#### <u>AGENDA</u>

## BAY ARENAC BEHAVIORAL HEALTH BOARD OF DIRECTORS

#### PERSONNEL & COMPENSATION COMMITTEE MEETING

Wednesday, October 4, 2023 at 5:00 pm

William B. Cammin Clinic, Bay Room, 1010 N. Madison Avenue, Bay City, MI 48708

| Committee Members:              | Present | Excused | Absent | Committee Members:    | Present | Excused | Absent | Others Present:                |
|---------------------------------|---------|---------|--------|-----------------------|---------|---------|--------|--------------------------------|
| Ernie Krygier, Ch               |         |         |        | Robert Pawlak         |         |         |        | BABH: Jennifer Lasceski, Chris |
| Colleen Maillette, V Ch, Ex Off |         |         |        | Marie (Toni) Reese    |         |         |        | Pinter, and Sara McRae         |
| Jerome Crete                    |         |         |        | Richard Byrne, Ex Off |         |         |        | BROWN & BROWN: Angela Garner   |
| Kathy Niemiec                   |         |         |        |                       |         |         |        | Legend: M-Motion; S-Support;   |
| ,                               |         |         |        |                       |         |         |        | MA-Motion Adopted; AB-         |
|                                 |         |         |        |                       |         |         |        | Abstained                      |

|    | Agenda Item   | Discussion | Motion/Action   |
|----|---|------------|---|
| 1. | Call To Order & Roll Call   |            |   |
| 2. | Public Input (Maximum of 3 Minutes)                                   |            |   |
| 3. | Personnel Change & Vacancy Reports<br>3.1) July 2023 – September 2023 |            | 3.1) No action necessary  |
| 4. | Benefits 4.1) 2024 Health Insurance & Benefits Renewal                |            | <ul> <li>4.1) Consideration of a motion to refer the BABH 2024 Health Insurance and Benefits renewal as follows to the full board for approval: <ul> <li>Vision Insurance:</li> <li>Eye-Med – No change</li> </ul> </li> <li>Dental Insurance: <ul> <li>Change to Blue Cross Blue Shield Dental – Minimal Cost Savings</li> </ul> </li> <li>Life &amp; Disability Insurance: <ul> <li>The Standard – No change</li> </ul> </li> </ul> |

#### **AGENDA**

# BAY ARENAC BEHAVIORAL HEALTH BOARD OF DIRECTORS

#### PERSONNEL & COMPENSATION COMMITTEE MEETING

Wednesday, October 4, 2023 at 5:00 pm William B. Cammin Clinic, Bay Room, 1010 N. Madison Avenue, Bay City, MI 48708

#### Page 2 of 2

|    | 4.2) Fiscal Year 2024 Compensation<br>Proposal                                   |         | Medical & Prescription Insurance for Active Staff & Early Retirees:     Blue Cross Blue Shield — Rate increases in premiums based on plan design     Medical & Prescription Insurance for Medicare Eligible Retirees:     Blue Cross Blue Shield Medicare Advantage Plan — No rate increases  4.2) No action necessary |
|----|--|---------|--|
| 5. | Unfinished Business<br>5.1) None   |         |  |
| 6. | New Business 6.1) Special Personnel & Compensation Committee Meeting in December |         | 6.1) No action necessary   |
| 7. | Adjournment  | M – S – | pm MA  |

#### Bay-Arenac Behavioral Health Personnel Change and Vacancy Report

#### July 2023

| New Hires | ··· <b>,</b> |         |            |                                     |
|-----------|--------------|---------|------------|-------------------------------------|
| Name      | Title        | Program | Start Date | New Position (N)<br>Replacement (R) |
|           |              |         |            |                                     |

#### Transfers/Reclassification

| Name              | Position<br>Previous/New  | Program<br>Prior/New               | Effective Date |
|-------------------|---|------------------------------------|----------------|
| Maryssa Schneider | From: Client Services Specialist – Family Support To: Home-Based Services Clinical Specialist                         | Both positions within Primary Care | 07/03/2023     |
| Minerva Gonzalez  | From: Access/ES Specialist – Casual To: Client Services Specialist – Family Support and Access/ES Specialist – Casual | Both positions within Primary Care | 07/10/2023     |

**Departures** 

| Name              | Title                                 | Program              | Hire Date  | Departure Date |
|-------------------|---------------------------------------|----------------------|------------|----------------|
| Renee Vincent     | Secretary II – Temp, Casual           | Primary Care         | 04/22/2002 | 06/27/2023     |
| Amber Ouellette   | Direct Support Professional           | Specialty Care       | 03/01/2023 | 06/30/2023     |
| Carrie Rittenberg | Mental Health Nurse – Community-based | Psychiatric Services | 08/08/2016 | 07/07/2023     |
| Paige Coldwell    | Team Lead – North Bay                 | Specialty Care       | 02/01/2018 | 07/14/2023     |

#### **Posted Vacancies**

| Position  | Program              | Posting Date  | New Position (N)<br>Replacement (R)<br>On Hold (H) |
|---|----------------------|---------------|--|
| Clinical Specialist – Outpatient Therapist (2)                          | Primary Care         | February 2023 | N  |
| Psychologist  | Psych Services       | February 2023 | R  |
| Clinical Specialist–Crisis Stab/Mobile Response (4P – 12A)              | Primary Care         | February 2023 | N  |
| Clinical Specialist/Therapist – ACT                                     | Primary Care         | March 2023    | R  |
| Intake and Emergency Services Clinical Specialist – Arenac (1 position) | Arenac Center        | March 2023    | R  |
| Client Services Specialist – MI Adult Team (1 position)                 | Primary Care         | April 2023    | N  |
| Access/Emergency Services Specialist (9P - 7A)                          | Primary Care         | May 2023      | R  |
| Home-based Clinical Specialist  | Primary Care         | May 2023      | R  |
| Mental Health Nurse – ACT   | Primary Care         | June 2023     | R  |
| Clinical Team Leader – Adult MI   | Primary Care         | June 2023     | R  |
| Psychiatrist  | Psychiatric Services | June 2023     | R  |
| Mental Health Nurse - Community   | Psychiatric Services | June 2023     | R  |
| Direct Support Professional (2 full-time)                               | Specialty Care       | July 2023     | R  |
| Residential Technician – FT 2 <sup>nd</sup> (3), PT 2 <sup>nd</sup> (1) | Specialty Care       | July 2023     | R/N  |

07/01/2023

#### Bay-Arenac Behavioral Health Personnel Change and Vacancy Report

#### August 2023

| New Hires | New | Hires |
|-----------|-----|-------|
|-----------|-----|-------|

| Name             | Title  | Program              | Start Date   | New Position (N)<br>Replacement (R) |
|------------------|--|----------------------|--|-------------------------------------|
| Kaylee O'Hara    | Co-op Secretary  | Psychiatric Services | 08/03/2023 – NEO<br>08/22/2023 – Madison               | R                                   |
| Chrystal Gleeson | Mental Health Nurse – Advanced Health and Community      | Psychiatric Services | 08/14/2023   | R                                   |
| Taylor Keyes     | Clinical Team Leader – Adult MI                          | Primary Care         | 08/21/2023   | R                                   |
| Justin Kerr      | Residential Technician – Full-time 2 <sup>nd</sup> Shift | Specialty Care       | 08/21/2023 – GHC Training<br>08/23/23 – Horizon Home   | R                                   |
| Sean Locey       | Residential Technician – Full-time 2 <sup>nd</sup> Shift | Specialty Care       | 08/21/2023 – GHC Training<br>08/24/2023 – Horizon Home | R                                   |
| Heidi Nixon      | Client Services Specialist – MI Adult Team               | Primary Care         | 08/28/2023   | N                                   |

#### Transfers/Reclassification

| Name | Position<br>Previous/New | Program<br>Prior/New | Effective Date |
|------|--------------------------|----------------------|----------------|
|      |                          |                      |                |

#### Departures

| Name              | Title  | Program        | Hire Date  | Departure Date |
|-------------------|--|----------------|------------|----------------|
| Renate Galloway   | Access/Emergency Services Clinical Specialist            | Primary Care   | 09/27/2021 | 07/26/2023     |
| Margaret Dixon    | Access/Emergency Services Specialist – Casual            | Primary Care   | 05/31/2011 | 07/31/2023     |
| Crystal Samuelson | Residential Technician – Full-time 2 <sup>nd</sup> Shift | Specialty Care | 12/13/2021 | 08/03/2023     |
| Lisa Hoy          | Mental Health Nurse – ACT                                | Primary Care   | 06/05/2023 | 08/25/2023     |
| Toni Brett        | Direct Support Professional                              | Specialty Care | 04/15/1996 | 08/25/2023     |

