



Teachers' Retirement System of the State of Kentucky

Insurance 2023

Gary L. Harbin, CPA
Executive Secretary

What TRS Is

Teachers' Retirement System of the State of Kentucky (TRS)

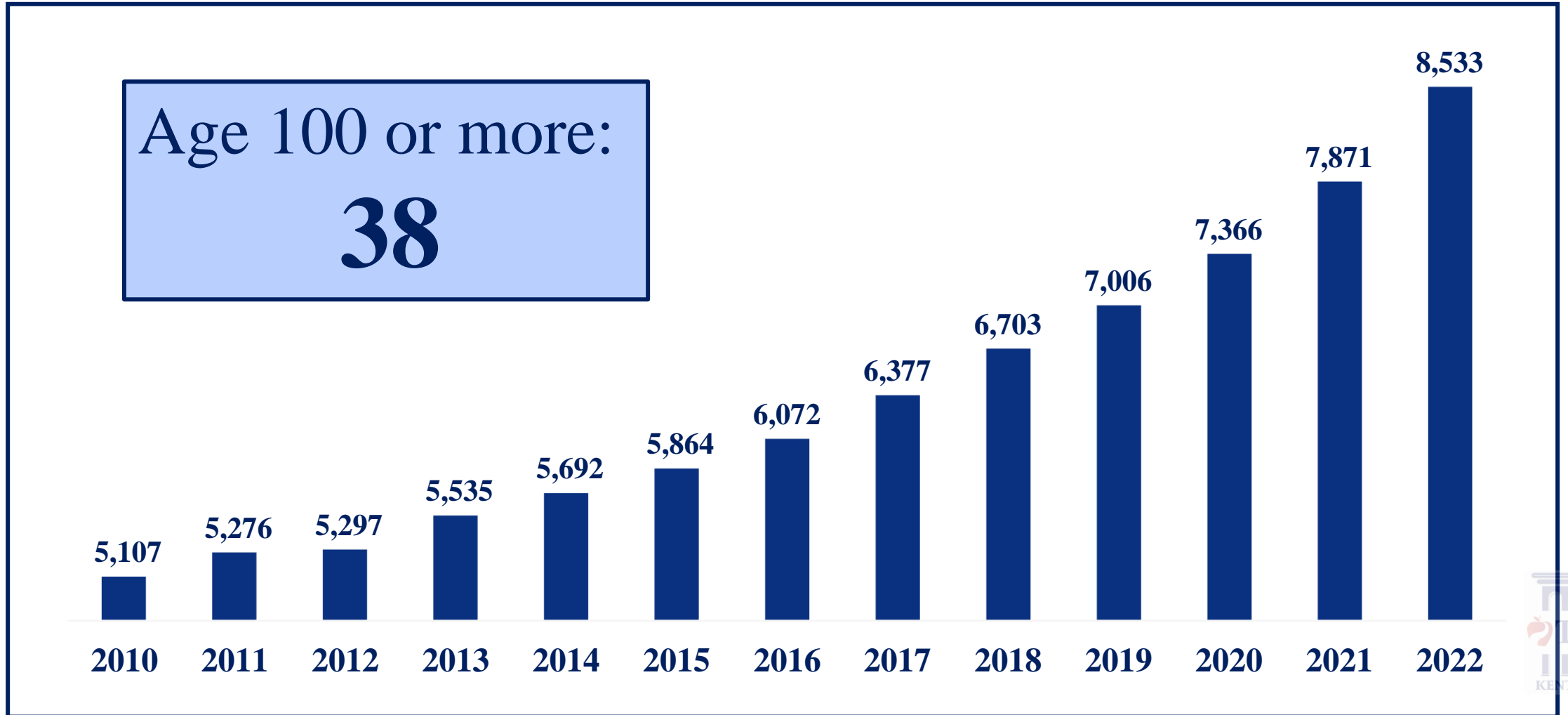
TRS is a defined benefit retirement plan that pays a defined amount in retirement based on the employee's length of service, final average salary and a retirement multiplier. TRS retirement eligibility is determined by the employee's age and years of service. The service retirement annuity is a guaranteed lifetime benefit.

