REQUEST FOR LEGISLATIVE ACTION

Completed by County Counselor's Office: Res/@xxx No.: 18644

Sponsor(s): Date:

Theresa Garza Ruiz October 27, 2014

SUBJECT	Action Requested Resolution Ordinance Project/Title: A RESOLUTION awarding a one year to two additional years for the furnishing of employee gro Blue Cross Blue Shield of Kanas City, MO under the tell.	up health insurance as an en	plovee benefit countywide to			
BUDGET						
INFORMATION	Amount authorized by this legislation this fiscal year:	\$				
To be completed	Amount previously authorized this fiscal year:	\$				
By Requesting	Total amount authorized after this legislative action:	\$				
Department and	Amount budgeted for this item * (including	\$				
Finance	transfers):	\$				
	Source of funding (name of fund) and account code number; FROM / TO	FROM ACCT				
		TO ACCT				
	* If account includes additional funds for other expenses, total budget	ed in the account is: \$				
	OTHER FINANCIAL INFORMATION:	oo iii iio assosii is. S				
	OTTER PINANCIAL INFORMATION;					
	No budget impact (no fiscal note required) Term and Supply Contract (funds approved in the art Department: Estimated Use: \$	nnual budget); estimated val	ue and use of contract:			
	Prior Year Budget (if applicable): Prior Year Actual Amount Spent (if applicable):					
PRIOR LEGISLATION	Prior ordinances and (date):					
	Prior resolutions and (date): Resolution #16743, 10-20-	-08				
CONTACT INFORMATION	RLA drafted by (name, title, & phone): Shelley Kneuvean. Chief Operating Officer					
REQUEST SUMMARY	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:					
	Blue Cross Blue Shield Kanas City (Jackson County, MO AETNA/Coventry (Jackson County, MO)	O)				
	Based on the proposals submitted including terms and corecommended for the award of a one year contract with t insurance as an employee benefit for use countywide. U lowest and best bid, at an estimated first year cost of \$15 does not obligate Jackson County to pay any specific amappropriation.	wo annual renewal terms for nder the terms and condition ,231,072. This award is mad	the furnishing of health is of RFP 63-14 as the de on an as needed basis and			

		A few enhancements ha (previously was until 6: administrative fee will	nve been added, including extended r 5); as well as digital mammography be be fixed for two years.	etiree access to health insu being a covered service. A	rance indefinitely dditionally, the
		The total premium cost	for 2015 is as follows:		
		BCBS LOW OPTION Individual \$445.88 Family \$1,239.51			
		BCBS HIGH OPTION Individual \$505.53 Family \$1,405.36			
		BCBS PPO OPTION Individual \$672.56 Family \$1,869.69			
	RANCE	Business License V	upleted (Purchasing & Department) erified (Purchasing & Department) ace - Affirmative Action/Prevailing V	Vage (County Auditor's O	ffice)
ATTA	CHMENTS				
REVIE	W	Department Director:			Date:
		Finance (Budget Approvi If applicable N/A (Division Manager:	liboran & Ball		Date: 10 / 1
		County Counselor's Off	ice:		Date:
Fiscal	Informatio	n (to be verified by B	Budget Office in Finance Depar	tment)	
	This expend	liture was included in the	annual budget.	16	
	Funds for th	is were encumbered from	the	_Fund in	
	is chargeabl	e aind there is a cash balan	nbered to the credit of the appropriat nce otherwise unencumbered in the t t to provide for the obligation herein	reasury to the credit of the	re fund from which
	Funds suffic	eient for this expenditure	will be/were appropriated by Ordinar	nce #	
	Funds suffic	eient for this appropriation	are available from the source indica	ated below.	
	Account N	umber:	Account Title:	Amount Not to Exceed:	
			5		
×	This award i	is made on a need basis an ecific purchases will, of n	nd does not obligate Jackson County eccessity. be determined as each using	to pay any specific amour g agency places its order.	at. The availability of
			at the County financially and does no		nnroval

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Res. 18644

Jackson County January 1, 2015

nmended Funding increase of 6.65%

nistrative & Access Fee Rate Cap: 2016 = +3.5%, 2017 = +3.5%

62.1%	scan copay	ı (medical/drug)	35.7%	scan copay	ı (medical/drug)		Res. 1
	n/a \$12/50/70 \$30/125/175 \$150	BC BuyUp \$300 \$30/\$60 \$50 \$150 \$1,200/\$5,500		n/a \$12/50/70 \$30/125/175 \$200	BC Base \$400 \$35/\$70 \$60 \$200 \$2,400/\$6,000	\$75,000	Current
	n/a \$12/50/70 \$30/125/175 \$150	BC BuyUp \$300 \$30/\$60 \$50 \$150 \$2,200/\$5,500		n/a \$12/50/70 \$30/125/175 \$200	BC Base \$400 \$35/\$70 \$60 \$200 \$2,400/\$6,000	\$75,000	Renewsi
	n/a \$12/50/70 \$30/125/175 \$150	BC BuyUp \$300 \$30/\$60 \$50 \$150 \$2,200/\$5,500		n/a \$12/50/70 \$30/125/175 \$200	BC Base \$400 \$35,\$70 \$60 \$2,400/\$6,000	\$75,000	Renewal Option Change PPO Network From PCB to BlueSelect Plus Add 3-D Digital Mammography
	n/a \$12/50/70 \$30/125/175 \$1 50	BC BuyUp \$300 \$30/\$60 \$50 \$150 \$3,250/\$9,125		n/a \$12/50/70 \$30/125/175 \$200	BC Base \$400 \$35/\$70 \$60 \$200 \$3,500/\$8,750	\$75,000	Renewal Option 2 (Increase OOP Max Limits; Add 3-D Digital Mammography)
	n/a \$12/50/70 \$30/125/175 \$150	BC BuyUp \$300 \$30/\$60 \$50 \$150 \$3,250/\$8,125		n/a \$12/50/70 \$30/125/175 \$200	BC Base \$400 \$35/\$70 \$60 \$200 \$3,500/\$8,750	\$75,000	Renewal Option 3 (Increase OOP Max Limits; Change PPO Network From PCB to BlueSelect Plus; Add 3-D Digital Mammography)

