#### THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA

#### FINANCIAL SERVICES DEPARTMENT

 $M_EM_OR_AN_DUM$ 

TO: Mitsi Corcoran, Chief Financial Officer

FROM: Bert Palmer, Risk Manager

DATE: August 26, 2009

SUBJECT: Group Medical Insurance – Renewal 01/01/2010

#### 2010 Group Medical Renewal

Blue Cross Blue Shield of Florida (BCBSFL) has proposed a rate increase of 7.5% across the board on all four (4) of the plans offered by the district. The expiring and proposed BCBSFL monthly contract rates are as follows:

|                   | 2009 G          | 2009 Group Medical Monthly Contract Rates – (Expiring) *                |            |          |  |  |  |  |  |  |
|-------------------|-----------------|---|------------|----------|--|--|--|--|--|--|
| Coverage Tier     | Blue Care HMO 5 | Blue Care HMO 5 Blue Choice PPO 902 Blue Care HMO 15 Blue Choice PPO 12 |            |          |  |  |  |  |  |  |
| Single Only       | \$486.42        | \$601.50  | \$456.60   | \$331.90 |  |  |  |  |  |  |
| Single + Spouse   | \$1,011.68      | \$1,250.12  | \$949.70   | \$689.78 |  |  |  |  |  |  |
| Single + Children | \$920.00        | \$1,136.50  | \$863.60   | \$627.10 |  |  |  |  |  |  |
| Single+ Family    | \$1,410.00      | \$1,742.40  | \$1,323.58 | \$961.40 |  |  |  |  |  |  |

|                   | 2010 Group Medical Monthly Contract Rates – (Renewal) * |  |            |            |  |  |  |  |  |  |
|-------------------|---|--|------------|------------|--|--|--|--|--|--|
| Coverage Tier     | Blue Care HMO 5   | Blue Care HMO 5 Blue Choice PPO 902 Blue Care HMO 15 Blue Choice PPO 125 |            |            |  |  |  |  |  |  |
| Single Only       | \$522.90  | \$646.60   | \$490.84   | \$356.80   |  |  |  |  |  |  |
| Single + Spouse   | \$1,087.56  | \$1,343.88   | \$1,020.92 | \$741.52   |  |  |  |  |  |  |
| Single + Children | \$989.00  | \$1,221.74   | \$928.36   | \$674.14   |  |  |  |  |  |  |
| Single+ Family    | \$1,515.74  | \$1,873.08   | \$1,422.86 | \$1,033.50 |  |  |  |  |  |  |

<sup>\*</sup> The monthly rates contributed by the district and employees are shown on the attached exhibit titled, "Group Health Insurance Monthly Rates".

The estimated 2010 calendar year total plan cost [district paid & employee paid] based on enrollments as of August 2009 is \$40,898,200.68. This is an increase of \$2,853,084.86 or 7.5%. The estimate does not include retirees and Cobra. The projected annual district cost is \$34,651,434.38. This is an increase in cost of \$2,417,017.36 or 7.5%.

#### **Recommendation**

Aon Benefit Consulting has reviewed the renewal and has found the underwriting assumptions to be within industry norms. They believe the renewal is fair and reasonable given our group claims experience, rating factors, and that medical trend [inflation] continues to average 10.5%. I have attached a copy of their letter dated August 25, 2009. Aon recommends the district accept the renewal offer and I agree with their recommendation.

Group Medical Insurance - Renewal 01/01/2010 August 26, 2009 Page 2

If you have any questions, please let me know.

#### Attachments:

- 1. Blue Cross Blue Shield of Florida renewal letter, dated 8/25/2009
- Aon Benefit Consulting review letter, dated 8/25/2009
  2010 Group Health Insurance Monthly Rates
  2009 Group Health Insurance Monthly Rates

# THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA Group Health Insurance Monthly Rates

#### PLAN YEAR 2009 Effective 01/01/2009

### **BCBSFL - PPO (Blue Choice Plan 902)**

|                     | Monthly<br>Contract | Employee Cost |          | <u>District Cost</u> |          | COBRA      |
|---------------------|---------------------|---------------|----------|----------------------|----------|------------|
|                     | <u>Premium</u>      | Per           | Per      | Per                  | Per      | Per        |
|                     |                     | Month         | Pay (24) | Month                | Pay (24) | Month      |
| Employee Only       | \$601.50            | \$0.00        | \$0.00   | \$601.50             | \$300.75 | \$613.53   |
| Employee + Spouse   | \$1,250.12          | \$648.62      | \$324.31 | \$601.50             | \$300.75 | \$1,275.12 |
| Employee + Children | \$1,136.50          | \$535.00      | \$267.50 | \$601.50             | \$300.75 | \$1,159.23 |
| Employee + Family   | \$1,742.40          | \$1,140.90    | \$570.45 | \$601.50             | \$300.75 | \$1,777.25 |