- ◆ Member Recipients:
 - ◆ Female: 73%
 - ◆ Male: 27%



TRS Benefits Protect Teachers

Retirees over 80 as of Dec. 31



Two Plans for TRS Health Benefits

MEHP **Medicare** **Eligible Health** **Plan**

- Medicare-eligible or 65 & over
- Exclusively TRS members
- One Plan

KEHP **Kentucky** **Employees'** **Health Plan**

- Under 65 and not Medicare-eligible
- Same fund as active teachers and state employees
- Coverage options

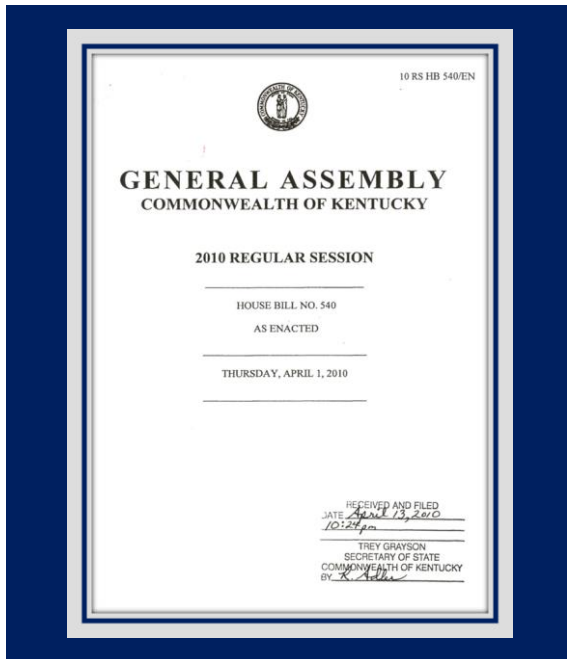
Health Insurance Details Subject to Change

Kentucky law guarantees retired teachers access to group coverage, but the details of that coverage – including costs and level of coverage – can change.

Shared Responsibility

In Second Decade

Shared solution providing permanent funding for retiree health care



Shared Responsibility Results

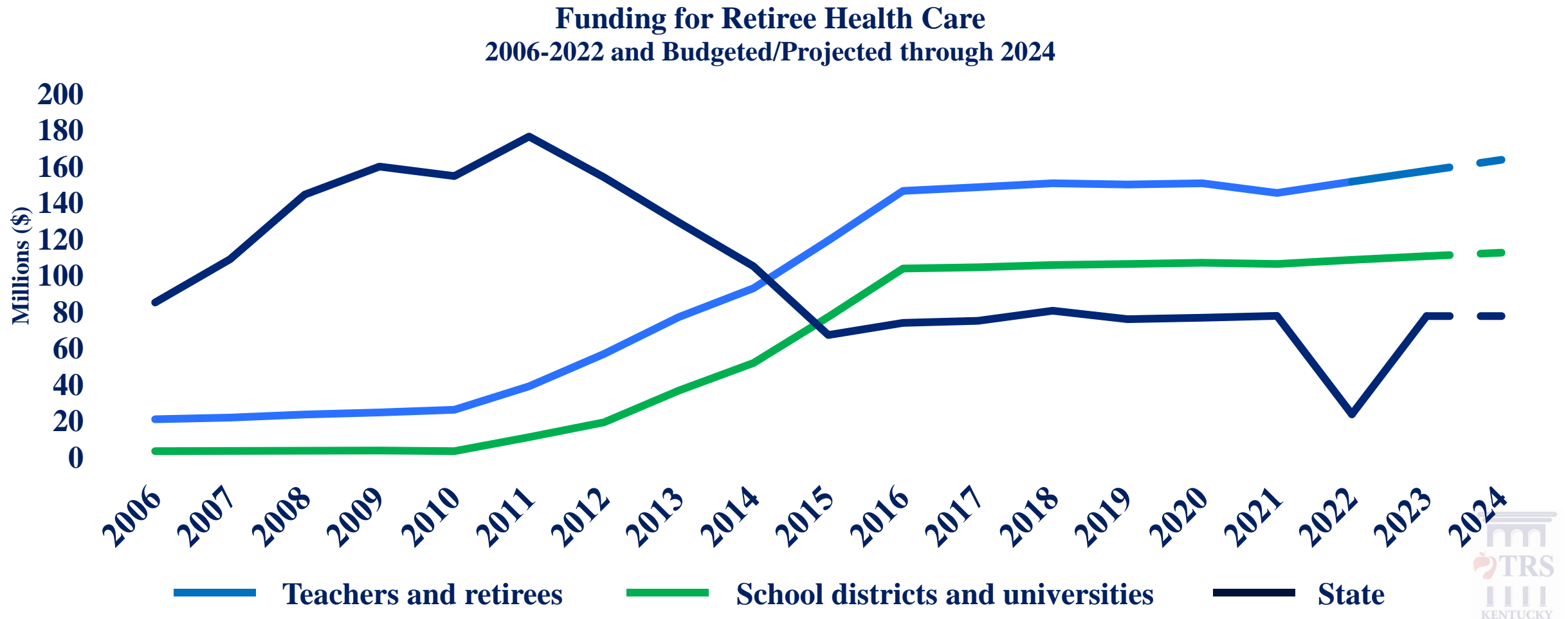
Prefunds Benefits

In 2010, board spearheaded Shared Responsibility passage to fund retiree health insurance, lowering state's cost from \$170 million in 2010 to \$70 million in 2020.

