

### KENAI PENINSULA BOROUGH SCHOOL DISTRICT

### Office of Superintendent

John O'Brien, Superintendent

148 North Binkley Street Soldotna, Alaska 99669-7520
Phone (907) 714-8888

August 28, 2019

Members of the KPBSD Health Care Plan Committee,

With the inability of the District, KPEA, and KPESA bargaining teams to reach a negotiated agreement at this time, which would include new health care plan options for our employees, it is incumbent upon the Health Care Plan Committee to take action immediately. I am highly concerned for our employees who are currently enrolled in the KPBSD Traditional Health Plan. Based on broker recommended rates, employees on the Traditional Health Care Plan will soon face deductions in their monthly paychecks of over \$1,000 (for 9-month employees) for their health care coverage. Without immediate action on the part of the Health Care Plan Committee, these rates could go into effect.

I ask that the Health Care Plan Committee <u>provide guidance to the District's Health Care Plan Administrator (Mr. Dave Jones) at this afternoon's meeting.</u> Should the District offer an immediate "Special Open Enrollment" period? A "Special Open Enrollment," enacted as soon as possible, would provide the option for employees currently in the Traditional Health Care Plan to switch to the High Deductible Health Plan (HDHP). Monthly contributions for the HDHP would be much lower than Traditional Health Care Plan contributions.

The last time the District conducted a "Special Open Enrollment," accusations of a "bait and switch" were made and continue to be made. In the interest of all District employees, I want to protect against such harmful allegations, and invite you to work with the District to provide fair and helpful information to employees in a Special Open Enrollment notice.

Beyond a "Special Open Enrollment" period, another option would be for the rate setting sub-committee to keep the employee contribution rates the same as the FY19 amounts until the next normal annual open enrollment period (mid-November through mid-December with an effective date of Jan. 1). This would serve as a temporary solution with any shortfall in contributions needing to be paid back by the respective parties.

I am hopeful that we can work together today in the interest of our employees on this very important decision. Furthermore, I offer that we commit to working together on the communication of these important health care decisions.

Sincerely,

John O'Brien Superintendent

### **Stacey Cockroft**

From:

Stacey Cockroft

Sent:

Thursday, August 22, 2019 4:03 PM

To:

Anne McCabe; Dave Jones; David Brighton; Elizabeth Hayes; Jimmy Love; Joel Burns;

Kristen Vix; Laura Wertanen; Matt Fischer; Robert Ernst; Stephanie Bohrnsen; Vaughn

Dosko

Subject:

Specific Stop Loss 7/31/19

Good Afternoon,

Below is the Specific Stop loss Report through 7/31/2019.

Subscriber	Total Amt	Amt over Spec	Amt Requested	Amt Reimbursed	Non Reimbursed Expenses	Amt Open
1	\$908,969.24	\$688,969.24	\$688,969.24	\$411,692.82		\$277,276.42
2	\$706,535.03	\$486,535.03	\$486,535.03	\$417,992.55		\$68,542.48
3	\$296,675.23	\$76,675.23	\$76,675.23	\$60,313.08		\$16,362.15
4	\$246,679.88	\$26,679.88	\$26,633.73	\$0.00		\$26,633.73
	\$2,158,859.38	\$1,278,859.38	\$1,278,813.23	\$889,998.45	\$0.00	\$388,814.78

Thank you,

### Stacey Cockroft

Kenai Peninsula Borough School District

Employee Benefits Manager

148 N. Binkley St. Soldotna, AK 99669 Phone: (907) 714-8879 Fax: (907) 262-9645

scockroft@kpbsd.k12.ak.us



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KPBSD - Chiropractic, Massage Therapy & Rolfing

PlanID	SvcYear	Benefit	BilledTotal	PaidTotal	SvcTotals
800301	2017	Massage	\$134,232.72	\$94,845.78	1667
800301	2018	Massage	\$172,128.54	\$127,395.96	1598
800301	2019	Massage	\$60,465.50	\$47,245.30	535
800303	2017	Massage	\$1,378.00	\$168.24	18
800303	2018	Massage	\$23,981.98	\$8,616.34	205
800303	2019	Massage	\$21,147.50	\$9,239.58	205

