

Employee Benefits

Ongoing 2025 Renewal Planning

July 25, 2024





Total Cost Summary - Preliminary

Medical/Rx/Vision/Dental

		Carrier/Administrator	Estimated 2024 Annual Cost	Estimated 2025 Annual Cost	Net Change (\$/%)	
Med/Rx/Vision - PPO	Self-Funded	Regence	\$10,540,498	\$11,541,845	\$1,001,347	9.50%
Med/Rx/Vision - HDHP	Self-Funded	Regence	\$2,638,880	\$2,889,574	\$250,694	9.50%
Vision	Self-Funded	VSP	\$150,772	\$178,665	\$27,893	18.50%
Med/Rx/Vision - HMO	Fully Insured	Kaiser	\$5,009,872	\$5,254,185	\$244,313	4.88%
Med/Rx/Vision - HDHP	Fully Insured	Kaiser	\$650,432	\$679,259	\$28,827	4.43%
Dental - PPO	Self-Funded	Delta Dental of WA	\$999,795	\$992,796	-\$6,999	-0.70%
Dental - HMO	Fully Insured	Kaiser	\$17,929	\$17,571	-\$358	-2.00%
Total Med/Rx/Vision/Dental			\$20,008,178	\$21,553,896	\$1,545,717	7.73%

Assumptions Include:

Estimated Stop loss renewal = +50% (Rate Cap) with same lasered claimants

Regence ASO renewal = 0.00%

Updated pharmacy terms and rebates = \$200,000 savings to the pharmacy plan

No change to ASO VSP renewal, in rate guarantee until January 2026

Estimated Delta Dental ASO renewal = +5%

Using claims data through June 2024

HSA Funding is not included and should be budgeted separately

*COV currently contributes \$1,600 and \$3,200 to the HSA account



Regence PPO w/VSP

		2024 Employee Contributions			2025 Employee Contributions			Option 1			
					Same as	current % w	out one-				
					time extra	2024 CoV c	ontribution	EE's -EE	10%	EE's -Dep's	20%
	Enrollment	Rates	ER Pays	EE Pays	Rates	ER Pays	EE Pays	ER Pays	EE Pays	EE \$ Change	EE % Change
As-Is Renewal						Renewal				Over R	enewal
Employee	150	\$956.55	\$852.33	\$104.22	\$1,048.62	\$871.01	\$177.61	\$943.76	\$104.86	-\$72.75	-41.0%
Employee & Spouse	94	\$2,010.08	\$1,695.10	\$314.98	\$2,203.56	\$1,734.32	\$469.24	\$1,867.71	\$335.85	-\$133.39	-28.4%
Employee & Child(ren)	34	\$1,723.03	\$1,465.42	\$257.61	\$1,888.88	\$1,499.04	\$389.84	\$1,615.96	\$272.91	-\$116.93	-30.0%
Employee & Family	179	\$2,776.01	\$2,308.04	\$467.97	\$3,043.21	\$2,362.16	\$681.05	\$2,539.43	\$503.78	-\$177.27	-26.0%
Total Monthly	457	\$887,919	\$750,152	\$137,766	\$973,384	\$767,471	\$205,913	\$826,629	\$146,755		
Total Annualized		\$10,655,026	\$9,001,828	\$1,653,198	\$11,680,607	\$9,209,656	\$2,470,951	\$9,919,549	\$1,761,058		
Change over current %	6				9.6%	2.3%	49.5%	10.19%	6.52%		
Change over current \$					\$1,025,581	\$207,828	\$817,753	\$917,721	\$107,860		

		2024 Em	ployee Cont	ributions	2025 Employee Contributions			Option 1			
			-		Same as	current % w	out one-				
					time extra	2024 CoV co	ontribution	EE's -EE	10%	EE's -Dep's	20%
	Enrollment	Rates	ER Pays	EE Pays	Rates	ER Pays	EE Pays	ER Pays	EE Pays	EE \$ Change	EE % Change
As-Is Renewal					Renewal				Over R	enewal	
Employee	40	\$758.88	\$696.91	\$61.97	\$831.92	\$686.35	\$145.57	\$748.73	\$83.19	-\$62.38	-42.9%
Employee & Spouse	27	\$1,593.99	\$1,463.71	\$130.28	\$1,747.42	\$1,441.62	\$305.80	\$1,481.13	\$266.29	-\$39.51	-12.9%
Employee & Child(ren)	16	\$1,366.28	\$1,254.67	\$111.61	\$1,497.79	\$1,235.73	\$262.06	\$1,281.42	\$216.37	-\$45.69	-17.4%
Employee & Family	58	\$2,201.27	\$2,021.36	\$179.91	\$2,413.15	\$1,990.85	\$422.30	\$2,013.71	\$399.44	-\$22.86	-5.4%
Total Monthly	141	\$222,927	\$204,710	\$18,217	\$244,385	\$201,619	\$42,766	\$207,238	\$37,147		
Total Annualized		\$2,675,125	\$2,456,522	\$218,603	\$2,932,614	\$2,419,425	\$513,189	\$2,486,853	\$445,761		***************************************
Change over current 9	6				9.6%	-1.5%	134.8%	1.23%	103.91%		***************************************
Change over current \$		B			\$257,489	-\$37,097	\$294,586	\$30,331	\$227,158		<u> </u>