	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)
	es.	РСВ	РСВ	BlueSelect Plus	РСВ	BlueSelect Plus
•	R	\$250/\$750	\$250/\$750	\$250/\$750	\$250/\$750	\$250/\$750
ımily)		\$1,000/\$3,000	\$1,000/\$3,000	\$1,000/\$3,000	\$1,000/\$3,000	\$1,000/\$3,000
		90/80%	90/80%	90/60%	90/80%	90/60%
y		\$2,650/\$5,300	\$2,650/\$5,300	\$2,650/\$5,300	\$3,500/\$7,000	\$3,500/\$7,000
amily)		\$5,300/\$10,600	\$5,300/\$10,600	\$13,250/\$26,500	\$7,000/\$14,000	\$14,000/\$28,000
		\$30/\$60	\$30/\$60	\$30/\$60	\$30/\$60	\$30/\$60
		\$50	\$50	\$50	\$50	\$50
		\$200	\$200	\$200	\$200	\$200
		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
	2.2%					

2.2%

Inits:

Ited are subject to change based on ACA guidance and regulation. Rates and benefits reflect lation 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, e rules would require that all member medical cost sharing, including deductibles, coinsurance, frug) would apply to the corresponding in-network and out-of-network out-of-pocket maximums.

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

Renewal Date: 1/1/2015 Specific: \$250,000 Aggregate: 10%

Exper Period: 8/1/2013 - 8/1/2014

Rates Page

Res. 18644

nrollment					
	BC Base	BC BuyUp	PCB	Total	
Contracts		* -			
Employee	221	654	36	911	
Family	215	308	7	530	
Total	436	962	43	1,441	
Members	961	1,670	60	2,691	

Fixed Costs								
Current Rates			BCBS	ACA	Contractual			
	<u>Admin</u>	Stop Loss	Total Fixed	Excise Tax	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			BCBS	ACA	Contractual	Est. ACA	Est. ACA	Total
5	Admin	Stop Loss	Total Fixed	Excise Tax	Billed Rates	Comp Eff	Reinsurer	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 Comparative Effectiveness Fee N/A 3.40%

N/A

Comparative Effectiveness Fee Reinsurer Tax

To Be Collected And Remitted By Employer 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 &				
	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 P	PO Network from PCB to	BlueSelect Plus	s; add 3-D Digital Mamm	ography)
	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 I	Maximum OOP Limits; ac	dd 3-D Digital Ma	mmography)	
	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 I	Maximum OOP Limits; Cl	hange PPO Netw	ork from PCB to BlueSe	elect 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%	

Terminal	Admin	Fee

10% of paid claims

Terminal Access Fee

Employee

Family

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 \$657.24 \$757.56 \$1,038.46 \$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)".

Res. 18644

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

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	\$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

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

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

Renewal Date: 1/1/2015 Specific: \$250,000

Aggregate: 10% Exper Period: 8/1/2013 - 8/1/2014

Res. 18644

nrollment					
	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	125	<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			BCBS	ACA	Contractual			
	<u>Admin</u>	Stop Loss	Total Fixed	Excise Tax	Billed Rates			
Employee	\$25.53	\$11.20	\$36.73	\$0.27	\$37.00			
	\$53.61	\$23.52	\$77.13	\$0.56	\$77.70			
	\$48.51	\$21.28	\$69.79	\$0.51	\$70.30			
Family	\$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			BCBS	ACA	Contractual	Est. ACA	Est. ACA	Total
	Admin	Stop Loss	Total Fixed	Excise Tax	Billed Rates	Comp Eff	Reinsurer	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
	\$50.11	\$24.03	\$74.13	\$0.82	\$74.95	\$0.36	\$7.87	\$83.18
Family	\$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 Reinsurer Tax

To Be Collected And Remitted By Employer
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: 2015 +3.5%; 2017 +3.5%.

