

REQUEST FOR LEGISLATIVE ACTION

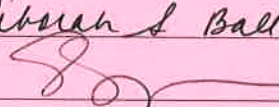
Completed by County Counselor's Office:

Res/~~Ord~~ No.: 18644

Sponsor(s): Theresa Garza Ruiz

Date: October 27, 2014

<p>SUBJECT</p>	<p>Action Requested <input checked="" type="checkbox"/> Resolution <input type="checkbox"/> Ordinance</p> <p>Project/Title: A RESOLUTION awarding a one year term and supply contract with annual renewal options for two additional years for the furnishing of employee group health insurance as an employee benefit countywide to Blue Cross Blue Shield of Kanas City, MO under the terms and conditions of the Request for Proposal No. 63-14.</p>										
<p>BUDGET INFORMATION <i>To be completed By Requesting Department and Finance</i></p>	<table border="1" data-bbox="329 611 1214 926"> <tr> <td>Amount authorized by this legislation this fiscal year:</td> <td>\$</td> </tr> <tr> <td>Amount previously authorized this fiscal year:</td> <td>\$</td> </tr> <tr> <td>Total amount authorized after this legislative action:</td> <td>\$</td> </tr> <tr> <td>Amount budgeted for this item * (including transfers):</td> <td>\$</td> </tr> <tr> <td>Source of funding (name of fund) and account code number: FROM / TO</td> <td>FROM ACCT TO ACCT</td> </tr> </table> <p>* If account includes additional funds for other expenses, total budgeted in the account is: \$</p> <p>OTHER FINANCIAL INFORMATION:</p> <p><input type="checkbox"/> No budget impact (no fiscal note required) <input type="checkbox"/> Term and Supply Contract (funds approved in the annual budget); estimated value and use of contract: Department: Estimated Use: \$</p> <p>Prior Year Budget (if applicable): Prior Year Actual Amount Spent (if applicable):</p>	Amount authorized by this legislation this fiscal year:	\$	Amount previously authorized this fiscal year:	\$	Total amount authorized after this legislative action:	\$	Amount budgeted for this item * (including transfers):	\$	Source of funding (name of fund) and account code number: FROM / TO	FROM ACCT TO ACCT
Amount authorized by this legislation this fiscal year:	\$										
Amount previously authorized this fiscal year:	\$										
Total amount authorized after this legislative action:	\$										
Amount budgeted for this item * (including transfers):	\$										
Source of funding (name of fund) and account code number: FROM / TO	FROM ACCT TO ACCT										
<p>PRIOR LEGISLATION</p>	<p>Prior ordinances and (date):</p> <p>Prior resolutions and (date): Resolution #16743, 10-20-08</p>										
<p>CONTACT INFORMATION</p>	<p>RLA drafted by (name, title, & phone): Shelley Kneuvean, Chief Operating Officer</p>										
<p>REQUEST SUMMARY</p>	<p>Request for Proposal 63-14 was sent out with a total of five (5) solicitations sent out. Two responses were returned for health insurance from the following:</p> <p>Blue Cross Blue Shield Kanas City (Jackson County, MO) AETNA/Coventry (Jackson County, MO)</p> <p>Based on the proposals submitted including terms and conditions as well as pricing, Blue Cross Blue Shield is recommended for the award of a one year contract with two annual renewal terms for the furnishing of health insurance as an employee benefit for use countywide. Under the terms and conditions of RFP 63-14 as the lowest and best bid, at an estimated first year cost of \$15,231,072. This award is made on an as needed basis and does not obligate Jackson County to pay any specific amount, with the availability of funds subject to annual appropriation.</p>										

	<p>A few enhancements have been added, including extended retiree access to health insurance indefinitely (previously was until 65); as well as digital mammography being a covered service. Additionally, the administrative fee will be fixed for two years.</p> <p>The total premium cost for 2015 is as follows:</p> <p>BCBS LOW OPTION Individual \$445.88 Family \$1,239.51</p> <p>BCBS HIGH OPTION Individual \$505.53 Family \$1,405.36</p> <p>BCBS PPO OPTION Individual \$672.56 Family \$1,869.69</p>	
CLEARANCE	<input type="checkbox"/> Tax Clearance Completed (Purchasing & Department) <input type="checkbox"/> Business License Verified (Purchasing & Department) <input type="checkbox"/> Chapter 6 Compliance - Affirmative Action/Prevailing Wage (County Auditor's Office)	
ATTACHMENTS		
REVIEW	Department Director:	Date:
	Finance (Budget Approval): <i>If applicable N/A Deborah S Ball</i>	Date: <i>10-21-14</i>
	Division Manager: 	Date: <i>10/20/14</i>
	County Counselor's Office:	Date:

Fiscal Information (to be verified by Budget Office in Finance Department)

- This expenditure was included in the annual budget.
- Funds for this were encumbered from the _____ Fund in _____.
- There is a balance otherwise unencumbered to the credit of the appropriation to which the expenditure is chargeable and there is a cash balance otherwise unencumbered in the treasury to the credit of the fund from which payment is to be made each sufficient to provide for the obligation herein authorized.
- Funds sufficient for this expenditure will be/were appropriated by Ordinance # _____
- Funds sufficient for this appropriation are available from the source indicated below.

Account Number:	Account Title:	Amount Not to Exceed:

- This award is made on a need basis and does not obligate Jackson County to pay any specific amount. The availability of funds for specific purchases will, of necessity, be determined as each using agency places its order.
- This legislative action does not impact the County financially and does not require Finance/Budget approval.

