# Stacey Cockroft

From:

Stacey Cockroft

Sent:

Wednesday, January 8, 2020 8:58 AM

To:

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

Kristen Vix; Laura Wertanen; Matt Fischer; Stephanie Bohrnsen; Vaughn Dosko

Subject:

Specific Stop Loss 12/31/2019

## Good Morning,

Below is the Specific Stop loss Report through 12/31/2019.

Subscriber	Total Amt	Amt over Spec	Amt Requested	Amt Reimbursed	Non Reimbursed Expenses	Amt Open
1	\$ 1,611,311.04	\$ 1,391,311.04	\$ 1,391,311.04	\$ 1,245,110.70		\$ 146,200.34
2	\$ 1,346,442.06	\$ 1,126,442.06	\$ 1,126,442.06	\$ 983,153.23		\$ 143,288.83
3	\$ 367,350.40	\$ 147,350.40	\$ 147,350.40	\$ -		\$ 147,350.40
4	\$ 358,314.87	\$ 138,314.87	\$ 138,314.87	\$ 135,071.97		\$ 3,242.90
5	\$ 322,550.39	\$ 102,550.39	\$ 102,550.39	\$ -		\$ 102,550.39
6	\$ 278,763.92	\$ 58,763.92	\$ 58,763.92	\$ 38,951.16		\$ 19,812.76
7	\$ 270,083.14	\$ 50,083.14	\$ 50,083.14	\$ -		\$ 50,083.14
8	\$ 250,602.33	\$ 30,602.33	\$ 30,602.33	\$ 28,704.53		\$ 1,897.80
9	\$ 234,859.54	\$ 14,859.54	\$ 14,859.54	\$ 14,859.54		\$ -
	\$ 5,040,277.69	\$ 3,060,277.69	\$ 3,060,277.69	\$ 2,445,851.13	\$ -	\$ 614,426.56

# 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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# **Stacey Cockroft**

From:

Stacey Cockroft

Sent:

Monday, December 30, 2019 9:55 AM

To:

Dave Jones

Cc:

Culbertson, Nicole; Hebert, Curtis; Meyhoff, Jennifer

Subject:

Open Enrollment numbers

Hi Dave,

Below are the total open enrollment changes:

Traditional to HRA	Traditional To HSA	HRA to HSA	ELECTED HRA COVERAGE - Previously Opted Out	DECLINING COVERAGE
395	58	19	5	25
	Total HSA enro	lments: 77		

Thanks!

# Stacey Cockroft

Kenai Peninsula Borough School District

Employee Benefits Manager

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Kenai Peninsula Borough School District	Reserve Account	As of 6-30-18	As of 6-30-19	FY19 Monthly Contribut	on - Traditional
	<b>Employee Share</b>	471,065.27	750,000.00	Employee Share *	469.36
Health Care Committee Monthly recap	Employer Share	1,572,408.17	2,418,648.76	Employer Share	2,659.73
as of November 30, 2019.					3,129.09

FY19 Monthly Contr	<u>ribution - HDHP</u>
Employee Share *	302.34
Employer Share	1,713.29
	2 245 52

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.

