



# Custom Design Benefits

Innovative Cost Containment Solutions for Employee Benefits

## **+*Inside***

FMLA and Leave  
Administration

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Customer  
Survey Results

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Drug Formulary  
Management

---

Compliance  
Corner: COVID-19  
Immunization

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COVID-19 Impact  
on Self-Funded  
Employers

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*And More*

FOURTH ISSUE  
NEWSLETTER

2020

# Executive Spotlight

## Letter from Julie



Season's Greetings!

We're wrapping up 2020 (thank the Lord!). I know we are all anxious to say goodbye, adios, sayonara to this crazy year!

I want to take this opportunity to thank our brokers and clients for your continued partnership. With the release of the first COVID-19 vaccine, we are encouraged that we may be coming closer to an end of this pandemic and a return to our normal lives. We look forward to once again meeting with you in person in 2021. But in the meantime, our CDB family will continue providing you and your members with the high touch customer service you deserve and appreciate, as reflected in the results of our annual customer satisfaction survey. I am very proud of our staff who continuously provide excellent customer service despite the fact that they and their families have also been impacted by COVID-19.

In our last issue of 2020, we're excited to share some great content from our Customer Conference, COVID-19 immunization coverage, and so much more. We look forward to your feedback and continuing to provide you with relevant information for your business.

We wish you and your family the best this holiday season, and a safe and healthy New Year.

Best regards,

Julie D. Mueller  
President & CEO

## Inside this issue

Letter from Julie .....	2	Conference Videos On Demand .....	5	Fighting High Prescription Costs .....	8
Customer Survey Results .....	3	Compliance Corner .....	6	PCORI Update .....	8
Executive Analytics .....	4	FMLA Feature .....	7	Inside Insights .....	9

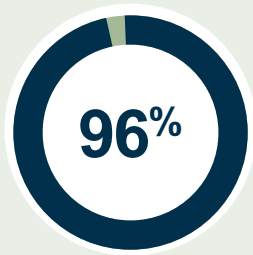


# The Results Are In!

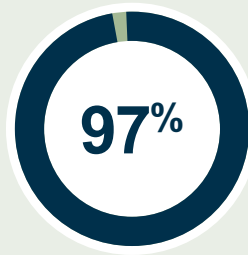
## Customer Satisfaction Survey Results

Our annual tradition of gathering client feedback continued this year with our customer satisfaction survey. With more than 200 responses, we got a lot of great feedback to help us better support our clients with more products and better services.

Thank you to everyone who took the time to complete the survey! We value your input on making sure we continue to exceed your expectations in 2021.



**WOULD RECOMMEND  
CDB**



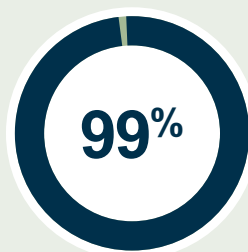
**CONSIDER SERVICE  
TO BE  
EXCELLENT**



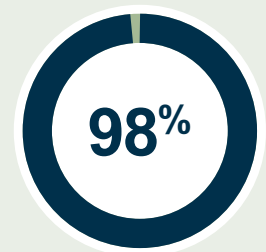
**BELIEVE CDB CLEARLY  
UNDERSTANDS  
QUESTIONS/PROBLEMS**