Jackson County January 1, 2015

Res. 18644

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mmended Funding increase of 6.65%
nistrative & Access Fee Rate Cap: 2016 = +3.5%, 2017 = +3.5%

as City

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2015

Res. 18644

	Current	Renewal	Renewal Option Change PPO Network From PCB to BlueSelect Plus Add 3-D Digital Mammography	Renewal Option 2 (Increase OOP Max Limits: Add 3-D Digital Mammography)	Renewal Option 3 (Increase OOP Max Limits: Change PPO Network From PCB to BlueSelect Plus; Add 3-D Digital Mammography)
	\$75,000	\$75,000	\$75,000	\$75,000	\$75,000
	BC Base	BC Base	BC Base	BC Base	BC Base
	\$400	\$400	\$400	\$400	\$400
	\$35/\$70	\$35/\$70	\$35/\$70	\$35/\$70	\$35/\$70
	\$60	\$60	\$60	\$60	\$60
	\$200	\$200	\$200	\$200	\$200
! (medical/drug)	\$2,400/\$6,000	\$2,400/\$6,000	\$2,400/\$6,000	\$3,500/\$8,750	\$3,500/\$8,750
	n/a	n/a	n/a	n/a	n/a
	\$12/50/70	\$12/50/70	\$12/50/70	\$12/50/70	\$12/50/70
	\$30/125/175	\$30/125/175	\$30/125/175	\$30/125/175	\$30/125/175
scan copay	\$200	\$200	\$200	\$200	\$200
	35.7%				
	BC BuyUp	BC BuyUp	BC BuyUp	BC BuyUp	BC BuyUp
	\$300	\$300	\$300	\$300	\$300
	\$30/\$60	\$30/\$60	\$30/\$60	\$30/\$60	\$30/\$60
	\$50	\$50	\$50	\$50	\$50
	\$150	\$150	\$150	\$150	\$150
! (medical/drug)	\$2,200/\$5,500	\$2,200/\$5,500	\$2,200/\$5,500	\$3,250/\$8,125	\$3,250/\$8,125
	n/a	n/a	n/a	n/a	n/a
	\$12/50/70	\$12/50/70	\$12/50/70	\$12/50/70	\$12/50/70
	\$30/125/175	\$30/125/175	\$30/125/175	\$30/125/175	\$30/125/175
scan copay	\$150	\$150	\$150	\$150	\$150

62.1%

Res. 18644

	Current	Renewal	Renewal Option Change PPO Network From PCB to BlueSelect Plus Add 3-D Digital Mammography	Renewal Option 2 (Increase OOP Max Limits: Add 3-D Digital Mammography)	Renewal Option 3 (Increase OOP Max Limits: Change PPO Network From PCB to BlueSelect Plus; Add 3-D Digital Mammography)
1) Family)	PCB \$250/\$750 \$1,000/\$3,000 90/80%	PCB \$250/\$750 \$1,000/\$3,000 90/80%	BlueSelect Plus \$250/\$750 \$1,000/\$3,000 90/80%	PCB \$250/\$750 \$1,000/\$3,000 90/80%	BlueSelect Plus \$250/\$750 \$1,000/\$3,000 90/80%
2) Family)	PCB \$2,650/\$5,300 \$5,300/\$10,600 \$30/\$60 \$50 \$200	PCB \$2,650/\$5,300 \$5,300/\$10,600 \$30/\$60 \$50 \$200	BlueSelect Plus \$2,650/\$5,300 \$13,250/\$26,500 \$30/\$60 \$50 \$200	PCB \$3,500/\$7,000 \$7,000/\$14,000 \$30/\$60 \$50 \$200	BlueSelect Plus \$3,500/\$7,000 \$14,000/\$28,000 \$30/\$60 \$50 \$200
	n/a \$12/50/70 \$30/125/175	n/a \$12/50/70 \$30/125/175	n/a \$12/50/70 \$30/125/175	n/a \$12/50/70 \$30/125/175	n/a \$12/50/70 \$30/125/175
	2.2%				

Notes:
 Rates are subject to change based on ACA guidance and regulation. Rates and benefits reflect
 calculation applying to the out-of-pocket maximum limits and corresponding accumulation rules
 Non-grandfathered plans must comply with new out-of-pocket maximum rules under the ACA.
 The rules would require that all member medical cost sharing, including deductibles, coinsurance,
 and (drug) would apply to the corresponding in-network and out-of-network out-of-pocket maximums.

Notes:
 Maximum limits, projected claims or rates will be impacted by a reduction of : 2.02%

Jackson County

Renewal Date: 1/1/2015
 Specific: \$250,000
 Aggregate: 10%
 Exper Period: 8/1/2013 - 8/1/2014

Rates Page

Res. 18644

Enrollment	BC Base	BC BuyUp	PCB	Total
Contracts				
Employee	221	654	36	911
Family	<u>215</u>	<u>308</u>	<u>7</u>	<u>530</u>
Total	436	962	43	1,441
Members	961	1,670	60	2,691

Fixed Costs									
Current Rates	Admin	Stop Loss	BCBS Total Fixed	ACA Excise Tax	Contractual Billed Rates				
Employee	\$25.53	\$11.20	\$36.73	\$0.27	\$37.00				
Family	\$70.95	\$31.14	\$102.09	\$0.75	\$102.84				
Annual Premium	\$730,336	\$320,489	\$1,050,825	\$7,722	\$1,058,546				
Renewal Rates	Admin	Stop Loss	BCBS Total Fixed	ACA Excise Tax	Contractual Billed Rates	Est. ACA Comp Eff	Est. ACA Reinsurer	Total Funding	
Employee	\$26.37	\$12.65	\$39.02	\$0.43	\$39.45	\$0.19	\$4.14	\$43.78	
Family	\$73.29	\$35.16	\$108.45	\$1.20	\$109.65	\$0.52	\$11.51	\$121.68	
Annual Premium	\$754,437	\$361,864	\$1,116,301	\$12,303	\$1,128,604	\$5,382	\$118,512	\$1,252,498	
Needed Rate Change	3.30%	12.91%	6.23%						
Admin Fee Caps: 2016 +3.5%; 2017 +3.5%									
ACA Taxes/Fees (A)									
Health Insurance Excise Tax	N/A	3.40%	N/A						
Comparative Effectiveness Fee	To Be Collected And Remitted By Employer								
Reinsurer Tax	To Be Collected And Remitted By Employer								
ACA Taxes (A)									
Health Insurance Excise Tax - 3.4% x Stop Loss Premium. Estimated at: \$12,303.									
Comparative Effectiveness Fee - The PPACA law requires Cost Plus accounts collect and remit this fee of \$2.00 per member per year to the IRS. Estimated at: \$5,382.									
Reinsurer Fee - The PPACA law requires Cost Plus accounts collect and remit this fee of \$3.67 per member per month to the IRS. Estimated at: \$118,512.									
Refer to "Important Rate Information - Taxes and Fees Related to the Affordable Care Act (ACA)".									