Renewal Rates - Current Benefits & 3	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	\$959.50	\$1,315.38	
Family	\$1,466.34	\$1,690.17	\$2,316.86	\$13,918,2
ate Increase	7.1%	7.1%	7.1%	
renewal Rates - Option 1 (Change P	PO Network from PCB to	o BiueSelect Plus	s); add 3-D Digital Mamm	ography
	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	\$13,866,6
late Increase denewal Rates - Option 2 (Increase II)	7.1% Maximum OOP Limits); a	7.1% add 3-D Digital M	-4.56% ammography	
	daximum OOP Limits); a	ıdd 3-D Digital M	ammography	
enewal Rates - Option 2 (increase ii	Aaximum OOP Limits); a BC Base	idd 3-D Digital M	amm ography PCB	
enewal Rates - Option 2 (Increase II	Aaximum OOP Limits); a BC Base \$429.90	add 3-D Digital M BC BuyUp \$495.52	ammography PCB \$679.25	
enewal Rates - Option 2 (Increase II Employee Employee & Spouse	Aaximum OOP Limits); a BC Base	BC BuyUp \$495.52 \$1,040.59	PCB \$679.25 \$1,426.43	
enewal Rates - Option 2 (Increase II	Maximum OOP Limits); a BC Base \$429.90 \$902.79	add 3-D Digital M BC BuyUp \$495.52	ammography PCB \$679.25	\$13,655,8
enewal Rates - Option 2 (Increase M Employee Employee & Spouse Employee & Child(ren) Family	######################################	BC BuyUp \$495.52 \$1,040.59 \$941.49	PCB \$679.25 \$1,426.43 \$1,290.58	\$13,655,83
enewal Rates - Option 2 (Increase M Employee Employee & Spouse Employee & Child(ren) Family ate Increase enewal Rates - Option 3 (Increase M	Maximum OOP Limits); a BC Base \$429.90 \$902.79 \$816.81 \$1,438.69 5.1%	BC BuyUp \$495.52 \$1,040.59 \$941.49 \$1,658.30 5.1%	PCB \$679.25 \$1,426.43 \$1,290.58 \$2,273.17	,
enewal Rates - Option 2 (Increase II Employee Employee & Spouse Employee & Child(ren) Family ate Increase	BC Base \$429.90 \$902.79 \$816.81 \$1,438.69 5.1%	BC BuyUp \$495.52 \$1,040.59 \$941.49 \$1,658.30 5.1%	PCB \$679.25 \$1,426.43 \$1,290.58 \$2,273.17 5.1%	,
enewal Rates - Option 2 (Increase M Employee Employee & Spouse Employee & Child(ren) Family ate Increase enewal Rates - Option 3 (Increase M add 3-D Digital Mammography	######################################	BC BuyUp \$495.52 \$1,040.59 \$941.49 \$1,658.30 5.1% hange PPO Netw BC BuyUp	PCB \$679.25 \$1,426.43 \$1,290.58 \$2,273.17 5.1% ork from PCB to BlueSel	,
enewal Rates - Option 2 (Increase In Employee Employee & Spouse Employee & Child(ren) Family ate Increase enewal Rates - Option 3 (Increase In add 3-D Digital Mammography Employee	######################################	BC BuyUp \$495.52 \$1,040.59 \$941.49 \$1,658.30 5.1% hange PPO Netw BC BuyUp \$495.52	PCB \$679.25 \$1,426.43 \$1,290.58 \$2,273.17 5.1% Pork from PCB to BlueSell BlueSelect Plus \$603.71	,
enewal Rates - Option 2 (Increase Memployee Employee & Spouse Employee & Child(ren) Family ate Increase Members - Option 3 (Increase Members) Employee Employee & Spouse	### Alaximum OOP Limits); a ### BC Base	BC BuyUp \$495.52 \$1,040.59 \$941.49 \$1,658.30 5.1% hange PPO Netw BC BuyUp \$495.52 \$1,040.59	PCB \$679.25 \$1,426.43 \$1,290.58 \$2,273.17 5.1% Pork from PCB to BlueSel BlueSelect Plus \$603.71 \$1,267.79	,
enewal Rates - Option 2 (Increase In Employee Employee & Spouse Employee & Child(ren) Family ate Increase enewal Rates - Option 3 (Increase In add 3-D Digital Mammography Employee	######################################	BC BuyUp \$495.52 \$1,040.59 \$941.49 \$1,658.30 5.1% hange PPO Netw BC BuyUp \$495.52	PCB \$679.25 \$1,426.43 \$1,290.58 \$2,273.17 5.1% Pork from PCB to BlueSell BlueSelect Plus \$603.71	ect Plus);
Employee & Spouse Employee & Child(ren) Family ate Increase enewal Rates - Option 3 (Increase & add 3-D Digital Memmography Employee & Spouse Employee & Spouse Employee & Child(ren)	BC Base \$429.90 \$902.79 \$816.81 \$1,438.69 5.1% BC Base \$429.90 \$902.79 \$816.81	BC BuyUp \$495.52 \$1,040.59 \$941.49 \$1,658.30 5.1% hange PPO Netw BC BuyUp \$495.52 \$1,040.59 \$941.49	PCB \$679.25 \$1,426.43 \$1,290.58 \$2,273.17 5.1% Pork from PCB to BlueSel BlueSelect Plus \$603.71 \$1,267.79 \$1,147.05	\$13,655,83 ect Plus); \$13,604,22

	BC Base	BC BuyUp	PCB	
Employee	\$657.24	\$757.56	\$1,038.46	
· ·	\$1,380.21	\$1,590.89	\$2,180.76	
	\$1,248.76	\$1,439.37	\$1,973.07	
Family	\$2,199.51	\$2,535.25	\$3,475,29	
inal Claim Liability Factors - Rei	newal Option 1 (Change PPO	Network from P	CB 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	
	\$1,248.76	\$1,439.37	\$1,757.78	
Family	\$2,199.51	\$2,535.25	\$3,096.08	
,	. ,		ts); add 3-D Digital Mammogra	phy
inal Claim Liability Factors - Re r Employee	BC Base \$644.85 \$1,354.18 \$1,225.21	BC BuyUp \$743.28 \$1,560.89 \$1,412.23	BlueSelect Plus \$1,018.88 \$2,139.64 \$1,935.87	phy
inal Claim Liability Factors - Res Employee Family	BC Base \$644.85 \$1,354.18 \$1,225.21 \$2,158.04 newal Option 3 (Increase Max Digital Mammography	BC BuyUp \$743.28 \$1,560.89 \$1,412.23 \$2,487.45	BlueSelect Plus \$1,018.88 \$2,139.64 \$1,935.87 \$3,409.76	
Employee Family inal Claim Liability Factors - Ren Family inal Claim Liability Factors - Ren BlueSelect Plus); add 3-D D	BC Base \$644.85 \$1,354.18 \$1,225.21 \$2,158.04 newal Option 3 (Increase Max bigital Mammography BC Base	BC BuyUp \$743.28 \$1,560.89 \$1,412.23 \$2,487.45 klmum OOP Limit	BlueSelect Plus \$1,018.88 \$2,139.64 \$1,935.87 \$3,409.76 s; Change PPO Network from	
inal Claim Liability Factors - Res Employee Family inal Claim Liability Factors - Re	BC Base \$644.85 \$1,354.18 \$1,225.21 \$2,158.04 newal Option 3 (Increase Max Digital Mammography BC Base \$644.85	BC BuyUp \$743.28 \$1,560.89 \$1,412.23 \$2,487.45 klimum OOP Limit BC BuyUp \$743.28	BlueSelect Plus \$1,018.88 \$2,139.64 \$1,935.87 \$3,409.76 ss; Change PPO Network from BlueSelect Plus \$905.56	
Employee Family inal Claim Liability Factors - Ren Family inal Claim Liability Factors - Ren BlueSelect Plus); add 3-D D	BC Base \$644.85 \$1,354.18 \$1,225.21 \$2,158.04 newal Option 3 (Increase Max Digital Mammography BC Base \$644.85 \$1,354.18	BC BuyUp \$743.28 \$1,560.89 \$1,412.23 \$2,487.45 climum OOP Limit BC BuyUp \$743.28 \$1,560.89	BlueSelect Plus \$1,018.88 \$2,139.64 \$1,935.87 \$3,409.76 is; Change PPO Network from BlueSelect Plus \$905.56 \$1,901.68	
Employee Family inal Claim Liability Factors - Ren Family inal Claim Liability Factors - Ren BlueSelect Plus); add 3-D D	BC Base \$644.85 \$1,354.18 \$1,225.21 \$2,158.04 newal Option 3 (Increase Max Digital Mammography BC Base \$644.85	BC BuyUp \$743.28 \$1,560.89 \$1,412.23 \$2,487.45 klimum OOP Limit BC BuyUp \$743.28	BlueSelect Plus \$1,018.88 \$2,139.64 \$1,935.87 \$3,409.76 ss; Change PPO Network from BlueSelect Plus \$905.56	