PlanID	SvcYear	Benefit(s)	BilledTotal	PaidTotal	SvcTotals
800301	2017	Chiropractic	\$683,311.19	\$432,432.07	8352
800301	2018	Chiropractic	\$576,399.43	\$390,594.14	6270
800301	2019	Chiropractic	\$191,124.57	\$134,743.06	2149
800303	2017	Chiropractic	\$18,360.61	\$5,822.80	240
800303	2018	Chiropractic	\$97,977.86	\$25,529.79	1000
800303	2019	Chiropractic	\$94,396.17	\$38,642.18	997

PlanID	SvcYear	Benefit(s)	BilledTotal	PaidTotal	SvcTotals
800301	2017	Rolfing	\$102,723.40	\$67,862.44	619
800301	2018	Rolfing	\$80,393.44	\$61,232.52	415
800301	2019	Rolfing	\$17,724.54	\$13,749.56	96
800303	2017	Rolfing	\$1,570.00	\$370.00	10
800303	2018	Rolfing	\$23,349.44	\$9,475.91	124
800303	2019	Rolfing	\$17,838.42	\$8,809.69	89

800301 = Traditional Plan 800303 = High Deductible Plan

Kenai Peninsula Borough School District	Reserve Account	As of 6-30-17	As of 6-30-18	FY19 Monthly Contribut	tion - Traditional
	Employee Share	701,399.69	471,065.27	Employee Share *	498.00
Health Care Committee Monthly recap	<b>Employer Share</b>	1,353,713.48	1,572,408.17	<b>Employer Share</b>	1,923.49
as of June 30, 2019.				0.	2 421 49

 FY19 Monthly Contribution - HDHP

 Employee Share \*
 308.00

 Employer Share
 1,770.47

 2.078.47

This document is provided to the Health Care Committee as a work paper to recap the contributions to and expenditures from the Health Care Plan each month. It is to be used primarily as an aid in estimating costs of the plan to determine if changes should be made in employee contribution amounts. Every effort is made to provide current and accurate information, but this information is not audited until after the end of the fiscal year.

Employees	Number of Employees	YTD Employees		urrent Month Obligations	YTD Obligations	Contributions Current Month Collected	Contributions YTD Collected
KPEA Employees	302	4,055		150,396.00	2,019,390.00	(24.28)	1,799,398.99
KPEA Employees - HDHP	301	3,184		92,708.00	980,672.00	21,245.67	1,216,505.25
KPEA Repay EE Reserve		-/			200,012.00	-	150,979.44
KPESA Employees	185	2,574		92,130.00	1,281,852.00	8,334.05	1,131,598.06
KPESA Employees - HDHP	195	2,091		60,060.00	644,028.00	3,792.17	777,714.15
KPESA Repay EE Reserve						27.60	96,682.20
Administrators	20	306		9,960.00	152,388.00	1,010.19	128,629.13
Administrators - HDHP	38	387		11,704.00	119,196.00	3,023.99	143,944.22
Admin Repay EE Reserve	AST				-		14,407.20
Board Members	1/	19		498.00	9,462.00	275.00	6,445.48
Board Members - HDHP	3	34		924.00	10,472.00	825.00	10,639.39
Board Repay EE Reserve	EST AST	- AND				-	476.10
Exempt Employees	11	137		5,478.00	68,226.00	5,656.46	65,848.74
Exempt Employees - HDHP	16	168		4,928.00	51,744.00	4,665.38	53,088.21
Exempt Repay EE Reserve	A7 9					-	6,265.20
Affordable Care Act **	- 1	Daniel III		0.00	0.00		
ACA Empl Repay EE Reserve							
Total Employees on Payroll	1,072	12,955		428,786.00	5,337,430.00	48,831.23	5,602,621.76
COBRA Payers (FY19 = \$2215.88)	1	18		2,215.88	39,885.84	2,534.08	42,431.44
COBRA HD Payers (FY19 = \$1960.28)	1	8		1,960.28	15,682.24	· ·	15,459.58
Total Employees	1,074	12,981	Total	432,962.16 *	5,392,998.08	51,365.31	5,660,512.78

<sup>\*</sup> Current month employee obligations are a calculation of "Number of Employees" eligible for health care coverage during that month times the "Employee Share" (shown in the upper right corner of the sheet).

<sup>\*\*</sup> Affordable Care Act (ACA) coverage is offered to employees once eligibility is determined. Eligibility is based on number of hours worked during the measurement period.