## **BCBSFL** - HMO (Blue Care Plan 5)

|                     | Monthly<br>Contract | Employ   | Employee Cost |          | <u>District Cost</u> |            |
|---------------------|---------------------|----------|---------------|----------|----------------------|------------|
|                     | <u>Premium</u>      | Per      | Per           | Per      | Per                  | Per        |
|                     |                     | Month    | Pay (24)      | Month    | Pay (24)             | Month      |
| Employee Only       | \$486.42            | \$0.00   | \$0.00        | \$486.42 | \$243.21             | \$496.15   |
| Employee + Spouse   | \$1,011.68          | \$525.26 | \$262.63      | \$486.42 | \$243.21             | \$1,031.91 |
| Employee + Children | \$920.00            | \$433.58 | \$216.79      | \$486.42 | \$243.21             | \$938.40   |
| Employee + Family   | \$1,410.00          | \$923.58 | \$461.79      | \$486.42 | \$243.21             | \$1,438.20 |

### **BCBSFL - PPO (Blue Choice Plan 125)**

|                     | <u>Monthly</u>  | Employee Cost |          | District Cost |          | COBRA    |   |
|---------------------|-----------------|---------------|----------|---------------|----------|----------|---|
|                     | <u>Contract</u> |               |          |               |          |          |   |
|                     | <u>Premium</u>  | Per           | Per      | Per           | Per      | Per      | l |
|                     |                 | Month         | Pay (24) | Month         | Pay (24) | Month    |   |
| Employee Only       | \$331.90        | \$0.00        | \$0.00   | \$331.90      | \$165.95 | \$338.54 |   |
| Employee + Spouse   | \$689.78        | \$203.36      | \$101.68 | \$486.42      | \$243.21 | \$703.58 |   |
| Employee + Children | \$627.10        | \$140.68      | \$70.34  | \$486.42      | \$243.21 | \$639.64 |   |
| Employee + Family   | \$961.40        | \$474.98      | \$237.49 | \$486.42      | \$243.21 | \$980.63 |   |

### **BCBSFL - HMO (Blue Care Plan 15)**

|                     | Monthly<br>Contract | Employ   | ee Cost  | <u>District Cost</u> |          | COBRA      |
|---------------------|---------------------|----------|----------|----------------------|----------|------------|
|                     | <u>Premium</u>      | Per      | Per      | Per                  | Per      | Per        |
|                     |                     | Month    | Pay (24) | Month                | Pay (24) | Month      |
| Employee Only       | \$456.60            | \$0.00   | \$0.00   | \$456.60             | \$228.30 | \$465.73   |
| Employee + Spouse   | \$949.70            | \$463.28 | \$231.64 | \$486.42             | \$243.21 | \$968.69   |
| Employee + Children | \$863.60            | \$377.18 | \$188.59 | \$486.42             | \$243.21 | \$880.87   |
| Employee + Family   | \$1,323.58          | \$837.16 | \$418.58 | \$486.42             | \$243.21 | \$1,350.05 |

10/07/2008 2009 Med Rate.123

#### THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA **Group Medical Insurance Monthly Rates**

#### **PLAN YEAR 2010** Effective 01/01/2010

### **BCBSFL - PPO (Blue Choice Plan 902)**

|                     | Monthly<br>Contract | Employ     | ee Cost  | <u>District Cost</u> |          | COBRA      |
|---------------------|---------------------|------------|----------|----------------------|----------|------------|
|                     | <u>Premium</u>      | Per        | Per      | Per                  | Per      | Per        |
|                     |                     | Month      | Pay (24) | Month                | Pay (24) | Month      |
| Employee Only       | \$646.60            | \$0.00     | \$0.00   | \$646.60             | \$323.30 | \$659.53   |
| Employee + Spouse   | \$1,343.88          | \$697.28   | \$348.64 | \$646.60             | \$323.30 | \$1,370.76 |
| Employee + Children | \$1,221.74          | \$575.14   | \$287.57 | \$646.60             | \$323.30 | \$1,246.17 |
| Employee + Family   | \$1,873.08          | \$1,226.48 | \$613.24 | \$646.60             | \$323.30 | \$1,910.54 |

