School District of Clay County Committee Recommended Basic HMO, Premium HMO and HDHP w/HSA Plans 2010-2011 Plan Year Renewal Contribution Model

Insurance Committee Recommendation: Board Funds increase, no increase to EE

	Current Plans (Current Plans (Aetna)						Committee Recommended Plans						
					09/30/2010 Per Pay Period				10/01/2010 - 09/30/2011 Pay Period					
	Estimated Enrollment	12 month	Per Pay Period	District	Employee	Estimated Enrollment	12 month	Per Pay Period	District	Employee	EE Differenc			
Basic HMO				44										
	1.529	\$416.88	\$250.13	\$240.12	\$10.01	1,529	\$426.98	\$256.19	\$246.18	\$10.01	\$0.00			
Employee EE & SP	103	\$805.52	\$483.31	\$266.02	\$217.29	103	\$825.01	\$495.01	\$277.72	\$217.29	\$0.00			
EE & Ch(s)	100	\$768.43	\$461.06	\$253.58	\$207.48	100	\$787.04	\$472.22	\$264.74	\$207.48	\$0.00			
Family	216	\$1,055.57	\$633.34	\$348.34	\$285.00	216	\$1,081.12	\$648.67	\$363.67	\$285.00	\$0.00			
Premium HMO				•				•						
Employee	827	\$489.52	\$293.71	\$232.03	\$61.68	827	\$525.13	\$315.08	\$253.40	\$61.68	\$0.00			
EE & SP	135	\$945.63	\$567.38	\$280.83	\$286.55	135	\$1,014.53	\$608.72	\$322.17	\$286.55	\$0.00			
EE & Ch(s)	44	\$902.13	\$541.28	\$267.93	\$273.35	44	\$967.78	\$580.67	\$307.32	\$273.35	\$0.00			
Family	99	\$1,239.40	\$743.64	\$368.10	\$375.54	99	\$1,329.60	\$797.76	\$422.22	\$375.54	\$0.00			
HDHP														
Employee	182	\$514.55	\$308.73	\$262.42	\$46.31	182	\$504.69	\$302.81	\$256.50	\$46.31	\$0.00			
EE & SP	31	\$993.60	\$596.16	\$327.75	\$268.41	31	\$975.02	\$585.01	\$316.60	\$268.41	\$0.00			
EE & Ch(s)	8	\$948.33	\$569.00	\$312.96	\$256.04	8	\$930.09	\$558.05	\$302.01	\$256.04	\$0.00			
Family	12	\$1,302.10	\$781.26	\$429.50	\$351.76	. 12	\$1,277.78	\$766.67	\$414.91	\$351.76	\$0.00			
	3,286					3,286								
			tal Annual Cost: \$					Annual Cost: §			3.9%			
			t per pay period \$				•	er pay period S						
		Employee Cost per pay period \$ Total Annual DISTRICT Contribution Total Annual EMPLOYEE Contribution			20	Employee Cost per pay period \$ 281,912.20 Total Annual District Contribution \$17,646,129								
	Total A				061									
	Total A				244	Total Ann	nual Employee	Contribution	\$5,638,244					
							o DISTRICT fr		\$871,069		5.19%			
						Difference to	EMPLOYEE fr	om Current	\$0		0.00			



School District of Clay County Committee Recommended Basic HMO, Premium HMO and HDHP w/HSA Plans 2010-2011 Plan Year Renewal Contribution Model