Access Fee	
Current	10% of savings, not to exceed \$2,000 per claim \$25.00 PEPM annual cumulative monthly cap
Renewal	10% of savings, not to exceed \$2,000 per claim \$25.83 PEPM annual cumulative monthly cap
Access Fee Caps: 2016 +3.5%; 2017 +3.5%.	

Current Rates				
	BC Base	BC BuyUp	PCB	Annual
Employee	\$409.00	\$471.43	\$646.23	
Family	\$1,137.02	\$1,310.58	\$1,796.52	\$12,991,945

Renewal Rates - Current Benefits & 3-D Digital Mammography				
	BC Base	BC BuyUp	PCB	
Employee	\$438.16	\$505.04	\$692.31	
Family	\$1,218.09	\$1,404.02	\$1,924.61	\$13,918,271
Rate Increase	7.13%	7.13%	7.13%	

Renewal Rates - Option 1 (Change PPO Network from PCB to BlueSelect Plus; add 3-D Digital Mammography)				
	BC Base	BC BuyUp	BlueSelect Plus	
Employee	\$438.16	\$505.04	\$614.76	
Family	\$1,218.09	\$1,404.02	\$1,709.03	\$13,866,661
Rate Increase	7.13%	7.13%	-4.87%	

Renewal Rates - Option 2 (Increase Maximum OOP Limits; add 3-D Digital Mammography)				
	BC Base	BC BuyUp	PCB	
Employee	\$429.90	\$495.52	\$679.25	
Family	\$1,195.12	\$1,377.55	\$1,888.32	\$13,655,833
Rate Increase	5.11%	5.11%	5.11%	

Renewal Rates - Option 3 (Increase Maximum OOP Limits; Change PPO Network from PCB to BlueSelect Plus; add 3-D Digital Mammography)				
	BC Base	BC BuyUp	BlueSelect Plus	
Employee	\$429.90	\$495.52	\$601.70	
Family	\$1,195.12	\$1,377.55	\$1,672.74	\$13,604,224
Rate Increase	5.11%	5.11%	-6.89%	

Res. 18644

Res. 18644

Terminal Admin Fee 10% of paid claims

Terminal Access Fee 10% of savings, not to exceed \$2,000 per claim

Terminal Claim Liability Factors - Current Benefits & 3-D Digital Mammography

	BC Base	BC BuyUp	PCB
Employee	\$657.24	\$757.56	\$1,038.46
Family	\$1,827.13	\$2,106.04	\$2,886.92

Terminal Claim Liability Factors - Renewal Option 1 (Change PPO Network from PCB to BlueSelect Plus)

	BC Base	BC BuyUp	BlueSelect Plus
Employee	\$657.24	\$757.56	\$922.14
Family	\$1,827.13	\$2,106.04	\$2,563.54

Terminal Claim Liability Factors - Renewal Option 2 (Increase Maximum OOP Limits; add 3-D Digital Mammography)

	BC Base	BC BuyUp	BlueSelect Plus
Employee	\$644.85	\$743.28	\$1,018.88
Family	\$1,792.68	\$2,066.33	\$2,832.48

Terminal Claim Liability Factors - Renewal Option 3 (Increase Maximum OOP Limits; Change PPO Network from PCB to BlueSelect Plus; add 3-D Digital Mammography)

	BC Base	BC BuyUp	BlueSelect Plus
Employee	\$644.85	\$743.28	\$902.56
Family	\$1,792.68	\$2,066.33	\$2,509.11

Rate Impact to Terminal and Maximum Claim Liability Factors to Maintain Current Out of Pocket Maximums -2.02% -2.02% -2.02%

Rates and benefits quoted are subject to change based on ACA guidance and regulation. Rates and benefits reflect the adjustment for regulation applying to the out-of-pocket maximum limits and corresponding accumulation rules referenced in the ACA. Non-grandfathered plans must comply with new out-of-pocket maximum rules under the ACA. In very broad terms, the rules would require that all member medical cost sharing, including deductibles, coinsurance, and copays (including drug) would apply to corresponding in-network and out-of-network out-of-pocket maximums.

Refer to "Important Rate Information - Taxes and Fees Related to the Affordable Care Act (ACA)".

Jackson County

Res. 18644

Proposed Funding Rates

Current Benefits; Add 3-D Digital Mammography

January 1, 2015 Renewal

	BC Low	BC High	PCB	TOTAL
Employee	\$501.19	\$568.63	\$757.45	
Family	\$1,393.29	\$1,580.78	\$2,105.69	
Annual Premium	\$4,923,862	\$10,305,171	\$504,098	\$15,733,132

Rates are based on current enrollment. Annual Premium is based on current enrollment.

January 1, 2014 Renewal

	BC Low	BC High	PCB	TOTAL
Employee	\$470.18	\$533.10	\$709.24	
Family	\$1,307.10	\$1,482.00	\$1,971.68	
Annual Premium	\$4,619,237	\$9,661,249	\$472,011	\$14,752,497

Rates are based on enrollment at time of January 1, 2014 renewal.
Annual Premium is based on current enrollment.

Proposed Funding Rates

Renewal Option 1 (Change PPO Network from PCB to BlueSelect Plus; Add 3-D Digital Mammography)

January 1, 2015 Renewal

	BC Low	BC High	BlueSelect Plus	TOTAL
Employee	\$501.19	\$568.63	\$674.15	
Family	\$1,393.29	\$1,580.78	\$1,874.10	
Annual Premium	\$4,923,862	\$10,305,171	\$448,655	\$15,677,689

Rates are based on current enrollment. Annual Premium is based on current enrollment.

