

Cost of Realignment Calculation

Preliminary Renewal as of September 28, 2018

Enrollment as of September 2018			2019 Plan Yearly Rates - Not Aligned with Rate Adjustment							2019 Plan Yearly Rates - Aligned with Rate Adjustment									
	Rate Tier	Employees	Not Aligned Rates - Per Employee	Annual Employee Responsibility - Per Employee	Annual Board Responsibility - Per Employee	Total Annual Cost - Employee Portion	Total Annual Cost - Board Portion	Aligned Rates - Per Employee	Annual Employee Responsibility - Per Employee	Alignment Difference	One-Time Realignment Credit (50/50)	One-Time Realignment Credit Cost to the Board	Annual Board Responsibility (Not Including Credit) - Per Employee	Total Annual Cost - Employee Portion	Total Annual Cost - Board Portion (Not Including Credit)				
Glenbrook PPO (6%)	Single	111	\$14,146.80	5%	\$707.34	95%	\$13,439.46	\$78,514.74	\$1,491,780.06	\$9,754.56	5%	\$487.73	-\$219.61	\$0.00	\$0.00	95%	\$9,266.83	\$54,137.81	\$1,028,618.35
	Family	184	\$28,322.52	12%	\$3,398.70	88%	\$24,923.82	\$625,361.24	\$4,585,982.44	\$27,312.72	12%	\$3,277.53	-\$121.18	\$0.00	\$0.00	88%	\$24,035.19	\$603,064.86	\$4,422,475.62
		295																	
High Deductible PPO (6%)*	Single	51	\$8,627.40	5%	\$431.37	95%	\$8,196.03	\$21,999.87	\$417,997.53	\$8,525.52	5%	\$426.28	-\$5.09	\$0.00	\$0.00	95%	\$8,099.24	\$21,740.08	\$413,061.44
	Family	104	\$17,313.00	12%	\$2,077.56	88%	\$15,235.44	\$216,066.24	\$1,584,485.76	\$23,871.36	12%	\$2,864.56	\$787.00	\$393.50	\$40,924.17	88%	\$21,006.80	\$297,914.57	\$2,184,706.87
		155																	
New High Deductible PPO *	Single	0	Plan is new; Plan did not exist in a "not aligned" state.							\$7,987.80	5%	\$399.39	Plan is new			95%	\$7,588.41	\$0.00	\$0.00
	Single +1	0	Plan is new; Plan did not exist in a "not aligned" state.							\$15,975.60	12%	\$1,917.07	Plan is new			88%	\$14,058.53	\$0.00	\$0.00
	Family	0	Plan is new; Plan did not exist in a "not aligned" state.							\$23,963.40	12%	\$2,875.61	Plan is new			88%	\$21,087.79	\$0.00	\$0.00
	0																		
HMO Illinois (8.8%)	Single	64	\$7,954.32	5%	\$397.72	95%	\$7,556.60	\$25,453.82	\$483,622.66	\$6,950.76	5%	\$347.54	-\$50.18	\$0.00	\$0.00	95%	\$6,603.22	\$22,242.43	\$422,606.21
	Family	134	\$21,476.64	12%	\$2,577.20	88%	\$18,899.44	\$345,344.37	\$2,532,525.39	\$19,462.20	12%	\$2,335.46	-\$241.73	\$0.00	\$0.00	88%	\$17,126.74	\$312,952.18	\$2,294,982.62
		198																	
Blue Advantage HMO (8.8%)	Single	34	\$6,363.36	5%	\$318.17	95%	\$6,045.19	\$10,817.71	\$205,536.53	\$6,767.28	5%	\$338.36	\$20.20	\$10.10	\$343.33	95%	\$6,428.92	\$11,504.38	\$218,583.14
	Single +1	19	\$12,329.16	12%	\$1,479.50	88%	\$10,849.66	\$28,110.48	\$206,143.56	\$13,534.56	12%	\$1,624.15	\$144.65	\$72.32	\$1,374.16	88%	\$11,910.41	\$30,858.80	\$226,297.84
	Family	56	\$16,164.36	12%	\$1,939.72	88%	\$14,224.64	\$108,624.50	\$796,579.66	\$20,301.96	12%	\$2,436.24	\$496.51	\$248.26	\$13,902.34	88%	\$17,865.72	\$136,429.17	\$1,000,480.59
		109						\$1,460,292.98	\$12,304,653.58					\$56,543.99			\$1,490,844.27	\$12,211,812.69	
	757						\$13,764,946.56										\$13,702,656.96		

* High Deductible PPO plans receive an additional District-funded HSA benefit of \$1,000 for Single and \$1,600 for Family, which is not factored into the premium equivalent rates.