Insurance Committee Alternative 1: Same dollar subsidy across all plans

	Current Plans (Current Plans (Aetna)						Committee Recommended Plans						
				10/01/2009 - 09/30 Perio	-				10/01/2010 - 09/3 Pay Per					
	Estimated Enrollment	12 month	Per Pay Period	District	Employee	Estimated Enrollment	12 month	Per Pay Period	District	Employee	EE Difference			
Basic HMO														
Employee	1,529	\$416.88	\$250.13	\$240.12	\$10.01	1,529	\$426.98	\$256.19	\$246.23	\$9.96	-\$0.05			
EE & SP	103	\$805.52	\$483.31	\$266.02	\$217.29	103	\$825.01	\$495.01	\$255.00	\$240.01	\$22.72			
EE & Ch(s)	100	\$768.43	\$461.06	\$253.58	\$207.48	100	\$787.04	\$472.22	\$255.00	\$217.22	\$9.74			
Family	216	\$1,055.57	\$633.34	\$348.34	\$285.00	216	\$1,081.12	\$648.67	\$325.00	\$323.67	\$38.67			
Premium HMO														
Employee	827	\$489.52	\$293.71	\$232.03	\$61.68	827	\$525.13	\$315.08	\$246.23	\$68.85	\$7.17			
EE & SP	135	\$945.63	\$567.38	\$280.83	\$286.55	135	\$1,014.53	\$608.72	\$255.00	\$353.72	\$67.17			
EE & Ch(s)	. 44	\$902.13	\$541.28	\$267.93	\$273.35	44	\$967.78	\$580.67	\$255.00	\$325.67	\$52.32			
Family	99	\$1,239.40	\$743.64	\$368.10	\$375.54	99	\$1,329.60	\$797.76	\$325.00	\$472.76	\$97.22			
HDHP														
Employee	182	\$514.55	\$308.73	\$262.42	\$46.31	182	\$504.69	\$302.81	\$246.23	\$56.58	\$10.27			
EE & SP	31	\$993.60	\$596.16	\$327.75	\$268.41	31	\$975.02	\$585.01	\$255.00	\$330.01	\$61.60			
EE & Ch(s)	8	\$948.33	\$569.00	\$312.96	\$256.04	8	\$930.09	\$558.05	\$255.00	\$303.05	\$47.01			
Family	12	\$1,302.10	\$781.26	\$429.50	\$351.76	12	\$1,277.78	\$766.67	\$325.00	\$441.67	\$89.91			
	3,286					3,286					0.00%			
		Total Annual Cost: \$ District Cost per pay period \$		22,413,305				Annual Cost:			3.9%			
				838,753.03			•	er pay period						
		Employee Cost per pay period \$ Total Annual DISTRICT Contribution Total Annual EMPLOYEE Contribution					Employee Cost p							
	Total Ani						nual District C		\$16,771,235					
	Total An					Total Ani	nual Employee	Contribution	\$6,513,138					
							to DISTRICT fr		-\$3,826		-0.02%			
						Difference to	EMPLOYEE fi	om Current	\$874,894		15.52%			



School District of Clay County Committee Recommended Basic HMO, Premium HMO and HDHP w/HSA Plans 2010-2011 Plan Year Renewal Contribution Model

Insurance Committee Alternative 2: Current Dollar Subsidy, No increase to District

	Current Plans (Committee Re	commended	<u> Pians</u>							
			10/	01/2009 - 09/30/2010	1/2009 - 09/30/2010 Per Pay Period			1	10/01/2009 - 09/30/2010 Per Pay Period		,
	Estimated Enrollment	12 month	Per Pay Period	District	Employee	Estimated Enrollment	12 month	Per Pay Period	District	Employee	Change
Basic HMO											
Employee	1,529	\$416.88	\$250.13	\$240.12	\$10.01	1,529	\$426.98	\$256.19	\$240.12	\$16.07	\$6.06
EE & SP	103	\$805.52	\$483.31	\$266.02	\$217.29	103	\$825.01	\$495.01	\$266.02	\$228.99	\$11.70
EE & Ch(s)	100	\$768.43	\$461.06	\$253.58	\$207.48	100	\$787.04	\$472.22	\$253.58	\$218.64	\$11.16
Family	216	\$1,055.57	\$633.34	\$348.34	\$285.00	216	\$1,081.12	\$648.67	\$348.34	\$300.33	\$15.33
Premium HMO										***	, , , , ,
Employee	827	\$489.52	\$293.71	\$232.03	\$61.68	827	\$525.13	\$315.08	\$232.03	\$83.05	\$21.37
EE & SP	135	\$945.63	\$567.38	\$280.83	\$286.55	135	\$1,014.53	\$608.72	\$280.83	\$327.89	\$41.34
EE & Ch(s)	44	\$902.13	\$541.28	\$267.93	\$273.35	44	\$967.78	\$580.67	\$267.93	\$312.74	\$39.39
Family	99	\$1,239.40	\$743.64	\$368.10	\$375.54	. 99	\$1,329.60	\$797.76	\$368.10	\$429.66	\$54.12
HDHP									*****	\$40.00	0.00
Employee	182	\$514.55	\$308.73	\$262.42	\$46.31	182	\$504.69	\$302.81	\$262.42	\$40.39	-\$5.92
EE & ŚP	31	\$993.60	\$596.16	\$327.75	\$268.41	31	\$975.02	\$585.01	\$327.75	\$257.26	-\$11.1
EE & Ch(s)	8	\$948.33	\$569.00	\$312.96	\$256.04	8	\$930.09	\$558.05	\$312.96	\$245.09	-\$10.98
Family	12	\$1,302.10	\$781.26	\$429.50	\$351.76	12	\$1,277.78	\$766.67	\$429.50	\$337.17	-\$14.59
	3,286 Total Annual Cost: \$				•	3,286	*** - 1 - 1	Annual Cost:	\$ 23,284,373		3.9%
			22,413,305							000700	
		District Cost per pay period \$ Employee Cost per pay period \$		838,753.03		District Cost per pay period Employee Cost per pay period			•		
				281,912.20							
	Total Ani	Total Annual DISTRICT Contribution		\$16,775,061		Total Annual District Contribution \$16,775,061					
	Total An	Total Annual EMPLOYEE Contribution		\$5,638,244	•	Total An	Total Annual Employee Contribution \$6,509,313				
							to DISTRICT fi		\$0 \$871,069		0.00% 15.45%