Rate Impact to Terminal and

Maximum Claim Liability Factors to -2.02% -2.02%

Maintain Current Out of Pocket Maximums

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)".

Res. 18644

Proposed Funding Rates

Res. 18644

Current Benefits; Add 3-D Digital Mammography

January 1, 2015 Renewal

	BC Low	BC High	PCB	TOTAL
Employee Employee & Spouse Employee & Child(ren) Family	\$501.19 \$1,052.51 \$952.27 \$1,677.35	\$568.63 \$1,194.13 \$1,080.40 \$1,903.04	\$757.45 \$1,590.65 \$1,439.16 \$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 Family	\$470.18 \$1,307.10	\$533.10 \$1,482.00	\$709.24 \$1,971.68	
Annual Premium	\$4,619,237	\$9,661,249	\$472,011	\$14,752,497

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 Employee & Spouse	\$501.19 \$1,052.52	\$568.63 \$1,194.14	\$676.15 \$1,419.92	
Employee & Child(ren) Family	\$952.28 \$1,677.37	\$1,080.41 \$1,903.06	\$1,284.69 \$2,262.86	
Annual Premium	\$4,921,802	\$10,293,940	\$461,947 0.30%	\$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 Family	\$470.18 \$1,307.10	\$533.10 \$1,482.00	\$709.24 \$1,971.68	
Annual Premium	\$4,619,237	\$9,661,249	\$472,011	\$14,752,497

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

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

s City

Res. 18644

8.9 Cost Compare Sheet Jackson County

MATCHES CURRENT BENEFITS & INCLUDES 3-D DIGITAL MAMMOGRAPHY

			13	10		306	644	MOHISH	rollment
						7	زر	PPO	
			\$35.16	\$12.65		\$35.16	\$12.65	HMO LOW	Specif
			\$35.16	T		S35.16	\$12.65	нмо нідһ	Specific Stop Loss Premlum
			\$35.16	T		S35.16	1	PPO	Premium
			66	\$12.65 Incl in spec stop loss premium		6	\$12.65 Incl in spec stop loss premium	HIMO Lo	Aggreg
				c stop loss			ec stop loss	HMO LOW HMO High	ate Stop Lo
				premium			premium	PPO	Aggregate Stop Loss Premium
			\$73.29	526.37		\$73.29	\$26.37	HMO Low	
			\$73.29	526.37		573.29	\$26,37	HMO High	Administrative Fee
			\$73.29	\$26.37		\$73.29	\$26.37	PPO	Fea
			\$44.59	\$16.04		\$44.59	\$16.04	HMO LOW	Misc. F
			9 \$44.59	4 \$16.04		9 \$44.59	4 \$16.04	нмо нів	Misc. Fees - Describa Below
			\$44.59	\$16.04		\$44,59	\$16.04	h PPO	sa Below
			\$1,107.35	\$398.33		\$1,107,35	\$398.33	MOTOWH	Ex
			-	33 \$459.13		-	33 \$459.13	нио нід	Expectad Facto
			\$1,276.38 \$1,749.65	.13 \$629.37		\$1,276.38 \$1,749.65 \$1,260.39 \$1,429.42 \$1,902.69	.13 \$629.37	lgh ppg	d Factors - Med/Rx
ANNUA	MONTH	Γ	.65 \$1,260.39		Γ	.65 \$1,26	.37 \$453.39	HMO LOW	A418
ANNUAL TOTAL EXPECTED	MONTHLY TOTAL EXPECTED	TOTAL	0.39 \$1,4	\$453.39 \$5	TOTAL	0.39 \$1,4			Expected Monthly flates
PECTED	KPECTED	TOTAL PRE-65:	\$1,429.42 \$1	\$514.19	TOTAL ACTIVE:	29.42 \$1	5514.19	нмо нідь	onthly flat
			\$1,902,69	\$684.43		,902.69	\$684,43	PPO	
NAME OF TAXABLE PARTY.	Second II	315,346	24,319	344.404	53, 170 Tea	and the same	\$14.00 p. 100		A Streeted
			\$1,218.09	\$438.16		\$1,218.09	\$438.16	HMO LOW	Aggreg
			\$1,404.02	\$505.04		\$1,218.09 \$1,404.02 \$1,924.61	\$505.04	нмо ніјі	Aggregate Factors - Med/Rx
			\$1,924.61	\$692.31		\$1,924.61	\$692.31	PPO	- Med/Rx
ANNUAL	MONTHU	Γ	1 \$1,371.1	1 5493.2		1 \$1,371.1	1 \$493.22	HMD Low	Maxi

