

FY 2016-2017 - No Change in Employer or Employee Contributions

Aetna	Employee	Employee / Spouse	Employee / Child(ren)	Family	**Dual - 2nd emp.	Total per plan
Choice	57	10	3	0		70
HSA	190	25	57	31	11	303
Total for each category	247	35	60	31	11	373

<u>PLAN</u>	<u>Health Premium</u>	<u>Dental</u>	<u>Total</u>	<u>Employee Premium</u>	<u>School Board Premium w/dental</u>	<u>School Board Annual Premium</u>	<u>School Board HSA Contribution</u>	<u>School Board Annual Cost Per Covered Emp.</u>
Choice								
Single	\$801.00	\$28.00	\$829.00	\$221.00	\$608.00	\$7,296.00		\$7,296.00
Employee + Children	\$1,568.00	\$52.00	\$1,620.00	\$626.00	\$994.00	\$11,928.00		\$11,928.00
Employee + Spouse	\$1,614.00	\$46.00	\$1,660.00	\$798.00	\$862.00	\$10,344.00		\$10,344.00
Family	\$2,249.00	\$84.00	\$2,333.00	\$1,290.00	\$1,043.00	\$12,516.00		\$12,516.00
HSA								
Single	\$583.00	\$28.00	\$611.00	\$26.00	\$585.00	\$7,020.00	\$800.00	\$7,820.00
Employee + Children	\$1,136.00	\$52.00	\$1,188.00	\$223.00	\$965.00	\$11,580.00	\$1,600.00	\$13,180.00
Employee + Spouse	\$1,171.00	\$46.00	\$1,217.00	\$398.00	\$819.00	\$9,828.00	\$1,600.00	\$11,428.00
Family	\$1,632.00	\$84.00	\$1,716.00	\$730.00	\$986.00	\$11,832.00	\$1,600.00	\$13,432.00
**Family - Dual 2nd Employee			\$0.00	\$0.00	\$507.00	\$6,084.00		\$6,084.00

<u>School Board Annual Cost</u>	<u>Med./Dental</u>	<u>HSAccount</u>	<u>Total</u>
Choice		** (includes fees)	
Single	\$415,872.00		\$415,872.00
Employee + Children	\$35,784.00		\$35,784.00
Employee + Spouse	\$103,440.00		\$103,440.00
Family	\$0.00		\$0.00
HSA			
Single	\$1,333,800.00	\$160,550.00	\$1,494,350.00
Employee + Children	\$660,060.00	\$93,765.00	\$753,825.00
Employee + Spouse	\$245,700.00	\$41,125.00	\$286,825.00
Family	\$366,792.00	\$50,995.00	\$417,787.00
**Family - Dual 2nd Employee	\$66,924.00	\$0.00	\$66,924.00
Total Cost	\$3,228,372.00	\$346,435.00	\$3,574,807.00

<u>PLAN</u>	School	County	Current	Proposed	New
<u>Choice</u>	Employee	Employee	Difference	School	Difference
	Premiums	Premiums	In Premiums	Employee	In Premiums
				Premiums	
Single	\$ 221.00	\$ 101.00	\$ 120.00	\$ 161.00	\$ 60.00
Employee + Children	\$ 626.00	\$ 340.00	\$ 286.00	\$ 483.00	\$ 143.00
Employee + Spouse	\$ 798.00	\$ 344.00	\$ 454.00	\$ 571.00	\$ 227.00
Family	\$ 1,290.00	\$ 563.00	\$ 727.00	\$ 926.00	\$ 363.00
<u>HSA</u>					
Single	\$ 26.00	\$ 34.00	\$ (8.00)	\$ 26.00	\$ (8.00)
Employee + Children	\$ 223.00	\$ 213.00	\$ 10.00	\$ 213.00	\$ -
Employee + Spouse	\$ 398.00	\$ 216.00	\$ 182.00	\$ 307.00	\$ 91.00
Family	\$ 730.00	\$ 368.00	\$ 362.00	\$ 549.00	\$ 181.00

**County medical and dental benefit are unbundled - county employee premiums shown combine medical and dental.

FY 2016-2017 - Increase School Board Contributions halfway toward equaling County employee premiums

Aetna	Employee	Employee / Spouse	Employee / Child(ren)	Family	**Dual - 2nd emp.	Total per plan
Choice	57	10	3	0		70
HSA	190	25	57	31	11	303
Total for each category	247	35	60	31	11	373

****Using current enrollment**

<u>PLAN</u>	<u>Health Premium</u>	<u>Dental</u>	<u>Total</u>	<u>New Employee Premium</u>	<u>School Board Premium w/dental</u>	<u>School Board Annual Premium</u>	<u>School Board HSA Contribution</u>	<u>School Board Annual Cost Per Covered Emp.</u>
Choice								
Single	\$801.00	\$28.00	\$829.00	\$161.00	\$668.00	\$8,016.00		\$8,016.00
Employee + Children	\$1,568.00	\$52.00	\$1,620.00	\$483.00	\$1,137.00	\$13,644.00		\$13,644.00
Employee + Spouse	\$1,614.00	\$46.00	\$1,660.00	\$571.00	\$1,089.00	\$13,068.00		\$13,068.00
Family	\$2,249.00	\$84.00	\$2,333.00	\$926.00	\$1,407.00	\$16,884.00		\$16,884.00
HSA								
Single	\$583.00	\$28.00	\$611.00	\$26.00	\$585.00	\$7,020.00	\$1,030.00	\$8,050.00
Employee + Children	\$1,136.00	\$52.00	\$1,188.00	\$213.00	\$975.00	\$11,700.00	\$2,054.00	\$13,754.00
Employee + Spouse	\$1,171.00	\$46.00	\$1,217.00	\$307.00	\$910.00	\$10,920.00	\$2,054.00	\$12,974.00
Family	\$1,632.00	\$84.00	\$1,716.00	\$549.00	\$1,167.00	\$14,004.00	\$2,054.00	\$16,058.00
**Family - Dual 2nd Employee			\$0.00	\$0.00	\$507.00	\$6,084.00		\$6,084.00

<u>School Board Annual Cost</u>	<u>Med./Dental</u>	<u>HSAccount</u>	<u>Total</u>
Choice		** (includes fees)	
Single	\$456,912.00		\$456,912.00
Employee + Children	\$40,932.00		\$40,932.00
Employee + Spouse	\$130,680.00		\$130,680.00
Family	\$0.00		\$0.00
HSA			
Single	\$1,333,800.00	\$204,250.00	\$1,538,050.00
Employee + Children	\$666,900.00	\$119,643.00	\$786,543.00
Employee + Spouse	\$273,000.00	\$52,475.00	\$325,475.00
Family	\$434,124.00	\$65,069.00	\$499,193.00
**Family - Dual 2nd Employee	\$66,924.00	\$0.00	\$66,924.00
Total Cost	\$3,403,272.00	\$441,437.00	\$3,844,709.00

New annual cost of employer premiums and HSA contributions:	\$3,844,709
Current annual cost of employer premiums and HSA contributions:	\$3,574,807
Total Cost Increase:	\$ 269,902