#### **Posted Vacancies**

| Position   | Program              | Posting Date  | New Position (N)<br>Replacement (R)<br>On Hold (H) |
|--|----------------------|---------------|--|
| Clinical Specialist – Outpatient Therapist (2)                 | Primary Care         | February 2023 | N  |
| Psychologist   | Psych Services       | February 2023 | R  |
| Clinical Specialist–Crisis Stab/Mobile Response (4P – 12A)     | Primary Care         | February 2023 | N  |
| Clinical Specialist/Therapist – ACT                            | Primary Care         | March 2023    | R  |
| Intake and Emergency Services Clinical Specialist – Arenac (1) | Arenac Center        | March 2023    | R  |
| Access/Emergency Services Specialist (9P - 7A)                 | Primary Care         | May 2023      | R  |
| Home-based Clinical Specialist                                 | Primary Care         | May 2023      | R  |
| Mental Health Nurse – Advanced Health and Community (1)        | Psychiatric Services | June 2023     | R  |
| Mental Health Nurse – ACT (2)                                  | Primary Care         | June 2023     | R  |
| Psychiatrist   | Psychiatric Services | June 2023     | R  |
| Direct Support Professional (3 full-time)                      | Specialty Care       | July 2023     | R  |
| Residential Technician – FT 2 <sup>nd</sup> (1)                | Specialty Care       | July 2023     | R/N  |

08/01/2023

### Bay-Arenac Behavioral Health Personnel Change and Vacancy Report

#### September 2023

| w Hires              | ооргония 2020  |                      |  |                                     |
|----------------------|--|----------------------|--|-------------------------------------|
| Name                 | Title  | Program              | Start Date   | New Position (N)<br>Replacement (R) |
| Citlalli Licea       | Co-op Secretary  | Psychiatric Services | 08/22/2023   | R                                   |
| Angelina Schillinger | Mental Health Nurse – ACT                                | Primary Care         | 09/05/2023   | R                                   |
| Elise Rechsteiner    | Mental Health Nurse – ACT                                | Primary Care         | 09/11/2023   | R                                   |
| Everleigh Wicker     | Residential Technician – Full-time 2 <sup>nd</sup> Shift | Specialty Care       | 09/11/2023 – GHC Training<br>09/13/2023 – Horizon Home | R                                   |
| Rashell Byrski       | Intake and Emergent Services Clinical Specialist         | Arenac Center        | 09/18/2023   | R                                   |
| Amber Trout          | Mental Health Nurse – Advanced Health and Community      | Psychiatric Services | 09/18/2023   | R                                   |

Transfers/Reclassification

| Name | Position<br>Previous/New | Program<br>Prior/New | Effective Date |  |  |  |
|------|--------------------------|----------------------|----------------|--|--|--|
|      |                          |                      |                |  |  |  |

**Departures** 

| Name                  | Title  | Program              | Hire Date  | Departure Date |
|-----------------------|--|----------------------|------------|----------------|
| Justin Kerr           | Residential Technician – Full-time 2 <sup>nd</sup> Shift | Specialty Care       | 08/21/2023 | 08/29/2023     |
| Shaun Beyer, Jr.      | Direct Support Professional                              | Specialty Care       | 08/02/2022 | 09/20/2023     |
| Katherine Chamberlain | Psychiatrist   | Psychiatric Services | 10/01/2012 | 09/30/2023     |

#### **Posted Vacancies**

| Position   | Program              | Posting Date  | New Position (N)<br>Replacement (R)<br>On Hold (H) |
|--|----------------------|---------------|--|
| Clinical Specialist – Outpatient Therapist (2) (on-hold)                       | Primary Care         | February 2023 | Н  |
| Psychologist (on-hold)   | Psych Services       | February 2023 | Н  |
| Clinical Specialist/Therapist – ACT  | Primary Care         | March 2023    | R  |
| Access/Emergency Services Specialist (9P - 7A)                                 | Primary Care         | May 2023      | R  |
| Home-based Clinical Specialist   | Primary Care         | May 2023      | R  |
| Psychiatrist   | Psychiatric Services | June 2023     | R  |
| Direct Support Professional (4 full-time)                                      | Specialty Care       | July 2023     | R  |
| Residential Technician – Full-time 2 <sup>nd</sup> , Part-time 2 <sup>nd</sup> | Specialty Care       | August 2023   | R  |
| Client Services Specialist – Adult MI  | Primary Care         | August 2023   | R  |

09/01/2023



October 4, 2023

Ms. Jennifer Lasceski, HR Director Bay Arenac Behavioral Health 201 Mulholland Bay City, MI. 48708

Re: 2024 Insurance Renewal

Dear Ms. Lasceski:

Brown & Brown has received Bay Arenac Behavioral Health's (BABH) 2024 renewals. It is important to note that claims experience has risen in late 2022 and 2023. There are two main reasons for this. Post COVID the group's claims (like other groups) are experiencing many more claims due to the following reasons:

- Access to services shut down during COVID are now back open
- Delay in members seeking and receiving services have complicated conditions and increased expenses related to those conditions
- Access to providers is delayed, meaning members can't timely make appointments and schedule services due to shortages of medical personnel
- Increase in some medications like GLP-1's for anti-obesity medications at approximately \$1,300 per dose
- State of Michigan Public Act 152 of 2011 caps employer's expenses for healthcare at a stated hard cap every year

The combination of the above items has forced BABH's cost for health care (medical and pharmacy for actives and early retirees) to \$3,641,720.04 for 2024 from \$2,748,182 in 2023 based upon current census. This is an \$893,538 increase or 32.51% higher than the previous year.

Pursuant to your request, Brown and Brown solicited proposals from other insurance companies for Bay Arenac Behavioral Health, Medical, Pharmacy, and Dental for both active and retired employees. A total of nine (9) companies were solicited and six (6) companies submitted proposals. Vision (EyeMed) and Life and Disability (Standard) were in rate holds, meaning no increase on those rates for another year. Blue Cross Blue Shield Medicare Advantage offered a one year rate hold for a 0% increase for those services.

Based upon the results and limitations put on BABH by the claims experience and renewal trend, I am recommending BABH consider alternate options with Blue Cross Blue Shield, Increase the dental benefit with Blue Cross Blue Shield. For BCBS, we have are recommending alternate options that modifies existing benefits and adds a high deductible option and provides a lower cost HMO option through BCN. In addition, offering retirees who pay for retiree healthcare for themselves and/or a spouse a lower premium plan matching the actives HMO option. It is to be noted that based upon most recent 12 months of claims, there is only a 5.8% disruption of claims that would be outside of the network and the majority of those are retiree claims outside of Michigan.

The Resulting Changes show Renewing as is over 2023 and then with changes, capping overall cost to BABH at or nearing Hard caps. Estimate for 2024 is showing everyone in the Base Plan

(new PPO Option) Renewal rates with recommended changes are compared to current rates and totals on page three (3).

In addition, recommending changing premium share for the base plan to 12% and HRA contributions to \$150/\$300 and allowing employees to utilize remaining HRA balances for 2024 with possible elimination for 2025. A buy down BCN HMO plan with 10% premium sharing and similar HRA contributions to \$150/\$300 and allowing employees to utilize remaining HRA balances for 2024 with possible elimination for 2025. The third option for employees would be a BCBS high deductible health plan with a health savings account and HSA contributions up to the PA 152 hard cap for 2024.

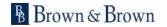
The table on the next page does not include active employer and employee premium sharing, include active and retiree coverage and does include any estimated taxes and fees. For the 2024 plan year, BCBS is giving an approximate \$10,000 implementation credit to switch to BCBS Dental to Bay Arenac Behavioral Health that isn't included in the table above. Additional material is presented within this document for your review. Please note that all taxes and fees are estimates. Final amounts may not be available until the first invoice received by the carriers and after elections of plan choices are made by members. Please review those invoices to ensure they correlate with the renewal information provided. We remain committed to giving you the highest level of service and look forward to working with you during the coming year. Please feel free to contact me if you have any questions. Thank you.