January 1, 2014 Renewal

	BC Low	BC High	PCB	TOTAL
Employee	\$470.18	\$533.10	\$709.24	
Family	\$1,307.10	\$1,482.00	\$1,971.68	
Annual Premium	\$4,619,237	\$9,661,249	\$472,011	\$14,752,497

Rates are based on enrollment at time of January 1, 2014 renewal.
Annual Premium is based on current enrollment.

Jackson County

Res. 18644

Proposed Funding Rates

Renewal Option 2 (Increase Maximum OOP Limits; Add 3-D Digital Mammography)

January 1, 2015 Renewal

	BC Low	BC High	PCB	TOTAL
Employee	\$491.90	\$557.92	\$742.77	
Family	\$1,367.45	\$1,550.99	\$2,064.86	
Annual Premium	\$4,832,549	\$10,111,016	\$494,323	\$15,437,889

Rates are based on current enrollment. Annual Premium is based on current enrollment.

January 1, 2014 Renewal

	BC Low	BC High	PCB	TOTAL
Employee	\$470.18	\$533.10	\$709.24	
Family	\$1,307.10	\$1,482.00	\$1,971.68	
Annual Premium	\$4,619,237	\$9,661,249	\$472,011	\$14,752,497

Rates are based on enrollment at time of January 1, 2014 renewal.
Annual Premium is based on current enrollment.

Jackson County

Res. 18644

Proposed Funding Rates

Renewal Option 3 (Increase Maximum OOP Limits; Change PPO Network from PCB to BlueSelect Plus; Add 3-D Digital Mammography)

January 1, 2015 Renewal

	BC Low	BC High	BlueSelect Plus	TOTAL
Employee	\$491.90	\$557.92	\$661.09	
Family	\$1,367.45	\$1,550.99	\$1,837.81	
Annual Premium	\$4,832,548	\$10,111,017	\$439,968	\$15,383,534

Rates are based on current enrollment. Annual Premium is based on current enrollment.

January 1, 2014 Renewal

	BC Low	BC High	PCB	TOTAL
Employee	\$470.18	\$533.10	\$709.24	
Family	\$1,307.10	\$1,482.00	\$1,971.68	
Annual Premium	\$4,619,237	\$9,661,249	\$472,011	\$14,752,497

Rates are based on enrollment at time of January 1, 2014 renewal.
Annual Premium is based on current enrollment.

Jackson County

Rates Page

Renewal Date: 1/1/2015
 Specific: \$250,000
 Aggregate: 10%
 Expir Period: 8/1/2013 - 8/1/2014

Res. 18644

Enrollment	BC Base	BC BuyUp	PCB	Total
Contracts				
Employee	221	654	36	911
Employee & Spouse	40	81	2	123
Employee & Child(ren)	50	52	0	102
Family	<u>125</u>	<u>175</u>	<u>5</u>	<u>305</u>
Total	436	962	43	1,441
Members	961	1,670	60	2,691

Fixed Costs									
Current Rates	Admin	Stop Loss	BCBS Total Fixed	ACA Excise Tax	Contractual Billed Rates				
Employee	\$25.53	\$11.20	\$36.73	\$0.27	\$37.00				
	\$53.61	\$23.52	\$77.13	\$0.56	\$77.70				
Family	\$48.51	\$21.28	\$69.79	\$0.51	\$70.30				
	\$85.45	\$37.51	\$122.96	\$0.90	\$123.86				
Annual Premium	\$730,336	\$320,489	\$1,050,825	\$7,692	\$1,058,517				
Renewal Rates	Admin	Stop Loss	BCBS Total Fixed	ACA Excise Tax	Contractual Billed Rates	Est. ACA Comp Eff	Est. ACA Reinsurer	Total Funding	
Employee	\$26.37	\$12.65	\$39.02	\$0.43	\$39.45	\$0.19	\$4.14	\$43.78	
	\$55.38	\$26.56	\$81.94	\$0.90	\$82.84	\$0.40	\$8.70	\$91.94	
Family	\$50.11	\$24.03	\$74.13	\$0.82	\$74.95	\$0.36	\$7.87	\$83.18	
	\$88.27	\$42.35	\$130.62	\$1.44	\$132.06	\$0.63	\$13.97	\$146.56	
Annual Premium	\$754,437	\$361,864	\$1,116,301	\$12,303	\$1,128,605	\$5,382	\$118,512	\$1,252,498	
Needed Rate Change	3.30%	12.91%	6.23%						

Admin Fee Caps: 2016 +3.5%; 2017 +3.5%

ACA Taxes/Fees (A)

Health Insurance Excise Tax	N/A	3.40%	N/A
Comparative Effectiveness Fee	To Be Collected And Remitted By Employer		
Reinsurer Tax	To Be Collected And Remitted By Employer		

ACA Taxes (A)

Health Insurance Excise Tax - 3.4% x Stop Loss Premium. Estimated at: \$12,303.
 Comparative Effectiveness Fee - The PPACA law requires Cost Plus accounts collect and remit this fee of \$2.00 per member per year to the IRS. Estimated at: \$5,382.
 Reinsurer Fee - The PPACA law requires Cost Plus accounts collect and remit this fee of \$3.67 per member per month to the IRS. Estimated at: \$118,512.

Refer to "Important Rate Information - Taxes and Fees Related to the Affordable Care Act (ACA)".

Access Fee	
Current	10% of savings, not to exceed \$2,000 per claim \$25.00 PEPM annual cumulative monthly cap
Renewal	10% of savings, not to exceed \$2,000 per claim \$25.83 PEPM annual cumulative monthly cap
Access Fee Caps: 2016 +3.5%; 2017 +3.5%.	