**SAY CDB RESEARCHES  
AND RESOLVES WITH  
ACCURACY**



**SAY CDB IS COMPETENT  
IN HANDLING THEIR  
PROBLEM**



**SAY CDB RESPONDS  
WITHIN AGREEABLE  
TIMEFRAME**

# Executive Analytics

## COVID-19 Impact on Self-Funded Employers

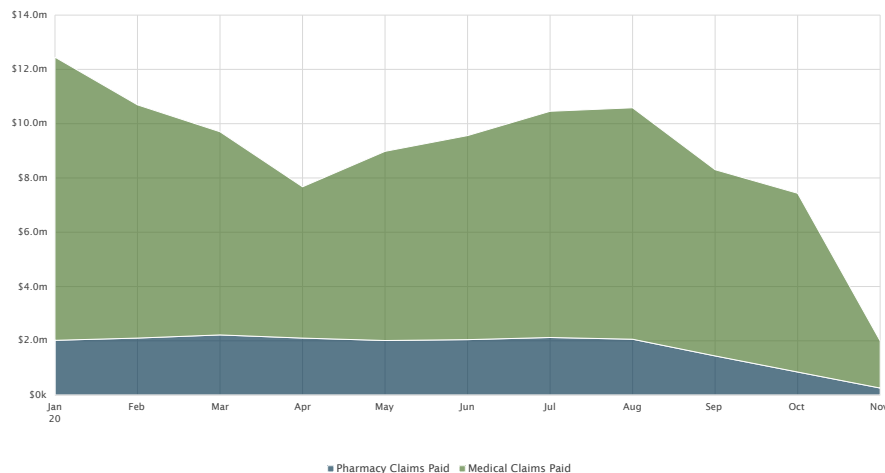
This issue's Executive Analytics provides a look at the impact of COVID-19 through 2020. Through the end of November, 1541 members have been tested for COVID-19, with 384 members diagnosed (24.9%). Plans have paid \$91,959.45 for COVID-19 testing from January through November at an average cost per test of \$60.

Members with Primary Diagnosis of COVID-19	
Place of Service	Paid Amount
Inpatient Hospital	\$294,620.87
Emergency Room - Hospital	\$94,171.53
Outpatient Hospital	\$10,859.03
Office	\$9,895.42
Urgent Care Facility	\$7,116.71
Independent Laboratory	\$6,386.77
Ambulance - Land	\$1,969.60
Telehealth	\$728.68
Other Place of Service	\$667.42
Off Campus-Outpatient Hospital	\$505.55
Walk-in Retail Health Clinic	\$421.82
Home	\$238.00
Nursing Facility	\$60.93
<b>GRAND TOTAL</b>	<b>\$427,642.33</b>

**Health Plan Snapshot Trended**  
Population: Book of Business

Custom Design Benefits

**Total Health Plan Claims Paid**



Reporting Period: Incurred January 2020 to November 2020 Through November 2020  
Benchmark: Commercial

December 16, 2020

# Customer Conference Playback!



This year's Customer Conference was full of great information shared by our guest presenters and CDB leaders. We want to make sure all of our partners can learn about the latest trends in healthcare, so we're offering the videos to you!

With topics ranging from soaring drug costs to the need for behavioral health options, the available videos cover today's most important topics to help you make the best decisions for your business. Ask your Account Manager for more information or [VISIT THIS PAGE](#) to make a request.

## AVAILABLE VIDEOS:

### **CDB YEAR IN REVIEW AND LOOKING AHEAD**

*Julie Mueller, Custom Design Benefits*

CDB's President and CEO provides an update on COVID-19's impact on Custom Design Benefits' self-funded employers and an outlook for 2021.

### **SPECIALTY ALTERNATIVE FUNDING SOLUTION**

*David Galardi, Paydhealth*

Learn about how alternative funding solutions can take some of the pain out of the high cost of specialty drugs.

### **SOARING DRUG COSTS**

*L.G. Hanzel, RxResults*

Discover the latest evidence-based strategies for removing waste from drug formularies.

### **SELF-FUNDING IN A COVID WORLD**

*Adam Russo, The Phia Group*

The Phia Group's Adam Russo covers challenges facing a health plan's success in the current environment.

### **TODAY'S NEED FOR ACCESSIBLE BEHAVIORAL HEALTH**

*Rob Previte, Call A Doctor Plus*

Hear from Call A Doctor Plus about how telemedicine and behavioral health can benefit your employees by providing them the care they need, when they need it.

### **COVID-19 IMPACT ON FMLA**

*Karen Murphy, Custom Design Benefits*

CDB's own Karen Murphy provides an update on the significant changes to family medical leave this year due to the coronavirus pandemic.

### **CUSTOM CARE AND SPECIALTY MEDICATION MANAGEMENT**

*Terri Martin, Custom Design Benefits*

Learn how CDB's population health management program can bridge the gaps in member care to reduce hospital admissions, emergency room visits and health care costs.