Sincerely,

Angela Garner, MBA, CEBS

**Executive Vice President** 

Prepared by: Angela Garner Effective Date: January 1, 2024



|  |  |   |   | BCBS PPO (HRA), BCN HMO   |  |
|--|--|---|---|---|--|
| ACTIVE MEDICAL   | CURRENT  | RENEWAL   | RENEWAL LIFESTYLE REMOVED   | (HRA), BCBS HDHP (HSA)  |  |
| Total Monthly Premium  | \$201,197.89   | \$269,230.84  | \$267,476.61  | \$241,743.33  |  |
| Total Annualized Cost  | \$2,414,374.68   | \$3,230,770.08  | \$3,209,719.32  | \$2,900,919.96  |  |
| Annualized Dollar Change From Current  |  | \$816,395.40  | \$795,344.64  | \$486,545.28  |  |
| Annualized Percentage Change From Current  |  | 33.81%  | 32.94%  | 20.15%  |  |
|  |  | 204   | 204   | 204 All in Base   |  |
|  |  |   |   | Lower if alternate chosen   |  |
| EARLY RETIREE MEDICAL  | CURRENT  | RENEWAL   | RENEWAL LIFESTYLE REMOVED   | RECOMMENDATIONS   |  |
| Total Monthly Premium  | \$19,480.56  | \$25,909.08   | \$25,525.94   | \$25,525.94   |  |
| Total Annualized Cost  | \$233,766.72   | \$310,908.96  | \$306,311.28  | \$306,311.28  |  |
| Annualized Dollar Change From Current  |  | \$77,142.24   | \$72,544.56   | \$72,544.56   |  |
| Annualized Percentage Change From Current  |  | 33.00%  | 31.03%  | 31.03%  |  |
|  |  | 352   | 352   | 352 All in Base   |  |
|  |  |   |   | Lower if alternate chosen   |  |
| BCBS Medicare Advantage BCBS   | CURRENT  | RENEWAL   | RENEWAL   | RENEWAL   |  |
| Total Monthly Premium  | \$12,924.52  | \$12,924.52   | \$12,924.52   | \$12,924.52   |  |
| Total Annualized Cost  | \$155,094.24   | \$155,094.24  | \$155,094.24  | \$155,094.24  |  |
| Annualized Dollar Change From Current  |  | \$0.00  | \$0.00  | \$0.00  |  |
| Annualized Percentage Change From Current  |  | 0.00%   | 0.00%   | 0.00%   |  |
|  |  | 62  | 62  | 62  |  |
|  |  |   |   |   |  |
| DENTAL   | CURRENT  | RENEWAL   | RENEWAL   | BCBS Increased Benefit  |  |
| The state of the s | 610 100 10   | 00.000.40   | \$9,858.48  | \$10,128.67   |  |
| Total Monthly Premium  | \$10,198.10  | \$9,858.48  | ¥ 1,000 01 10   | \$10,120.07   |  |
| Total Annualized Cost  | \$10,198.10  | \$9,858.48  | \$118,301.76  | \$121,544.04  |  |
|  |  |   |   |   |  |
| Total Annualized Cost  |  | \$118,301.76  | \$118,301.76  | \$121,544.04  |  |
| Total Annualized Cost Annualized Dollar Change From Current  |  | \$118,301.76<br>(\$4,075.44)  | \$118,301.76<br>(\$4,075.44)  | \$121,544.04<br>(\$833.16)  |  |
| Total Annualized Cost Annualized Dollar Change From Current  |  | \$118,301.76<br>(\$4,075.44)<br>-3.33%  | \$118,301.76<br>(\$4,075.44)<br>-3.33%  | \$121,544.04<br>(\$833.16)<br>-0.68%  |  |
| Total Annualized Cost Annualized Dollar Change From Current  |  | \$118,301.76<br>(\$4,075.44)<br>-3.33%  | \$118,301.76<br>(\$4,075.44)<br>-3.33%  | \$121,544.04<br>(\$833.16)<br>-0.68%  |  |
| Total Annualized Cost  Annualized Dollar Change From Current  Annualized Percentage Change From Current  | \$122,377.20   | \$118,301.76<br>(\$4,075.44)<br>-3.33%<br>258   | \$118,301.76<br>(\$4,075.44)<br>-3.33%<br>258   | \$121,544.04<br>(\$833.16)<br>-0.68%<br>258   |  |
| Total Annualized Cost  Annualized Dollar Change From Current  Annualized Percentage Change From Current  VISION - EYEMED   | \$122,377.20<br>CURRENT  | \$118,301.76<br>(\$4,075.44)<br>-3.33%<br>258   | \$118,301.76<br>(\$4,075.44)<br>-3.33%<br>258   | \$121,544.04<br>(\$833.16)<br>-0.68%<br>258   |  |
| Total Annualized Cost  Annualized Dollar Change From Current  Annualized Percentage Change From Current  VISION - EYEMED  Total Monthly Premium  | \$122,377.20  CURRENT \$2,050.16                                   | \$118,301.76<br>(\$4,075.44)<br>-3.33%<br>258<br>RENEWAL<br>\$2,050.16  | \$118,301.76<br>(\$4,075.44)<br>-3.33%<br>258<br>RENEWAL<br>\$2,050.16  | \$121,544.04<br>(\$833.16)<br>-0.68%<br>258<br>RENEWAL<br>\$2,050.16                                      |  |
| Total Annualized Cost  Annualized Dollar Change From Current  Annualized Percentage Change From Current  VISION - EYEMED  Total Monthly Premium  Total Annualized Cost   | \$122,377.20  CURRENT \$2,050.16                                   | \$118,301.76<br>(\$4,075.44)<br>-3.33%<br>258<br>RENEWAL<br>\$2,050.16<br>\$24,601.92                           | \$118,301.76<br>(\$4,075.44)<br>-3.33%<br>258<br>RENEWAL<br>\$2,050.16<br>\$24,601.92                           | \$121,544.04<br>(\$833.16)<br>-0.68%<br>258<br>RENEWAL<br>\$2,050.16<br>\$24,601.92                       |  |
| Total Annualized Cost  Annualized Dollar Change From Current  Annualized Percentage Change From Current  VISION - EYEMED  Total Monthly Premium  Total Annualized Cost  Annualized Dollar Change From Current  | \$122,377.20  CURRENT \$2,050.16                                   | \$118,301.76<br>(\$4,075.44)<br>-3.33%<br>258<br>RENEWAL<br>\$2,050.16<br>\$24,601.92<br>\$0.00                 | \$118,301.76<br>(\$4,075.44)<br>-3.33%<br>258<br>RENEWAL<br>\$2,050.16<br>\$24,601.92<br>\$0.00                 | \$121,544.04 (\$833.16) -0.68% 258  RENEWAL \$2,050.16 \$24,601.92 \$0.00                                 |  |
| Total Annualized Cost  Annualized Dollar Change From Current  Annualized Percentage Change From Current  VISION - EYEMED  Total Monthly Premium  Total Annualized Cost  Annualized Dollar Change From Current  | \$122,377.20  CURRENT \$2,050.16                                   | \$118,301.76<br>(\$4,075.44)<br>-3.33%<br>258<br>RENEWAL<br>\$2,050.16<br>\$24,601.92<br>\$0.00<br>0.00%        | \$118,301.76<br>(\$4,075.44)<br>-3.33%<br>258<br>RENEWAL<br>\$2,050.16<br>\$24,601.92<br>\$0.00<br>0.00%        | \$121,544.04 (\$833.16) -0.68% 258  RENEWAL \$2,050.16 \$24,601.92 \$0.00 0.00%                           |  |
| Total Annualized Cost  Annualized Dollar Change From Current  Annualized Percentage Change From Current  VISION - EYEMED  Total Monthly Premium  Total Annualized Cost  Annualized Dollar Change From Current  | \$122,377.20  CURRENT \$2,050.16                                   | \$118,301.76<br>(\$4,075.44)<br>-3.33%<br>258<br>RENEWAL<br>\$2,050.16<br>\$24,601.92<br>\$0.00<br>0.00%        | \$118,301.76<br>(\$4,075.44)<br>-3.33%<br>258<br>RENEWAL<br>\$2,050.16<br>\$24,601.92<br>\$0.00<br>0.00%        | \$121,544.04 (\$833.16) -0.68% 258  RENEWAL \$2,050.16 \$24,601.92 \$0.00 0.00%                           |  |
| Total Annualized Cost Annualized Dollar Change From Current Annualized Percentage Change From Current  VISION - EYEMED Total Monthly Premium Total Annualized Cost Annualized Dollar Change From Current Annualized Percentage Change From Current   | \$122,377.20  CURRENT \$2,050.16 \$24,601.92                       | \$118,301.76<br>(\$4,075.44)<br>-3.33%<br>258<br>RENEWAL<br>\$2,050.16<br>\$24,601.92<br>\$0.00<br>0.00%<br>258 | \$118,301.76<br>(\$4,075.44)<br>-3.33%<br>258<br>RENEWAL<br>\$2,050.16<br>\$24,601.92<br>\$0.00<br>0.00%<br>258 | \$121,544.04 (\$833.16) -0.68% 258  RENEWAL \$2,050.16 \$24,601.92 \$0.00 0.00% 258                       |  |
| Total Annualized Cost  Annualized Dollar Change From Current  Annualized Percentage Change From Current  VISION - EYEMED  Total Monthly Premium  Total Annualized Cost  Annualized Dollar Change From Current  Annualized Percentage Change From Current  Cost Comparison - Total  | \$122,377.20  CURRENT \$2,050.16 \$24,601.92  CURRENT              | \$118,301.76<br>(\$4,075.44)<br>-3.33%<br>258<br>RENEWAL<br>\$2,050.16<br>\$24,601.92<br>\$0.00<br>0.00%<br>258 | \$118,301.76 (\$4,075.44) -3.33% 258  RENEWAL \$2,050.16 \$24,601.92 \$0.00 0.00% 258                           | \$121,544.04 (\$833.16) -0.68% 258  RENEWAL \$2,050.16 \$24,601.92 \$0.00 0.00% 258  RENEWAL              |  |
| Total Annualized Cost  Annualized Dollar Change From Current  Annualized Percentage Change From Current  VISION - EYEMED  Total Monthly Premium  Total Annualized Cost  Annualized Dollar Change From Current  Annualized Percentage Change From Current  Cost Comparison - Total  Total Monthly Premium   | \$122,377.20  CURRENT \$2,050.16 \$24,601.92  CURRENT \$245,851.23 | \$118,301.76<br>(\$4,075.44)<br>-3.33%<br>258<br>RENEWAL<br>\$2,050.16<br>\$24,601.92<br>\$0.00<br>0.00%<br>258 | \$118,301.76 (\$4,075.44) -3.33% 258  RENEWAL \$2,050.16 \$24,601.92 \$0.00 0.00% 258  RENEWAL \$317,835.71     | \$121,544.04 (\$833.16) -0.68% 258  RENEWAL \$2,050.16 \$24,601.92 \$0.00 0.00% 258  RENEWAL \$292,372.62 |  |