Kaiser HMO

		2024 Employee Contributions			2025 Employee Contributions			Option 1			
			-		Same as	current % w	out one-				
					time extra	2024 CoV c	ontribution	EE's -EE	10%	EE's -Dep's	20%
	Enrollment	Rates	ER Pays	EE Pays	Rates	ER Pays	EE Pays	ER Pays	EE Pays	EE \$ Change	EE % Change
As-Is Renewal					Renewal				Over R	enewal	
Employee	53	\$862.83	\$714.54	\$148.29	\$904.90	\$716.65	\$188.25	\$814.41	\$90.49	-\$97.76	-51.9%
Employee & Spouse	45	\$1,725.74	\$1,358.87	\$366.87	\$1,809.90	\$1,363.08	\$446.82	\$1,538.41	\$271.49	-\$175.33	-39.2%
Employee & Child(ren)	19	\$1,553.26	\$1,230.07	\$323.19	\$1,629.01	\$1,233.85	\$395.16	\$1,393.70	\$235.31	-\$159.85	-40.5%
Employee & Family	74	\$2,588.99	\$2,003.52	\$585.47	\$2,715.25	\$2,009.83	\$705.42	\$2,262.69	\$452.56	-\$252.86	-35.8%
Total Monthly	191	\$344,485	\$270,652	\$73,834	\$361,285	\$271,492	\$89,793	\$306,312	\$54,973		
Total Annualized		\$4,133,826	\$3,247,819	\$886,007	\$4,335,419	\$3,257,899	\$1,077,519	\$3,675,738	\$659,681		
Change over current %	6				4.9%	0.3%	21.6%	13.18%	-25.54%		
Change over current \$					\$201,593	\$10,080	\$191,512	\$427,919	-\$226,326		

Kaiser HSA

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		2024 Em	2024 Employee Contributions			2025 Employee Contributions			Option 1			
					Same as cu	rrent % w/ou	ıt one-time					
					extra 20	24 CoV cont	ribution	EE's -EE	10%	EE's -Dep's	20%	
	Enrollment	Rates	ER Pays	EE Pays	Rates	ER Pays	EE Pays	ER Pays	EE Pays	EE \$ Change	EE % Change	
As-Is Renewal	As-Is Renewal							Over R	enewal			
Employee	8	\$594.43	\$495.74	\$98.69	\$620.78	\$497.06	\$123.72	\$558.70	\$62.08	-\$61.64	-49.8%	
Employee & Spouse	12	\$1,188.39	\$991.07	\$197.32	\$1,241.06	\$993.70	\$247.36	\$1,054.93	\$186.13	-\$61.23	-24.8%	
Employee & Child(ren)	2	\$1,070.93	\$893.20	\$177.73	\$1,118.39	\$895.58	\$222.81	\$956.79	\$161.60	-\$61.21	-27.5%	
Employee & Family	17	\$1,782.82	\$1,486.84	\$295.98	\$1,861.83	\$1,490.79	\$371.04	\$1,551.54	\$310.29	-\$60.75	-16.4%	
Total Monthly	39	\$51,466	\$42,921	\$8,544	\$53,747	\$43,035	\$10,711	\$45,419	\$8,328			
Total Annualized		\$617,591	\$515,057	\$102,534	\$644,962	\$516,426	\$128,537	\$545,022	\$99,940			
Change over current %	6				4.4%	0.3%	25.4%	5.82%	-2.53%			
Change over current \$	·	***************************************			\$27,371	\$1,368	\$26,003	\$29,965	-\$2,594		***************************************	



PPO Plan Change Considerations

Change from Current: \$300/\$900 Ded; \$20 Copay;\$2,300/\$6,900 OOP Max	Estimated Savings
Copay \$25	0.22%
Copay \$30	0.33%
Deductible \$400/\$1,200	1.00%
Deductible \$500/\$1,500	1.30%
Deductible \$750/\$2,250	1.80%
OOP Max \$2,600/\$7,800	1.20%
OOP Max \$3,000/\$9,000	3.16%
OOP Max \$4,000/\$12,000	4.53%
OOP Max \$5,000/\$15,000	5.85%



PPO Plan Change Considerations

Change from Current: \$30 Copay for Specialty Drug	Estimated Savings (currently impacts 33 members)
Copay \$250	1.90%
Copay \$100	0.90%

Change from Current: Unlimited visits for Alternative Care	Estimated Savings
12 Visits on Chiro and Acupuncture (same as CoV Kaiser plan and Regence BoB benchmark)	0.02% *Very few members use more than 12 visits per year.



Deductible and Out of Pocket Met in 2023

Deductible PPO Actives (total-817)	Members
Less than \$150	425
\$150-\$249	44
\$250-\$299	22
\$300	326

Deductible <u>Police</u> PPO (total – 521)	Members
Less than \$150	302
\$150-\$249	37
\$250-\$299	11
\$300	171

OOP Max PPO Actives (total-817)	Members
Less than \$150	669
\$1,150-\$1,999	64
\$2,000-\$2,299	13
\$2,300	71

OOP Max <u>Police PPO</u> Actives (total-521)	Members
Less than \$150	455
\$1,150-\$1,999	32
\$2,000-\$2,299	5
\$2,300	29

