

CITY of JACKSON (ACTIVES)
ILLUSTRATIVE RATE RENEWAL SUMMARY - JULY 1, 2016
Single, Consolidated Health Care Plan for all Active City/Jackson Employees
Plan is the CURRENT Community Blue PPO\$5000/HRA Blue Cross Blue Shield of Michigan

PA 152 Design=80-20%
 07/01/2015 & 2016 - BCBS Illustrative Rates*

DETAILED RATE COMPONENT BREAKOUT EXHIBIT

Suffix	Benefit Plan Description	Single Rate	Two-Person Rate	Family Rate
Proposed Active Employee Plan @ 07/01/15 Rates:				
007000992-0019	CBPPO\$5000,OV\$10,Rx \$10/20/40 (including ACA Tax-1.5% YTD) + HR/MT/PA Fees (=\$5000/\$10,000 Ded'l Reimbursed to \$4500/\$9000, applying 20% HRA use*) BCBS Illustrative Rate: 1.5% ACA Tax: HRA Admin Fee Agent Commission Replacement Sub-Total HRA Funding—Based on 20% Use Total Medical + Rx + All Cost Components (Does NOT include Dental/Vision) PA152 - 20%: 26-Pay Period - 2014 Estimated Payroll Cost:	*\$550.84 \$8.26 \$9.00 \$10.00 \$578.10 \$75.00 \$653.10 45	\$1322.00 \$19.83 \$9.00 \$10.00 \$1360.83 \$150.00 \$1510.83 43	\$1652.51 \$24.79 \$9.00 \$10.00 \$1696.30+ \$150.00 \$1846.30 71
Proposed Active Employee Plan @ 07/01/16 Rates:				
007000992-0019	CBPPO\$5000,OV\$10,Rx \$10/20/40 (including ACA Tax-1% YTD) + HR/MT/PA Fees (=\$5000/\$10,000 Ded'l Reimbursed to \$4500/\$9000, applying 20% HRA use*) BCBS Illustrative Rate: (Reflects Reduction in Reinsurance Fee for 2016-17) 1.0% ACA Tax: HRA Admin Fee Agent Commission Replacement New HR Connection Fee Sub-Total **HRA Funding—Based on 20% Use Total Medical + Rx + All Cost Components (Does NOT include Dental/Vision) PA152 - 20%: 26-Pay Period - 2014 Estimated Payroll Cost:	*\$626.06 \$6.26 \$9.00 \$10.00 \$1.00 \$652.32 \$75.00 \$727.32 42 / 32	\$1502.53 \$15.02 \$9.00 \$10.00 \$1.00 \$1537.55 \$150.00 \$1687.55 29 / 26	\$1878.17 \$18.78 \$9.00 \$10.00 \$1.00 \$1916.95+ \$150.00 \$2066.95 79 / 8

****HRA Calculations**

Calendar Year 2015 - CBPPOHRA Use was at 19.8%**
 (Maximum HRA Exposure for Active Employees= \$1,161,000; Actual 2015 Use=\$230,201.15=19.8%)
 Thus - above HRA Funding calculation remains to be based on 20% use.

CITY of JACKSON
RENEWAL SUMMARY – Rates Effective July 1, 2015 & Renewal Rates Effective 7/1/2016
+MONTHLY Payroll Cost Summary – MEDICAL/Rx Costs Only (PA152 Calculator)

Monthly Illustrative Costs (Factor of Premium + Ded'l Funding Averages)		Single	Two Person	Family
Current City of Jackson CBPPO\$5000 Plan Rates – 7/1/2015:				
(Single Plan Offering to ALL City of Jackson Active Employees – Effective July 1, 2014)				
-See Reverse Side for 7/1/2015 Rate Components-				
0019	CBPPO\$5000, OV\$10, Rx \$10/20/40 (=\$5000/\$10,000 Reimbursed to \$500/\$1000 -- @ 20% use)	Total Medical + Rx =\$653.10	Total Medical + Rx =\$1510.83	Total Medical + Rx =\$1846.30
(No Dental/Vision)		Employee 20% Payroll Contribution \$130.62/month = \$60.28/pay	\$302.17/month = \$139.46/pay	\$369.26/month = \$170.43/pay
Current City of Jackson CBPPO\$5000 Plan Rates – 7/1/2016:				
(Illustrative Rate Components alone = 13.7%; Overall w/ Non-Blue Fixed Fees, HRA, ACA-11.5%)				
-See Reverse Side for 7/1/2016 Rate Components-				
0019	CBPPO\$5000, OV\$10, Rx \$10/20/40 (=\$5000/\$10,000 Reimbursed to \$500/\$1000 -- @ 20% use)	Total Medical + Rx =\$727.32	Total Medical + Rx =\$1687.55	Total Medical + Rx =\$2066.95
(No Dental/Vision)		Employee 20% Payroll Contribution \$145.46/month = \$67.14/pay	\$337.51/month = \$155.77/pay	\$413.39/month = \$190.80/pay

NOTE: Above Payroll Calculations are based on 20% of the stated monthly cost. This amount is then multiplied by 12 months then divided by the number of payroll periods (26).
 Per-Pay amounts listed would then be taken on a 'Pre-Tax' basis...prior to federal, state and social security income tax deductions.

ILLUSTRATIVE DENTAL & VISION RATE RENEWAL SUMMARY – JULY 1, 2016

Current City of Jackson Dental/Vision Plan Rates – 7/1/2015:		(Monthly Rates)	
<u>Illustrative VISION Rates</u>	\$8.23	\$19.75	\$24.69
<u>Illustrative DENTAL Rates</u>			
	Mape = \$31.33	Mape = \$75.21	Mape = \$94.01
	Non Mape = \$30.19	Non Mape = \$72.46	Non Mape = \$90.57
Current City of Jackson Dental/Vision Plan Rates – 7/1/2016:			
<u>Illustrative VISION Rates</u>	\$8.21	\$16.42	\$27.27
<u>Illustrative DENTAL Rates</u>			
	Mape = \$26.92	Mape = \$53.83	Mape = \$94.21
	Non Mape = \$25.94	Non Mape = \$51.86	Non Mape = \$90.76

* Above Illustrative D/V rates also include ACA Tax/Fee components