-1	Number of Employees	YTD Employees		Current Month Obligations	YTD Obligations	Contributions Current Month Collected	Contributions YTD Collected
Employees							E0120E10
KPEA Employees	284	1,404		133,298.24	658,981.44	198,304.60	594,327.10
KPEA Employees - HDHP	282	1,389		85,259.88	419,950.26	125,912.82	377,335.34
KPEA Repay EE Reserve							
KPESA Employees	158	797		74,158.88	374,079.92	106,084.76	337,929.78
KPESA Employees - HDHP	193	893		58,351.62	269,989.62	81,463.64	246,801.14
KPESA Repay EE Reserve							
Administrators	19	94		8,917.84	44,119.84	12,878.76	40,628.28
Administrators - HDHP	38	187		11,488.92	56,537.58	15,847.38	53,086.14
Admin Repay EE Reserve							
Board Members	1	5		469.36	2,346.80	275.00	3,244.50
Board Members - HDHP	3	15		907.02	4,535.10	825.00	4,125.00
Board Repay EE Reserve							
Exempt Employees	10	51		4,693.60	23,937.36	4,550.40	24,109.20
Exempt Employees - HDHP	16	80		4,837.44	24,187.20	5,399.67	24,531.99
Exempt Repay EE Reserve							
Affordable Care Act **				0.00	0.00		
ACA Empl Repay EE Reserve			_		-		
Total Employees on Payroll	1,004	4,915		382,382.80	1,878,665.12	551,542.03	1,706,118.47
COBRA Payers (FY20 = \$2534.08)	2	12		4,431.76	26,590.56	1,886.06	22,158.70
COBRA HD Payers (FY20 = \$1886.06)	1	15	-	1,960.28	29,404.20	2,534.08	17,622.56
Total Employees	1,007	4,942	Total	388,774.84 *	1,934,659.88	555,962.17	1,745,899.73

<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	472	2,351	1,255,392.56	6,253,025.23	1,380,664.37	4,268,588.78
Employer share - HDHP	532	2,564	911,470.28	4,392,875.56	1,197,991.00	3,695,138.16
Total			2,555,637.68	12,580,560.67	3,134,617.54	9,709,626.67
+ Employee Share Split	FY20 Contribution Trac	litional	469.36	Subtotal	322,093.52	1,000,238.86
	Cobra		2,534.08	Subtotal	1,886.06	22,158.70
					323,979.58	1,022,397.56
	FY20 Contribution HDF	IP	302.34	Subtotal	229,448.51	705,879.61
	Cobra HD		1,886.06	Subtotal	2,534.08	17,622.56
					231,982.59	723,502.17

### **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	Current Month	Year-To-Date
Health Care Claims paid by TPA (Rehn)	1,195,108.40	5,090,890.05	419,255.35	2,809,281.98
Prescription Claims paid by Caremark	471,292.06	1,594,712.23	73,727.00	374,549.68
HRA	<del></del> -	<del>-</del>	32,807.54	140,660.88
Total Claims Paid	1,666,400.46	6,685,602.28	525,789.89	3,324,492.54
Administration				
TPA (Rehn) fees and costs	17,629.09	78,736.46	_	_
TPA (Rehn) HRA fees and costs	-		16.618.21	114,876.07
Aetna Administration Fees	10,288.73	50,494.96	11,569.39	55,119.80
Consultant Fees		-	,005.05	-
Stop Loss Premiums	135,028.90	665,149,74	151,836.29	726,301.57
Affordable Care Act Fee		22,082.83	•	23,903.89
Total Administration	162,946.72	816,463.99	180,023.89	920,201.33
Total Claims plus Administration	1,829,347.18	7,502,066.27	705,813.78	4,244,693.87
Adjustments				
Stop Loss reimbursements	(328,680.45)	(1,475,785.11)	•	_
Prescription Rebates	(131,508.69)	(261,640.81)	(46,134.50)	(144,430.54)
Health Care Claims refund	-	•	•	-
Claims reimbursements	(500.00)	(2,150.00)	(750.00)	(750.00)
Other adjustments				
Total Adjustments	(460,689.14)	(1,739,575.92)	(46,884.50)	(145,180.54)
Total Expenditures	1,368,658.04	5,762,490.35	658,929.28	4,099,513.33

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.