Renewal Rates - Current Benefits & 3-D Digital Mammography

	BC Base	BC BuyUp	PCB	
Employee	\$438.16	\$505.04	\$692.31	
Employee & Spouse	\$920.14	\$1,060.59	\$1,453.84	
Employee & Child(ren)	\$832.51	\$959.58	\$1,315.38	
Family	\$1,466.34	\$1,690.17	\$2,316.86	\$13,918,270
Rate Increase	7.1%	7.1%	7.1%	

Res. 18644

Renewal Rates - Option 1 (Change PPO Network from PCB to BlueSelect Plus); add 3-D Digital Mammography

	BC Base	BC BuyUp	BlueSelect Plus	
Employee	\$438.16	\$505.04	\$616.76	
Employee & Spouse	\$920.14	\$1,060.59	\$1,295.21	
Employee & Child(ren)	\$832.51	\$959.58	\$1,171.85	
Family	\$1,466.34	\$1,690.17	\$2,064.05	\$13,866,661
Rate Increase	7.1%	7.1%	-4.56%	

Renewal Rates - Option 2 (Increase Maximum OOP Limits); add 3-D Digital Mammography

	BC Base	BC BuyUp	PCB	
Employee	\$429.90	\$495.52	\$679.25	
Employee & Spouse	\$902.79	\$1,040.59	\$1,426.43	
Employee & Child(ren)	\$816.81	\$941.49	\$1,290.58	
Family	\$1,438.69	\$1,658.30	\$2,273.17	\$13,655,833
Rate Increase	5.1%	5.1%	5.1%	

Renewal Rates - Option 3 (Increase Maximum OOP Limits; Change PPO Network from PCB to BlueSelect Plus); add 3-D Digital Mammography

	BC Base	BC BuyUp	BlueSelect Plus	
Employee	\$429.90	\$495.52	\$603.71	
Employee & Spouse	\$902.79	\$1,040.59	\$1,267.79	
Employee & Child(ren)	\$816.81	\$941.49	\$1,147.05	
Family	\$1,438.69	\$1,658.30	\$2,020.39	\$13,604,224
Rate Increase	5.1%	5.1%	-6.6%	

	BC Base	BC BuyUp	PCB
Employee	\$657.24	\$757.56	\$1,038.46
	\$1,380.21	\$1,590.89	\$2,180.76
Family	\$1,248.76	\$1,439.37	\$1,973.07
	\$2,199.51	\$2,535.25	\$3,475.29

Res. 18644

Terminal Claim Liability Factors - Renewal Option 1 (Change PPO Network from PCB to BlueSelect Plus)

	BC Base	BC BuyUp	BlueSelect Plus
Employee	\$657.24	\$757.56	\$925.15
	\$1,380.21	\$1,590.89	\$1,942.81
Family	\$1,248.76	\$1,439.37	\$1,757.78
	\$2,199.51	\$2,535.25	\$3,096.08

Terminal Claim Liability Factors - Renewal Option 2 (Increase Maximum OOP Limits); add 3-D Digital Mammography

	BC Base	BC BuyUp	BlueSelect Plus
Employee	\$644.85	\$743.28	\$1,018.88
	\$1,354.18	\$1,560.89	\$2,139.64
Family	\$1,225.21	\$1,412.23	\$1,935.87
	\$2,158.04	\$2,487.45	\$3,409.76

Terminal Claim Liability Factors - Renewal Option 3 (Increase Maximum OOP Limits; Change PPO Network from PCB to BlueSelect Plus); add 3-D Digital Mammography

	BC Base	BC BuyUp	BlueSelect Plus
Employee	\$644.85	\$743.28	\$905.56
	\$1,354.18	\$1,560.89	\$1,901.68
Family	\$1,225.21	\$1,412.23	\$1,720.57
	\$2,158.04	\$2,487.45	\$3,030.59

Rate Impact to Terminal and Maximum Claim Liability Factors to Maintain Current Out of Pocket Maximums	-2.02%	-2.02%	-2.02%
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Rates and benefits quoted are subject to change based on ACA guidance and regulation. Rates and benefits reflect the adjustment for regulation applying to the out-of-pocket maximum limits and corresponding accumulation rules referenced in the ACA. Non-grandfathered plans must comply with new out-of-pocket maximum rules under the ACA. In very broad terms, the rules would require that all member medical cost sharing, including deductibles, coinsurance, and copays (including drug) would apply to corresponding in-network and out-of-network out-of-pocket maximums.

Refer to "Important Rate Information - Taxes and Fees Related to the Affordable Care Act (ACA)".

Jackson County

Proposed Funding Rates

Res. 18644

Current Benefits; Add 3-D Digital Mammography

January 1, 2015 Renewal

	BC Low	BC High	PCB	TOTAL
Employee	\$501.19	\$568.63	\$757.45	
Employee & Spouse	\$1,052.51	\$1,194.13	\$1,590.65	
Employee & Child(ren)	\$952.27	\$1,080.40	\$1,439.16	
Family	\$1,677.35	\$1,903.04	\$2,534.94	
Annual Premium	\$4,921,763	\$10,293,877	\$517,492	\$15,733,133

Rates are based on current enrollment. Annual Premium is based on current enrollment.

January 1, 2014 Renewal

	BC Low	BC High	PCB	TOTAL
Employee	\$470.18	\$533.10	\$709.24	
Family	\$1,307.10	\$1,482.00	\$1,971.68	
Annual Premium	\$4,619,237	\$9,661,249	\$472,011	\$14,752,497

Rates are based on enrollment at time of January 1, 2014 renewal.
Annual Premium is based on current enrollment.

Jackson County

Res. 18644

Proposed Funding Rates

Renewal Option 1 (Change PPO Network from PCB to BlueSelect Plus; Add 3-D Digital Mammography)

January 1, 2015 Renewal

	BC Low	BC High	BlueSelect Plus	TOTAL
Employee	\$501.19	\$568.63	\$676.15	
Employee & Spouse	\$1,052.52	\$1,194.14	\$1,419.92	
Employee & Child(ren)	\$952.28	\$1,080.41	\$1,284.69	
Family	\$1,677.37	\$1,903.06	\$2,262.86	
Annual Premium	\$4,921,802	\$10,293,940	\$461,947	\$15,677,689
			0.30%	

Rates are based on current enrollment. Annual Premium is based on current enrollment.