With implementation of Shared Responsibility and federal subsidy solutions, the state's \$6.2 billion share of unfunded liability fell to \$1.2 billion.

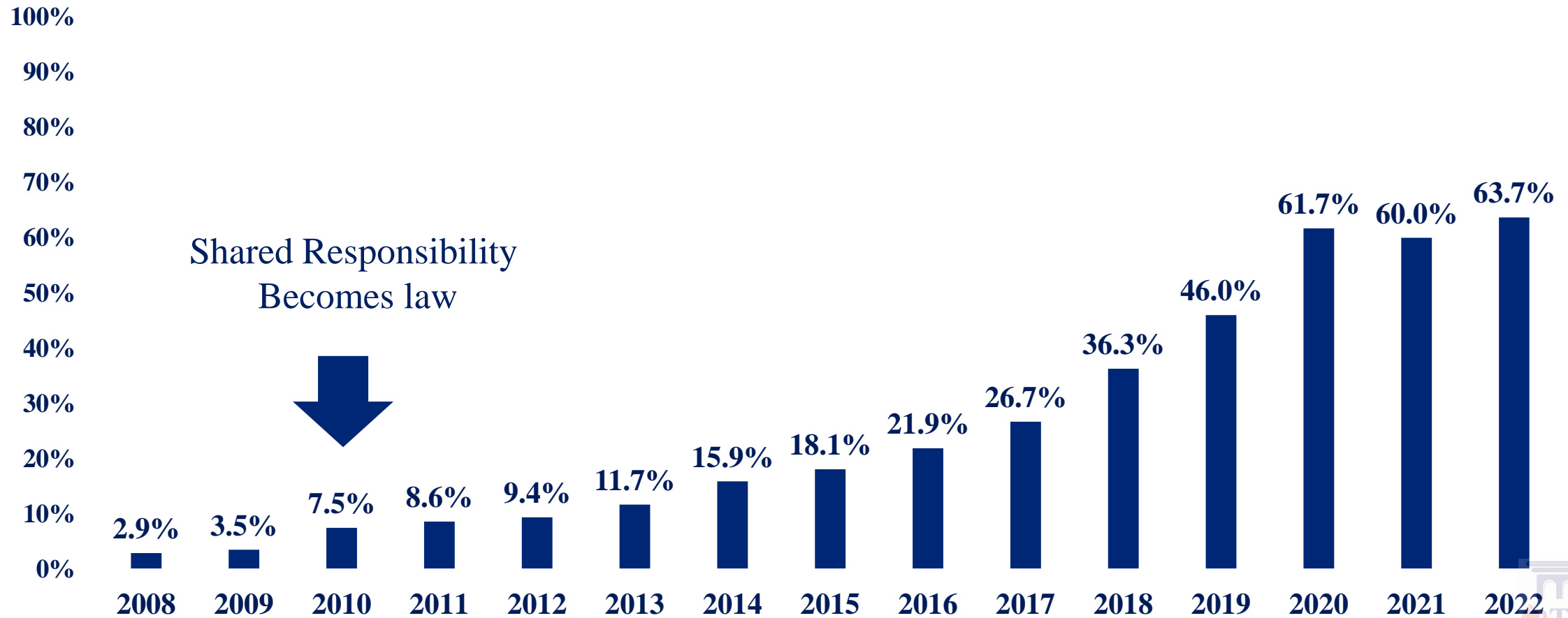
Shared Responsibility

How the Cost Has Been Shared



TRS Health Insurance

Funded Status



Funding Decisions

2022-24 Biennial Budget

- Means eight straight years of full or nearly full annuity funding
- More than \$1.36 billion to meet actuarially required contribution for annuities
 - About \$900 million more to TRS in salary contributions from education budget
- \$149 million for state statutory contribution for under-65 health insurance under Shared Responsibility
- \$479.2 million to pay off liabilities for certain previously awarded benefits that had been amortized over several years
- \$78 million up front for sick leave-related annuity liabilities projected to occur from retirements in next two years

