



For Local 8 Members at Crisis Connections

November 30, 2023

Urgent Reminder to Vote on Possible Changes to Healthcare by 8am Tomorrow, December 1, 2023!

At CC's request, our Union Stewards and Reps met with Alex (HR) and Sonja (Finance) on Wednesday, November 22nd, and Monday, November 27th, to discuss the possibility of changing health insurance providers in 2024. Because health insurance was negotiated as part of the union contract, any changes to our insurance needs to be agreed upon by a majority of voting employees. With some urgency, we need you to review the insurance options for 2024 (outlined below) and cast your vote so that CC can begin open enrollment with enough time before January 1, 2024.

Here's what you need to know:

Employees currently have medical benefits through Kaiser Permanente (KP). There are two KP plans to choose from: HMO Virtual Plus (more restricted network) and PPO (more flexible network).

The language in <u>Section 12.1 Medical/Vision/Dental Coverage</u> of our union contract says, "The Employer will maintain the current healthcare carrier, plan design, and the outlined benefit levels below for Kaiser Permanente PPO and HMO Virtual Plus plans and Delta Dental DPPO plan for the duration of this Agreement." This means, unless

employees agree otherwise, CC is obligated to provide the same KP plans and to continue to pay the same negotiated percentage share of the premium through 2025.

However, CC has requested to change your healthcare carrier and plan design. CC was recently notified that KP's health insurance renewal rates for 2024 are set to increase the monthly premiums by over 25%. CC did not anticipate this unusually high increase and therefore did not budget for it. CC reports this 25% increase would create a budgetary challenge that could potentially lead to operational cuts. Further, CC has begun hiring more out-of-state employees and they state KP's coverage is more limited in areas outside of Washington State. In an effort to contain costs and increase coverage, CC asked us to change the healthcare carrier from KP to Aetna, whose bid reflected an 8% increase in premiums (as opposed to 25%). We informed them that this could only be accomplished by a vote of the membership.

Review the information below and <u>VOTE HERE</u> by 8am on Friday, December 1, 2023. The outcome will be decided by a simple majority of those who vote. Make your voice heard!

You are voting on whether you want CC to stay with KP or switch to Aetna. Your OPEIU Local 8 Reps and Stewards aren't making a recommendation to vote one way over another as there are both pros and cons to moving to the Aetna plan—it is truly dependent on your individual usage and needs. You can review the side-by-side comparisons summarizing the KP and Aetna plans below and make the decision best for you. You will notice, whereas KP offers the HMO and PPO, Aetna only offers a PPO option. For an even more in-depth overview, you can access the full Aetna PPO plan here. (Please note there is one error in this document- it says routine eye exams are not covered but we have confirmed they are and there is a \$250 annual hardware benefit as well).