Employer						
Employer share	520	7,109	1,000,214.80	13,674,090.41	58,081.15	12,120,270.40
Enrollment adjustments				AND L	-	1,468,221.78
Sub-Total					58,081.15	13,588,492.18
F. J.				Add	1970/9470	
Employer share - HDHP	554	5,872	980,840.38	10,396,199.84	67,856.43	11,804,474.37
Enrollment adjustments - HDHP					-	(1,468,221.78)
Sub-Total					67,856.43	10,336,252.59
Total			2,414,017.34	29,463,288.33	177,302.89	29,585,257.55
		The State of				
+ Employee Share Split	FY19 Contribution Trad	itional	498.00	Subtotal	15.251.42	3.131.920.40
+ Employee Share Split	FY19 Contribution Trad Enrollment adjustment	200072 7107021	498.00	Subtotal	15,251.42	3,131,920.40 384,722.40
+ Employee Share Split	것 : 1000 이 아이 아이라 있는 것 같아 다 아이트 장	200072 7107021	498.00 2,215.88	Subtotal Subtotal	15,251.42 - 2,534.08	384,722.40
+ Employee Share Split	Enrollment adjustment	200072 7107021			-	and the second second second second
+ Employee Share Split	Enrollment adjustment Cobra	s	2,215.88		2,534.08	384,722.40 42,431.44
+ Employee Share Split	Enrollment adjustment Cobra FY19 Contribution HDH	s P			2,534.08	384,722.40 42,431.44
+ Employee Share Split	Enrollment adjustment Cobra FY19 Contribution HDH Enrollment adjustment	s P	2,215.88 308.00	Subtotal	2,534.08 17,785.50	384,722.40 42,431.44 3,559,074.24
+ Employee Share Split	Enrollment adjustment Cobra FY19 Contribution HDH	s P	2,215.88	Subtotal	2,534.08 17,785.50	384,722.40 42,431.44 3,559,074.24 2,201,891.22
+ Employee Share Split	Enrollment adjustment Cobra FY19 Contribution HDH Enrollment adjustment	s P	2,215.88 308.00	Subtotal	2,534.08 17,785.50	384,722.40 42,431.44 3,559,074.24 2,201,891.22 (384,722.40)
+ Employee Share Split	Enrollment adjustment Cobra FY19 Contribution HDH Enrollment adjustment	s P	2,215.88 308.00	Subtotal	2,534.08 17,785.50 33,552.21	384,722.40 42,431.44 3,559,074.24 2,201,891.22 (384,722.40) 15,459.58

### **Expenditures**

Since the health care plan is self-funded, both employee and employer contributions are collected and bills are paid from the accumulated funds.

	INADII	IONAL	поп	r		
Claims	<b>Current Month</b>	Year-To-Date	Current Month	Year-To-Date		
Health Care Claims paid by TPA (Rehn)	1,933,224.93	17,563,135.40	667,456.74	5,208,509.04		
Prescription Claims paid by Caremark	650,987.71	5,040,843.71	111,761.20	781,287.01		
HRA	<u> </u>		21,860.04	232,318.00		
Total Claims Paid	2,584,212.64	22,603,979.11	801,077.98	6,222,114.05		
Administration						
TPA (Rehn) fees and costs	14,382.32	217,741.40	•	•		
TPA (Rehn) HRA fees and costs	•	· <u>-</u>	31,681.75	177,592.17		
Aetna Administration Fees	11,356.41	142,373.76	12,098.95	120,086.23		
Consultant Fees	2,388.58	28,377.41	2,544.75	30,822.55		
Stop Loss Premiums	146,539.83	1,648,010.27	156,121.28	1,440,248.30		
Affordable Care Act Fee	<u> </u>	70,323.67		45,652.69		
Total Administration	174,667.14	2,106,826.51	202,446.73	1,814,401.94		
Total Claims plus Administration	2,758,879.78	24,710,805.62	1,003,524.71	8,036,515.99		
Adjustments						
Stop Loss reimbursements	(122,035.89)	(3,543,332.78)	•	-		
Prescription Rebates	-	(498,816.46)	•	(167,752.38)		
Health Care Claims refund	•	-	•	•		
Claims reimbursements	(300.00)	(1,100.00)	-	-		
Other adjustments	<u> </u>	(25.00)	<u> </u>	<del></del>		
Total Adjustments	(122,335.89)	(4,043,274.24)	<u> </u>	(167,752.38)		
Total Expenditures	2,636,543.89	20,667,531.38	1,003,524.71	7,868,763.61		

TRADITIONAL

HDHP

### **Obligations/Contributions**

Health care obligations and contributions provide employee and employer amounts of health care contributions using different calculation methods.