### **BCBSFL** - HMO (Blue Care Plan 5)

|                     | <u>Monthly</u><br><u>Contract</u> | Employee Cost |          | <u>District Cost</u> |          | COBRA      |
|---------------------|-----------------------------------|---------------|----------|----------------------|----------|------------|
|                     | <u>Premium</u>                    | Per           | Per      | Per                  | Per      | Per        |
|                     |                                   | Month         | Pay (24) | Month                | Pay (24) | Month      |
| Employee Only       | \$522.90                          | \$0.00        | \$0.00   | \$522.90             | \$261.45 | \$533.36   |
| Employee + Spouse   | \$1,087.56                        | \$564.66      | \$282.33 | \$522.90             | \$261.45 | \$1,109.31 |
| Employee + Children | \$989.00                          | \$466.10      | \$233.05 | \$522.90             | \$261.45 | \$1,008.78 |
| Employee + Family   | \$1,515.74                        | \$992.84      | \$496.42 | \$522.90             | \$261.45 | \$1,546.05 |

### **BCBSFL - PPO (Blue Choice Plan 125)**

|                     | Monthly<br>Contract | Employ   | ee Cost  | Distric  | COBRA    |            |
|---------------------|---------------------|----------|----------|----------|----------|------------|
|                     | <u>Premium</u>      | Per      | Per      | Per      | Per      | Per        |
|                     |                     | Month    | Pay (24) | Month    | Pay (24) | Month      |
| Employee Only       | \$356.80            | \$0.00   | \$0.00   | \$356.80 | \$178.40 | \$363.94   |
| Employee + Spouse   | \$741.52            | \$218.62 | \$109.31 | \$522.90 | \$261.45 | \$756.35   |
| Employee + Children | \$674.14            | \$151.24 | \$75.62  | \$522.90 | \$261.45 | \$687.62   |
| Employee + Family   | \$1,033.50          | \$510.60 | \$255.30 | \$522.90 | \$261.45 | \$1,054.17 |

### **BCBSFL - HMO (Blue Care Plan 15)**

|                     | Monthly<br>Contract | Employee Cost |          | <u>District Cost</u> |          | COBRA      |
|---------------------|---------------------|---------------|----------|----------------------|----------|------------|
|                     | <u>Premium</u>      | Per           | Per      | Per                  | Per      | Per        |
|                     |                     | Month         | Pay (24) | Month                | Pay (24) | Month      |
| Employee Only       | \$490.84            | \$0.00        | \$0.00   | \$490.84             | \$245.42 | \$500.66   |
| Employee + Spouse   | \$1,020.92          | \$498.02      | \$249.01 | \$522.90             | \$261.45 | \$1,041.34 |
| Employee + Children | \$928.36            | \$405.46      | \$202.73 | \$522.90             | \$261.45 | \$946.93   |
| Employee + Family   | \$1,422.86          | \$899.96      | \$449.98 | \$522.90             | \$261.45 | \$1,451.32 |

08/26/2009 Med Rate 2010.123



August 25, 2009

Bert Palmer Risk Manager The School Board of Sarasota County 1960 Landings Blvd Sarasota, FL 34231-3331

#### Dear Bert:

We have reviewed the factors that affect the cost of The Sarasota School District's group health benefits program and, after negotiations, offer a revised renewal of 7.5% increase above current rates with no benefit changes as follows:

#### 2010 Renewal Rates

|           | HMO High  | HMO Low   | PPO High  | PPO Low   |
|-----------|-----------|-----------|-----------|-----------|
| Single    | \$522.90  | \$490.84  | \$646.60  | \$356.80  |
| Emp/Sp    | \$1087.56 | \$1020.92 | \$1343.88 | \$741.52  |
| Emp/Child | \$989.00  | \$928.36  | \$1221.74 | \$674.14  |
| Family    | \$1515.74 | \$1422.86 | \$1873.08 | \$1033.50 |

Thank you for the opportunity to continue to serve the employees of The School Board of Sarasota County. We truly value your business and look forward to working with you as a valued partner in the future.

