TOTAL REWARDS
Human Resources

Medical Benefits Plan Updates

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Agenda

- MFP RFP for Claims Administration
- MBP Rates Update
- Other MBP Updates
- Questions

MBP RFP for Claims Administration

- The MBP is self-insured. An outside claims administrator is contracted to provide claims administration and customer service.

- Since 1999, there have been separate claims administrators for U.S. versus international participants.
  - 1999-2007 Willse and Associates/NCAS (U.S) and Vanbreda International (outside of U.S.)
  - 2008-2023 Aetna (U.S.) and Vanbreda/Cigna (outside of U.S.)

- In order to ensure a competitive process, procurement rules require the Fund to conduct an RFP process after a maximum of five years under one provider.

- The current contracts with Aetna and Cigna have been in place since 2018.

MBP RFP for Claims Administration

- Mercer was contracted to assist the Fund in the RFP process. Mercer advised on the RFP requirements and conducted an evaluation of the proposals received.

- Proposals were evaluated taking the following factors into consideration:
  - Customer service including ability to provide enhanced service
  - High quality claims processing
  - Comprehensive network with high quality providers for medical, dental and prescription drugs
  - Case management / member advocacy programs

- RFP was sent to current administrators (Aetna and Cigna) as well as CareFirst Blue Cross Blue Shield and United Healthcare

- Consideration given to combining U.S. and international administration under one vendor

- The selection of the new administrator(s) will be announced in the next two or three weeks.

- Implementation of any changes will begin immediately and take effect on January 1, 2024

MBP Contribution Rates Update

- Contribution rates were increase by 6.1 percent effective May 1, 2023.
- In line with the Board's decision in 2022, contribution rates are no longer linked to the annual staff salary increase but to an external claims trend index that more closely reflects actual increases in plan costs.
- The intent is to gradually raise rates to a level where contribution rates will be sufficient to cover plan costs. This is necessary due to the gradual reduction in the plan's reserve.
- We expect that savings achieved from negotiations with the new claims administrator(s) will minimize the need for significant contribution increases in future years.

Other MBP Updates

- COVID Testing
  - With the end of the U.S. Public Health Emergency on May 12, 2023, the MBP's coverage for COVID tests has reverted to Aetna's standard coverage practices:
    - Over the counter (at home) COVID-19 tests are no longer be covered.
    - COVID-19 lab tests are covered the same as any other lab test, subject to the plan deductible and co-insurance.
    - COVID-19 vaccines continue to be covered in full
- Reminder of plan enhancements effective January 2023
    - Coverage of eyeglasses and contact lenses has been increased to an allowance of $600 every two years.
    - Coverage for hearing aids has been increased to an allowance of $4,500 every four years

Questions

- **Medicare Part B**
  - Required of all retirees and their spouses who turn 65 on or after January 1, 2021
  - It is important that the spouse's SSN be on file with FIN so that Medicare premium reimbursements can be made to the spouse. The SSN can be submitted to:

    The International Monetary Fund ,Pension Unit

    700 19th St, NW, HQ@-12-008

    Washington, DC 20431

    or Faxed to the Pension Unit in the Finance Department at (202) 701-2544
  - A Medicare seminar is being planned for the fall. More information will be communicated as soon at is available.

Questions

- **Resolving claim issues**
  - Contact Aetna customer service first on the number on your ID card:
    - 1-866-258-6680 for medical claims
    - 1-888-792-3862 for pharmacy claims
  - If unable to resolve the issue, request an appointment with the Fund's onsite Aetna representative Aileen Mcneil by sending an email to mbpqueries@imf.org

- **Brand vs. Generic Drugs**
  - The MBP does not require the use of generic drugs. If a brand name drug is prescribed or is preferred by the member, it will still be covered accordingly:
    - No deductible
    - Retail Coinsurance: 10% generics, formulary brand 15%, non-formulary brand 25%

Questions

- **Concierge providers**
  - The annual membership fee charged by concierge providers is not covered by the MBP.
  - Individual services obtained at a concierge provider may be covered if an itemized invoice for that service is obtained and a claim is filed by the member as a regular claim.