Prepared by: Angela Garner Effective Date: January 1, 2024

#### BCBSM

Brown & Brown

Simply Blue PPO RENEWAL 2024 Comparison to 2023 Rates

PA 152 Analysis

| A 152 Analys | 15     |                   |             |                          |                |  |                     |                |                   |             |                                |                |                                 |
|--------------|--------|-------------------|-------------|--------------------------|----------------|--|---------------------|----------------|-------------------|-------------|--------------------------------|----------------|---------------------------------|
|              |        | 2024              |             |                          |                |  |                     |                | 2023              |             |                                |                |                                 |
|              | Census | SB \$1,000 - 0007 | HRA @ 45%   | Outpatient MH and SA HRA | TOTAL          | BUY UP EMPLOYEE PREMIUM SHARING        | EMPLOYER<br>PORTION | PA 152         | SB \$1,000 - 0007 | HRA @ 45%   | Outpatient<br>MH and SA<br>HRA | 2023 TOTAL     | BUY UP EMPLOYEE PREMIUM SHARING |
| Single       | 20     | \$749.93          | \$37.50     | \$4.00                   | \$791.43       | \$123.13                               | \$668.30            | \$641.90       | \$561.20          | \$37.50     | \$4.00                         | \$602.70       | \$98.44                         |
| 2 Person     | 13     | \$1,799.84        | \$75.00     | \$8.00                   | \$1,882.84     | \$287.10                               | \$1,595.75          | \$1,342.42     | \$1,346.87        | \$75.00     | \$8.00                         | \$1,429.87     | \$227.80                        |
| Family       | 23     | \$2,249.80        | \$75.00     | \$8.00                   | \$2,332.80     | \$348.36                               | \$1,984.44          | \$1,750.65     | \$1,683.59        | \$75.00     | \$8.00                         | \$1,766.59     | \$274.26                        |
|              | 56     | \$90,141.92       | \$3,450.00  | \$368.00                 | \$93,959.92    | \$14,207.10                            | \$79,752.82         | \$70,554.57    | \$67,455.88       | \$3,450.00  | \$368.00                       | \$71,273.88    | \$11,238.07                     |
|              |        | 33.63%            |             |                          |                |  |                     |                |                   |             |                                |                |                                 |
|              | Census | SB \$1,500 - 0008 | HRA @ 45%   | Outpatient MH and SA HRA | TOTAL          | I 0%<br>EMPLOYEE<br>PREMIUM<br>SHARING | EMPLOYER<br>PORTION | PA 152         | SB \$1,500 - 0008 | HRA @ 45%   | Outpatient<br>MH and SA<br>HRA | 2023 TOTAL     | I0% EMPLOYEE PREMIUM SHARING    |
| Single       | 43     | \$719.81          | \$18.75     | \$4.00                   | \$742.56       | \$74.26                                | \$668.30            | \$641.90       | \$537.54          | \$18.75     | \$4.00                         | \$560.29       | \$56.03                         |
| 2 Person     | 32     | \$1,727.55        | \$37.50     | \$8.00                   | \$1,773.05     | \$177.31                               | \$1,595.75          | \$1,342.42     | \$1,290.12        | \$37.50     | \$8.00                         | \$1,335.62     | \$133.56                        |
| Family       | 43     | \$2,159.43        | \$37.50     | \$8.00                   | \$2,204.93     | \$220.49                               | \$1,984.44          | \$1,750.65     | \$1,612.65        | \$37.50     | \$8.00                         | \$1,658.15     | \$165.82                        |
|              | 118    | \$179,088.92      | \$3,618.75  | \$772.00                 | \$183,479.67   | \$18,347.97                            | \$165,131.70        | \$145,837.43   | \$133,742.01      | \$3,618.75  | \$772.00                       | \$138,132.76   | \$13,813.28                     |
|              |        | 33.91%            |             |                          |                |  |                     |                |                   |             |                                |                |                                 |
| Monthly      | 174    | \$269,230.84      | \$7,068.75  | \$1,140.00               | \$277,439.59   | \$32,555.07                            | \$244,884.52        | \$216,392.00   | \$201,197.89      | \$7,068.75  | \$1,140.00                     | \$209,406.64   | \$25,051.35                     |
| Annually     |        | \$3,230,770.08    | \$84,825.00 | \$13,680.00              | \$3,329,275.08 | \$390,660.85                           | \$2,938,614.23      | \$2,596,704.03 | \$2,414,374.68    | \$84,825.00 | \$13,680.00                    | \$2,512,879.68 | \$300,616.16                    |
|              | _      | 33.81%            | 16.13%      |                          | 32.49%         | 30.0%                                  | 32.8%               |                |                   |             |                                |                |                                 |
|              |        |                   |             |                          |                | RETIREE                                |                     |                |                   |             | Outpatient                     |                | RETIREE                         |

|          | Census | SB \$500 - 0009 |
|----------|--------|-----------------|
| Single   | 28     | \$789.91        |
| 2 Person | 2      | \$1,895.80      |
| Family   | 0      | \$2,369.75      |
| Monthly  | 30     | \$25,909.08     |
| Annually |        | \$310,908.96    |
|          |        | 33.00%          |

| Outpatient MH and SA HRA | TOTAL        | RETIREE<br>PREMIUM<br>SHARING | EMPLOYER<br>PORTION |
|--------------------------|--------------|-------------------------------|---------------------|
| \$4.00                   | \$793.91     |                               |                     |
| \$8.00                   | \$1,903.80   | VARIES                        | VARIES              |
| \$8.00                   | \$2,377.75   | VARIES                        | VARIES              |
| \$128.00                 | \$26,037.08  |                               |                     |
| \$1,536.00               | \$312,444.96 | \$0.00                        | \$0.00              |
|                          | 32.78%       |                               |                     |

| SB \$500 - 0009 |
|-----------------|
| \$593.92        |
| \$1,425.40      |
| \$1,781.75      |
| \$19,480.56     |
| \$233,766.72    |
|                 |

| Outpatient<br>MH and SA<br>HRA | 2023 TOTAL   | RETIREE<br>PREMIUM<br>SHARING |
|--------------------------------|--------------|-------------------------------|
| \$4.00                         | \$597.92     |                               |
| \$8.00                         | \$1,433.40   | VARIES                        |
| \$8.00                         | \$1,789.75   | VARIES                        |
| \$128.00                       | \$19,608.56  |                               |
| \$1,536.00                     | \$235,302.72 | \$0.00                        |

| Monthly     | 204 | \$295,139.92   | \$7,068.75  | \$1,268.00  | \$303,476.67   |
|-------------|-----|----------------|-------------|-------------|----------------|
| Annually    |     | \$3,541,679.04 | \$84,825.00 | \$15,216.00 | \$3,641,720.04 |
| \$ Increase |     | \$893,537.64   | \$0.00      | \$0.00      | \$893,537.64   |
| % Increase  |     |                | 0.00%       | 0.00%       | 32.51%         |

| \$220,678.45   | \$7,068.75  | \$1,268.00  | \$229,015.20   |
|----------------|-------------|-------------|----------------|
| \$2,648,141.40 | \$84,825.00 | \$15,216.00 | \$2,748,182.40 |