1/20/2020

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

Tra	ditional Plan				HDHP		
YTD Participants	2,351		:	 YTD Participants	2,564		
Net Expenditures	5,762,490.35		!	Net Expenditures	4,099,513.33		
ER - Employer portion (85%)	4,898,116.80		i	ER - Employer portion (85%)	3,484,586.33		
EE - Employee portion (15%)	864,373.55			EE - Employee portion (15%)	614,927.00		
Total ER & EE Expenditures	5,762,490.35			Total ER & EE Expenditures	4,099,513.33		
			:				
Tradit	ional Summary			н	DHP Summary		
Through	YTD	YTD	REV Less	Through	YTD	YTD	REV Less
Current Month	EXP	REV	EXP	Current Month	EXP	REV	EXP
Employer	4,898,116.80	4,268,588.78	(629,528.02)	Employer	3,484,586.33	3,695,138.16	210,551.83
Employee	<u>864,373.55</u>	1,022,397.56	158,024.01	Employee	614,927.00	723,502.17	108,575.17
Totals	5,762,490.35	5,290,986.34	(471,504.01)	Totals	4,099,513.33	4,418,640.33	319,127.00
Obligation per Employee FY20		Year-to-date		Obligation per Employee FY20	<del>-</del>	Year-to-date	
469.36 EE/2659.73 ER Split	3,129.09	3,129.09		302.34 EE/1713.29 ER Split	2,015.63	2,015.63	
Monthly Cost per Employee - ER		2083.42		Monthly Cost per Employee - ER		1359.04	
Monthly Cost per Employee - EE + Cobra	_	367.66		Monthly Cost per Employee - EE + Cobra		239.83	
	-	2451.08			-	1598.87	
,	Current Variance	678.01			Current Variance	416.76	

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 Contrib	ution - Traditional
	Employee Share	471,065.27	750,000.00	Employee Share *	469.36
Health Care Committee Monthly recap	Employer Share	1,572,408.17	2,418,648.76	Employer Share	2,659.73
as of December 31, 2019.					3,129.09

FY19 Monthly Conti	ribution - HDHP
Employee Share *	302.34
Employee Share * Employer Share	1,713.29
173	2.015.63

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.

	Number of Employees	YTD Employees		Current Month Obligations	YTD Obligations	Contributions Current Month Collected	Contributions YTD Collected
Employees	p.oyces	Linployees		o bilgations	o bilgations	Concolica	dometica
KPEA Employees	283	1,687		132,828.88	791,810.32	196,544.50	790,871.60
KPEA Employees - HDHP	283	1,672		85,562.22	505,512.48	125,879.37	503,214.71
KPEA Repay EE Reserve							
KPESA Employees	156	953		73,220.16	447,300.08	105,146.04	443,075.82
KPESA Employees - HDHP	190	1,083		57,444.60	327,434.22	80,485.28	327,286.42
KPESA Repay EE Reserve							
Administrators	19	113		8,917.84	53,037.68	12,878.76	53,507.04
Administrators - HDHP	38	225		11,488.92	68,026.50	15,847.38	68,933.52
Admin Repay EE Reserve							
Board Members	1	6		469.36	2,816.16	275.00	3,519.50
Board Members - HDHP	3	18		907.02	5,442.12	825.00	4,950.00
Board Repay EE Reserve							
Exempt Employees	10	61		4,693.60	28,630.96	4,550.40	28,659.60
Exempt Employees - HDHP	17	97		5,139.78	29,326.98	5,399.67	29,931.66
Exempt Repay EE Reserve							
Affordable Care Act **				0.00	0.00		
ACA Empl Repay EE Reserve			_				
Total Employees on Payroll	1,000	5,915		380,672.38	2,259,337.50	547,831.40	2,253,949.87
COBRA Payers (FY20 = \$2534.08)	1	13		2,215.88	28,806.44	5,725.75	27,884.45
COBRA HD Payers (FY20 = \$1886.06)	1	16	-	1,960.28	31,364.48	2,055.94	19,678.50
Total Employees	1,002	5,944	Total	384,848.54 *	2,319,508.42	555,613.09	2,301,512.82

<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	469	2,820	1,247,413.37	7.500.438.60	1,369,997.91	5,638,586.69
Employer share - HDHP	531	3,095	909,756.99	5,302,632.55	1,192,234.13	4,887,372.29
Total			2,542,018.90	15,122,579.57	3,117,845.13	12,827,471.80
+ Employee Share Split	FY20 Contribution Trac	ditional	469.36	Subtotal	319,394.70	1,319,633.56
	Cobra		2,534.08	Subtotal	5,725.75 325,120.45	27,884.45 1,347,518.01
	FY20 Contribution HDH Cobra HD	HP.	302.34 1,886.06	Subtotal Subtotal	228,436.70 2,055.94	934,316.31 19,678.50
	CODIA ND		1,886.06	Jubiotai _	230,492.64	953,994.81

