Premium Equivalent Rate Comparision - Short vs. Long Plan Years

Preliminary Renewal as of September 28, 2018

Enrollment as of September 2018			2018 "Short" Plan Yearly Rates (Sept - December) - Not Aligned					2019 "Long" Plan Yearly Rates (January - December) - Aligned									
	Rate Tier	Employees	Not Aligned Rates	Employee Responsibility		Total Cost to the ⁻ Employee	Total Cost to the Board	Aligned Rates	Percent Change		nployee ponsibility	Plan to Plan Difference for EE	Realignment Credit (50/50) **	Realignment Credit Cost to the Board	Board Responsibilitiy (Not Including Credit)	Total Cost to the Employee	Total Cost to the Board (Not Including Credit)
Glenbrook PPO	Single	108	\$13,557.60	5% \$677.8	8 95% \$12,879.72	\$73,211.04	\$1,391,009.76	\$9,754.56	-38.99%	5%	\$487.73	-\$190.15	\$0.00	\$0.00	95% \$9,266.83	\$52,674.62	\$1,000,817.86
(6%)	Family	183	\$27,143.04	12% \$3,257.1	6 88% \$23,885.88	\$596,061.16	\$4,371,115.16	\$27,312.72	0.62%	12%	\$3,277.53	\$20.36	\$0.00	\$0.00	88% \$24,035.19	\$599,787.33	\$4,398,440.43
		291															
High Deductible	Single	51	\$8,268.12	5% \$413.4	1 95% \$7,854.71	\$21,083.71	\$400,590.41	\$8,525.52	3.02%	5%	\$426.28	\$12.87	\$0.00	\$0.00	95% \$8,099.24	\$21,740.08	\$413,061.44
PPO (6%)*	Family	104	\$16,592.04	12% \$1,991.0	4 88% \$14,601.00	\$207,068.66	\$1,518,503.50	\$23,871.36	30.49%	12%	\$2,864.56	\$873.52	\$393.50	\$40,924.00	88% \$21,006.80	\$297,914.57	\$2,184,706.87
		155															
	Single	0						\$7,987.80		5%	\$399.39				95% \$7,588.41	\$0.00	\$0.00
New High	Single +1	0		Plan is new; Pl	an did not exist in a "n	ot aligned" state.		\$15,975.60		12%	\$1,917.07		Plan is new		88% \$14,058.53	\$0.00	\$0.00
Deductible PPO *	Family	0						\$23,963.40		12%	\$2,875.61				88% \$21,087.79	\$0.00	\$0.00
		0															
HMO Illinois	Single	60	\$7,623.00	5% \$381.1	5 95% \$7,241.85	\$22,869.00	\$434,511.00	\$6,950.76	-9.67%	5%	\$347.54	-\$33.61	\$0.00	\$0.00	95% \$6,603.22	\$20,852.28	\$396,193.32
(8.8%)	Family	133	\$20,582.28	12% \$2,469.8	7 88% \$18,112.41	\$328,493.19	\$2,408,950.05	\$19,462.20	-5.76%	12%	\$2,335.46	-\$134.41	\$0.00	\$0.00	88% \$17,126.74	\$310,616.71	\$2,277,855.89
		193															
	Single	34	\$6,098.40	5% \$304.9	2 95% \$5,793.48	\$10,367.28	\$196,978.32	\$6,767.28	9.88%	5%	\$338.36	\$33.44	\$10.10	\$343.40	95% \$6,428.92	\$11,504.38	\$218,583.14
Blue Advantage HMO (8.8%)	Single +1	19	\$11,815.68	12% \$1,417.8	8 88% \$10,397.80	\$26,939.75	\$197,558.17	\$13,534.56	12.70%	12%	\$1,624.15	\$206.27	\$72.32	\$1,374.08	88% \$11,910.41	\$30,858.80	\$226,297.84
11110 (0.076)	Family	56	\$15,491.16	12% \$1,858.9	4 88% \$13,632.22	\$104,100.60	\$763,404.36	\$20,301.96	23.70%	12%	\$2,436.24	\$577.30	\$248.26	\$13,902.56	88% \$17,865.72	\$136,429.17	\$1,000,480.59
	•	109				\$1,390,194.38	\$11,682,620.74							\$56,544.04	-	\$1,482,377.94	\$12,116,437.38
		748				\$13,072,	815.12								-	\$13,598	,815.32
														6.63%	Y-o-Y Net Differe	ence for Employee	\$92,183.56
																	. ,