Obligations are estimates of funds that employees and the district will be obligated to contribute, based on the plan year (July through June).

Returning employees are covered by the health care plan for the entire plan year, meaning the 12 month period July through June; both employee and employer are obligated to pay for 12 months of coverage. New employees pay for coverage from date of hire through June, the end of the plan year. If an employee works at all during a month, both employee and employer pay for the entire month of coverage.

Actual Contributions made by employees and benefits paid by the employer during the payroll process are shown on the sheet in the columns labeled "Collected." The division of payments is governed by the Collective Bargaining Agreements and Memorandums of Understanding between the district and the employee groups.

Employee-paid contributions are deductions from payroll checks. Employees who work 12 months make contributions each pay period. Many school district employees do not work 12 months, so contributions are collected for those employees during the 9 month period from September through May.

For this reason, contributions are generally larger than obligations for September through May and contributions are generally smaller than obligations for June, July and August.

The "Collected" columns show what is actually available for paying health care costs. The "Obligations" show what is estimated to be available by month, based on number of employees at the current rate of contributions.

### Kenai Peninsula Borough School District Healthcare Expenditures Split as of June 30, 2019

	raditional Plan				HDHP		
YTD Participants	7,109			YTD Participants	5,872		
Net Expenditures	20,667,531.38			Net Expenditures	7,868,763.61		
ER - Employer Cap \$1731.45	12,308,878.05			ER - Employer Cap \$1645.61	9,663,021.92		
EE - Employee Cap \$305.55	2,172,154.95	100		EE - Employee Cap \$182.85	1,073,695.20		
Total Cap Expenditure EE/ER	14,481,033.00			Total Cap Expenditure EE/ER	10,736,717.12		
Expenditures over Cap	6,186,498.38	439		Expenditures over Cap			
50/50 Split of Expenditures over Cap	3,093,249.19			50/50 Split of Expenditures over Cap			
ER Expenditures Up To Cap	12,308,878.05			ER Expenditures Up To Cap	7,081,887.25		
ER Expenditures Above Cap	3,093,249.19			ER Expenditures Above Cap	-		
Total ER Expenditures	15,402,127.24		The same of the sa	Total ER Expenditures	7,081,887.25		
EE Expenditures Up To Cap	2,172,154.95			EE Expenditures Up To Cap	786,876.36		
EE Expenditures Above Cap	3,093,249.19			EE Expenditures Above Cap			
Total EE Expenditures	5,265,404.14			Total EE Expenditures	786,876.36		
Total ER & EE Expenditures	20,667,531.38			Total ER & EE Expenditures	7,868,763.61		
	itional Summary			H	DHP Summary		
Through January 2019	YTD EXP	YTD REV	REV Less EXP	Through	YTD	YTD	REV Less
January 2015	EXP	KEV	EXP	January 2019	EXP	REV	EXP
Employer	15,402,127.24	13,588,492.18	(1,813,635.06)	Employer	7,081,887.25	10,336,252.59	3,254,365.34
Employee	5,265,404.14	3,559,074.24	(1,706,329.90)	Employee	786,876.36	1,832,628.40	1,045,752.04
Totals	20,667,531.38	17,147,566.42	(3,519,964.96)	Totals	7,868,763.61	12,168,880.99	4,300,117.38
					1839	400	
Obligation per Employee FY19 498.00 EE/1923.49 ER Split	2,421.49	Year-to-date 2,421.49		Obligation per Employee FY19 308.00 EE/1770.47 ER Split	2,078.47	Year-to-date 2,078.47	
Monthly Cost per Employee - ER		2166.57		Monthly Cost per Employee - ER		1206.04	
Monthly Cost per Employee - EE + Cobra		740.67		Monthly Cost per Employee - EE + Cobra		134.00	
	_	2907.23			1	1340.05	
	Current Variance	(485.74)			Current Variance	738.42	

Obligations indicate the funds that will be accumulated per employee per month. Expenditures are amounts that have been paid through the plan.

A positive number for "current variance" represents the amount per employee per month that is estimated to be collected above the amount spent year-to-date. A negative number represents the amount of expenditures (per employee per month) that are more than what is estimated to be collected for payment of those expenditures.

