PSHCG due to their extensive presence in the Colorado market and experience with Colorado's Political Subdivisions. It is imperative that we maintain the highest level of negotiations, service, and accessibility for our member agencies. Your consulting and service team fully expects to be your first and last resource for all of your benefits needs.



Our approach is hands-on, personalized service; our goal is to feel like an extension of your HR team.

Our Consultants work directly with the PSHCG's Executive and Operating Committees on program decisions and vendor negotiations. We manage all aspects of the renewal process to ensure quality and compliance needs are met accordingly.

Our Account Managers work with your HR team to prepare and communicate benefits at Open Enrollment and throughout the year to new hires. They are your single point of contact for all your benefit needs. Members can speak directly with our Account Managers to navigate the complex world of healthcare and resolve issues. Ongoing services include full COBRA administration, employee webinars and on-site meetings, and an on-line benefits enrollment portal.

We value our partnership with PSHCG and take seriously, our responsibility as the overseer of such a critical part of the association.

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EXECUTIVE COMMITTEE

MEET YOUR EXECUTIVE COMMITTEE

Public Sector Health Care Group is proud to highlight the 5 Executive Committee members who are currently serving on the board (in order of service). Governed by the IGA, the Executive Committee handles daily operations and makes recommendations to the broader Operating Committee regarding budget, benefit changes, and new programs.



CHIEF TJ STECK

ELIZABETH FIRE PROTECTION DISTRICT - PRESIDENT, EXECUTIVE COMMITTEE MEMBER SINCE 2011

TJ Steck is the Fire Chief with the Elizabeth Fire Protection District in Colorado. Chief Steck is a founding member of the Public Sector Health Care Group and currently serves as the Executive Committee President. His priorities for the group include healthy enrollment growth, stable and predictable renewal rates. He also seeks to involve each agency in the decision-making process whenever possible.



CHRISTINE CHAPLIN

FRONT RANGE FIRE RESCUE - EXECUTIVE COMMITTEE MEMBER SINCE 2016

Christine Chaplin has worked as the Director of Administrative Service for the Front Range Fire Rescue for five years. She has worked with budgets of all sizes, consistently meeting or exceeding expectations. In addition, she has served on several boards over the past ten years including, Finance, Marketing, Parent/Teacher, and Pastoral Council.



CHIEF TOM BEACH

SOUTHEAST WELD FIRE PROTECTION DISTRICT - EXECUTIVE COMMITTEE SINCE 2018

Tom Beach is Fire Chief of the Southeast Weld Fire Protection District. Chief Beach leads a combination of twenty-seven full-time firefighters in addition to volunteer and reserve firefighters. Chief Beach has twenty-five years of fire service experience. He has his Fire Officer through the Commission on Professional Credentialing, an Associates in Fire Science, and a Bachelor's Degree in Fire Administration. His understanding of the healthcare system is largely due to the operation and billing of their ambulance services.



LINDSAY WILEY

MONTROSE FIRE PROTECTION DISTRICT - EXECUTIVE COMMITTEE SINCE 2019

Lindsay Wiley has served both her community and the employees of the Montrose Fire Protection District for over fifteen years. As the district's Deputy Administrator, she handles HR functions, administrative services and assists in general operations for the large district. Her presence as a regional representative for Colorado's Western Slope has been a valuable addition as PSHCG continues to expand state-wide. Her goal in serving on the Executive Committee is to promote stability and longevity for PSHCG agencies and members.



KATIE DAVIS

PUEBLO DEPARTMENT OF PUBLIC HEALTH & ENVIRONMENT - EXECUTIVE COMMITTEE MEMBER SINCE 2016

Katie Davis is the Director of Operations and Health Promotion at the Pueblo Department of Public Health and Environment. Katie has been a senior-level executive in the public sector for over eight years in the areas of public health, operations, human resource management, and administration.

Medical

United Healthcare

United Healthcare offers a choice of six (6) medical plans. Groups have the option to offer as few as one (1) plan or as many as six (6) plans to their employees. The PPO network (offered with 5 plans) is a comprehensive network which allows employees access to a greater number of physician and specialists, both in-network and out-of-network, along with comprehensive hospital choices.