misc, fees include ACA excise tax and access fee

8.9 Cost Compare Sheet Jackson County MATCHES CURRENT BENEFITS & INCLUDES 3-D DIGITAL MAMMOGRAPHY

		•	_	_	10			175	15	80	544	NO High	rollment
								s		2	35	PPO	
		\$42.35	\$24.03	\$26.56	\$12.65			\$42.35	\$24.03	\$26.56	\$12.65	HMO LOW	Specific
		\$42.35	\$24.03	\$26.56	\$12.65			\$42.35	\$24.03	\$26.56	\$12.65	нмо нідһ	Specific Stop Loss Premium
		\$42.35	\$24.03	\$26.56	\$12.65			\$42.35	\$24.03	\$26.56	\$12.65	PPO	remlum
			-	-	\$12.65 incl in spec stop loss premium						incl in spe	HMO Low	Aggreg
					stop loss p						incl in spec stop loss premium	нию нік	Aggregate Stop Loss Premium
					remium						remium	n ppo	s Premium
		\$88.27	\$50.11	\$55.38	\$26.37			\$88.27	\$50.11	\$55.38	\$26.37	HMO Low	Ad
		\$88.27	\$50.11	\$55.38	\$26.37			\$88 27	\$50.11	\$55.38	\$26.37	HIMO High	Administrative Fee
		\$88,27	\$50.11	\$55:38	\$26.37			\$88.27	\$50.11	\$55.38	\$26,37	PPO	Fee
		\$53,69	\$30.48	\$33.68	\$16.04			\$53.69	\$30.48	\$33.68	\$16.04	HMO LOW	Misc. f
		9 553,69	18 530,48	83.68	\$16.04	68		39 \$53.69	18 \$30.48	\$33.68	\$16,04	имо нідһ	Misc, Fees - Describe Below
		9 \$53.69	8 \$30.48	8 533.68	4 \$16.04			9 \$53.69	8 \$30.48	8 \$33.68	4 \$16.04	th PPO	be Below
		F-0	Г					9 \$1,333.04				MO LOWIN	
		1,333,04 \$1,5	\$756.83 \$8	\$836,49 \$9	\$398.33 \$4			-	\$756.83 \$8	\$836.49 \$9	\$398.33 \$4		Expected Fac
П		\$1,536.52 \$2,	\$872.35 \$1.	\$964.17 \$1,	\$459.13 \$1			36.52 \$2.	\$872.35 \$1.	\$964.17 \$1.	\$459,13 50	нмо ніжь	Factors - Med/Rx
MOI	Г	\$2,106.24 \$1	\$1,195.80	\$1,321.67	\$629.37			106.24 \$1	\$1,195.80	\$1,321.67	5629.37	PPO H	/Rx
MONTHLY TOTAL EXPECTED	10	\$1,517.35	\$861,45	\$952.11	\$453.39		70	\$1,536.52 \$2,106.24 \$1,517.35 \$1,720.83 \$2,290.55	\$861.45	\$952.11	\$453.39	HMO LOW I	Expecte
EXPECTED L EXPECTED	TOTAL PRE-65:	\$1,720.83	\$976.97	\$1,079.79	\$514.19		TOTAL ACTIVE:	1 720 83	\$976.97	\$1,079.79	\$514.19	нио нідь	Expected Monthly Rates
		\$2,290.55	51,300.42	\$1,437.29	\$684,43			\$2,290.55	\$1,300.42	\$1,437.29	\$684,43	990	lates
Market 1	210,000	A15 14	lass!	Strong .	200700		A 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Back Social	MALE	DAY LETT	BERTON		Hole Parents Hole Parents
		\$1,466.34	\$832.51	5920.14	\$438.16			\$1,466.34	\$832.51	\$920.14	\$438.16	HMO Low	Aggrego
		\$1,690.17	\$959.58	\$1,060.59	\$505,04			\$1,690.17	\$959.58	\$1,060.59	\$505.04	ны омн	Aggregate Factors - Med/Rx
		\$1,690.17 \$2,316.86	\$1,315,38	\$1,459.84	\$692.31			\$1,466.34 \$1,690.17 \$2,316.86	\$1,315,38	\$1,453,84	\$692.31	PPO	Med/Rx
MONTHLY		\$1,650.65	\$937.1	\$1,035.76	\$498.22			\$1,650.65	\$937.13	\$1,035.76	\$499.22	MMO LOW	Maxb

misc. fees Include ACA exclse tax and access fee

8.9 Cost Compare Sheet

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

	\$35.16 \$35.16 \$35.16 \$44.59 \$44.59 \$44.59 \$1,100	\$12.65 \$12.65 \$12.65 incl in spec stop loss premium \$26.37 \$26.37 \$26.37 \$16.04 \$16.04 \$36.04	\$12.65 \$12.65 \$12.65 Incl in spec stop loss premium \$26.37 \$26.37 \$26.37 \$26.37 \$16.04<	HMO LOW HMO High PPO HMO	188
		emium	emium	PPO	
	\$79,29	\$26,37	\$26.37 \$73.29	MO LOW	
	\$73.29	\$26.97	\$26,37 \$73,29	ную нідһ	
	\$73,29	526.37	\$26.37 \$73.29	PPO	
	\$44.59	\$16.04	\$16.04	HMO Low	
	\$44.59	\$16.04	\$16.04 \$44.59	нмо нідһ	
	\$44.59	\$16.04	\$16.04	PPO	
	\$1,107.35	\$398.33	\$398.33	HMO Low	3
	\$1,276.38	\$459.13	-	нмо нід	38
	\$1,553.66	\$558.87	\$558.87	PPO	10
ANNUAL TO		\$453.39	\$453.39 \$1,260.39	HMO Low	
MONTHLY TOTAL EXPECTED ANNUAL TOTAL EXPECTED	\$1,260.39 \$1,429.42	\$514.19	\$514.19	ны оми	
TEO OS:	2 \$1,706.70	9 \$613.93	\$459.13 \$558.87 \$453.39 \$514.19 \$613.93 \$1,276.38 \$1,553.66 \$1,260.39 \$1,429.42 \$1,706.70	h PPO	
NAME OF THE PERSON NAME OF THE P	-	Mar Title	British B		and the same

misc. fees include ACA excise tax and access fee

Aggrego	Aggregate Factors - Med/Rx	Med/Rx	Maxi
HMIO Low	нмо нівь	PPO	HMO LOW
\$438.16	\$505.04	\$614.76	
\$1,218,09	2	20000	549
	\$1,404.02	21,709.03	\$49 \$1,97
\$438.16	\$1,404.02	31,709.05	\$493.2 \$1,971.1
	\$505.04	\$614.76	\$493.22 \$1,971.19 \$493.22