Prepared by: Angela Garner Effective Date: January 1, 2024



|   |   | REN                                     | EWAL                     |   |   | RENE        | EWAL            |   |  | RENE        | WAL                                     |            |
|---|---|---|--------------------------|---|---|-------------|-----------------|---|--|-------------|---|------------|
|   |   | ВС                                      | вѕм                      |   |   | ВС          | вѕм             |   |  | ВС          | BSM                                     |            |
| Medical / Rx  |   | Simply Blue                             | \$1,000 / \$2,00         | 00                                      | •                                       | imply Blue  | \$1,500 / \$3,0 | 00                                      |  | Simply Blue | \$500 / \$1.00                          | 0          |
|   |   |   | - Active                 |   | •                                       |             | Active          | 00                                      | •  |             | Retiree                                 | Ů          |
| Benefit Comparison  |   |   | etwork                   |   |   |             | etwork          |   |  |             | twork                                   |            |
| Annual Deductible/Individual                              |   |   | ,000                     |   |   |             | .500            |   |  |             | 500                                     |            |
| Annual Deductible/Family                                  |   | •                                       | 2,000                    |   |   |             | .000            |   | ,  | \$1,        |   |            |
| Coinsurance   |   |   | 2,500/\$5,000            |   |   |             | 00/\$5,000      |   | ***************************************      |             | ,500/\$3,000                            |            |
| Office Visit/Exam   | <b> </b>                                |   | 30                       |   |   |             | 30              |   |  | ·····       | 20                                      |            |
| Outpatient Specialist Visit                               | <b>-</b>                                |   | 30                       |   |   |             | 30              |   |  |             | 20                                      |            |
| Telemedicine  |   |   | \$0                      |   | *************************************** |             | 0               |   | ***************************************      |             | 50                                      |            |
| Chiropractic  |   | \$30;                                   | 24 Visits                |   |   | \$30;2      | 4 Visits        |   | /······                                      | \$20;2      | 4 Visits                                |            |
| Annual Out-of-Pocket Limit/Individual                     |   | \$6                                     | 5,350                    |   | *************************************** | \$6,        | ,350            |   |  | \$6,        | 350                                     |            |
| Annual Out-of-Pocket Limit/Family                         |   | \$1                                     | 2,700                    |   |   | \$12        | 2,700           |   | <b>,</b>                                     | \$12        | ,700                                    |            |
| Emergency Room  | <b></b>                                 | \$                                      | 150                      | *************************************** |   | \$          | 150             | ***********************                 | <b>*************************************</b> | \$1         | 50                                      |            |
| Urgent Care Facility                                      |   | \$                                      | 30                       |   |   | \$          | 30              |   |  | \$          | 20                                      |            |
| Inpatient Hospitalization - Substance Abuse/Mental Health |   | 20% after                               | deductible               |   | *************************************** | 20% after   | deductible      |   | ***************************************      | 20% after   | deductible                              |            |
| Outpatient Services - Substance Abuse/Mental Health       |   | \$                                      | 30                       |   |   | \$          | 30              |   |  | \$          | 20                                      |            |
| Prescription Drug Benefits                                |   | In-N                                    | etwork                   |   |   | In-Ne       | etwork          |   |  | In-Ne       | twork                                   |            |
| Generic   |   | \$                                      | 10                       |   |   | \$          | 10              |   |  | \$          | 10                                      |            |
| Preferred Specialty                                       |   | \$                                      | 80                       |   | ı                                       | 5% but no m | ore than \$1    | 50                                      |  | \$          | 80                                      |            |
| Non-preferred Specialty                                   |   | 9                                       | 80                       |   | 2                                       | 5% but no m | ore than \$30   | 00                                      |  | \$          | 80                                      |            |
| Brand (Formulary/Preferred)                               | \$40                                    |   | ************************ | \$40                                    |   | \$40        |                 |   |  |             |   |            |
| Brand (Non-Formulary/Non-preferred)                       |   |   | 80                       |   | *************************************** | \$          | 80              |   | ***************************************      | \$          | 80                                      |            |
| Number of Days Supply                                     |   | 30                                      | Days                     |   |   | 30          | Days            |   |  | 30 I        | Days                                    |            |
| Mail Order  |   | *************************************** |                          | *************************************** |   |             |                 |   | ***************************************      |             | *************************************** |            |
| Generic   |   | \$                                      | 20                       |   |   | \$          | 20              |   |  | \$          | 20                                      |            |
| Preferred Specialty                                       |   | No C                                    | overage                  | *************************************** |   | No Co       | overage         |   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,      | \$1         | 60                                      |            |
| Non-preferred Specialty                                   | *************************************** |   | overage                  |   | No Coverage                             |             | \$160           |   |  |             |   |            |
| Brand (Formulary/Preferred)                               | *************************************** |   | 080                      |   | *************************************** |             | 80              | *************************************** |  | \$          | 80                                      |            |
| Brand (Non-Formulary/Non-preferred)                       |   | \$                                      | 160                      |   |   | \$          | 160             |   |  | \$1         | 60                                      |            |
| Number of Days Supply for Mail Order                      | *************************************** |   | Days                     |   |   |             | Days            |   | ***************************************      |             | Days                                    |            |
|   |   | Rate                                    | s Table                  |   |   | Rates       | Table           |   |  | Rates       | Table                                   |            |
| Rates   | Counts                                  | Tier                                    | Premium                  | Medical /                               | Counts                                  | Tier        | Premium         | Medical /                               | Counts                                       | Tier        | Premium                                 | Medical /  |
|   | 20                                      | EE Only                                 | \$14,998.60              | \$749.93                                | 43                                      | EE Only     | \$30,951.83     | \$719.81                                | 28   | EE Only     | \$22,117.48                             | \$789.91   |
|   | 13                                      | Two Person                              | \$23.397.92              | \$1,799.84                              | 32                                      | Two Person  | \$55,281.60     | \$1,727.55                              | 2  | Two Person  | \$3.791.60                              | \$1,895.80 |
|   |   |   |                          |   | *************************************** |             | ·               |   | ***************************************      |             |   |            |
|   | 23                                      | Family                                  | \$51,745.40              | \$2,249.80                              | 43                                      | Family      | \$92,855.49     | \$2,159.43                              | 0  | Family      | \$0.00                                  | \$2,369.75 |
|   |   | Medical /                               |                          | Difference                              |   | Medical /   |                 | Difference                              |  | Medical /   |   | Difference |
| PA 152  | Tier                                    | Rx Rate                                 | PA 152                   | over Hard                               | Tier                                    | Rx Rate     | PA 152          | over Hard                               | Tier   | Rx Rate     | PA 152                                  | over Hard  |
|   |   |   |                          | Сар                                     |   |             |                 | Сар                                     |  |             |   | Сар        |
|   | EE Only                                 | \$749.93                                | \$641.90                 | \$108.03                                | EE Only                                 | \$719.81    | \$641.90        | \$77.91                                 | EE Only                                      | \$789.91    | \$641.90                                | \$148.01   |
|   | Two Person                              | \$1,799.84                              | \$1,342.42               | \$457.42                                | Two Person                              | \$1,727.55  |                 | \$385.13                                | Two Person                                   | \$1,895.80  | <b></b>                                 | \$553.38   |
|   | Family                                  | \$2,249.80                              | \$1,750.65               | \$499.15                                | Family                                  | \$2,159.43  | \$1,750.65      | \$408.78                                | Family                                       | \$2,369.75  | \$1,750.65                              | \$619.10   |

Prepared by: Angela Garner Effective Date: January 1, 2024



**BUY DOWN 2** 

SB H.S.A 2000 20%

AIMAPI Custom Select Rx

HIGH DEDUCTIBLE HEALTH PLAN In-Network \$2,000 \$4,000 20% 20% after deductible 20% after deductible 20% after deductible 20% after deductible; 24 Visits \$4,000 \$8,000 20% after deductible 20% after deductible 20% after deductible 20% after deductible Custom Select Rx \$15 after deductible \$15 after deductible \$50 after deductible \$70 or 50% up to \$100 after deductible \$50 after deductible \$70 or 50% up to \$100 after deductible 30 Days