PLAN A PPO

Primary Care Physician	\$25 copay
Specialist	\$50 copay
Preventive Care	Plan pays 100%
Associated Lab Work	Plan pays 100% after copay
Individual Deductible	\$1,000 in-network
Family Deductible	Max 3 per family
Coinsurance Percentage	Plan pays 80% in-network
Individual Out-of-Pocket Max	\$4,500 per individual
Family Out-of-Pocket Max	\$12,700 per family
Inpatient Hospital	Plan pays 80% after deductible
Outpatient Surgery	Plan pays 80% after deductible
Urgent Care	\$25 copay
Emergency Room	\$400 copay
MRI, CT, PET Scans	Plan pays 80% after deductible
Pharmacy	\$10 / \$30 / \$60 / 25% max \$500

PLAN B PPO

Primary Care Physician	\$30 copay
Specialist	\$50 copay
Preventive Care	Plan pays 100%
Associated Lab Work	Plan pays 100% after copay
Individual Deductible	\$3,000 in-network
Family Deductible	Max 3 per family
Coinsurance Percentage	Plan pays 80% in-network
Individual Out-of-Pocket Max	\$6,000 per individual
Family Out-of-Pocket Max	\$12,700 per family
Inpatient Hospital	\$500 copay, 100% after deductible
Outpatient Surgery	\$500 copay, 100% after deductible
Urgent Care	\$30 copay
Emergency Room	\$400 copay
MRI, CT, PET Scans	Plan pays 100% after deductible
Pharmacy	\$15 / \$40 / \$70 / 25% max \$500

Medical

United Healthcare

United Healthcare offers a choice of six (6) medical plans. Groups have the option to offer as few as one (1) plan or as many as six (6) plans to their employees. The PPO network (offered with 5 plans) is a comprehensive network which allows employees access to a greater number of physician and specialists, both in-network and out-of-network, along with comprehensive hospital choices.

PLAN B HMO

* Primary Care Physician	\$30 copay
* Specialist	\$50 copay
Preventive Care	Plan pays 100%
Associated Lab Work	Plan pays 100% after copay
Individual Deductible	\$3,000 in-network
Family Deductible	Max 3 per family
Coinsurance Percentage	Plan pays 80% in-network
Individual Out-of-Pocket Max	\$6,000 per individual
Family Out-of-Pocket Max	\$12,700 per family
Inpatient Hospital	\$500 copay, 100% after deductible
Outpatient Surgery	\$500 copay, 100% after deductible
Urgent Care	\$30 copay
Emergency Room	\$400 copay
MRI, CT, PET Scans	Plan pays 100% after deductible
Pharmacy	\$15 / \$40 / \$70 / 25% max \$500

* PCP Required, Specialist Referral Required

PLAN C PPO

Primary Care Physician	\$0 copay
Specialist	\$50 copay
Preventive Care	Plan pays 100%
Associated Lab Work	Plan pays 100% after copay
Individual Deductible	\$3,000 in-network
Family Deductible	Max 2 per family
Coinsurance Percentage	Plan pays 80% in-network
Individual Out-of-Pocket Max	\$6,500 per individual
Family Out-of-Pocket Max	\$13,000 per family
Inpatient Hospital	Plan pays 80% after deductible
Outpatient Surgery	Plan pays 80% after deductible
Urgent Care	\$0 copay
Emergency Room	Plan pays 80% after deductible
MRI, CT, PET Scans	\$750 copay
Pharmacy	\$5 / \$40 / \$60 / 25% max \$500

Medical

United Healthcare

United Healthcare offers a choice of six (6) medical plans. Groups have the option to offer as few as one (1) plan or as many as six (6) plans to their employees. The PPO network (offered with 5 plans) is a comprehensive network which allows employees access to a greater number of physician and specialists, both in-network and out-of-network, along with comprehensive hospital choices.

PLAN D PPO HSA

Primary Care Physician	Plan pays 100% after deductible
Specialist	Plan pays 100% after deductible
Preventive Care	Plan pays 100%
Associated Lab Work	Plan pays 100% after deductible
Individual Deductible	\$2,500 per employee only in-network
Family Deductible	\$5,000 per family combined
Coinsurance Percentage	Plan pays 100% in-network
Individual Out-of-Pocket Max	\$3,500 per employee only
Family Out-of-Pocket Max	\$7,000 per family combined
Inpatient Hospital	Plan pays 100% after deductible
Outpatient Surgery	Plan pays 100% after deductible
Urgent Care	Plan pays 100% after deductible
Emergency Room	Plan pays 100% after deductible
MRI, CT, PET Scans	Plan pays 100% after deductible
Pharmacy	\$15 / \$40 / \$70 / 25% max \$500

PLAN E PPO HSA

Primary Care Physician	Plan pays 90% after deductible
Specialist	Plan pays 90% after deductible
Preventive Care	Plan pays 100%
Associated Lab Work	Plan pays 90% after deductible
Individual Deductible	\$3,500 per individual
Family Deductible	\$7,000 per family embedded
Coinsurance Percentage	Plan pays 90% in-network
Individual Out-of-Pocket Max	\$4,500 per individual
Family Out-of-Pocket Max	\$9,000 per family embedded
Inpatient Hospital	Plan pays 90% after deductible
Outpatient Surgery	Plan pays 90% after deductible
Urgent Care	Plan pays 90% after deductible
Emergency Room	Plan pays 90% after deductible
MRI, CT, PET Scans	Plan pays 90% after deductible
Pharmacy	\$15 / \$40 / \$70 / 25% max \$500

HEALTHIESTYOU

No Cost Virtual Medicine


HealthiestYou
is a FREE
24/7
virtual medicine
program.