Kenai Peninsula Borough School District	Reserve Account	As of 6-30-18	As of 6-30-19	FY19 Monthly Contributi	on - Traditional
	Employee Share	471,065.27	81,251.83	Employee Share *	498.00
Health Care Committee Monthly recap	<b>Employer Share</b>	1,572,408.17	3,087,396.93	Employer Share	1,923.49
as of July 31, 2019.				182	2,421.49

 FY20 Monthly Contribution - HDHP

 Employee Share \*
 308.00

 Employer Share
 1,770.47

 2.078.47

This document is provided to the Health Care Committee as a work paper to recap the contributions to and expenditures from the Health Care Plan each month. It is to be used primarily as an aid in estimating costs of the plan to determine if changes should be made in employee contribution amounts. Every effort is made to provide current and accurate information, but this information is not audited until after the end of the fiscal year.

Employees	Number of Employees	YTD Employees		Current Month Obligations	YTD Obligations	Contributions Current Month Collected	Contributions YTD Collected
KPEA Employees	269	269		133,962.00	133,962.00		
KPEA Employees - HDHP	265	265		81,620.00	81,620.00		
KPEA Repay EE Reserve				,			
KPESA Employees	159	159		79,182.00	79,182.00	6,474.00	6,474.00
KPESA Employees - HDHP	160	160		49,280.00	49,280.00	3,080.00	3,080.00
KPESA Repay EE Reserve					4.000.000.000		-/
Administrators	18	18		8,964.00	8,964.00	996.00	996.00
Administrators - HDHP	35	35		10,780.00	10,780.00	2,772.00	2,772.00
Admin Repay EE Reserve				•		•	
Board Members	1	1		498.00	498.00	275.00	275.00
Board Members - HDHP	3	3		924.00	924.00	825.00	825.00
Board Repay EE Reserve							
Exempt Employees	11	11		5,478.00	5,478.00	5,478.00	5,478.00
Exempt Employees - HDHP	16	16		4,928.00	4,928.00	4,620.00	4,620.00
Exempt Repay EE Reserve							
Affordable Care Act **				0.00	0.00		
ACA Empl Repay EE Reserve							
Total Employees on Payroll	937	937		375,616.00	375,616.00	24,520.00	24,520.00
COBRA Payers (FY20 = \$2534.08)	3	3		6,647.64	6,647.64	7,602.24	7,602.24
COBRA HD Payers (FY20 = \$1886.06)	5	5		9,801.40	9,801.40	11,316.36	11,316.36
Total Employees	945	945	Total	392,065.04 *	392,065.04	43,438.60	43,438.60

<sup>\*</sup> Current month employee obligations are a calculation of "Number of Employees" eligible for health care coverage during that month times the "Employee Share" (shown in the upper right corner of the sheet).

<sup>\*\*</sup> Affordable Care Act (ACA) coverage is offered to employees once eligibility is determined. Eligiblity is based on number of hours worked during the measurement period.

Employer						
Employer share	461	461	886,728.89	886,728.89	51,934.23	51,934.23
Employer share - HDHP	484	484	856,907.48	856,907.48	65,507.39	65,507.39
Total			2,135,701.41	2,135,701.41	160,880.22	160,880.22
+ Employee Share Split	FV20 County is a time Too distance		400.00		42.000.00	
+ Employee Share Split	FY20 Contribution Traditiona	11.	498.00	Subtotal	13,223.00	13,223.00
	Cobra		2,534.08	Subtotal	7,602.24	7,602.24
					20,825.24	20,825.24
	FY20 Contribution HDHP		308.00	Subtotal	11,297.00	11,297.00
	Cobra HD		1,886.06	Subtotal	11,316.36	11,316.36
				_	22,613.36	22,613.36
	Prior Year Reserve Repayme	nt	20.70	Subtotal		

### **Expenditures**

Since the health care plan is self-funded, both employee and employer contributions are collected and bills are paid from the accumulated funds.

				•
Claims	Current Month	Year-To-Date	<b>Current Month</b>	Year-To-Date
Health Care Claims paid by TPA (Rehn)	815,030.39	815,030.39	654,294.68	654,294.68
Prescription Claims paid by Caremark	19,983.67	19,983.67	64,502.35	64,502.35
HRA	<del></del>	<u> </u>	26,723.68	26,723.68
Total Claims Paid	835,014.06	835,014.06	745,520.71	745,520.71
Administration				
TPA (Rehn) fees and costs	18,537.60	18,537.60	-	•
TPA (Rehn) HRA fees and costs	-		43,094.98	43,094.98
Aetna Administration Fees	9,947.92	9,947.92	10,444.24	10,444.24
Consultant Fees	•	•	-	-
Stop Loss Premiums	128,245.44	128,245.44	134,643.80	134,643.80
Affordable Care Act Fee	11,505.19	11,505.19	12,079.21	12,079.21
Total Administration	168,236.15	168,236.15	200,262.23	200,262.23
Total Claims plus Administration	1,003,250.21	1,003,250.21	945,782.94	945,782.94
Adjustments				
Stop Loss reimbursements	(213,029.49)	(213,029.49)	-	•
Prescription Rebates		•	-	=
Health Care Claims refund	•	•	-	-
Claims reimbursements	(300.00)	(300.00)	-	-
Other adjustments				<u> </u>
Total Adjustments	(213,329.49)	(213,329.49)	<u> </u>	<u> </u>