#### **ACTIVE**

| Benefit Comparison  |
|---|
| Annual Deductible/Individual                              |
| Annual Deductible/Family                                  |
| Coinsurance Office Visit/Exam                             |
| Specialist Visit  |
| Telemedicine  |
| Chiropractic  |
| Annual Out-of-Pocket Limit/Individual                     |
| Annual Out-of-Pocket Limit/Family                         |
| Emergency Room  |
| Urgent Care Facility                                      |
| Inpatient Hospitalization - Substance Abuse/Mental Health |
| Outpatient Services - Substance Abuse/Mental Health       |

| Prescription Drug Benefits           |
|--------------------------------------|
| Preferred Generic                    |
| Generic                              |
| Preferred Specialty                  |
| Non-preferred Specialty              |
| Brand (Formulary/Preferred)          |
| Brand (Non-Formulary/Non-preferred)  |
| Number of Days Supply                |
| Mail Order                           |
| Preferred Generic                    |
| Generic                              |
| Preferred Specialty                  |
| Non-preferred Specialty              |
| Brand (Formulary/Preferred)          |
| Brand (Non-Formulary/Non-preferred)  |
| Number of Days Supply for Mail Order |

| Rates |  |
|-------|--|
|       |  |

| EE Only    | 6 |
|------------|---|
| Two Person | 4 |
| Family     | 6 |

**BASE PLAN** BCBS SB 2000 20% AIMAP2 Custom Select Rx

| In-Network                 |
|----------------------------|
| \$2,000                    |
| \$4,000                    |
| 20% ECM: \$2,500 / \$5,000 |
| \$30                       |
| \$30                       |
| \$30                       |
| \$30 ; 24 Visits           |
| \$8,150                    |
| \$16,300                   |
| \$150                      |
| \$30                       |
| 20% after deductible       |
| 20% after deductible       |

| Custom Select Rx         |
|--------------------------|
| \$15                     |
| \$15                     |
| \$50                     |
| \$70 or 50% up to \$100  |
| \$50                     |
| \$70 or 50% up to \$100  |
| 30 Days                  |
|                          |
| \$35                     |
| \$35                     |
| NA                       |
| NA                       |
| \$140                    |
| \$200 or 50% up to \$290 |
| 90 Days                  |

| Rates Table   |            |         |              |  |  |  |  |
|---|------------|---------|--------------|--|--|--|--|
| Counts  | Tier       | Premium | Medical / Rx |  |  |  |  |
| Courts  | Her        | Freimum | Rate         |  |  |  |  |
| 0   | EE Only    | \$0.00  | \$655.13     |  |  |  |  |
| 0   | Two Person | \$0.00  | \$1,572.32   |  |  |  |  |
| 0   | Family     | \$0.00  | \$1,965.39   |  |  |  |  |
| *does not include OLV-MBH\$0 rider - 0.1% increase to add |            |         |              |  |  |  |  |

|    | 12% Premium Sharing | Employer   | PA 152     | Over/Under |
|----|---------------------|------------|------------|------------|
| 63 | \$78.62             | \$576.51   | \$641.90   | (\$65.39)  |
| 45 | \$188.68            | \$1,383.64 | \$1,342.42 | \$41.22    |
| 66 | \$235.85            | \$1,729.54 | \$1,750.65 | (\$21.11)  |
|    |                     |            |            |            |

**BUY DOWN I BCN HMO 1500 20%** 71529 Custom Select Rx

| In-Network                        |
|-----------------------------------|
| \$1,500                           |
| \$3,000                           |
| 20% ECM: \$2,500 / \$5,000        |
| \$30                              |
| \$50 after deductible             |
| \$30                              |
| \$50 after deductible ; 30 Visits |
| \$8,150                           |
| \$16,300                          |
| \$250 after deductible            |
| \$60                              |
| 20% after deductible              |
| \$30                              |

| Custom Select Rx                              |
|---|
| \$10  |
| \$30  |
| 20% coinsurance after deductible, up to \$200 |
| 20% coinsurance after deductible, up to \$300 |
| \$60  |
| \$80  |
| 30 Days                                       |
|   |
| \$20  |
| \$80  |
| NA  |
| NA  |
| \$170   |
| \$230   |
| 90 Days                                       |

| l | Rates Table |             |        |                      |  |  |  |
|---|-------------|-------------|--------|----------------------|--|--|--|
|   | Counts      | Counts Tier |        | Medical / Rx<br>Rate |  |  |  |
| 1 | 0           | EE Only     | \$0.00 | \$605.22             |  |  |  |
| ] | 0           | Two Person  | \$0.00 | \$1,452.53           |  |  |  |
|   | 0           | Family      | \$0.00 | \$1,815.67           |  |  |  |

| Rates Table |            |         |                      |  |
|-------------|------------|---------|----------------------|--|
| Counts      | Tier       | Premium | Medical / Rx<br>Rate |  |
| 0           | EE Only    | \$0.00  | \$605.22             |  |
| 0           | Two Person | \$0.00  | \$1,452.53           |  |
| 0           | Family     | \$0.00  | \$1,815.67           |  |

| dical / Rx | Co |
|------------|----|
| Rate       | ĵ  |
| 605.22     |    |
| ,452.53    |    |
| ,815.67    |    |
|            |    |

| ** | Family | \$0.00 | \$1,758.48 |
|----|--------|--------|------------|
|    |        |        |            |

Premium

\$0.00

Medical / Rx

\$586.16

\$1,406.79

**ANNUAL** 

| 0% Premium Sharing | Employer   | PA 152     | Over/Under |
|--------------------|------------|------------|------------|
| \$60.52            | \$544.70   | \$641.90   | (\$97.21)  |
| \$145.25           | \$1,307.28 | \$1,342.42 | (\$35.14)  |
| \$181.57           | \$1,634.10 | \$1,750.65 | (\$116.55) |

| 5% Premim<br>Sharing | Employer   | PA 152     | ER HSA<br>Contributio |
|----------------------|------------|------------|-----------------------|
| \$29.31              | \$556.85   | \$641.90   | \$1,020.63            |
| \$70.34              | \$1,336.45 | \$1,342.42 | \$71.65               |
| \$87.92              | \$1,670.56 | \$1,750.65 | \$961.16              |

NA \$35 after deductible

NA \$140 after deductible \$200 or 50% up to \$290 after deductible

> 90 Days Rates Table

Tier

Two Person

EE Only

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Prepared by: Angela Garner

Effective Date: January 1, 2024





| RETIREE   | RENEWAL<br>BCBSM<br>Simply Blue \$500 / \$1,000 | BUY DOWN OPTION<br>BCN<br>HMO \$1,500 / \$3,000 |  |
|---|---|---|--|
|   | 0009 - Retiree                                  | 71529   |  |
| Benefit Comparison  | In-Network                                      | In-Network                                      |  |
| Annual Deductible/Individual                              | \$500   | \$1,500   |  |
| Annual Deductible/Family                                  | \$1,000   | \$3,000   |  |
| Coinsurance   | 20% Max \$1,500/\$3,000                         | 20% ECM: \$2,500 / \$5,000                      |  |
| Office Visit/Exam   | \$20  | \$30  |  |
| Specialist Visit  | \$20  | \$50 after deductible                           |  |
| Telemedicine  | \$0   | \$30  |  |
| Chiropractic  | \$20 ; 24 Visits                                | \$50 after deductible ; 30 Visits               |  |
| Annual Out-of-Pocket Limit/Individual                     | \$6,350   | \$8,150   |  |
| Annual Out-of-Pocket Limit/Family                         | \$12,700  | \$16,300  |  |
| Emergency Room  | \$150   | \$250 after deductible                          |  |
| Urgent Care Facility                                      | \$20  | \$60  |  |
| Inpatient Hospitalization - Substance Abuse/Mental Health | 20% after deductible                            | 20% after deductible                            |  |
| Outpatient Services - Substance Abuse/Mental Health       | \$20  | \$30  |  |
| Prescription Drug Benefits                                | In-Network                                      | Custom Select Rx                                |  |
| Preferred Generic   | NA  | \$10  |  |
| Generic   | \$10  | \$30  |  |
| Preferred Specialty                                       | \$80  | 20% up to \$200                                 |  |
|   |   |   |  |

| Prescription Drug Benefits           | In-Ne |
|--------------------------------------|-------|
| Preferred Generic                    | ١     |
| Generic                              | \$    |
| Preferred Specialty                  | \$    |
| Non-preferred Specialty              | \$    |
| Brand (Formulary/Preferred)          | \$    |
| Brand (Non-Formulary/Non-preferred)  | \$    |
| Number of Days Supply                | 30    |
| Mail Order                           |       |
| Preferred Generic                    | N     |
| Generic                              | \$    |
| Preferred Specialty                  | \$    |
| Non-preferred Specialty              | \$    |
| Brand (Formulary/Preferred)          | \$    |
| Brand (Non-Formulary/Non-preferred)  | \$    |
| Number of Days Supply for Mail Order | 90    |
|                                      |       |

| In-Network |
|------------|
| NA         |
| \$10       |
| \$80       |
| \$80       |
| \$40       |
| \$80       |
| 30 Days    |
|            |
| NA         |
| \$20       |
| \$160      |
| \$160      |
| \$80       |
| \$160      |
| 90 Days    |
|            |

| Custom Select Rx    |  |
|---------------------|--|
| <br>\$10            |  |
| <br>\$30            |  |
| <br>20% up to \$200 |  |
| 20% up to \$300     |  |
| \$60                |  |
| \$80                |  |
| 30 Days             |  |
|                     |  |
| <br>\$20            |  |
| <br>\$80            |  |
| NA                  |  |
| NA                  |  |
| <br>\$170           |  |
| \$230               |  |
| 90 Days             |  |