PSHCG has partnered with HealthiestYou to offer a FREE virtual medicine program to members. Both the member and their enrolled dependents have access to HealthiestYou. Through HealthiestYou, members can connect to a licensed physician from a mobile phone, computer, or landline, 24/7.





Your healthcare just got a whole lot easier!



Attention Members:
Be Sure to Download the HealthiestYou App Today!

Available on the App Store | GET IT ON Google play

Along With Our Amazing App, HealthiestYou offers:

- 24/7 UNLIMITED DOCTOR ACCESS**
Need help? Call HealthiestYou. Our physician network can diagnose, treat, and prescribe with no consult fees, anytime, anywhere. Really!
- LOCATE PROVIDERS**
Need to search for a doctor, dentist, or other provider? Our app knows best and will easily lead you through the process. You can even [request a second opinion](#).
- PRESCRIPTION SAVINGS**
Need a prescription? Our geo-based prescription search engine can save you up to 85% on your prescription and will fulfill best your co-pay.
- HEALTH MANAGEMENT CONTENT**
Are you stressed? Let HealthiestYou guide you to improved health and happiness with relevant health content delivered at the time of need.
- SHOP & PRICE PROCEDURES**
Do you need an MRI or an Ultrasound? Our app puts you in the driver's seat by providing a vehicle to search and price procedures in your direct area. Happy shopping!
- SYNC YOUR MEDICAL BENEFITS**
Our app provides you a one-stop-shop to view your medical plan deductible in real time. Easily shop and book in-network and out-of-network providers for medical, dental, vision, and specialists.

Connect with a Doctor 24x7 to Diagnose, Treat, & Prescribe FOR FREE!
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member.healthiestyou.com

www.healthiestyou.com | customer service 855-894-9627 | designed with love in scottsdale, az



Our App is a Claim Changer!



RADAR
This exclusive tool continuously scans for Doctors, pharmacies, urgent care centers and even vets in your direct area, helping you quickly and easily select the best providers for your plan and needs.

CIRCLES
Our intelligent bookmarking tool helps you keep track of everyone in your circle of care from your PCP to your favorite pharmacy.

PROVIDER SEARCH
Instantly seek, evaluate and connect with more than 1,000,000 top providers in the country. Really!

COST COMPARE
Arm yourself with our awesome price comparison engine giving you access to special deals on more than 5,000 drugs at more than 100,000 pharmacies.

TRACK DEDUCTIBLE
Connect your medical insurance plan and track your deductible. You can instantly view your in/out of Network deductibles to make sure your minimizing your out of pocket expenses.

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Available on the App Store | GET IT ON Google play

Set up your account today!
member.healthiestyou.com

Dental

MetLife

Public Sector Healthcare Group offers a dental plan through MetLife. The dental plan includes both in-network and out-of-network options and has a \$1500 annual calendar maximum for services. Our program is especially designed to offer state-wide coverage, including a higher out of network reimbursement for dentists who are not in the MetLife network. This feature is key to properly insure our rural agencies and their members

Benefit Summary	In-Network	Out-of-Network
Calendar Year Deductible	\$50 per individual / max \$150 per family	\$50 per individual / max \$150 per family
Deductible Applies To	Type II & III	Type II & III
Dental Calendar Year Maximum	\$1,500 per individual in your family	\$1,500 per individual in your family
Benefit Percentage	In-Network	Out-of-Network
Type I - Diagnostic & Preventive	100%	100%
Type II - Basic Services	80%	80%
Type III - Major Services	50%	50%
Type IV - Orthodontic Services	50%	50%
Endodontics / Periodontics	80%	80%

Vision

MetLife

Public Sector Healthcare Group offers a vision plan through MetLife. The vision plan includes both in-network and out-of-network options with allowances. The MetLife vision plan utilizes the VSP network, which is a broad network with many choices of providers, state-wide, making them a valued partner.