TRS Health Policy Education

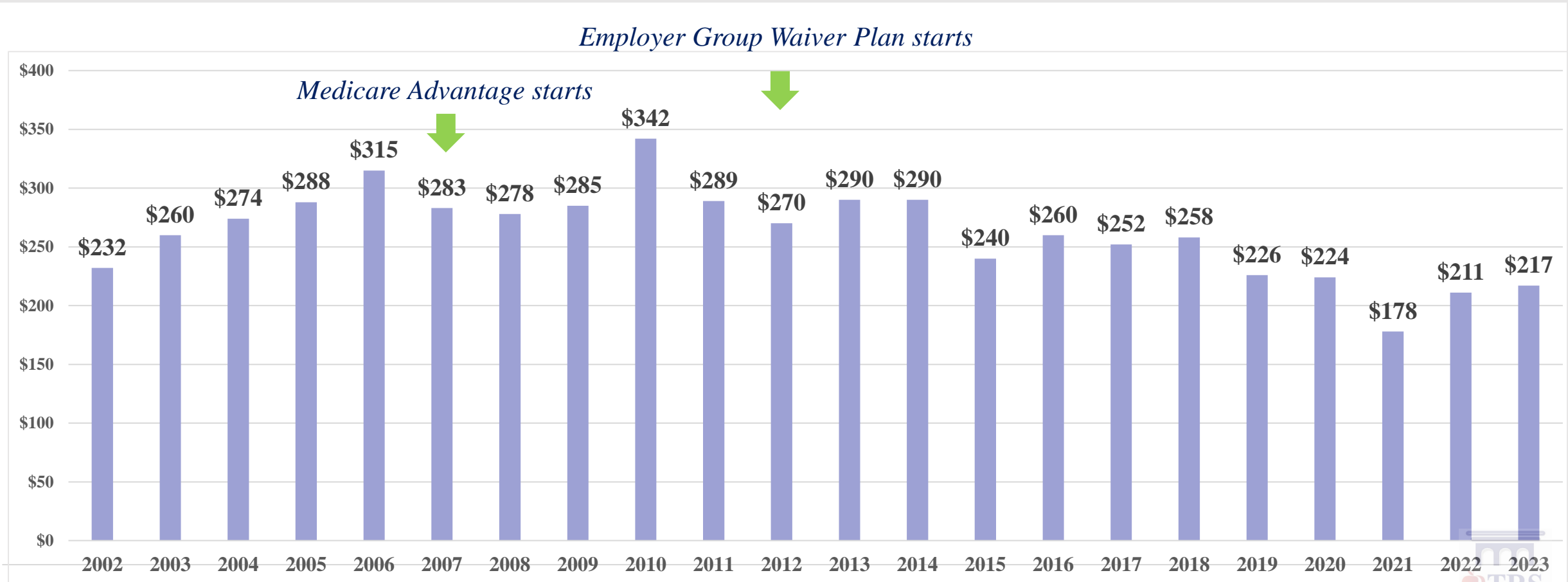


BETTER MEDICARE



BETTER MEDICARE
ALLIANCE





Premiums Held Almost Constant For 20 Years

Consists of:



EXPRESS SCRIPTS



Register at retiree.uhc.com/trs to see these features available to you or call 844-518-5877 for more information.



- Routine hearing exam
- HouseCalls in-home assessment
- Hearing aids discount
- Diabetes support program

Quit For Life[®]

Tobacco Cessation Program



Gift cards for completing certain activities



Weight loss program



Post-hospitalization meals delivered



Virtual visits with doctor



Fitness program

Medical Alert Systems



Lifeline[®]

Wherever life goes,
help can be there:



So the right support
can be there at home:



HomeSafe Standard
Landline and Cellular versions
available



HomeSafe with AutoAlert
Landline and Cellular versions
available

Call: 1-855-595-8485, TTY 771

Enroll online: <https://www.lifeline.com/uhcgroup>



Virtual Education Center

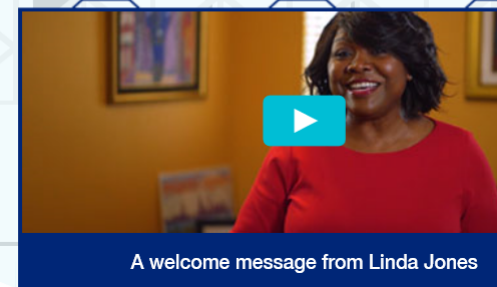
Teachers' Retirement System of the State of Kentucky



[Home](#) [How the Plan Works](#) [HouseCalls](#) [Health & Wellness](#) [Virtual Visits/NurseLine](#) [Clinical Resources Support](#) [Your Plan](#)

Explore your plan benefits virtually to get the most of them in real life

Welcome to the Virtual Education Center, created to make caring for yourself easier. Because it's not always possible to share information face to face, we've brought our resources together in one place, at your fingertips, wherever and whenever you need it.