TRADITIONAL

HDHP

### **Obligations/Contributions**

**Total Expenditures** 

Health care obligations and contributions provide employee and employer amounts of health care contributions using different calculation methods.

Obligations are estimates of funds that employees and the district will be obligated to contribute, based on the plan year (July through June).

Returning employees are covered by the health care plan for the entire plan year, meaning the 12 month period July through June; both employee and employer are obligated to pay for 12 months of coverage. New employees pay for coverage from date of hire through June, the end of the plan year. If an employee works at all during a month, both employee and employer pay for the entire month of coverage.

789,920.72

789,920.72

945,782.94

945,782.94

Actual Contributions made by employees and benefits paid by the employer during the payroll process are shown on the sheet in the columns labeled "Collected." The division of payments is governed by the Collective Bargaining Agreements and Memorandums of Understanding between the district and the employee groups.

Employee-paid contributions are deductions from payroll checks. Employees who work 12 months make contributions each pay period. Many school district employees do not work 12 months, so contributions are collected for those employees during the 9 month period from September through May.

For this reason, contributions are generally larger than obligations for September through May and contributions are generally smaller than obligations for June, July and August.

The "Collected" columns show what is actually available for paying health care costs. The "Obligations" show what is estimated to be available by month, based on number of employees at the current rate of contributions.

### Kenai Peninsula Borough School District Healthcare Expenditures Split as of July 31, 2019.

	raditional Plan				HDHP		
YTD Participants	461			YTD Participants	484		
Net Expenditures	789,920.72			Net Expenditures	945,782.94		
ER - Employer Cap \$1731.45	798,198.45			ER - Employer Cap \$1645.61	796,475.24		
EE - Employee Cap \$305.55	140,858.55			EE - Employee Cap \$182.85	88,499.40		
Total Cap Expenditure EE/ER	939,057.00			Total Cap Expenditure EE/ER	884,974.64		
Expenditures over Cap	(149,136.28)			Expenditures over Cap	60,808.30		
50/50 Split of Expenditures over Cap	(74,568.14)			50/50 Split of Expenditures over Cap	30,404.15		
ER Expenditures Up To Cap	798,198.45			ER Expenditures Up To Cap	796,475.24		
ER Expenditures Above Cap	(74,568.14)			ER Expenditures Above Cap	30,404.15		
Total ER Expenditures	723,630.31			Total ER Expenditures	826,879.39		
EE Expenditures Up To Cap	140,858.55			EE Expenditures Up To Cap	88,499.40		
EE Expenditures Above Cap	(74,568.14)			EE Expenditures Above Cap	30,404.15		
Total EE Expenditures	66,290.41			Total EE Expenditures	118,903.55		
Total ER & EE Expenditures	789,920.72			Total ER & EE Expenditures	945,782.94		
	itional Summary			н	HP Summary		
Through July 2019	YTD EXP	YTD REV	REV Less EXP	Through	YTD	YTD	REV Less
July 2013	EXF	KEV	EAP	July 2019	EXP	REV	EXP
Employer	723,630.31	51,934.23	(671,696.08)	Employer	826,879.39	65,507.39	(761,372.00)
Employee	66,290.41	20,825.24	(45,465.17)	Employee	118,903.55	22,613.36	(96,290.19)
Totals	789,920.72	72,759.47	(717,161.25)	Totals	945,782.94	88,120.75	(857,662.19)
Obligation per Employee FY20	0.000	Year-to-date		Obligation per Employee FY20		Year-to-date	
498.00 EE/1923.49 ER Split	2,421.49	2,421.49		308.00 EE/1770.47 ER Split	2,078.47	2,078.47	
Monthly Cost per Employee - ER		1569.70		Monthly Cost per Employee - ER		1708.43	
Monthly Cost per Employee - EE + Cobra	<u> </u>	143.80		Monthly Cost per Employee - EE + Cobra		245.67	
		1713.49			_	1954.10	
	Current Variance	708.00			Current Variance	124.37	

Obligations indicate the funds that will be accumulated per employee per month. Expenditures are amounts that have been paid through the plan.