Benefit Summary	In-Network	Out-of-Network
Eye Exam	\$10 copay	\$45 allowance
Prescription Glasses: Lenses	\$10 copay	\$30 - \$100 allowance
Prescription Glasses: Frames	\$150 retail allowance	\$70 allowance
Contact Lenses	\$150 allowance	\$105 allowance
Benefit Frequency	In-Network	Out-of-Network
Eye Exam	Every 12 months	Every 12 months
Prescription Glasses: Lenses	Every 12 months	Every 12 months
Prescription Glasses: Frames	Every 24 months	Every 24 months
Contact Lenses	Every 12 months in lieu of glasses	Every 12 months in lieu of glasses
Benefit Savings	In-Network	Out-of-Network
Laser Vision Correction	15% Savings	n/a
Prescription Glasses	20% Savings	n/a
Contact Lenses	15% off evaluation	n/a

RATES

Medical • Dental • Vision

Front Range

	Plan A PPO
Employee Only	\$729.49
Employee + Spouse	\$1,609.76
Employee + Child(ren)	\$1,313.96
Employee + Family	\$2,264.26

	Plan B PPO
Employee Only	\$662.18
Employee + Spouse	\$1,461.71
Employee + Child(ren)	\$1,192.80
Employee + Family	\$2,055.63

	Plan B HMO
Employee Only	\$625.10
Employee + Spouse	\$1,379.86
Employee + Child(ren)	\$1,126.01
Employee + Family	\$1,940.52

	Plan C PPO
Employee Only	\$572.67
Employee + Spouse	\$1,264.23
Employee + Child(ren)	\$1,031.60
Employee + Family	\$1,777.82

	Plan D PPO HSA
Employee Only	\$628.48
Employee + Spouse	\$1,387.42
Employee + Child(ren)	\$1,132.11
Employee + Family	\$1,951.06

	Plan E PPO HSA
Employee Only	\$559.64
Employee + Spouse	\$1,235.59
Employee + Child(ren)	\$1,008.15
Employee + Family	\$1,737.47

	Dental Plan
Employee Only	\$31.71
Employee + Spouse	\$64.70
Employee + Child(ren)	\$84.86
Employee + Family	\$125.49

	Vision Plan
Employee Only	\$7.79
Employee + Spouse	\$15.61
Employee + Child(ren)	\$13.22
Employee + Family	\$21.79

Ancillary Benefits

Public Sector Healthcare Group offers ancillary benefits through MetLife and Humana.

MetLife Basic Life and AD&D

Public Sector Healthcare Group offers a Basic Life and AD&D policy through MetLife. This policy covers up to \$50,000 for employees, \$5,000 for spouses, and \$2,000 for children. MetLife also offers an optional life policy up to \$500,000 or up to 5 times the annual salary for employees, up to \$100,000 for spouses, and up to \$10,000 for children.

Upon initial enrollment, the guaranteed issued amount where no medical paperwork is required for MetLife's optional life plan is \$100,000 for employees and \$30,000 for spouses.

Humana Basic Life and AD&D

Public Sector Healthcare Group offers a Basic Life and AD&D policy through Humana. This policy covers up to \$100,000 for employees, \$10,000 for spouses, and \$2,500 for children. Humana offers an optional life policy with a guarantee issue up to \$100,000 or up to 5 times the annual salary for employees and their spouses. Humana also offers \$10,000 for children.

Upon initial enrollment, the guaranteed issue amount where no medical paperwork is required for the optional life plan is \$50,000 for employees and \$20,000 for spouses.

MetLife Long-Term Disability

Public Sector Healthcare Group offers a Long-Term Disability plan through MetLife. This plan helps employees replace a portion of their income for an extended period. The plan pays 60% of employee pre-disability earnings up to a maximum of \$6,000 per month.

MetLife Short-Term Disability

Public Sector Healthcare Group offers a Short-Term Disability plan through MetLife. The STD plan pays 60% of employee pre-disability earnings for up to 9 weeks for employees who are sick, pregnant, or experience an accidental injury. The maximum weekly benefit for this plan is \$1,000.

Employee Assistance Program

Public Sector Healthcare Group offers an Employee Assistance Program through MetLife. This program is available only to the agencies that have enrolled in the Long-Term Disability plan. Employees and their family members are entitled to 5 free consultations with a licensed clinician per incident, per individual per year. Additionally, financial services, childcare, and eldercare, assistance and referrals, Identity Theft Recover Services, Legal Services, and Daily Living Services (referrals to consultants and business) are provided at no additional cost to members.

TIMELINE

Renewal and Open Enrollment Timeline



JUNE

Mid-year Workshop, Employee Survey, New Vendor + Product Meetings

JULY

**Receipt of Carrier Vendor Renewals
Renewal Negotiations and Final Bids From Vendors**

AUGUST

Executive Committee Presentations and Recommendations

SEPTEMBER

Annual Operating Committee Meeting to Finalize Benefits

OCTOBER

**Finalize Member Agency Programs and Offerings,
including Employee Cost Share**

NOVEMBER

Open Enrollment Meetings & Employee Elections

DECEMBER

Benefit Data Processing

JANUARY

Start Date for the Next Plan Year