	OPTION A				OPTION B		
Summary of Covered	Kaiser Permanente Current Virtual Plus HMO		Kaiser Permanente Current Access PPO Waiver		Aetna Open Choice PPO - Washington		
Benefits	In-Network	Out-of-	In-Network	Out-of-Network	In-Network	Out-of-Network	
Calendar Year Deductible	Embedded	Network	Embedded		Emb	Embedded	
Individual	\$250	n/a	\$1,000	\$2,000	\$1,000	\$3,000	
Family	\$500	n/a	\$3,000	\$6,000	\$2,000	\$6,000	
Out-of-pocket Maximum		TI) ü					
(includes deductible & copays)	Embedded		Embedded		Embedded		
Individual	\$3,000	n/a	\$4,000	Unlimited	\$6,000	\$12,000	
Family	\$6,000	n/a	\$12,000	Unlimited	\$12,000	\$24,000	
Physician Services	- 4 - 141-						
Primary Care Physician	Referred: \$10 copay / Non- Referred: 90% after deductible	Not covered	\$35 copay	50% after deductible	\$25 copay	50% after deductible	
Specialist	Referred: \$30 copay / Non- Referred: 90% after deductible	Not covered	\$35 copay	50% after deductible	\$40 copay	50% after deductible	
Telemedicine	Covered in full	Not covered	Covered in full	50% after deductible	Covered in full	50% after deductible	
Preventive Care	Covered in full	Not covered	Covered in full	50% after deductible	Covered in full	50% after deductible	
Behavioral Health Services							
Inpatient Mental Health or	90% after deductible	Not covered	80% after	50% after	80% after	50% after	
Substance Abuse Services	90% after deductible	Not covered	deductible	deductible	deductible	deductible	
Outpatient Mental Health or	Referred: \$10 copay / Non-	Not covered	\$35 copay	50% after	\$25 copay	50% after	
Substance Abuse Services	Referred: 90% after deductible	Not covered	\$55 copay	deductible	\$25 сорау	deductible	
Emergency Medical Care							
Inpatient Hospital Services	90% after deductible	Not covered	80% after deductible	50% after deductible	80% after deductible	50% after deductible	
Emergency Room (ER) Care	90% after \$200 copay		80% after \$200 copay		80% after \$250 copay		
ER copay waived if admitted?	Yes		Yes		Yes		
Urgent Care	Primary Care: \$10 copay /	90% after \$200	\$35 copay	50% after	\$50 copay	50% after	
-	Specialty Care: \$30 copay	copay		deductible		deductible	
Lab/X-Ray			80% after	50% after	80% after	50% after	
Diagnostic Lab/X-Ray	90% after deductible	Not covered	deductible	deductible	deductible	deductible	
High Tech Services (MRI, CT	90% after deductible	Not covered	80% after	50% after	80% after	50% after	
scans, etc.)	30% after deductible	Not covered	deductible	deductible	deductible	deductible	
Prescriptions (30-day supply)							
Preferred Generic	\$10 copay		\$15 copay		\$10 copay		
Preferred Brand	\$30 copay		\$50 copay		\$40 copay		
Non-Preferred Drugs	above cost share applies		\$95 copay		\$70 copay	60%	
Speciality Drugs	\$150 copay	Not covered	\$150 copay	Not covered	70% *Max cost \$150		
Non-Formulary Speciality Drugs	n/a		70%		70% *Max cost \$150		
Mail Order (90-day supply)	\$5/\$60/\$300		\$10/\$60/\$130		\$20/\$80/\$140	Not covered	
Other Services and Supplies							
Durable Medical Equipment	80% after deductible	Not covered	80% after deductible	50% after deductible	80% after deductible	50% after deductible	
Home Health Care	Covered in full	Not covered	80% after	50% after	80% after	50% after	
Home Health Care	Covered in full	Not covered	deductible	deductible	deductible	deductible	
Skilled Nursing/Extended Care	90% after deductible	Not covered	80% after deductible	50% after deductible	80% after deductible	50% after deductible	
Facility Hospice Care	Covered in full	Not covered	80% after	50% after	80% after	50% after	
			deductible	deductible	deductible	deductible	
Chiropractic - Annual Limits	10 visits per yea			s per year 50% after		per year 50% after	
Chiropractic Services	\$10 copay	Not covered	\$35 copay	deductible	\$40 copay	deductible	
Acupuncture - Annual Limits	12 visits per yea		12 visit	s per year 50% after	20 visits	per year 50% after	
Acupuncture	\$10 copay	Not covered	\$35 copay	deductible	\$25 copay	deductible	
Outpatient Rehab Therapies - Annual Limits	45 visits per year		45 visits per year		25 vists per year		
Physical, Occupational, & Speech	Primary Care: \$10 copay/	Not covered	\$35 copay	50% after	\$40 copay	50% after	
Therapy	Specialty Care: \$30 copay	Hot covered	433 сора у	deductible	_ф -то сорау	deductible	
Vision			_	40		40	
Plan Benefit Limits	Once every 12 months		Once every 12 months		Once every 12 months		
Refractive Exam	\$10 copay \$150 allowance		Covered in full \$150 allowance		Covered in full \$250 allowance		
Eye Wear	\$ 150 allowance		\$150 a	liowance	\$250 a	liowance	

The previously negotiated cost share for KP's PPO would be applied to Aetna's PPO (ex. employee pays 2% and Employer pays 98% of the monthly premium for "Employee Only" coverage), but the dollar amounts would vary per the chart below. Depending on whether you are currently on KP's HMO or PPO, your share of the monthly premium could go slightly up or down in 2024.

Level of Coverage	2024 KP HMO Monthly Premium Cost to Employee	2024 KP PPO Monthly Premium Cost to Employee	2024 Aetna PPO Monthly Premium Cost to Employee	
Employee Only	\$0	\$19.09	\$16.08	
Employee + Spouse	\$887.28	\$1,207.37	\$1,016.95	
Employee +	\$642.34	\$928.61	\$782.17	
Child(ren)				
Family	\$1,664.21	\$2,118.70	\$1,783.02	

If you have any questions or need help interpreting any of this information, reach out to HR ASAP! You deserve to feel confident in your ability to make an informed decision about your healthcare.

Local 8 Union Stewards at CC Include:

Lauren Gougeon- Call Specialist, SK Lewis- Screener, Joseph Revard- Provider Outreach Coordinator, and Darby Robertson- CSC

As always, please contact your Union Representatives

<u>Valarie@opeiu8.org</u> and <u>Phoebe@opeiu8.org</u> with any questions, comments, or ideas.



OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION LOCAL 8

1-800-600-2433 or 206-441-8880 ★ Fax: 206-441-0207 ★ www.opeiu8.org

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liuna#242/afl-cio