	9 \$1.404.02 \$1,709.03 \$1.93
	\$1,971.13

ANNUAL	MONTHL	

s City

Res. 18644

8.9 Cost Compare Sheet Jackson County

Jackson County OPTION 1 · CHANGE PPO NETWORK FROM PCB TO BLUESELECT PLUS; ADD 3-D DIGITAL MAMMOGRAPHY

			-	-	101		175	34	80	7	MO HIJIN PPO	rollment
		\$42.35	\$24.03	\$26.56	1 512.65		5 \$42	\$24.03	2 \$26	35 \$12.65	HMO Low	S _p
			T	Г	Г		\$42.35 \$4	Г	\$26.56 \$2		LOW HATCHIER	Specific Stop Loss Premium
		\$42.35	\$24.03	\$26.56	\$12.65		\$42.35	\$24.03	\$26.56	\$12.65	Т	Loss Premi
		\$42.35	\$24.03	\$26.56	\$12.65 incl in spec stop loss premium		\$42.35	\$24.03	\$26.56	\$12.65 Incl in spec stop loss premium	PPO H	
					in spec sto					In spec sto	HMOLOW	Agregate S
					op loss prei					op loss prei	нмо нідь	Aggregate Stop Loss Premium
				-	mium			_		nlum	PPO	remium
		\$88.27	\$50.11	\$55.38	\$26.37		\$88.27	\$50.11	\$55.38	\$26.37	HMO LOW	Adn
		\$88.27	\$50.11	\$55,38	\$26.37		\$88.27	\$50.11	\$55,38	\$26.37	нды омн	Administrative Foe
		\$88.27	\$50.11	\$55.38	\$26.37		588.27	\$59.11	\$55.38	\$26.37	PPO	Face
		\$53.69	\$30.48	\$33.68	\$16.04		\$53.69	\$30.48	\$33.68	\$16.04	MMO Low	Misc. Fe
		\$53.69	\$30.48	\$33,68	\$16.04		\$53.69	\$30.48	\$33,68	\$16.04	нмо нівь	Mlsc. Feas - Describe Bolow
		\$53.69	\$30,48	\$33.68	\$16.04		\$53.69	\$30.48	\$33.68	\$16.04	h ppo	se Below
	*	\$1,333.04	\$756.83	\$836,49	\$398.33		\$1,333.04	\$756.83	\$836,49	\$398.93	HMO LOW	Expected
		30	\$872.35	\$964.17	\$459.13		-		\vdash	\$459.13	нмо ніш	
		1,536.52 \$1,876.41	5 \$1,065.32	7 \$1,177.46	3 \$560.69		\$1.536.52 \$1.876.41 \$1.517.35 \$1,720.83 \$2.060.72	\$872.35 \$1,065.32	\$964.17 \$1,177.46	.3 \$560.69	ah PPO	Factors - Med/Rx
ANNUA	l٢	41 \$1,517.35	32 \$861.45			Γ	41 \$1.51	32 \$861.45		69 \$453.39	HMO LOW	
ANNUAL TOTAL EXPECTED	TOTAL			\$952.11 \$1,0	\$453.39 \$5	TOTAL	7.35 \$1,7		\$952.11 \$1,079.79		1	Expected Monthly Rates
PECTED	TOTAL PRE-65:	\$1,720.83 \$3	\$976.97 \$1	\$1,079.79 \$1	\$514.19	TOTAL ACTIVE:	720.83 S.	\$976.97 \$1	-	\$514.19	ндін омн	ionthly Rat
		\$2,060.72	\$1,169.94	\$1,293.08	\$615.75		2,060.72	\$1,169.94	\$1,293.08	\$615.75	Odd	is is
MICHAEL STREET	277,782	21,014	100	22,000	MAT SALE	社員	200.00	100,000	Married	BH574H6		Action of the last
		\$1,466.34	\$892.51	\$920.14	\$438.16		\$1,466.34	\$832.51	\$920.14	\$438.16	HMO Low	Aggrega
		\$1,690,17	\$959.58	\$1,060.59	\$505,04		\$1,690	\$959.58	\$1,060.59	\$505,04	нмо ніф	Aggregate Factors - Mod/Rx
		\$1,690,17 \$2,064.05	8 \$1,171.85	9 \$1,295.21	4 \$616.76		\$1,466.34 \$1,690.17 \$2,064.05	\$959.58 \$1,171.85	\$920.14 \$1.060.59 \$1,295.21	4 5616.76	h ppo	- Mod/Rx
ANNUAL	Г	31,650.65	15 5937.13	1 \$1,035.76	6 \$493,22	Γ	\$1,650.65	\$937.13	1 \$1,035.76	6 5493.22	HIMIO Low	Maxi