A positive number for "current variance" represents the amount per employee per month that is estimated to be collected above the amount spent year-to-date. A negative number represents the amount of expenditures (per employee per month) that are more than what is estimated to be collected for payment of those expenditures.

# Kenai Peninsula Borough School District 2019/20 Self-Funded Projected Rates

MEDICAL/RX	Enrollment	FY19 Rates	FY20 Projected Rates
Traditional Plan			
Employee Only	<u>520</u>	\$2,421.49	\$3,129.09
Monthly Total	520	\$1,259,175	\$1,627,129
Annual Total		\$15,110,098	\$19,525,548
PEPM		\$2,421.49	\$3,129.09
% Increase		•	29.2%
HDHP			
Employee Only	552	\$2,078.47	\$2,015.63
Monthly Total	552	\$1,147,315	\$1,112,628
Annual Total		\$13,767,785	\$13,351,535
PEPM		\$2,078.47	\$2,015.63
% Increase			-3.0%
Monthly Total	1,072	\$2,406,490	\$2,739,757
Annual Total		\$28,877,883	\$32,877,083
PEPM		\$2,244.86	\$2,555.74
% Increase			13.8%

## Kenai Peninsula Borough School District 2019/20 Self-Funded Projected Rates

MEDICAL/RX	Traditional Plan	HDHP
2018/19 Current Rate	\$2,421.49	\$2,078.47
2019/20 Projected Rates		
0% Migration to HDHP	\$3,129.09	\$2,015.63
10% Migration to HDHP	\$3,117.05	\$2,108.75
20% Migration to HDHP	\$3,146.14	\$2,159.11
30% Migration to HDHP	\$3,133.25	\$2,227.92
40% Migration to HDHP	\$3,116.16	\$2,287.28
50% Migration to HDHP	\$3,162.86	\$2,316.42
60% Migration to HDHP	\$3,144.93	\$2,363.24
70% Migration to HDHP	\$3,115.23	\$2,404.71
80% Migration to HDHP	\$3,056.16	\$2,441.69
90% Migration to HDHP	\$3,232.13	\$2,456.89
100% Migration to HDHP	\$2,941.41	\$2,487.69

### Kenai Peninsula Borough School District Projected Self-Funded Costs

		Cr	

Annual Cost					
July 2018 - June 2019 Projected Rates	Traditional Plan	HDHP	Total		
Average Monthly Enrollment	547	577	1,124		
Net Claims	\$14,243,359	\$12,134,159	\$26,377,519		
Administration (Rehn)	\$93,444	\$99,774	\$193,218		
Administration (Rx)	\$4,033	\$4,334	\$8.367		
Specific Stop Loss Premium	\$1,476,054	\$1,610,024	\$3,086,078		
Aggregate Stop Loss Premium	\$17,649	\$18,932	\$36,580		
Broker Fees	\$28,831	\$30,369	\$59.200		
HRA Administration Fee	\$0	\$24,185	\$24,185		
HRA Fund	\$0	\$432,688	\$432,688		
Variable Costs	\$31,041	\$32,733	\$63,774		
Total	\$15,894,411	\$14.387.198	\$30,281,609		

### PEPM

Traditional Plan	HDHP	Total
547	577	1,124
\$2,169.59	\$1,752.73	\$1,955.63
\$14.23	\$14.41	\$14.33
\$0.61	\$0.63	\$0.62
\$224.84	\$232.56	\$228.80
\$2.69	\$2.73	\$2.71
\$4.39	\$4.39	\$4.39
\$0.00	\$3.49	\$1.79
\$0.00	\$62.50	\$32.08
\$4.73	\$4.73	\$4.73
\$2,421.08	\$2,078.17	\$2,245.08