Retiree.uhc.com/trs

Top Three Behavioral Health Diagnoses

Depression disorders

Anxiety disorders

Trauma and stressor-related disorders

- Housecalls provides depression screening as part of assessment
- Access to self-guided care and mindfulness activities
- Online platforms to help navigate behavioral health needs
- 4% coinsurance for individual therapy visits in network
- 4% coinsurance for virtual behavioral visits in network



VISA Gift Card HouseCalls in-home assessment reward remains a VISA reward card of \$50

Renew Active
by  UnitedHealthcare®

Fitness program –
no ID cards in future

Renew Rewards Gift Cards

- In 2023 will still be reloadable Visa Cards.
- Funds are loaded within 24 hours of activity completion
- Don't have to track multiple reward card balances and expiration dates
- Consolidated rewards on one card for larger purchases
- Can now see reward card balance and transaction details every time you log-in to Renew Rewards
- Must be used within 12 months

Annual Wellness Visit rewards is now \$25

If Some Old Quarterback Says You Need More Coverage ...

Tell Joe (and others like him),
“No!”

If you are enrolled in the TRS Medicare Eligible Health Plan (MEHP), enrolling in another Medicare Advantage plan would “dyn-o-mite” your TRS MEHP coverage.



Go to trs.ky.gov to watch an informative 4-minute video

Free counseling with live pharmacists

Know Your Rx Coalition *Pharm-Assist*

Hours: Monday to Friday, 8 a.m. to 6 p.m. ET

Phone: 855-218-5979

Email: KYRx@uky.edu

Website: www.KYRx.org



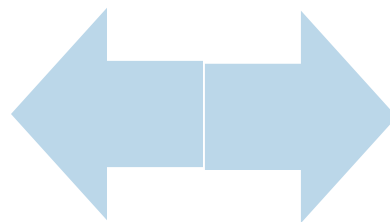


TRS Solution: Personalized Medicine Partnership



This personalized medicine program uses DNA testing to help you find out if your medications work for you.

You
Your Doctor
Your Pharmacist



MEHP enrollees can contact Coriell at 888-454-9024 or online at www.coriell.com/trs to request a free DNA kit.

Non-Medicare KEHP enrollees are eligible for the DNA kit at a current cost of \$360. Pay through credit card or your CDHP HRA.

How it Can Help

Your DNA matters

Using DNA to see what drugs will be safe and effective — Pharmacogenomics

Steps

Collect genetic information through saliva test

Empower pharmacists

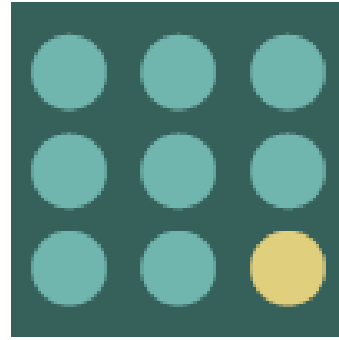
Communicate the Medication Action Plan

Personalized Medicine

Why It Works

- Helps avoid taking ineffective medications that even could be fatal
- Saves money for retirees and their insurance trust
- Uses DNA testing to help doctors making treatment decisions
- Results help make sure medications are beneficial from the start
- Avoids traditional trial-and-error process without DNA information

Peer-Reviewed Initial Results Receive Attention



Journal of
*Personalized
Medicine*

- 66% had genetic risks detected in a current medication
- 14.9% reduction in inpatient visits
- 6.8% reduction in emergency room visits
- \$37 million savings in direct medical charges over 32 months

Personalized Medicine

One Retiree's Story

I am *so grateful* for the information that was given to me and my physician. I was taking metoprolol for my *heart condition*. Your tests showed that it *stayed too long in my system*. I sometimes had the feeling that I was on the verge of *fainting*. I *had not had that feeling since I started taking the new suggested medication*. I thank you from the bottom of my heart.