misc, fees include ACA excise tax and access fee

8.9 Cost Compare Sheet Jackson County OPTION 2 - INCREASE OOP MAXIMUM LIMITS; ADD 3-D DIGITAL MAMMOGRAPHY

			13	10		300	644	MO High PF	rollment
				_		1	35	РРО Н	
			\$35.16	\$12.65		535.16	\$12.65	HMO LOW	Specifics
			\$35.16	\$12.65		535.16	\$12.65	нмо ніф	Spocific Stop Loss Fremium
			\$35,16	\$12.65		S35.16	\$12.65	PPO	mima
				512.65 Incl in spec stop loss premium			\$12.65 incl in spec stop loss premium	HMO LOW	Aggrega
				stop loss p			stop loss p	HMO LOW HMO HIGH	te Stop Los
				muiman			remium	h PPO	Aggregate Stop Loss Premium
			\$73.29	\$26.37		\$73.29	\$26.37	HMOLOW	Ad
			\$73.29	\$26.37		\$73.29	П	HMO Low HMO High	Administrative Fee
			\$73.29	\$26.37		\$73.29	\$26.37	PPO	e e
			\$44.59	\$16.04		\$44.59	516.04	HMO Low	Misc. Fe
			9 544.59	\$16.04		\$44.59	\$16.04	нмо нів	Misc. Fees - Describe Below
			S44.59	\$16.04		\$44.59	\$16.04	PPO	e Below
			\$1,086.47	\$390.82		\$1,086.47	\$390.82	HMOLOW	Expe
			-	2 \$450,47		_	2 \$450.47	м нмоніц і	Expected Factors - Med/Rx
			\$1,252.32 \$1,716.65	17 \$617.50		\$1,252,32 \$1,716.65	17 \$617.50	th PPO	s - Med/Rx
ANNUAL	MONTHL		65 \$1,239.51	\$0 \$445.88	Γ	65 \$1,239.51	50 \$445.88	HMO Low	m
ANNUAL TOTAL EXPECTED	MONTHLY TOTAL EXPECTED	TOTAL PRE-65:	51 \$1,405.36		TOTAL ACTIVE:	.51 \$1,405.36		W HMO High	Expected Monthly Rates
ECLED	ECTED	RE-65:	S	\$505.53	CTIVE:		\$505,53 \$6	П	othly Rate
			\$1,869.69	\$672.56		\$1,869,69	\$672.56	PPO	61
	100,000,18	STATE OF		36115	13 590,000	Serviced.	See Trees		the state of
			\$1,195.12	\$429.90		\$1 195.1	\$429.90	HMO Low	Aggre
			S	0 \$495.52		2 \$1,377.5	0 \$495.52	₩ нМО н⊌һ	Aggregate Factors - Med/Rx
			V.	2 \$679.25		\$1,195.12 \$1,377.55 \$1,888.32 \$1,348.16	2 \$679.25	th PPO	- Med/Rx
ANNUA	MONTHE	Г	s,	5 \$484.96	Γ	2 \$1,34	5484.96	MOT DIVIN	Nex

misc. fees include ACA excise tax and access fee

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

MONTHLY TOTAL EXPECTED													
TOTAL PRE-65:													
S	\$1,507.55 \$2,066.52	\$1,307.90 \$	\$53.69	\$53.69	\$53.69	\$86.27	\$88.27	\$88.27		\$42,35	\$42.35	\$42.35	
		\$742.55			\$30,48	\$50.11	\$50.11	\$50.11		\$24,03	\$24.03	\$24.03	
	cal	\$820.72	\$33.68	\$33.68	\$33.68	\$55.38	\$55.38	\$55.38		\$26.56	\$26.56	\$26.56	
50 5445.88	\$450.47 \$617.50	\$390.82	\$16.04	\$16.04	\$16,04	\$26.37	\$26,37	\$26.37	\$12.65 incl in spec stop loss premium	\$12.65 inc	\$12.65	\$12.65	_
Z 51.492.21 51.691.86 TOTAL ACTIVE:	\$1,507.55 \$2,056.52 \$1,492.21	- 1	333.09		953.05	7.005	700.47	June					
56.52 \$1.492.21	1.507.55 \$2.0	-	\$53.69		\$53.69	\$88.27	\$88.27	\$88.27		\$42.35	\$42.35	S42.35	S
\neg	\$855.90 \$1.173.25	\$742.55	\$30.48	\$30.48	\$30.48	\$50.11	\$50.11	\$50.11		\$24.03	\$24.03	\$24.03	e,
\neg	\$945.99 \$1,296,75	\$820.72	\$33.68	\$33.68	\$33.68	\$55.38	\$55.38	\$55.38		\$26.56	\$26.56	\$26.56	13
\$617.50 \$445.88	\$450.47 \$	\$390.82	\$16.04	\$16.04	\$16.04	\$26.37	\$26.37	\$26.37	incl in spec stop loss premium	\$12,65 Inc	\$12.65	\$12.65	35
PPO HIMO Low	нмо нідь	HMO Low 1	PPO	нмо нівь	HMO LOW	PPO	нмо нідһ	HIMO Low	HMO Low HMO High PPO	PPO H	HMO High	HMO Low	PPO
3/Rx Expected Monthly Rates	Expected Factors - Med/Rx	Expected	e Below	Misc. Fees - Dascriba Below	Misc. Fe	Fige	Administrative Fee	Ad	Aggregate Stop Loss Premium	-	Specific Stop Loss Premium	Specific S	