# Compliance Corner

## COVID-19 Immunization Coverage



### Summary

Non-grandfathered group health plans must cover approved COVID-19 immunizations without cost-sharing during the COVID-19 public health emergency.

Under Section 3203 of the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) non-grandfathered group health plans are required to provide coverage for COVID-19 immunizations without cost sharing. This coverage requirement applies to immunizations recommended by the Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention (CDC).

On October 28, 2020, the Centers for Medicare & Medicaid Services (CMS) announced an Interim Final Rule with Comment Period (IFC) related to the implementation of the Cares Act requirements. The IFC rules related to immunization coverage are outlined below:

- Plans must cover COVID-19 immunizations recommended by ACIP within 15 business days of the effective date of the recommendation.
- During the COVID-19 public health emergency, plans must cover the ACIP recommended immunizations without cost sharing, whether services are provided by an in-network or out-of-network provider.
- This coverage includes items and services involved in the administration of the immunizations.

Although currently only one vaccine is approved for use in the U.S. (Pfizer/BioNTech), there is some initial estimated pricing available for vaccines produced by companies that have reached agreements with the federal government as part of Operation Warp Speed. The following estimates are for one dose, with each immunization requiring two doses:

AstraZeneca:.....	\$3 to \$4 per dose
Johnson & Johnson: .....	\$10 per dose
Moderna: .....	\$32 to \$37 per dose
Novavax:.....	\$16 per dose
Pfizer/BioNTech: .....	\$19.50 per dose

#### Sources:

Fourth COVID-19 Interim Final Rule with Comment Period (IFC-4) CMS.gov Newsroom 28 Oct. 2020. <<https://www.cms.gov/newsroom/fact-sheets/fourth-covid-19-interim-final-rule-comment-period-ifc-4>>  
Rise, Julia. How Much Will It Cost to Get a COVID-19 Vaccine? Healthline 29 Nov. 2020. <<https://www.healthline.com/health-news/how-much-will-it-cost-to-get-a-covid-19-vaccine>>

# FMLA Feature

## Managing Leave During COVID-19

The coronavirus pandemic has disrupted our lives in so many unforeseen ways, even to the point of making it hard for employers to know who will be able to report for work. Earlier this year, with the CARES Act and the Families First Coronavirus Response Act, legislators expanded leave coverages and the FMLA—and CDB got to work immediately helping our clients.

While the Department of Labor created these new leave types, it's the IRS guidelines on receiving their associated tax breaks that have employers scrambling with leave administration. We're working hard to handle this new paid leave and keep our groups compliant by collecting and organizing the proper documentation.

### CDB Leave Administration

#### BY THE NUMBERS

Total Leaves Managed in 2019

1,307

Total Leaves Managed in 2020

2,268

Total COVID-19 Leaves to Date

760

**Nearly 75% increase in leaves managed!**

### COVID-19 Leave Breakdown

172 Care for Child (School/Care Center Closure)

141 Employees Self-Quarantined

27 Employees Caring for Self-Quarantined Individual

3 Employees Experiencing COVID-similar Situation

11 Employees Subject to Quarantine or Isolation

406 Employees with COVID Symptoms, Awaiting Diagnosis

We're here to help businesses take care of their employees, so we take leave management very seriously. Some clients have been hit extremely hard by the pandemic and have several employees out on leave every day. We help the employer care for the health and safety of the employees, and then manage the chaos afterwards to ensure proper compliance is maintained.

*Any client who has questions about leave administration, FMLA practices, or how the coronavirus has changed employee leave benefits should reach out to their Account Manager. We're happy to answer any questions you might have.*

# Fighting High Prescription Costs With an Evidence-Based Preferred Drug List

Employers list high prescription costs among their top concerns every year, but what can be done to address the problem? L.G. Hanzel of RxResults has spearheaded Moneypill, a series of articles focused on how employers can reinvent their pharmacy plan strategy.

The Formulary for Success, Volume 2 on Moneypill, demonstrates how traditional PBM arrangements and drug formularies aren't necessarily built to benefit the plan. Instead, Hanzel suggests employers utilize a pharmacy risk manager to advocate for the plan sponsor and its plan participants. A pharmacy risk manager uses the plan's claims data to build an evidence-based risk management strategy that leverages reference-based pricing, drug exclusions, prior authorizations and other initiatives to drive real savings.

