



COMMISSIONERS COURT COMMUNICATION

REFERENCE NUMBER _____

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DATE: 12/06/2022

**SUBJECT: APPROVAL OF PLAN CHANGE RELATED TO THE APPLICATION
OF THE PRUDENT LAYPERSON STANDARD TO PROVIDE
MEDICAL COVERAGE FOR EMERGENCY CARE BASED ON
SYMPTOMS, NOT FINAL DIAGNOSIS, UNDER THE PUBLIC
EMPLOYEE BENEFITS COOPERATIVE MEDICAL PLANS**

***** CONSENT AGENDA *****

COMMISSIONERS COURT ACTION REQUESTED

It is requested that the Commissioners Court approve the plan change related to the Prudent Layperson Standard to provide medical coverage for emergency care based on symptoms, not the final diagnosis, under the Public Employee Benefits Cooperative (PEBC) Medical Plans, effective January 1, 2023.

BACKGROUND

On November 16, 2022, the PEBC Board of Governors approved a change to plans and issuers under the part of the federal law referred to as the Prudent Layperson Standard. This standard provides important patient protection for care received in an emergency department. In July 2021, the Department of Labor, Department of Health and Human Services, and the Department of Treasury released regulatory guidance that requires insurance companies to provide coverage for emergency care based on symptoms, not the final diagnosis.

UnitedHealthcare made the decision not to deny or reduce benefits coverage for emergency department claims under the prudent layperson standard for their fully-insured commercial plans following a detailed assessment of the practical implications of the new guidance, the unintended impact to the consumer, and the disproportionate risks to the plan.

According to UnitedHealthcare, approximately 1% of emergency department claims will be impacted by a non-emergent program under the PEBC medical plans.

FISCAL IMPACT

Plan costs for health care benefits for employees, retirees, and their respective dependents are accounted for in the benefits budget established for Plan Year 2023.

SUBMITTED BY:	Human Resources	PREPARED BY: APPROVED BY:	Amber Duckworth Tina Glenn
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