

RFP210280CJV
Group Medicare Advantage Plan
Aetna Health Management, LLC

E1 Contract # 9244
New E1 Contract # 9866

FIRST AMENDMENT OF THE GROUP MEDICARE ADVANTAGE PLAN AGREEMENT

THIS FIRST AMENDMENT OF THE GROUP MEDICARE ADVANTAGE PLAN AGREEMENT, made and entered into by and between the Lee County Board of County Commissioners, a political subdivision of the State of Florida ("Contract Holder") and Aetna Health Management, LLC ("Aetna"), collectively, the "Parties."

WHEREAS, the Contract Holder entered into an Agreement for the retiree Group Medicare Advantage medical and pharmacy benefits plan from the Aetna through Solicitation RFP210280CJV, effective the 1st day of January 2022 ("Agreement"); and,

WHEREAS, on the date the Agreement was effective, the Aetna's business entity name was Aetna Life Insurance Company, with a Federal Tax ID Number of 23-2229683; and,

WHEREAS, after execution of the Agreement, Aetna Life Insurance Company rebranded as Aetna Health Management LLC, with a Federal Tax ID Number of 13-3670795; and,

WHEREAS, after the execution of the Agreement it was discovered that a document, titled "Lee County Board of County Commissioners 2022 – 2024 Medicare Advantage and Part D Rate Guarantee" was meant to be incorporated into the Agreement to establish the rate change beginning in 2024, but was unintentionally left out; and,

WHEREAS, Contract Holder and Aetna desire to enter into this First Amendment to continue their Agreement via Solicitation No. RFP210280CJV under Aetna's new business name and incorporate the "Lee County Board of County Commissioners 2022 – 2024 Medicare Advantage and Part D Rate Guarantee" into the Agreement.

NOW, THEREFORE, IN CONSIDERATION OF THE FOREGOING AND THE MUTUAL COVENANTS CONTAINED HEREIN, IT IS AGREED AS FOLLOWS:

1. Aetna Life Insurance Company, conducting business as Aetna Health Management, LLC, shall continue to supply such products and services in accordance with the terms, conditions, and specifications of the Agreement, via Solicitation No. RFP210280CJV, including appendices and amendments, and Aetna's response.
2. The Parties agree that the June 2021 "Lee County Board of County Commissioners 2022 – 2024 Medicare Advantage and Part D Rate Guarantee" shall be attached and incorporated herein as attachment A of the Amendment and shall supplement the Agreement as a rate exhibit. Any conflicts between Attachment A and the Agreement shall be interpreted in favor of the Agreement.

[Remainder of the page left intentionally blank.]

IN WITNESS WHEREOF, this First Amendment of the Agreement has been signed and sealed, in duplicate, by the respective parties hereto.

:

AETNA HEALTH MANAGEMENT, LLC

Signed By: Richard A. Frommeyer

Print Name Richard A. Frommeyer

Title: Senior Vice President – Group Retiree

Date: August 3, 2023

LEE COUNTY

BOARD OF COUNTY COMMISSIONERS
OF LEE COUNTY, FLORIDA

BY: DocuSigned by: [Signature]
C95488F99FAF428...
CHAIR

DATE: 9/8/2023 | 2:27 PM EDT

ATTEST:
CLERK OF THE CIRCUIT COURT

BY: DocuSigned by: Chris Jagodzinski
DEEAC59F178B449...
DEPUTY CLERK

APPROVED AS TO FORM FOR THE
RELIANCE OF LEE COUNTY ONLY:

BY: DocuSigned by: Andrea Fraser
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OFFICE OF THE COUNTY ATTORNEY



ATTACHMENT A**Lee County Board of County Commissioners****2022 – 2024 Medicare Advantage and Part D Rate Guarantee**

Proprietary & Confidential

Trade Secrets/Commercial and Financial Information – Not for Further Distribution

2022-2024 Rate Guarantee

The chart below outlines the Aetna Medicare Advantage and Part D (MAPD) guaranteed aggregate rates for 2022, 2023 and 2024 on a per member per month (PMPM) basis.