– Member, Teachers' Retirement System of the State of Kentucky

Genetic Testing Wellness Program Gets National Attention

Journal of Precision Medicine

TEACHERS' Retirement System
TRS
KENTUCKY

A Commentary on a Precision Medicine Program: Humanistic Outcomes Are Always Key

By Jane Cheshire Gilbert, CPA, Teachers' Retirement System (TRS) of the State of Kentucky, a Member of the GTMRx Institute

46 The Journal of Precision Medicine

Introduction: GTMRx and TRS Kentucky Precision medicine meets personalized medicine in cases like the TRS retiree (quoted in #1) who voluntarily submitted a saliva sample for testing. Such a simple act, one of the many by TRS retirees, yields long-term returns on the scientific and financial investments made by TRS to achieve its precision medicine goals. Moreover, TRS puts

those goals into human terms, showing how real people express in their own words how precision science benefits them. Are there any better words a pharmacist or doctor could hear? Or for those inside the pharmacogenomics research world and academia? Or, for that matter, the director of retiree health care for Kentucky's retired teachers? In the past few years, TRS has made countless virtual presentations on this program to others

interested in their employees' and retirees' wellness, drug cost containment and precise use of science that now is well over a decade old. In addition, TRS has presented its program to many health care professionals, including doctors and health plan administrators at the National Institutes of Health in Bethesda, Maryland; attendees at the Personalized Medicine Coalition meeting at Harvard in Massachusetts; and, now, readers of

#3 A deep dive into our population discovered that 84% of retirees are on medications that are influenced by genetics. Medicare-eligible retirees were on an average of 15 prescriptions. Roughly 75% of the population had high blood pressure, 58% had high cholesterol and 50% were suffering from pain and inflammation. Using de-identified claims information, the PGx vendor provided an in-depth analysis of the possible return on investment with the program which found: 10% of members should stop taking a prescription immediately (potential savings: \$1.7 million), 57% of members might need to adjust dosage (potential savings: \$10 million) and 33% of members have a better alternative medication available.

48 The Journal of Precision Medicine

Doctor-Patient Reports and Consultations
CLS develops a personalized medicine report that includes the relevant genetic data as well as known drug-drug interactions, lifestyle factors and other relevant information. TRS made sure that if a retired teacher wanted to have their DNA tested, a pharmacist was in place who could communicate the results to the patient in language they understood. Pharmacists have developed medication action plans for the 7,800 program enrollees. Both the patient and the physician receive a copy of the plans, which explains the results of the testing and the pharmacist's recommendations. After these conversations with patients, the pharmacists then reach out to the prescribing physician, with the patient's permission, and discuss the recommended medication changes. And these recommendations are taken seriously. The physicians' acceptance of the initiative is gratifying and astounding... and key to validating the program. Prescribing physicians almost universally accepted the pharmacist's recommendations—89% of the time. Like the retirees, physicians were generally appreciative. TRS heard a lot of positive feedback, such as "you're helping me become a better doctor, to take better care of my patients and to be able to prescribe the right drug at the right time for them."

#4 Communicating with members early and consistently contributed to the program's successful launch. The overarching message: TRS is making smarter use of the health care dollar through the program because taking medications that do not work is bad for the member's health and for the TRS health insurance fund.

the pharmacists and, for example, switching to a generic. Other examples from this medication therapy management process—in which the pharmacist spends about an hour with a patient—include identifying drug-to-drug interactions, side effects and other issues. The process of "test, report, consult" avoids the possibly fatal trial-and-error type of prescribing



#5 TRS heard a lot of positive feedback, such as "you're helping me become a better doctor, to take better care of my patients and to be able to prescribe the right drug at the right time for them"

In collaborative practice with the physician to target correct therapies reduces the trial and error approach to prescribing. And TRS experience provides a path toward getting there as a widespread, accepted standard of care. Resources are available to guide those new to these concepts. In April, the GTMRx Institute released the GTMRx Employer Toolkit, a suite of resources to equip employers with the knowledge to manage and control medication therapy problems more effectively through their pharmacy benefit programs and medical carriers. The toolkit is designed to help educate, guide and assist employers as they work with solution providers. A pharmacist-led, person-centered, team-based, standardized and rational approach to medication use empowers employees to leverage PGx testing and moves us all toward a more precise and personalized care process. TRS continues to educate Medicare Advantage carriers and PBMs of the need for PGx inside these federal programs. Including PGx in Medicare Advantage and Medicare Part D would help continue to control the TRS Medicare Eligible Health Plan premium. The 2021 monthly premium is \$178, down \$54 (not adjusted for inflation) from 20 years ago due to increased federal revenues