*Download "The Formulary for Success Is an Evidence-Based Preferred Drug List"*

to see how a pharmacy risk management strategy reduced an employer group's spend by 46%. Visit Moneypill on LinkedIn to read more from the series.

## 2020-2021 PCORI Fee Update

The IRS recently released Notice 2020-84, which contained the PCORI applicable fee amount. The fee amount for plan years that end on or after October 1, 2020, and before October 1, 2021, is \$2.66 per covered person.

As a reminder, the PCORI fee, imposed by the Affordable Care Act, applies to plan sponsors of certain self-funded health plans and fully insured carriers to help fund the Patient-Centered Outcomes Research Institute. The fee is based on the average number of lives covered under the plan and is reported once per year on the second quarter Form 720, with payment made by July 31. The IRS updates the fee each year based on inflation.

Visit the [IRS website](#) to see the full text of Notice 2020-84.



# Inside Insights: Hyaluronic Acid Injection

Terri Martin, Chief Operating Officer, RN, BSN, MBA, CENP, NCQA PCMH CCE

Custom Design Benefits' Procedural Review Committee, led by the Medical Management team, is a multi-disciplinary group that meets monthly to review trends in authorization requests. This group makes recommendations and develops policy based on compliance with federal regulation, industry trends and review of evidence-based medicine.

The purpose of the Procedural Review Committee is rooted first in our Custom Fundamental, "Take care of the Client." These recommendations standardize policy and practice to provide the member with evidence-based medical care, while being a good fiduciary for the plan, through current Summary plan Documents and standard application of the language. Additional internal benefits are increased claim auto-adjudication and a well-educated Custom Design Benefits team to serve our members and clients.

Recently the Procedural Review Committee researched the practice of Hyaluronic Acid injection (HA), often requested in a series for arthritis in the knee. We consulted pharmacists at Rx Results and completed a review of the literature. Knee osteoarthritis is responsible for a large burden of care and cost within health care.

Our analysis found that a meta-analysis of only the double-blinded, sham-controlled trials did not show clinically important differences of HA treatment over placebo. This means that saline injections had the same effect as the Hyaluronic Acid injection on pain and stiffness. **For this reason, we now exclude Hyaluronic Acid injections, which often lead providers to offer alternatives that are known to be more effective.**



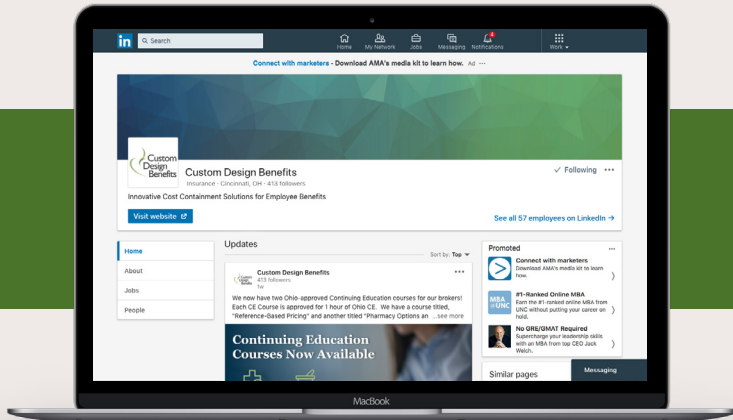
 Custom Design Benefits  
IS PROUD  
TO BE AMONG



# Happy Holidays from CDB!

As 2020 comes to a close and we look forward to 2021, we want to once more give thanks to you, our clients. The CDB team is inspired and humbled by your trust in us with your benefits needs. We look forward to another year in service to you and your members.

*We wish you a peaceful and happy holiday season.*



## Connect with CDB

*Have you checked out Custom Design Benefits on LinkedIn?*

**STAY UP TO DATE ON EVERYTHING  
CDB IS DOING!**

Thanks for reading this edition of the Custom Design Benefits Newsletter!  
To learn more about the products or announcements featured, call 513.598.2929.



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