misc. fees include ACA excise tax and access fee

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	WO High	UBIH DIA	644	300		10	3	1			
	800	PPO	35	7		_					
Specifi		HMO LOW	\$12.65	535.16		\$12.65	C25 16	0T.cc¢			
Specific Stop Loss Premium	_	HMO High	\$12.65	S35.16		\$12.65	1	01.000			
remium	3	PPO	\$12.65	535.16		\$12.65	200	92.00			
Agrego		HMOLOW	Incl in spe			incl in spe					
Aggregate Stop Loss Premium		HMO LOW HMO HIGH	\$12.65 Incl in spec stop loss premium			\$12.65 lind in spec stop loss premium	2000				
s Premlum	7	h PPO	remlum			remium					
Adi		MOLOW	\$26.37	\$73.29		\$36.37		\$73.29			
Administrative Fee		HMO Low HMO High	\$26.37	\$73.29		\$26.37		\$73.29			
ž		PPO	\$26.37	\$73.29		526.37	4.00	\$/3.29			
Misc. Fe		MOLOW	\$16.04	\$44.59		CIANA	240.00	\$44.59			
Misc. Fees - Describe Below		HMO High	\$16.04	\$44.59		21600	40.00	\$44.59			
Below		PPO	\$16.04	\$44,59		40.313	240,040	\$44,59			
Expec		HMO LOW	\$390.82	\$1,086,47		Coop of	20,000	\$1,086,47			
Expected Factors - Med/Rx		HIMO High	\$450.47	-	Control of the control	1	74,00,47	\$1,252.32			
-Med/Rx		PPO	\$547.00	\$1.520.67			3597,00	\$1,520.67		1	
Eup		HMO LOW	\$445 AB	\$1,239.51			3445.88	\$1,239.51		LAIMINOW	ANNIJAI T
Expacted Monthly Rates		ныо нішь		\$1.405.3	TOTAL ACTIVE:	1	3505.53	\$1,239.51 \$1,405.36	TOTAL PRE-65:	MONTHLY TOTAL EXPECTED	ANNUAL TOTAL EXPECTED
n'y Rates		PPO	1	ヿ	NE:	1	3 5602.06	6 \$1,673.7	65;	TED	5
M. Daymonto d			Á		11.00		g	T.	and the second	1	The same of the sa
A86*		MOTOM	2000	\$1 105	-		\$429.90	\$1,195			
Aggregate Factors - Med/Rx		HMO High	+	21 125 12 27 77 55 61 62 77			90 5495 52	50			
rs - Med/Rx		ph PPO	+	SE 61 671 74			52 \$601.70	\$5 \$1,672			
		=	-	2	-	1	0	14 51	1	1	

misc. fees include ACA excise tax and access fee

MANAGE		Africano.
\$429.90	HMO LOW	Aggrega
\$495.52	нмо ніgh	Aggregate Factors - Med/Rx
\$601.70	PPO	Med/Rx
\$484.96	HMO Low	Maxi

Aggrega	Aggregate Factors - Med/Rx	Med/Rx	_
MOLOW	нмо нідһ	PPO	HMIO
\$429,90	\$495.52	\$601.70	548
195.12	\$1,377.55	\$1,672.74	51,34
			I
\$429.90	\$495.52	\$601.70	\$48

\$484.96 \$1,348.16

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

rollment		Specific	Specific Stop Loss Premium	emium	Aggregat	e Stop Lo	Aggregate Stop Loss Premium	Ad	Administrative Fee	ř	Misc. Fee	Misc. Fees - Describe Below	Below	Expecte	Expected Factors - Med/Rx	Med/Rx	Ехре	Expected Monthly Rates	y Rates	A Deposited	Aggregat	Aggregate Fectors - Med/Rx	/led/Rx
MO High	PPO	HNIO Low	HMO High	PPO	HMOLOW	нмо нів	FPO FPO	MO LOW	HMO HILL	PPO	HMO LOW	нмони	200	HMO I OW	Hain Own	800	HADIOM	LINO MILA	B				
244	30	643.65	200		in cons	or loss	- Combine										1000	The Control	170		DIANO FOR	DIMO DIMO	770
044	E.	\$12.65	512.65	\$12.65	inclin spec stop loss premium	stop loss	premium	\$26.37	\$26.37	\$26.37	\$16.04	\$16.04	\$16.04	\$390.82	\$450.47	\$548.33	\$445.88	\$505.53	\$603.89	MARKET	\$429.90	\$495.52	\$603.71
80	2	\$26,56	\$26.56	\$26.56				\$55.38	\$55.38	\$55.38	\$33.68	\$33.68	\$33.68	\$820.72	\$945.99	\$1,152,54	\$936.34	\$1,061.61	\$1 268 16	- Contraction	\$902.79	\$1 040 59	\$1 267 79
51		\$24,03	\$24.03	\$24.03				\$50.11	\$50.11	\$50.11	\$30,48	\$30.48	\$30,48	\$742.55	\$855.90	\$1.042.77	\$847.17	\$960.52		THE PER	\$816.91	\$041.40	¢1 147 05
175	S	\$42.35	\$42.35	\$42.35				\$88.27	\$88.27	\$85.27	\$53.69	\$53.69	\$53.69	\$1,307.90	\$1,507.55	\$1,836,72	\$1,492.21	\$1.691.86			DE 000 C\$ 0E 839 I\$ 69 888 IS	C1 658 30	\$2020
																		TOTAL ACTIVE:	Æ.	- TO 100			
																Ţ.							
10	-	\$12,65	\$12.65	\$12.65	Incl in spec stop loss premium	stop loss	premium	\$26.37	\$26.37	\$26.37	\$16.04	\$16.04	\$16.04	\$390.82	\$450.47	\$548.83	\$445.88	\$505.53	\$603.89	555.00	\$429.90	\$495.52	\$603.71
-		\$26.56	526,56	\$26.56				\$55.38	\$55.38	\$55.38	\$33.68	\$33.68	\$33,68	\$820.72	\$945,99	\$1,152,54	\$936.34	\$1,061.61	4	SALVE S		\$1,040,59	\$1,767,79
-	L	524,03	\$24.03	\$24,03				\$50.11	\$50.11	\$50.11	\$30.48	\$30.48	\$30.48	\$742.55	\$855.90	\$1,042.77	\$847.17	\$960.52	-	E	-	69 1 1 1 5 5	\$1 147.05
-	L	\$42.35	\$42.35	\$42.35				\$88.27	\$88.27	\$88.27	\$53.69	\$53.69	\$53.69	\$1,307.90	\$1,507.55	\$1,507.55 \$1,836.72	\$1,492.23	\$1,691.86		The same		\$1,658.30 \$2,020.39	\$2,020
																		TOTAL PRE-65:	5:	25. F. S.			
																						1	
																	MONTHLY TOTAL EXPECTED	DIAL EXPECT	C3	120,000,000		_	
																				Name and Address of the Owner, where		T	

misc. fees include ACA excise tax and access fee