KPSC Case No. 2017-00179
Commission Staff's First Set of Data Requests
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January 1, 2017- December 31, 2017

PARTICIPANT MEDICAL CONTRIBUTIONS

The pre-tax monthly cost to active full-time employees is calculated based on a percentage of the total cost of coverage. The pre-tax monthly costs to active part-time employees are two and one-half times the monthly costs of active full-time employees.

MEDICAL PLAN SURCHARGES

Spousal Surcharge

Effective January 1, 2014, if an active employee covers his/her spouse/domestic partner on AEP's medical plan, and that spouse/domestic partner has access to medical coverage through his/her employer, the employee will be assessed a surcharge of \$50.00 per month.

Tobacco Surcharge

Effective January 1, 2015, employees who use tobacco and nicotine products will have a surcharge, in the amount of \$50.00 per month, assessed when they elect coverage under AEP's medical plan.

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GROUP MEDICAL PLANS

Health Savings Account (HSA)	HSA Basic		HSA Plus	
Plan Options	In-Network	Out-of-Network	In-Network	Out-of-Network
Company Annual Contribution to HSA	NA	NA	participant only: \$500 participant + spouse or participant + child(ren): \$750 participant + family: \$1,000	
Annual Deductible (includes medical, prescription and behavioral health) Annual out-of-	\$2,700/participant \$5,400/participant + spouse\$5,400/participant + 1 child \$8,100/participant + children \$8,100/participant + family \$4,000/participant	\$4,000/participant \$8,000/participant + spouse \$8,000/participant + 1 child \$12,000/participant + children \$12,000/participant + family \$8,000/participant	\$2,000/participant \$3,000/participant + spouse\$3,000/partici pant + child(ren) \$4,000/participant + family	\$3,000/participant \$4,500/participant + spouse \$4,500/participant + child(ren) \$6,000/participant + family
pocket maximum	\$8,000/participant + spouse\$8,000/participant + 1 child \$12,000/participant + child(ren) \$12,000/participant + family	\$16,000/participant + spouse\$16,000/participant + 1 child \$24,000/participant + child(ren) \$24,000/participant + family	\$6,000/participant + spouse\$6,000/participant + child(ren) \$8,000/participant + family	\$9,000/participant + spouse \$9,000/participant + child(ren) \$12,000/participant + family
Co-Insurance	10% after deductible	30% after deductible	15% after deductible	30% after deductible
Preventive Care	\$0%; no deductible	30% after deductible	\$0%; no deductible	30% after deductible
Prescription Coverage	10% after deductible		15% after deductible	
2017 Full-Time Employee Monthly Cost	participant only \$31.09 participant + spouse/domestic partner \$67.00 participant + child(ren) \$62.79 participant + family \$96.60		participant only \$89.70 participant + spouse: \$198.53 participant + child(ren) \$172.09 participant + family \$280.91	

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HRA Plan				
		Participant Only	Participant + Spouse or Participant + Child(ren)	Participant + Family
Health Reimbursement	AEP Annual	\$1,000	\$1,500	\$2,000
Account (HRA) Traditional Health	Allocation Annual	\$1,500	\$2,250	\$3,000
Coverage (Prescription coverage same as any other medical expense)	Deductible (includes medical, prescription drug and behavioral health)	\$1,300	\$2,230	\$3,000
	Then, employee pays coinsurance for covered services	15% for in-network providers 30% for out-of-network providers		
	Annual Out-of- Pocket Maximum	\$4,000 if innetwork \$6,500 if out-of-network	\$6,000 if in-network \$9,750 if out-of-network	\$8,000 if innetwork \$13,000 if out-of-network
Annual Preventive (not applied to Company's HRA allocation)	In-network: 0%; n Out-of-network: 3	o deductible 0% after deductible	•	

Teladoc

Teladoc provides employees and their eligible dependents with 24/7/365 access to US board-certified physicians by phone or online video. Teladoc can diagnose, recommend treatment and prescribe medication when appropriate, including sinus problem, bronchitis, allergies, poison ivy, cold and flu symptoms, urinary tract infection, respiratory infection and more. The cost to participants for each physician consultation is \$40.

This program is available to participants enrolled in an AEP consumer-directed health plan.

Wellness Program

Healthy living habits are an essential ingredient for healthy employees. For that reason, AEP sponsors a number of programs, including incentives, and initiatives designed to help employees achieve and maintain a healthy lifestyle. All active employees (regardless of whether they are enrolled in a medical plan) are eligible to participate in the following wellness programs along with spouses and domestic partners of active employees who are covered under an AEP medical plan. Rewards are offered for preventive care, flu shots, health risk assessments, life-style coaching including tobacco cessation.

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GROUP DENTAL

DPPO option

Coverage Level	Participant Only	Participant +	Participant +	Participant +
		Spouse	Child(ren)	Family
Deductible (does	\$50/individual	\$50/individual	\$50/individual	\$150/Family
not apply to			\$150/family	
preventive service)				
Annual Maximum	\$1,500 per covered person			
Coinsurance				
Preventive	100%			
Basic Services	80% after deductible			
Major Services	50% after deductible			
Orthodontia	50% up to a lifetime maximum of \$1,500 per covered child			

DMO Option

A DMO option is available to employees who live within the same zip code area as a network DMO dentist. Similar to a medical Health Maintenance Organization (HMO), the DMO provides dental service through a group of network dentist. The DMO offers no deductibles or annual maximum, no co-pay for covered preventive services and low, fixed co-pays on other dental services.

The pre-tax monthly costs to active part-time employees are two and one-half times the monthly costs to active full-time employees. The monthly costs to certain grandfathered retirees and surviving dependents are the same as active employees. The monthly cost to most other retirees and eligible surviving dependents are 100% of the total cost of coverage.

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VISION PLAN

AEP offers comprehensive employee paid vision coverage for eye care and vision correction. AEP's Comprehensive Vision Plan provides coverage through the Fidelity Security Life Insurance Company for eye exams, contacts (including disposable contacts) and eyeglass lenses and frames. It also offers discounts on special features, such as scratch-resistant lenses, laser eye surgery and more. Vision care discounts are also available through the Anthem medical plans.

Vision plan participants can take advantage of the discounted retinal-imaging exam option; in addition, members who have Type 1 or Type 2 diabetes are eligible for a follow-up exam and additional testing two times per benefit year.

Benefits are provided through EyeMed Vision Care's Access national network of private practice optometrists, ophthalmologists, opticians and retailers, such as Sears Optical, Target Optical, most Pearle Vision locations and LensCrafters.

Employee Contribution	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
	\$ 6.82/mth	\$12.93/mth	\$13.61/mth	\$20.41/mth