4.20% Y-o-Y Net Difference for Board \$490,360.68

(Inclusive of 1st Year Realignment Credit)

* 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. <u>** See "Cost of Realignment Calculation" document to view realignment credit calculations.</u>

RETIREE PLANS Premium Equivalent Rate Comparision - Short vs. Long Plan Years

Preliminary Renewal as of September 28, 2018

Enrollment as	of Septemb	er 2018	2018		2019 "Long" Plan Yearly Rates (January - December) - Aligned									
	Rate Tier	Employees	Not Aligned Rates	Employee Responsibility	Board Responsibilitiy	Total Cost to the Employee	Total Cost to the Board	Aligned Rates	Percent Change	Employee Responsibility	Plan to Plan Difference for EE	Board Responsibilitiy	Total Cost to the Employee	Total Cost to the Board
Glenbrook PPO (6%)	Single	3	\$13,557.60	5% \$677.88	95% \$12,879.72	\$2,033.64	\$38,639.16	\$14,146.80	4.16%	5% \$707.34	\$29.46	95% \$13,439.46	\$2,122.02	\$40,318.38
	Family	1	\$27,143.04	\$14,263.32	\$12,879.72	\$14,263.32	\$12,879.72	\$28,322.52	4.16%	\$14,883.06	\$619.74	\$13,439.46	\$14,883.06	\$13,439.46
ľ		4												
(Retiree) High Deductible PPO	Single	31	\$8,268.12	5% \$413.41	95% \$7,854.71	\$12,815.59	\$243,496.13	\$8,627.40	4.16%	5% \$431.37	\$17.96	95% \$8,196.03	\$13,372.47	\$254,076.93
	Single + 1	35	\$16,592.04	\$8,737.33	\$7,854.71	\$305,806.41	\$274,914.99	\$17,313.00	4.16%	\$9,116.97	\$379.64	\$8,196.03	\$319,093.95	\$286,861.05
(6%)*	Family	7	\$21,408.24	\$13,553.53	\$7,854.71	\$94,874.68	\$54,983.00	\$22,338.60	4.16%	\$14,142.57	\$589.04	\$8,196.03	\$98,997.99	\$57,372.21
		73												
(Retiree) PPO Supplement	Single	5	\$4,733.16	100% \$4,733.16	0%	\$23,665.80	0	\$4,938.84	4.16%	100% \$4,938.84	\$205.68	0% \$0.00	\$24,694.20	\$0.00
	Family	0	\$9,187.92	100% \$9,187.92	0%	\$0.00	0	\$9,587.16	4.16%	100% \$9,587.16	\$399.24	0% \$0.00	\$0.00	\$0.00
		5												
HMO Illinois (8.8%)	Single	4	\$7,623.00	5% \$381.15	95% \$7,241.85	\$1,524.60	\$28,967.40	\$7,954.32	4.17%	5% \$397.72	\$16.57	95% \$7,556.60	\$1,590.86	\$30,226.42
	Family	1	\$20,582.28	\$13,340.43	\$7,241.85	\$13,340.43	\$7,241.85	\$21,476.64	4.16%	\$13,920.04	\$579.61	\$7,556.60	\$13,920.04	\$7,556.60
		5												
Blue Advantage HMO (8.8%)	Single	7	\$6,098.40	5% \$304.92	95% \$5,793.48	\$2,134.44	\$40,554.36	\$6,363.36	4.16%	5% \$318.17	\$13.25	95% \$6,045.19	\$2,227.18	\$42,316.34
	Single +1	7	\$11,815.68	\$6,022.20	\$5,793.48	\$42,155.40	\$40,554.36	\$12,329.16	4.16%	\$6,283.97	\$261.77	\$6,045.19	\$43,987.78	\$42,316.34
	Family	2	\$15,491.16	\$9,697.68	\$5,793.48	\$19,395.36	\$11,586.96	\$16,164.36	4.16%	\$10,119.17	\$421.49	\$6,045.19	\$20,238.34	\$12,090.38
		16				\$532,009.67	\$753,817.93						\$555,127.88	\$786,574.12
		103				\$1,285,8	327.60						\$1,341	,702.00

Y-o-Y Net Difference for Employee	\$23,118.21							
Y-o-Y Net Difference for Board	\$32,756.19							
(Inclusive of 1st Year Realignment Credit)								

* 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. <u>** See "Cost of Realignment Calculation" document to view realignment credit calculations.</u>