Sincerely

Robin T. MacDonald

Strategic Account Executive

C.C AON Consulting BCBSFL File



August 25, 2009

Mr. Bert Palmer Director, Risk Management Sarasota County Public Schools 1960 The Landings Blvd. Sarasota, FL 34231

RE: 2010 Medical Plan Renewal

Dear Mr. Palmer:

Aon Consulting has reviewed the District's 2010 Blue Cross Blue Shield of Florida (BCBSFL) renewal. This process involved reviewing the financial experience of the District's medical plan and independently assessing what a fair renewal would be. Aon performed a review of the District's experience and reviewed all assumptions used by BCBSFL in projecting 2010 claims and expenses. The project leader on this assignment was one of our qualified health actuaries, Jay Miniati, Vice President, FSA, MAAA, along with peer review by other actuaries within Aon Consulting.

For 2010, Aon Consulting was able to leverage the negotiated terms from the 2009 renewal to expedite the process. The key items that were negotiated from BCBSFL's standard renewal formula were medical trend factors, expense factors, and the incurral factors utilized to project the future claims. The savings generated from these negotiated factors was \$2.5 million. The details on the negotiated savings are as follows:

Trend factor reduction of 3.4% on HMO and 2.5% on PPO
 Expense factors reduction of 2.1% on HMO
 Incurral Factor reduction to 1.5%
 \$0.7 million
 \$0.1 million

Additionally, through year over year analysis on actual realized claim trends, Aon Consulting was able to negotiate an additional \$0.5 million on the trend factor for the 2010 renewal. Therefore the total realized savings on BCBSFL's standard factors is \$3.0 million. The net increase for Sarasota Schools is 7.5% over the 2009 rates.

Aon Consulting surveys the medical markets regarding trend rates they are experiencing in their current book of business which impacts their future pricing on upcoming renewals. Our survey includes 44 of the top medical insurers including Blue Cross Blue Shield of Florida. Below is a chart that illustrates the impact of the market trend rate over the past 5 years relative to the renewals that Sarasota Schools has experienced over the same time period.

Cumulativa

|           | 2006  | 2007  | 2008  | 2009  | 2010  | Increase<br>Since 2005 |
|-----------|-------|-------|-------|-------|-------|------------------------|
| Aon Trend |       |       |       |       |       |                        |
| Survey    | 13.2% | 12.2% | 10.9% | 10.6% | 10.5% | 72.1%                  |
| Sarasota  |       |       |       |       |       |                        |
| Schools   | 0.0%  | 9.8%  | 6.0%  | 5.0%  | 7.5%  | 31.4%                  |



Based on the negotiated rate position with BCBSFL, Aon Consulting recommends that Sarasota Schools accepts the renewal as is for the current plan design.

The current 2009 and renewed 2010 monthly rates are as follows:

#### **2009 Current Rates**

| Tier                  | <u>HMO</u>  |            | <u>PPO</u>  |          |
|-----------------------|-------------|------------|-------------|----------|
|                       | <u>High</u> | Low        | <u>High</u> | Low      |
| Employee              | \$486.42    | \$456.60   | \$601.50    | \$331.90 |
| Employee + Spouse     | \$1,011.68  | \$949.70   | \$1,250.12  | \$689.78 |
| Employee + Child(ren) | \$920.00    | \$863.60   | \$1,136.50  | \$627.10 |
| Employee + Family     | \$1,410.00  | \$1,323.58 | \$1,742.40  | \$961.40 |

#### 2010 Renewal Rates (7.5% increase)

|                       | <u>HMO</u>  |            | <u> PPO</u> |            |
|-----------------------|-------------|------------|-------------|------------|
| Tier                  | <u>High</u> | Low        | <u>High</u> | Low        |
| Employee              | \$522.90    | \$490.84   | \$646.60    | \$356.80   |
| Employee + Spouse     | \$1,087.56  | \$1,020.92 | \$1,343.88  | \$741.52   |
| Employee + Child(ren) | \$989.00    | \$928.36   | \$1,221.74  | \$674.14   |
| Employee + Family     | \$1,515.74  | \$1,422.86 | \$1,873.08  | \$1,033.50 |

We would encourage the District to continue to monitor its plans' experience monthly, and to discuss and explore ways to continue to offer affordable medical coverage to its staff.

Please do not hesitate to contact us with any questions.

Sincerely,

JR Shamley, ASA SeniorVice President

JRS/mdg