January 1, 2014 Renewal

	BC Low	BC High	PCB	TOTAL
Employee	\$470.18	\$533.10	\$709.24	
Family	\$1,307.10	\$1,482.00	\$1,971.68	
Annual Premium	\$4,619,237	\$9,661,249	\$472,011	\$14,752,497

Rates are based on enrollment at time of January 1, 2014 renewal.
Annual Premium is based on current enrollment.

Jackson County

Proposed Funding Rates

Res. 18644

Renewal Option 2 (Increase Maximum OOP Limits; Add 3-D Digital Mammography)

January 1, 2015 Renewal

	BC Low	BC High	PCB	TOTAL
Employee	\$491.90	\$557.92	\$742.77	
Employee & Spouse	\$1,032.99	\$1,171.63	\$1,559.81	
Employee & Child(ren)	\$934.61	\$1,060.05	\$1,411.26	
Family	\$1,646.25	\$1,867.19	\$2,485.80	
Annual Premium	\$4,830,492	\$10,099,939	\$507,459	\$15,437,891

Rates are based on current enrollment. Annual Premium is based on current enrollment.

January 1, 2014 Renewal

	BC Low	BC High	PCB	TOTAL
Employee	\$470.18	\$533.10	\$709.24	
Family	\$1,307.10	\$1,482.00	\$1,971.68	
Annual Premium	\$4,619,237	\$9,661,249	\$472,011	\$14,752,497

Rates are based on enrollment at time of January 1, 2014 renewal.
Annual Premium is based on current enrollment.

Jackson County

Res. 18644

Proposed Funding Rates

Renewal Option 3 (Increase Maximum OOP Limits; Change PPO Network from PCB to BlueSelect Plus; Add 3-D Digital Mammography)

January 1, 2015 Renewal

	BC Low	BC High	BlueSelect Plus	TOTAL
Employee	\$491.90	\$557.92	\$663.10	
Employee & Spouse	\$1,033.00	\$1,171.64	\$1,392.50	
Employee & Child(ren)	\$934.62	\$1,060.06	\$1,259.88	
Family	\$1,646.26	\$1,867.20	\$2,219.20	
Annual Premium	\$4,830,520	\$10,099,984	\$453,030	\$15,383,534

Rates are based on current enrollment. Annual Premium is based on current enrollment.

January 1, 2014 Renewal

	BC Low	BC High	PCB	TOTAL
Employee	\$470.18	\$533.10	\$709.24	
Family	\$1,307.10	\$1,482.00	\$1,971.68	
Annual Premium	\$4,619,237	\$9,661,249	\$472,011	\$14,752,497

Rates are based on enrollment at time of January 1, 2014 renewal.
Annual Premium is based on current enrollment.



Res. 18644

8.9 Cost Compare Sheet

Jackson County

MATCHES CURRENT BENEFITS & INCLUDES 3-D DIGITAL MAMMOGRAPHY

rolment	Specific Stop Loss Premium			Aggregate Stop Loss Premium			Administrative Fee			Misc. Fees - Describe Below			Expected Factors - Med/Rx			Expected Monthly Rates			Total Premiums of Expected	Aggregate Factors - Med/Rx			Mark						
	MO High	PRO	HMO Low	HMO High	PRO	HMO Low	HMO High	PRO	HMO Low	HMO High	PRO	HMO Low	HMO High	PRO	HMO Low	HMO High	PRO	HMO Low		HMO High	PRO	HMO Low		HMO High	PRO				
644	35	\$12.65	\$12.65	\$12.65	\$12.65	Incl in spec stop loss premium			\$26.37	\$26.37	\$26.37	\$16.04	\$16.04	\$16.04	\$398.33	\$459.13	\$629.37	\$453.39	\$514.19	\$684.43	\$438.16	\$505.04	\$692.31	\$493.22					
80	2	\$26.56	\$26.56	\$26.56	\$26.56	Incl in spec stop loss premium			\$55.38	\$55.38	\$55.38	\$33.68	\$33.68	\$33.68	\$836.49	\$964.17	\$1,321.67	\$952.11	\$1,079.79	\$1,437.29	\$920.14	\$1,060.59	\$1,453.84	\$1,035.76					
51	-	\$24.03	\$24.03	\$24.03	\$24.03	Incl in spec stop loss premium			\$50.11	\$50.11	\$50.11	\$30.48	\$30.48	\$30.48	\$756.83	\$872.35	\$1,195.80	\$861.45	\$976.97	\$1,300.42	\$832.51	\$959.58	\$1,315.38	\$937.13					
175	5	\$42.35	\$42.35	\$42.35	\$42.35	Incl in spec stop loss premium			\$88.27	\$88.27	\$88.27	\$53.69	\$53.69	\$53.69	\$1,333.04	\$1,536.52	\$2,106.24	\$1,517.35	\$1,720.83	\$2,290.55	\$1,466.34	\$1,690.17	\$2,316.86	\$1,550.65					
10	1	\$12.65	\$12.65	\$12.65	\$12.65	Incl in spec stop loss premium			\$26.37	\$26.37	\$26.37	\$16.04	\$16.04	\$16.04	\$398.33	\$459.13	\$629.37	\$453.39	\$514.19	\$684.43	\$438.16	\$505.04	\$692.31	\$493.22					
1	-	\$26.56	\$26.56	\$26.56	\$26.56	Incl in spec stop loss premium			\$55.38	\$55.38	\$55.38	\$33.68	\$33.68	\$33.68	\$836.49	\$964.17	\$1,321.67	\$952.11	\$1,079.79	\$1,437.29	\$920.14	\$1,060.59	\$1,453.84	\$1,035.76					
1	-	\$24.03	\$24.03	\$24.03	\$24.03	Incl in spec stop loss premium			\$50.11	\$50.11	\$50.11	\$30.48	\$30.48	\$30.48	\$756.83	\$872.35	\$1,195.80	\$861.45	\$976.97	\$1,300.42	\$832.51	\$959.58	\$1,315.38	\$937.13					
-	-	\$42.35	\$42.35	\$42.35	\$42.35	Incl in spec stop loss premium			\$88.27	\$88.27	\$88.27	\$53.69	\$53.69	\$53.69	\$1,333.04	\$1,536.52	\$2,106.24	\$1,517.35	\$1,720.83	\$2,290.55	\$1,466.34	\$1,690.17	\$2,316.86	\$1,550.65					
												TOTAL PRE-65:																	
												TOTAL ACTIVE:																	
												MONTHLY TOTAL EXPECTED																	
												ANNUAL TOTAL EXPECTED																	