determination to allow PGx when specific criteria are met. Second, on the insurer side, some large companies, including UnitedHealthcare, have incorporated the use of PGx to include, for example, reimbursement for certain patients with depression. In addition to these positive signs, the accumulation of data and the weight of evidence will dictate that PGx becomes the standard so that patients are not on a drug that is ineffective or unsafe for months or years. **What's next** To implement PGx, engage your medical plan carrier and your pharmacy benefits manager (PBM) in this conversation. PBMs will see the value in lives saved, improved health outcomes and reduced costs; PBMs will come to recognize the value of PGx as a tool to optimize medications through comprehensive medication management (CMM).** Introducing a pharmacist who works

and heightened care management inside these federal programs, PGx, if included in these federal programs, would bring greater cost efficiency. In the end, the most rewarding part of the program, as indicated earlier, is not only the medication change that results from the testing and/or the dollars saved; it is also the reaction of Kentucky's retired teachers who take part in the program and the thanks TRS receives for actually running these tests. The story will get better because this wellness and savings program is a lifetime benefit for each Kentucky retired teacher who volunteered to provide a DNA sample. Testing results that already have paid dividends for the retirees and their health plan can continue to inform every aspect of their pharmaceutical treatment for the rest of their lives. ■

Jane Cheshire Gilbert, CPA
Director of Retiree Health Care for the Teachers' Retirement System of the State of Kentucky

Jane has served TRS retirees since April 2000. She manages over 100,000 retiree health plans covering 48,000 retirees. She also serves as a leader in the areas of health insurance cost containment, product management, risk management and federal health care solutions. Jane has served in management and directorial positions for a Louisville, Kentucky law firm and a cost containment company, The Savings Company, from 1999 through 2002. Prior to that, she worked as an accountant for a national CPB firm. Jane earned a bachelor's degree in accounting from Bellarmine University in Louisville, Kentucky and is a certified public accountant and a certified government benefits administrator. She has served on the board of the State and Local Government Benefits Association and is a member of the Public Sector Healthcare Roundtable.

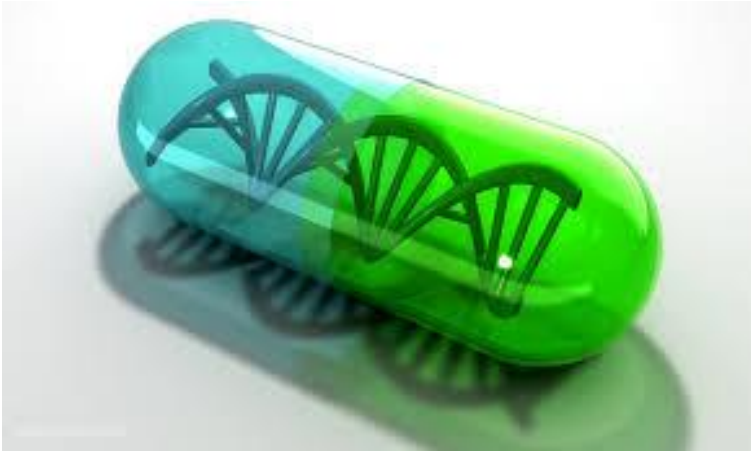
- References**
1. Cullen DM, Sauer W. Thinking outside the pillbox: medication adherence as a key to health outcomes. *J Gen Intern Med*. 2015;30(10):1555-1556. Accessed 3 April 2021. <https://pubmed.ncbi.nlm.nih.gov/25919922/>
 2. Wozniak L, et al. Cost of Prescription Drug-Based Inequality and Variability. *Am J Pharm Manage*. March 2020;23(3). Accessed 3 April 2021. <https://pubmed.ncbi.nlm.nih.gov/32199212/>
 3. <https://www.gtmrx.com/en/insights/medication-management-101>. The cost of medication management. <https://www.gtmrx.com/en/insights/medication-management-101>
 4. <https://www.gtmrx.com/en/insights/medication-management-101>
 5. <https://www.gtmrx.com/en/insights/medication-management-101>

49 The Journal of Precision Medicine



Personalized Medicine

Reaching Further After Success of Pharmacogenomics



Pharmacogenomics
Fall 2017



Breast Cancer Index
2021



Looking at other personalized
diagnostic tools in
2022

KEHP

MEHP

Personalized Medicine

How to Sign Up

MEHP

MEHP enrollees can contact Coriell at 888-454-9024 or www.coriell.com/trs to request free DNA kit.

KEHP

Non-Medicare KEHP enrollees can contact Coriell and use HRA funds to pay the \$360 cost.