Plan	2022 Guaranteed Rate (\$ PMPM)	2023 Guaranteed Rate (\$ PMPM)	2024 Guaranteed Rate (\$ PMPM)
Medicare V01 ESA PPO with Rx \$10/\$20/\$35/\$35	312.01	312.01	324.56

Conditions for the Guarantee

We reserve the right to revise or remove the guarantee if any of the following conditions are not met:

- **Accurate Information:** All of the information provided by you and/or your representative(s) for the development of this proposal is accurate.
- **Premium Payment:** Lee County Board of County Commissioners makes the required premium payments in accordance with the contract provisions.
- **Full Replacement:** Aetna group retiree benefits are a full replacement and the only group plan available for all current retirees subject to this Request for Proposal. All current retirees will be defaulted into the Aetna Medicare Advantage plans and must opt out if they want an individual market plan.
- **Benefit Plan Changes:** There are no changes to the products, programs, current or proposed benefit plans.
- **Legislative, Regulatory or CMS Changes or Enforcement action:** There are no legislative, regulatory or CMS changes or enforcement actions that cause a material change to taxes, fees, assessments, required benefits, funding levels, or the manner and/or cost of providing Medicare Advantage plan medical and/or Part D benefits or standalone PDP coverage.
- **Medicare Part D:** Aetna reserves the right to change the Medicare Part D premium or restructure the Part D plan design or formulary if any changes are made to the laws, rules, and/or regulations applicable to the Medicare Part D program. This includes, but is not limited to:
 - elimination of safe harbor protection under the federal Anti-Kickback Statute (AKS) for drug manufacturer rebates or other price concessions
 - establishment of new safe harbor protection under the AKS for certain point-of-sale reductions in drug pricing

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- mandatory point-of-sale rebates / price concessions
- changes to the drug manufacturer coverage gap discount program
- changes to federal Part D subsidies, including changes to catastrophic reinsurance

As a specific example of the items noted above, the Trump administration finalized a rebate rule in November 2020 that originally had an effective date of January 1, 2022. The U.S. District Court reviewing the rule in *PCMA vs. Azar* has delayed the effective date by one year, and it is now scheduled to take effect on January 1, 2023. This rule has a sizeable impact on the Part D rates and may be reversed completely. The pricing that has been provided assumes that this rule will be fully repealed and therefore has not factored in any increase that would result from the change in rebate methodology. If this rule does take effect at a later date, the rates will be increased accordingly.

The premium developed in this proposal excludes any additional income-related Medicare Part D premium payments required of Medicare-eligible members in order for the member to be eligible for the Part D product. Aetna reserves the right to communicate with enrolled members regarding opportunities to reduce out of pocket prescription drug costs.

Aetna Inc. reserves the right to review and possibly modify or terminate the guarantee arrangement if there is enactment of legislation (either state or federal) which impacts the ability of Aetna Inc. to contract for efficient, cost effective pharmacy care.

Aetna reserves the right to communicate with enrolled members regarding opportunities to reduce out of pocket prescription drug costs.

This guarantee assumes that our current experience-rating renewal methodology for groups with at least 400 subscribers will continue to be the accepted and approved methodology for renewals effective 2023 or 2024. If this is not the case, this guarantee will be reviewed and may require revision.

The supplemental premium rates are limited to prescription drugs covered by Aetna's Group Open 2 Plus formulary. Aetna reserves the right to adjust the level of the guaranteed increase per any request for formulary coverage expansion. Unless specifically addressed in this document, all previously provided Financial Conditions also apply to this Medicare Advantage Renewal Guarantee.

In developing the guarantee pricing for 2023 and 2024 we have assumed certain values for the Initial Coverage Limit (ICL) and Out of Pocket (TrOOP) thresholds. The final ICL and TrOOP figures are announced by CMS in the final call letter each year. If the actual ICL amount should change by more than 10% and/or the TrOOP amount should change by more than 10% from the assumption below we reserve the right to modify the pricing.

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Year	Initial Coverage Limit	Out Of Pocket Threshold (TrOOP)
2022	\$4,430	\$7,050
2023	\$4,650 estimate	\$7,400 estimate
2024	\$4,890 estimate	\$7,800 estimate

- Broker commissions: Rating and guarantee calculations exclude any broker commissions. Any broker commissions would need to be added to these rates.
- Pricing and Underwriting Basis: Total enrollment in combined MAPD coverage for any given plan year must not vary by more than 10% from the assumed enrollment of 555 members.
- Out-to-bid provision: All components of this guarantee will be terminated if the Medicare Advantage coverage is put out to bid for the 2023 or 2024 coverage periods.