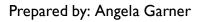
| Rates |  |  |
|-------|--|--|
|       |  |  |

| Rates Table |            |             |                      |
|-------------|------------|-------------|----------------------|
| Counts      | Tier       | Premium     | Medical /<br>Rx Rate |
| 28          | EE Only    | \$22,117.48 | \$789.91             |
| 2           | Two Person | \$3,791.60  | \$1,895.80           |
| 0           | Family     | \$0.00      | \$2,369.75           |

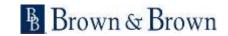
| Rates Table         |            |                      |            |  |
|---------------------|------------|----------------------|------------|--|
| Counts Tier Premium |            | Medical / Rx<br>Rate |            |  |
| 0                   | EE Only    | \$0.00               | \$605.22   |  |
| 0                   | Two Person | \$0.00               | \$1,452.53 |  |
| 0                   | Family     | \$0.00               | \$1,815.67 |  |

Volume and Counts are for illustrative purposes only. This proposal is a brief summary of benefits and is not intended to be a complete outline of policy provisions.

Rates are subject to final enrollment, medical underwriting and effective date.



Effective Date: January 1, 2024



| Dollar Change | % Change |
|---------------|----------|
|               |          |

| BCBSM MAPD -  |    | MA OPTION I | PD OPTION | MAPD RATE | MONTHLY     | ANNUAL       |
|---------------|----|-------------|-----------|-----------|-------------|--------------|
| Current (600) |    | MEDICAL     | RX        | OPTION I  | TOTAL       | TOTAL        |
| Contracts     | 62 | \$72.46     | \$136.00  | \$208.46  | \$12,924.52 | \$155,094.24 |

| BCBSM MAPD -  |    | MA OPTION I | PD OPTION | MAPD RATE | MONTHLY     | ANNUAL       |
|---------------|----|-------------|-----------|-----------|-------------|--------------|
| Renewal (600) |    | MEDICAL     | RX        | OPTION I  | TOTAL       | TOTAL        |
| Contracts     | 62 | \$72.46     | \$136.00  | \$208.46  | \$12,924.52 | \$155,094.24 |

| \$0.00 | 0.00% |  |
|--------|-------|--|
| \$0.00 | 0.00% |  |

| HUMANA MAPD |    | MA OPTION I | PD OPTION | MAPD RATE | MONTHLY     | ANNUAL       |
|-------------|----|-------------|-----------|-----------|-------------|--------------|
|             |    | MEDICAL     | RX        | OPTION I  | TOTAL       | TOTAL        |
| Contracts   | 62 |             |           | \$273.61  | \$16,963.82 | \$203,565.84 |

| \$48,471.60 | 31.25% |
|-------------|--------|
|             |        |

Prepared by: Angela Garner Effective Date: January 1, 2024



|                    | RENE         | WAL          |
|--------------------|--------------|--------------|
| Dental - All       | Delta Dental | Delta Dental |
|                    | ACTIVE       | RETIREE      |
|                    |              |              |
| Benefit Comparison | In-Network   | In-Network   |

| OPTION        |               |  |  |  |
|---------------|---------------|--|--|--|
| BCBS Dental 2 | BCBS Dental 2 |  |  |  |
| ACTIVE        | RETIREE       |  |  |  |

| Benefit  | : Comparison                  |
|----------|-------------------------------|
| Annual   | Deductible/Individual         |
| Annual   | Deductible/Family             |
| Annual   | Plan Maximum                  |
| Lifetime | Orthodontia Plan Maximum      |
| Waiting  | Period                        |
| Diagn    | ostic and Preventive Services |
| Basic    | Services                      |
| Majo     | Services                      |
| Ortho    | odontia Services              |
| Depe     | endent Children               |
| Rate G   | uarantee                      |

| In-Network            | In-Network            |
|-----------------------|-----------------------|
| \$0                   | \$0                   |
| \$0                   | \$0                   |
| \$1,000               | \$1,000               |
| \$1,000               | \$1,000               |
| FOM following 60 days | FOM following 60 days |
| 50%                   | 50%                   |
| 50%                   | 50%                   |
| 50%                   | 50%                   |
| 50%                   | 50%                   |
| up to age 19          | up to age 19          |
| l year                | l year                |

| In-Network            | In-Network            |
|-----------------------|-----------------------|
| \$0                   | \$0                   |
| \$0                   | \$0                   |
| \$1,000               | \$1,000               |
| \$1,000               | \$1,000               |
| FOM following 60 days | FOM following 60 days |
| 100%                  | 100%                  |
| 50%                   | 50%                   |
| 50%                   | 50%                   |
| 50%                   | 50%                   |
| up to age 19          | up to age 19          |
| 2 Year                | 2 Year                |

| Rates |  |  |  |
|-------|--|--|--|
|       |  |  |  |

|        | A          | ctive              |                           | Retiree |            |                    |         |  |
|--------|------------|--------------------|---------------------------|---------|------------|--------------------|---------|--|
| Counts | Tier       | Monthly<br>Premium | '   Rates   Counts   Tier |         | Tier       | Monthly<br>Premium | Rates   |  |
| 68     | EE Only    | \$1,297.44         | \$19.08                   | 57      | EE Only    | \$1,087.56         | \$19.08 |  |
| 46     | Two Person | \$1,729.14         | \$37.59                   | 10      | Two Person | \$375.90           | \$37.59 |  |
| 77     | EE + Fam   | \$5,368.44         | \$69.72                   | 0       | EE + Fam   | \$0.00             | \$69.72 |  |

|        | Ac         | tive               |              | Retiree |            |                    |         |  |
|--------|------------|--------------------|--------------|---------|------------|--------------------|---------|--|
| Counts | Tier       | Monthly<br>Premium | ' Rates Cour |         | Tier       | Monthly<br>Premium | Rates   |  |
| 68     | EE Only    | \$1,360.00         | \$20.00      | 57      | EE Only    | \$1,140.00         | \$20.00 |  |
| 46     | Two Person | \$1,839.54         | \$39.99      | 10      | Two Person | \$399.90           | \$39.99 |  |
| 77     | EE + Fam   | \$5,389.23         | \$69.99      | 0       | EE + Fam   | \$0.00             | \$69.99 |  |

| Cos  | t Comparison - Rates           |
|------|--------------------------------|
| Tota | al Monthly Premium             |
| Tota | al Annualized Premium          |
| Ann  | ual Dollar Change From Current |
| Perc | ent Change From Current        |

| RENEWAL      |            |  |  |  |  |  |  |  |
|--------------|------------|--|--|--|--|--|--|--|
| \$8,395.02   | \$1,463.46 |  |  |  |  |  |  |  |
| \$118,301.76 |            |  |  |  |  |  |  |  |
| -\$4,075.44  |            |  |  |  |  |  |  |  |
| -3.33%       |            |  |  |  |  |  |  |  |

| BCBS Dental 2         |        |  |  |  |  |  |  |  |  |
|-----------------------|--------|--|--|--|--|--|--|--|--|
| \$8,588.77 \$1,539.90 |        |  |  |  |  |  |  |  |  |
| \$121,                | 544.04 |  |  |  |  |  |  |  |  |
| -\$833.16             |        |  |  |  |  |  |  |  |  |
| -0.68%                |        |  |  |  |  |  |  |  |  |

\*No Commission

Dental Implementation Credit: \$37.50 per enrolled contract (approximately \$9,675)

Volume and Counts are for illustrative purposes only. This proposal is a brief summary of benefits and is not intended to be a complete outline of policy provisions. Rates are subject to final enrollment, medical underwriting and effective date.

