

Frequently Asked Questions

Why are you making this change to Aetna & Vimly?

In August, the Risk Management Trust Board of Trustees voted to end the contract with Medcost, and selected Aetna and Vimly Benefit Solutions as our new HBT partners, effective July 1, 2024. This vote was based on a recommendation from League after a thorough analysis of Aetna's and Vimly's capabilities to meet member needs and pain points. We feel that this transition will provide members with a more positive customer service experience – both at the HR and employer level and the individual employee level.

One major deciding factor was the need for the League to have more involvement in eligibility, and for us to be able to help members directly. We will be bringing eligibility in-house, which will provide a higher level of customer service for our members.

What is the difference between Aetna & Vimly?

The League is enlisting two companies to work with the Health Benefits Trust and our members.

Aetna will serve as the medical third-party administrator for medical services claims management. Our plans will utilize Aetna's provider network and claims processing. This means that your employees will have an insurance card that is from Aetna, receive EOBs from Aetna, and providers will file medical claims with Aetna according to your plan requirements. Claims processing questions and assistance will be provided by Aetna. Further, we will utilize CVS Caremark as the pharmacy benefit manager.

Vimly Benefit Solutions, and its software platform named SIMON, will be the billing and eligibility vendor for our plans. The SIMON software allows the League to bring eligibility in-house. This means that the League will use the SIMON platform to make any enrollment changes, such as new hires, terminations and qualifying event changes on behalf of members.

This will all take effect July 1, 2024.

Will our health plan options change?

No, the Health Benefits Trust's plan options will not change. The only change is how we administer the plans' benefits.



What does it mean to move the eligibility in-house?

Many of our longstanding members may remember that the League previously handled billing and eligibility in-house very successfully and efficiently. This is a major reason why the SIMON software by Vimly was selected – they are a trusted name in benefit eligibility and many of our counterparts in other states highly recommend their services.

Further, the SIMON platform fits our varied plan needs and allows the League and our team to directly assist you with enrollment changes with a quick turnaround. If a member needs to add a new employee to its plan or terminate coverage, they can contact the League directly with this change. Members will also be able to log into the SIMON platform and make the change themselves. Either method allows the League to have access to this eligibility information and the ability to directly assist members when questions arise.

Do I need to act now?

No. We are busy developing implementation timelines and will tell you when we need you to act. This transition may require us to get renewal information from you sooner than in previous years, but again, we will let you know as soon as possible these timelines.

If you have questions, please continue reaching out to your <u>Business Services</u> <u>Consultants</u> or HBT staff directly at <u>mit@nclm.org</u>.

How does the Aetna provider network compare to Medcost and what we are used to?

We have confirmed that Aetna's provider network includes nearly all of the same providers that were previously covered – a 99.6% match. The handful of primary care physicians (PCPs) that are not currently in Aetna's network will be "grandfathered" as in-network providers for pool members. Bottom line, you will not have to change your PCPs!

How does the pharmacy coverage compare?

This transition will also change our pharmacy benefit manager from Optum RX to CVS Caremark. Employees are not limited to only CVS pharmacies and will be able to use pharmacy services and networks outside of CVS stores, including local pharmacies.

CVS Caremark is widely available in physical locations across North Carolina, as well as prescription delivery by mail. Using CVS Caremark also includes access to CVS Minute Clinics for health care needs.



What about customer service?

Customer service remains a top priority for the League and the Health Benefits Trust. You will keep your direct access to our League staff. Further, both Aetna and Vimly are trusted companies with proven track records of providing a high level of customer service. Many of the concerns we heard from members were related to eligibility and billing issues – enrollment changes often took a long time, and the League was unable to access information directly so our ability to solve issues was limited. Working with the SIMON software provides the League access to status updates and the ability to intervene if needed.

Both companies have intuitive online member portals and resources. We are confident members will notice a change for the better following the transition.

Does this affect my Vision, Dental, Disability and Life insurance?

Only from a billing and eligibility standpoint. Again, the League is bringing billing and eligibility in-house and will work with the SIMON platform to process any enrollment changes to vision, dental, disability and life coverage. This means changes made via SIMON will automatically get communicated to VSP, Delta Dental and Unum.

We are not changing relationships with VSP, Delta Dental or Unum or the coverage plans they provide.