misc. fees include ACA excise tax and access fee

MONTHLY ANNUAL

8.9 Cost Compare Sheet
 Jackson County
 OPTION 1 - CHANGE PPO NETWORK FROM PCB TO BLUESELECT PLUS; ADD 3-D DIGITAL MAMMOGRAPHY

rollment	Specific Stop Loss Premium			Aggregate Stop Loss Premium			Administrative Fee			Misc. Fees - Describe Below			Expected Factors - Mod/Rx			Expected Monthly Rates			Total Expected # of Expected	Aggregate Factors - Mod/Rx			Maxi
	PPO	HMO Low	HMO High	PPO	HMO Low	HMO High	PPO	HMO Low	HMO High	PPO	HMO Low	HMO High	PPO	HMO Low	HMO High	PPO	HMO Low	HMO High		PPO	HMO Low	HMO High	
6-44	35	\$12.65	\$12.65	\$12.65	Incl In spec stop loss premium		\$26.37	\$26.37	\$26.37	\$16.04	\$16.04	\$16.04	\$398.33	\$459.13	\$560.69	\$453.99	\$514.19	\$615.75	447.444	\$438.16	\$505.04	\$616.76	\$493.22
NI	2	\$26.56	\$26.56	\$26.56			\$55.38	\$55.38	\$55.38	\$33.68	\$33.68	\$33.68	\$896.49	\$964.17	\$1,177.46	\$952.11	\$1,079.79	\$1,293.08	1117.244	\$920.14	\$1,060.59	\$1,295.21	\$1,035.76
51	5	\$24.03	\$24.03	\$24.03			\$50.11	\$50.11	\$50.11	\$30.48	\$30.48	\$30.48	\$756.83	\$872.35	\$1,065.32	\$861.45	\$976.97	\$1,169.94	861.899	\$832.51	\$959.58	\$1,171.85	\$937.13
175	5	\$42.35	\$42.35	\$42.35			\$88.27	\$88.27	\$88.27	\$53.69	\$53.69	\$53.69	\$1,333.04	\$1,596.52	\$1,876.41	\$1,517.35	\$1,720.83	\$2,060.72	1465.597	\$1,466.34	\$1,690.17	\$2,064.05	\$1,650.65
10	1	\$12.65	\$12.65	\$12.65	Incl In spec stop loss premium		\$26.37	\$26.37	\$26.37	\$16.04	\$16.04	\$16.04	\$398.33	\$459.13	\$560.69	\$453.99	\$514.19	\$615.75	111.144	\$438.16	\$505.04	\$616.76	\$493.22
1		\$26.56	\$26.56	\$26.56			\$55.38	\$55.38	\$55.38	\$33.68	\$33.68	\$33.68	\$896.49	\$964.17	\$1,177.46	\$952.11	\$1,079.79	\$1,293.08	1179.777	\$920.14	\$1,060.59	\$1,295.21	\$1,035.76
1		\$24.03	\$24.03	\$24.03			\$50.11	\$50.11	\$50.11	\$30.48	\$30.48	\$30.48	\$756.83	\$872.35	\$1,065.32	\$861.45	\$976.97	\$1,169.94	867.337	\$832.51	\$959.58	\$1,171.85	\$937.13
1		\$42.35	\$42.35	\$42.35			\$88.27	\$88.27	\$88.27	\$53.69	\$53.69	\$53.69	\$1,333.04	\$1,596.52	\$1,876.41	\$1,517.35	\$1,720.83	\$2,060.72	1517.337	\$1,466.34	\$1,690.17	\$2,064.05	\$1,650.65
												TOTAL PRE-65:			TOTAL ACTIVE:								
												TOTAL PRE-65:			TOTAL ACTIVE:								