### **Annual Cost**

Aillidal Cost					
July 2018 - June 2019 Actual Costs	Traditional Plan	HDHP	Total		
Average Monthly Enrollment	591	489	1.081		
Net Claims	\$17,159,432	\$4,765,851	\$21,925,283		
Administration (Rehn)	\$100.820	\$83,427	\$184,247		
Administration (Rx)	\$1,419	\$1,174	\$2.593		
Aetna / Coalition Fees	\$144,880	\$119.886	\$264,766		
Specific Stop Loss Premium	\$1,631,072	\$1,413,778	\$3.044.851		
Aggregate Stop Loss Premium	\$22.835	\$19.935	\$42,770		
Broker Fees	\$32,463	\$26,737	\$59.200		
HRA Administration Fee	\$0	\$20,549	\$20.549		
HRA Fund	\$0	\$366.938	\$366,938		
Variable Costs	\$47,412	\$39.233	\$86,645		
Total	\$19,140,332	\$6,857,507	\$25,997,840		

### PEPM

Traditional Plan	HDHP	Total
591	489	1,081
\$2,418.52	\$811.76	\$1,625.54
\$14.21	\$14.21	\$13.66
\$0.20	\$0.20	\$0.19
\$20.42	\$20.42	\$19.63
\$229.89	\$240.81	\$225.75
\$3.22	\$3.40	\$3.17
\$4.58	\$4.55	\$4.39
\$0.00	\$3.50	\$1.52
\$0.00	\$62.50	\$28.30
\$6.68	\$6.68	\$6.68
\$2,697.72	\$1,168.03	\$1,928.83

### **Annual Cost**

July 2019 - June 2020 Projected Costs	Traditional Plan	HDHP	Total
Average Monthly Enrollment	520	552	1.072
Net Claims	\$17,262,171	\$10,511,689	\$27,773,860
Administration (Rehn)	\$94,497	\$100.313	\$194,810
Administration (Rx)	\$3,772	\$4,004	\$7,776
Aetna / Coalition Fees	\$138,579	\$147,107	\$285,686
Specific Stop Loss Premium	\$1,908,672	\$2,026,129	\$3,934,802
Aggregate Stop Loss Premium	\$26,208	\$27,821	\$54.029
Broker Fees	\$28,716	\$30,484	\$59,200
HRA Administration Fee	\$0	\$23.184	\$23,184
HRA Fund	\$0	\$414,000	\$414,000
Variable Costs	\$62,932	\$66,805	\$129.737
Total	\$19,525,548	\$13,351,535	\$32,877,083

Traditional Plan	HDHP	Total
520	552	1,072
\$2,766.37	\$1,586.91	\$2,159.04
\$15.14	\$15.14	\$15.14
\$0.60	\$0.60	\$0.60
\$22.21	\$22.21	\$22.21
\$305.88	\$305.88	\$305.88
\$4.20	\$4.20	\$4.20
\$4.60	\$4.60	\$4.60
\$0.00	\$3.50	\$1.80
\$0.00	\$62.50	\$32.18
\$10.09	\$10.09	\$10.09
\$3,129.09	\$2,015.63	\$2,555.74

### Assumptions:

- 1. Projected enrollment based on Februar 2019 counts.
- 2. Net Claims are based on 10% weight on January December 2017 claims, 70% weight on January December 2018 claims, and 20% weight on January February 2019 claims with 8% annual trend.

  4. 2019/20 Fixed costs are estimated based on 6 months of the 2019 rates and 6 months of projected 2020 rate increases.
- 5. HRA fund of \$750 per year
- 6. Variable costs by plan are based on total variable costs pro-rated based on enrollment.
- 7. Projections assume no changes to the current plans.

### **KPBSD FY20 Rates Estimates**

8/28/2019

Based on claims through June of 2019

### 1. KPBSD Cap Related Information

1. RPBSD Cap Related Information		(PBSD Cap Amount [raditional	ŀ	(PBSD Cap Amount <u>HDHP</u>
District (85% Traditional - 90% HDHP)	\$	1,731.45	\$	1,645.61
Employee (15% Traditional - 10% HDHP)	\$	305.55	\$	182.85
Monthly Total	\$	2,037.00	\$	1,828.46
2. FY20 Healthcare Rate Estimate - Claims Through Feb 2019	Co	FY20 Estimated Intributions Iraditional		FY20 Estimated Intributions HDHP
FY20 Broker Recommended Amount Monthly	\$	3,129.09	\$	2,015.63
Amount above/below Cap	\$	1,092.09	\$	187.17
50% of Excess/Reduction	\$	546.05	\$	93.59
District	\$	2,277.50	\$	1,739.20
Employee	\$	851.60	\$	276.43
Total FY20 Amounts Per Broker Rec	\$	3,129.09	\$	2,015.63
District Yearly	\$	27,329.94	\$	20,870.37
Employee Yearly	\$	10,219.14	\$	3,317.19