<sup>\*</sup>Original renewal was a rate hold, agreed to reduce based upon BCBS quote

Prepared by: Angela Garner Effective Date: January 1, 2024



| Vision - All                      |   | CUF         | RRENT              |   |                       | RENI        | WAL                |         |  |
|-----------------------------------|---|-------------|--------------------|---|-----------------------|-------------|--------------------|---------|--|
|                                   |   | Еу          | eMed               |   | EyeMed                |             |                    |         |  |
| Benefit Comparison                |   | In-N        | etwork             |   | In-Network            |             |                    |         |  |
| Сорау                             |   |             |                    |   |                       |             |                    |         |  |
| Examination                       |   | \$          | 10                 |   |                       | \$          | 10                 |         |  |
| Materials                         |   | ,           | \$0                |   |                       | \$          | 0                  |         |  |
| Benefit Frequency                 |   |             |                    |   |                       |             |                    |         |  |
| Examination                       |   |             | 12                 |   |                       | ا           | 2                  |         |  |
| Lenses                            |   |             | 12                 |   |                       | l           | 2                  |         |  |
| Frames                            |   |             | 24                 |   |                       | 2           | 24                 |         |  |
| Lenses                            |   |             |                    |   |                       |             |                    |         |  |
| Single Vision Lens                |   | \$          | 25                 |   |                       | \$2         | 25                 |         |  |
| Bifocal Lens                      |   | \$          | 25                 |   |                       | \$2         | 25                 |         |  |
| Trifocal Lens                     |   | \$          | 25                 |   |                       | \$2         | 25                 |         |  |
| Contact Lenses                    | *************************************** |             |                    | •                                       |                       |             |                    |         |  |
| Medically Necessary               | *************************************** |             | \$0                | *************************************** | \$0                   |             |                    |         |  |
| Elective                          |   | \$          | 130                |   | \$130                 |             |                    |         |  |
| Frames                            |   | \$          | 130                |   | \$130                 |             |                    |         |  |
| Rate Guarantee                    |   | Year 3 of   | 4 Guarantee        |   | Year 4 of 4 Guarantee |             |                    |         |  |
|                                   |   | Rate        | s Table            |   | Rates Table           |             |                    |         |  |
| Rates - Active                    |   | rucc        | Monthly            |   | Monthly               |             |                    |         |  |
|                                   | Counts                                  | Tier        | Premium            | Rates                                   | Counts                | Tier        | Premium            | Rates   |  |
|                                   | 68                                      | EE Only     | \$310.76           | \$4.57                                  | 68                    | EE Only     | \$310.76           | \$4.57  |  |
|                                   | 46                                      | Two Person  | \$399.74           | \$8.69                                  | 46                    | Two Person  | \$399.74           | \$8.69  |  |
|                                   | 78                                      | EE + Fam    | \$996.84           | \$12.78                                 | 78                    | EE + Fam    | \$996.84           | \$12.78 |  |
|                                   |   | Rates Table |                    |   |                       | Rates Table |                    |         |  |
| Rates - Retiree/Cobra             | Counts                                  | Tier        | Monthly<br>Premium | Rates                                   | Counts                | Tier        | Monthly<br>Premium | Rates   |  |
|                                   | 56                                      | EE Only     | \$255.92           | \$4.57                                  | 56                    | EE Only     | \$255.92           | \$4.57  |  |
|                                   | 10                                      | Two Person  | \$86.90            | \$8.69                                  | 10                    | Two Person  | \$86.90            | \$8.69  |  |
|                                   | 0                                       | EE + Fam    | \$0.00             | \$12.78                                 | 0                     | EE + Fam    | \$0.00             | \$12.78 |  |
|                                   |   |             |                    |   |                       |             |                    |         |  |
| Cost Comparison                   |   |             | RRENT              |   |                       |             | WAL                |         |  |
| Total Monthly Premium             |   | \$2,0       | )50.16             |   |                       | \$2,0       | 50.16              |         |  |
| Total Annualized Premium          |   | \$24,       | 601.92             |   | \$24,601.92           |             |                    |         |  |
| Annual Dollar Change From Current |   |             |                    |   | \$0.00                |             |                    |         |  |
| Percent Change From Current       |   |             |                    |   |                       | 0.0         | 00%                |         |  |

#### Personnel & Compensation Committee

October 4, 2023

Proposed Plan Year 2024 Insurance Renewal:

Our broker, Brown & Brown and BABH Administration recommend:

Vision: Bay-Arenac Behavioral Health is in the final year of a rate guarantee for Vision coverage through EyeMed, resulting in no cost variance for plan year 2024. We recommend continuation of this coverage through 2024.

Dental: recommend moving to Blue Cross Blue Shield Dental in 2024. Moving to BCBS for dental insurance would result in minimal cost savings, however diagnostic and preventative services would go from 50% to 100% covered. In addition, BABH would receive a two-year rate guarantee and an implementation credit of approximately \$9500.

Life & Disability: Continue with The Standard. No rate increase, as we are in the 2<sup>nd</sup> year of a 2-year rate guarantee.

Health Reimbursement Account (HRA) – continue with Flex Administrators, with a decrease in contribution to\$150/\$300 on the base PPO plan.

Health - Medical and Rx coverage for active staff and pre-65 retirees: Recommend continuation through Blue Cross Blue Shield of Michigan with plan design changes in order to remain under the hard cap. We recommend the continuance for Medicare Eligible retirees with Blue Cross Blue Shield Medicare Advantage plan for plan year 2024, with no change in premium.

#### Cost Comparison for Employees (based on estimated eligible employee count):

#### **Monthly Premium & Employee Cost Sharing:**

Core contribution = 12% of premium. Two buy-down contribution: one option with 10% of premium sharing and one option with 5% premium sharing

| Plan | 2023       | EE           | EE           | 2024       | EE           | <b>EE Contribution</b> | <b>EE Contribution</b> |
|------|------------|--------------|--------------|------------|--------------|------------------------|------------------------|
| Type | Premium    | Contribution | Contribution | Premium    | Contribution | Buy-Down (1)           | Buy-Down (2)           |
|      |            | Core Plan    | Buy-Up       | (Core)     | Core Plan    |                        |                        |
| S    | \$560.29   | \$56.03      | \$98.44      | \$576.51   | \$76.82      | \$60.52                | \$29.31                |
| D    | \$1,335.62 | \$133.56     | \$227.81     | \$1,383.64 | \$188.68     | \$145.25               | \$70.34                |
| F    | \$1,658.15 | \$165.82     | \$274.26     | \$1,729.54 | \$235.85     | \$181.57               | \$87.92                |

2024 PA 152 Hard Cap Rates: 2024 ER Contribution

Single - \$641.90 Single - \$576.51

Double - \$1,342.42 Double - \$1,383.64

Family - \$1,750.65 Family - \$1,729.54

### December 2023 BABH Board

# BABH Board of Directors

|                           | December 2023       |                     |                     |                     |                          |                          |
|---------------------------|---------------------|---------------------|---------------------|---------------------|--------------------------|--------------------------|
| Su                        | Мо                  | Tu                  | We                  | Th                  | Fr                       | Sa                       |
| 3<br>10<br>17<br>24<br>31 | 4<br>11<br>18<br>25 | 5<br>12<br>19<br>26 | 6<br>13<br>20<br>27 | 7<br>14<br>21<br>28 | 1<br>8<br>15<br>22<br>29 | 2<br>9<br>16<br>23<br>30 |

| SUNDAY           | MONDAY  | TUESDAY                                   | WEDNESDAY   | THURSDAY                            | FRIDAY | SATURDAY |
|------------------|---|---|---|-------------------------------------|--------|----------|
| Nov 26           | 27  | 28  | 29  | 30                                  | Dec 1  | 2        |
| 3                | 5:00pm Health Care Improvement & Compliance Committee | 5   | 6   | 7 5:00pm Recipient Rights Committee | 8      | 9        |
| 10               | 5:00pm Facilities & Safety Committee                  | 12  | 13 5:00pm Finance Committee 5:30pm Bylaws Committee | 14<br>5:00pm Program<br>Committee   | 15     | 16       |
| 17               | 18  | 19<br>5:00pm Audit<br>Committee           | 20  | 5:00pm REGULAR BOARD MEETING        | 22     | 23       |
| 24 Christmas Eve | 25 Christmas Day/BABH Offices Closed                  | 26 Christmas Observed/BABH Offices Closed | 27  | 28                                  | 29     | 30       |
| 31               | Jan 1, 24   | 2   | 3   | 4                                   | 5      | 6        |