CORIELL
LIFE SCIENCES



A GOVERNMENTAL PURCHASING COLLABORATIVE



Consists of:



LiveHealth[™]
O N L I N E

Video chat
with doctors
and therapists

SmartShopper[®]

Cash for using cost-effective options for certain procedures.

rethink
BENEFITS

Support for
care of kids
with learning
or behavior
challenges

- Diabetes Prevention Program (DPP)
- Mental health and stress management
- 24/7 Nurse Line
- Substance Use Disorder Support Line
- Tobacco cessation
- Weight management

More information can be found at kehpn.ky.gov

Register for your account on WebMD



- New program year Jan. 1, 2023
- Online portal
- Mobile app
- Health Assessment
- Many options for device and app connectivity



- Living Well KEHP program is administered by WebMD
- Earn up to \$200 in rewards for well-being activities that encourage healthy behaviors, as the member.
- Spouses are eligible this year and can earn up to \$100

Note: Dependents are NOT eligible

- Dates to complete promise are Jan. 1 - July 1, 2023.
- Complete the online Health Assessment or biometric screening.
- If completed, you will receive the \$40 per month premium discount in 2024.

NOTE: Both spouses must complete promise if on a cross-reference plan.

More information can be found at www.webmdhealth.com/kehps

HealthEquity Healthcare Reimbursement Arrangement (HRA) helps reduce costs; remaining funds carry over to next year if remaining in a CDHP plan.



Pay for eligible healthcare expenses such as:

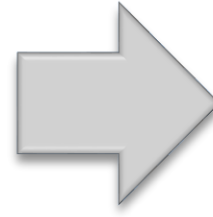
- Medical and pharmacy
- Deductibles
- Copayments and coinsurance
- Some over-the-counter products
- Certain dental and vision fees (does not apply to deductible or maximum out of pocket)

If you're on a CDHP plan and don't have a HealthEquity card, or to determine eligible expenses, call 877-430-5519 or visit wageworks.com.

- If you are enrolled in coverage through TRS and turning 65 in 2023, you will receive a Turning 65 email about four (4) months before your birth month.
- You still need to enroll in KEHP to be covered until you become eligible for Medicare (unless your birthday is in January or Feb. 1).
- Do not include your Medicare-eligible spouse or dependent child on your KEHP enrollment if they already are covered in TRS MEHP.

Before moving from KEHP to Medicare

KEHP



MEHP

*Web***MD**[®]

*Health***Equity**[®]

**Use or lose your
bucks before KEHP
coverage ends!**

**Funds in Consumer Driven
Health Plan (CDHP) HRA must
be used before moving to
MEHP**

Did you know TRS retirees can use Pathway to:

- Review your retirement account
- Review your pension check
- Update your address, tax withholding, etc.
- Enroll in health insurance (if eligible)
- Manage health insurance
 - Enroll in MEHP when gaining Medicare
 - Enroll/Terminate with a qualifying event



TEACHERS' RETIREMENT SYSTEM
PATHWAY

Register for Pathway

You must have a current email on file with TRS to register

Go to <https://mss.trs.ky.gov/>

Click Register



Enter your TRS ID, last 4 Social Security number digits and click Register

Follow additional instructions to complete registration

**As a retiree, you can use our
Pathway for insurance
enrollment.**



What applications can be completed through MSS?

- Turning 65
- Qualifying Event

What cannot?

- KEHP open enrollment uses KHRIS.
- MEHP open enrollment remains passive.

Need instructions?

Information Center staff are available to help you get signed up for your Pathway account.

They can also walk you through the steps of completing an insurance application using Pathway, outside of open enrollment.

Videos and instructions are also on our website for both.

KEHP open enrollments are still done through the KHRIS and instructions are available on TRS website.

TRS News & Information



<https://trs.ky.gov>



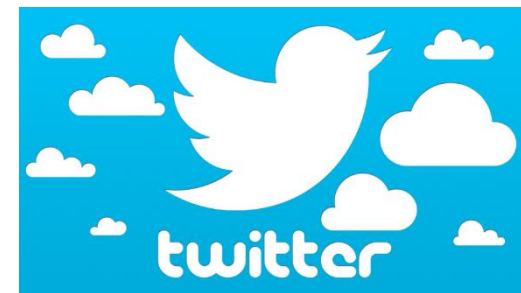
facebook.com/KyTeachersRS



TEACHERS' RETIREMENT SYSTEM
PATHWAY



<https://mss.trs.ky.gov/>



[@KyTeachersRS](https://twitter.com/KyTeachersRS)



***Our Members
Come First!***

800-618-1687

**8 a.m. – 5 p.m. ET
Monday – Friday**

info@trs.ky.gov
<https://trs.ky.gov>

Protecting & Preserving Teachers' Retirement Benefits