Misc. fees include ACA excise tax and access fee

MONTHLY TOTAL EXPECTED	\$1,184,178
ANNUAL TOTAL EXPECTED	\$14,210,136

MONTHLY	
ANNUAL	

Jackson County
OPTION 2 - INCREASE MAXIMUM COP LIMITS; ADD 3-D DIGITAL MAMMOGRAPHY

Enrollment	Specific Stop Loss Premium			Aggregate Stop Loss Premium			Administrative Fee			Misc. Fees - Describe Below			Expected Factors - Med/Rx			Expected Monthly Rates			Aggregate Factors - Med/Rx			Market		
	HMO Low	HMO High	PPO	HMO Low	HMO High	PPO	HMO Low	HMO High	PPO	HMO Low	HMO High	PPO	HMO Low	HMO High	PPO	HMO Low	HMO High	PPO	HMO Low	HMO High	PPO		HMO Low	HMO High
644	\$12.65	\$12.65	\$12.65	\$12.65	\$12.65	\$12.65	\$26.37	\$26.37	\$26.37	\$16.04	\$16.04	\$16.04	\$390.82	\$450.47	\$617.50	\$445.88	\$505.53	\$672.56	\$429.90	\$495.52	\$679.25	\$484.96	\$561.01	\$744.04
810	\$26.56	\$26.56	\$26.56	\$26.56	\$26.56	\$26.56	\$55.38	\$55.38	\$55.38	\$33.68	\$33.68	\$33.68	\$820.72	\$945.99	\$1,296.75	\$936.34	\$1,061.61	\$1,432.37	\$902.79	\$1,040.59	\$1,426.43	\$1,018.41	\$1,163.09	\$1,540.00
51	\$24.03	\$24.03	\$24.03	\$24.03	\$24.03	\$24.03	\$50.11	\$50.11	\$50.11	\$30.48	\$30.48	\$30.48	\$742.55	\$855.90	\$1,173.25	\$847.17	\$960.52	\$1,277.87	\$816.81	\$941.49	\$1,290.58	\$971.43	\$1,107.00	\$1,480.00
175	\$42.35	\$42.35	\$42.35	\$42.35	\$42.35	\$42.35	\$88.27	\$88.27	\$88.27	\$53.69	\$53.69	\$53.69	\$1,307.90	\$1,507.55	\$2,066.52	\$1,492.21	\$1,691.86	\$2,250.83	\$1,438.69	\$1,658.30	\$2,273.17	\$1,623.00	\$1,830.00	\$2,400.00
10	\$12.65	\$12.65	\$12.65	\$12.65	\$12.65	\$12.65	\$26.37	\$26.37	\$26.37	\$16.04	\$16.04	\$16.04	\$390.82	\$450.47	\$617.50	\$445.88	\$505.53	\$672.56	\$429.90	\$495.52	\$679.25	\$484.96	\$561.01	\$744.04
1	\$26.56	\$26.56	\$26.56	\$26.56	\$26.56	\$26.56	\$55.38	\$55.38	\$55.38	\$33.68	\$33.68	\$33.68	\$820.72	\$945.99	\$1,296.75	\$936.34	\$1,061.61	\$1,432.37	\$902.79	\$1,040.59	\$1,426.43	\$1,018.41	\$1,163.09	\$1,540.00
1	\$24.03	\$24.03	\$24.03	\$24.03	\$24.03	\$24.03	\$50.11	\$50.11	\$50.11	\$30.48	\$30.48	\$30.48	\$742.55	\$855.90	\$1,173.25	\$847.17	\$960.52	\$1,277.87	\$816.81	\$941.49	\$1,290.58	\$971.43	\$1,107.00	\$1,480.00
1	\$42.35	\$42.35	\$42.35	\$42.35	\$42.35	\$42.35	\$88.27	\$88.27	\$88.27	\$53.69	\$53.69	\$53.69	\$1,307.90	\$1,507.55	\$2,066.52	\$1,492.21	\$1,691.86	\$2,250.83	\$1,438.69	\$1,658.30	\$2,273.17	\$1,623.00	\$1,830.00	\$2,400.00
incl in spec stop loss premium												TOTAL PPE-65:			TOTAL PPE-65:			TOTAL PPE-65:			TOTAL PPE-65:			
MONTHLY TOTAL EXPECTED												MONTHLY TOTAL EXPECTED			MONTHLY TOTAL EXPECTED			MONTHLY TOTAL EXPECTED			MONTHLY TOTAL EXPECTED			
ANNUAL TOTAL EXPECTED												ANNUAL TOTAL EXPECTED			ANNUAL TOTAL EXPECTED			ANNUAL TOTAL EXPECTED			ANNUAL TOTAL EXPECTED			

misc. fees include ACA excise tax and access fee

MONTHLY ANNUAL

8.9 Cost Compare Sheet
 Jackson County
OPTION 3 - INCREASE OOP MAXIMUM LIMITS; CHANGE PPO NETWORK FROM PCB TO BLUESELECT PLUS; ADD 3-D DIGITAL MAMMOGRAPHY

rollment	Specific Stop Loss Premium			Aggregate Stop Loss Premium			Administrative Fee			Misc. Fees - Describe Below			Expected Factors - Med/Rx			Expected Monthly Rates			Aggregate Factors - Med/Rx			Max		
	PPO	HMO Low	HMO High	PPO	HMO Low	HMO High	PPO	HMO Low	HMO High	PPO	HMO Low	HMO High	PPO	HMO Low	HMO High	PPO	HMO Low	HMO High	PPO	HMO Low	HMO High		PPO	HMO Low
MO High	35	\$12.65	\$12.65	35	\$12.65	\$12.65	35	\$26.37	\$26.37	35	\$16.04	\$16.04	35	\$390.82	\$450.47	\$547.00	\$445.88	\$505.53	\$602.06	\$429.90	\$495.52	\$601.70	\$484.96	
MO	7	\$35.16	\$35.16	7	\$35.16	\$35.16	7	\$73.29	\$73.29	7	\$44.59	\$44.59	7	\$1,086.47	\$1,252.32	\$1,520.67	\$1,239.51	\$1,405.36	\$1,673.71	\$1,195.12	\$1,377.55	\$1,672.74	\$1,348.16	
10	1	\$12.65	\$12.65	1	\$12.65	\$12.65	1	\$26.37	\$26.37	1	\$16.04	\$16.04	1	\$390.82	\$450.47	\$547.00	\$445.88	\$505.53	\$602.06	\$429.90	\$495.52	\$601.70	\$484.96	
2	1	\$35.16	\$35.16	1	\$35.16	\$35.16	1	\$73.29	\$73.29	1	\$44.59	\$44.59	1	\$1,086.47	\$1,252.32	\$1,520.67	\$1,239.51	\$1,405.36	\$1,673.71	\$1,195.12	\$1,377.55	\$1,672.74	\$1,348.16	
Total PHE 65:													\$1,086.47	\$1,252.32	\$1,520.67	\$1,239.51	\$1,405.36	\$1,673.71	\$1,195.12	\$1,377.55	\$1,672.74	\$1,348.16		
Total PHE 65:													\$1,086.47	\$1,252.32	\$1,520.67	\$1,239.51	\$1,405.36	\$1,673.71	\$1,195.12	\$1,377.55	\$1,672.74	\$1,348.16		

misc. fees include ACA excise tax and access fee

MONTHLY TOTAL EXPECTED	\$1,348.16
ANNUAL TOTAL EXPECTED	\$16,177.92

MONTHLY	\$1,348.16
ANNUAL	\$16,177.92