1/7/2020

### **Expenditures**

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

		IOITAL	Heri	
Claims	Current Month	Year-To-Date	Current Month	Year-To-Date
Health Care Claims paid by TPA (Rehn)	1,982,449.11	7,073,339.16	746,098.30	3,555,380.28
Prescription Claims paid by Caremark	397,952.62	1,992,664.85	69,028.41	443,578.09
HRA			26,687.51	167,348.39
Total Claims Paid	2,380,401.73	9,066,004.01	841,814.22	4,166,306.76
Administration				
TPA (Rehn) fees and costs	21,339.38	100,075.84	•	-
TPA (Rehn) HRA fees and costs	•	•	25,807.15	140,683.22
Aetna Administration Fees	10,211.76	60,706.72	11,558.84	66,678.64
Consultant Fees	-	-	•	· -
Stop Loss Premiums	132,043.67	797,193.41	149,462.19	875,763.76
Affordable Care Act Fee		22,082.83	<del></del> -	23,903.89
Total Administration	163,594.81	980,058.80	186,828.18	1,107,029.51
Total Claims plus Administration	2,543,996.54	10,046,062.81	1,028,642.40	5,273,336.27
Adjustments				
Stop Loss reimbursements	(293,097.06)	(1,768,882.17)		-
Prescription Rebates	•	(261,640.81)	-	(144,430.54)
Health Care Claims refund	-	-	-	•
Claims reimbursements	(550.00)	(2,700.00)	•	(750.00)
Other adjustments	<u> </u>	<u> </u>	<del></del>	<u> </u>
Total Adjustments	(293,647.06)	(2,033,222.98)	<u> </u>	(145,180.54)
Total Expenditures	2,250,349.48	8,012,839.83	1,028,642.40	5,128,155.73

**TRADITIONAL** 

**HDHP** 

## **Obligations/Contributions**

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

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1/7/2020 2

### Kenal Peninsula Borough School District Healthcare Expenditures Split as of December 31, 2019.

	Traditional Plan					HDHP		
YTD Participants	2,820				YTD Participants	3,095		
Net Expenditures	8,012,839.83				Net Expenditures	5,128,155.73		
ER - Employer portion (85%)	6,810,913.86				ER - Employer portion (85%)	4,358,932.37		
EE - Employee portion (15%)	1,201,925.97				EE - Employee portion (15%)	769,223.36		
Total ER & EE Expenditures	8,012,839.83				Total ER & EE Expenditures	5,128,155.73		
			!					
Traditional Summary				HDHP Summary				
Through	YTD	YTD	REV Less		Through	YTD	YTD	REV Less
Current Month	EXP	REV	EXP		Current Month	EXP	REV	EXP
Employer	6,810,913.86	5,638,586.69	(1,172,327.17)		Employer	4,358,932.37	4,887,372.29	528,439.92
Employee	1,201,925.97	1,347,518.01	145,592.04		Employee	769,223.36	953,994.81	184,771.45
Тс	tals 8,012,839.83	6,986,104.70	(1,026,735.13)		Totals	5,128,155.73	5,841,367.10	713,211.37
Obligation per Employee FY20	_	Year-to-date		-	Obligation per Employee FY20	_	Year-to-date	
469.36 EE/2659.73 ER S	plit 3,129.09	3,129.09			302.34 EE/1713.29 ER Spli	t 2,015.63	2,015.63	
Monthly Cost per Employee - ER 2415.		2415.22			Monthly Cost per Employee - ER		1408.38	
Monthly Cost per Employee - EE + Cobra 42		426.21			Monthly Cost per Employee - EE + Cobra		248.54	
	_	2841.43				_	1656.92	
	Current Variance	287.66				Current Variance	358.71	

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.