## Self-Insurance Estimating Conference State Employees' Group Health Self-Insurance Trust Fund Executive Summary August 10, 2022

The Outlook for the State Employees' Group Health Self-Insurance Trust Fund has been revised to reflect actual enrollment and cash flows through June 2022; revised Investment Earnings rates; revised claims trends for Preferred Provider Organization (PPO) and Health Maintenance Organization (HMO) pharmacy claims; revised growth factors for PPO and HMO medical claims for FY 2022-23; revised projections for the Shared Savings Program. The fund is expected to remain solvent only through FY 2022-23.

For FY 2021-22, the ending cash balance decreased from \$670.2 million to \$606.6 million. For FY 2022-23, the ending cash balance increased from \$408.1 million to \$427.7 million after having \$200 million added to that year's beginning balance (Ch. 2022-156 (HB 5001) - Section 199). The forecast for subsequent years shows that expenses are expected to exceed revenues by amounts that generate negative cash balances of \$169.0 million in FY 2023-24, \$866.4 million in FY 2024-25, \$1,154.4 million in FY 2025-26, and \$1,441.0 million in FY 2026-27. The escalating negatives occur even though the Conference assumes that each year's deficit is cleared prior to the beginning of the next year. A major contributing factor to the changes in ending cash balances is lowered expectations regarding enrollment in the short term with higher per enrollee expenses for those that remain. In this regard, enrollment in FY 2021-22 is -1,006 lower than expected in January. Similarly, the expected enrollment is -3,985 lower in FY 2022-23 when compared to the prior forecast, yet total projected expenses for those that remain are higher.

Even though enrollment projections were decreased for all years in the forecast compared to the January 2022 forecast, the growth in enrollment beginning in FY 2023-24 reflects the Conference's expectation that the atypically large number of current vacancies will slowly begin to reverse.

A complete Executive Summary outlining all of the changes since the August 2021 Conference can be found at the beginning of the *Report on Financial Outlook* used as the conference packet. The following table shows the **major** net changes between the August 2022 and January 2022 forecasts.

Financial Outlook for FY2021-22 and FY 202-23
Changes to Conference Forecast – January 2022 Compared to August 2022
(In Millions)

		(				
		FY 2021-22			FY 2022-23	
	13-Jan	10-Aug	Difference	13-Jan	10-Aug	Difference
Beginning Cash Balance	\$720.8	\$720.8	\$0.0	\$670.2	\$806.6	\$136.4
Total Revenues	\$2,846.1	\$2,828.1	(\$18.0)	\$2,862.1	\$2,789.6	(\$72.5)
Total Expenses	\$2,896.7	\$2,942.3	\$45.6	\$3,124.2	\$3,168.5	\$44.3
<b>Ending Cash Balance</b>	\$670.2	\$606.6	(\$63.6)	\$408.1	\$427.7	\$19.6

Slight differences in results due to rounding.

# State Employees' Group Health Self-Insurance Trust Fund

#### **Report on Financial Outlook**

For the Fiscal Years Ending June 30, 2022 through June 30, 2027

Adopted August 10, 2022, by the Self-Insurance Estimating Conference

#### **EXECUTIVE SUMMARY**

The Florida Division of State Group Insurance (the Division) prepared an Outlook for the State Employees' Group Health Self-Insurance Trust Fund (Trust Fund) for the fiscal years (FY) ending June 30, 2022, through June 30, 2027. The Outlook is prepared to assist in the State's planning and budgeting in accordance with section 216.136(9), Florida Statutes. The Outlook is prepared using cash basis methods and modeling based on the healthcare benefit and funding design currently in place.

The Outlook builds on the financial and enrollment data presented in the January 2022 Report on the Financial Outlook, henceforth referred to as the Prior Outlook. With the Prior Outlook as the base, this Outlook has adjustments for the following:

- 1. Actual enrollment and cash flows through June 2022.
- 2. Revised Investment Earnings rates.
- 3. Revised claims trends for Preferred Provider Organization (PPO) and Health Maintenance Organization (HMO) pharmacy claims.
- 4. Revised growth factors for PPO and HMO medical claims for FY 2022-23.
- 5. Revised projections for the Shared Savings Program.

This Outlook reflects decreases in revenues for all years and increases in expenses for all years of the Outlook compared to the Prior Outlook. The deficits previously projected for FY 2023-24 through FY 2026-27 in the Prior Outlook have increased. The Outlook reflects that the Trust Fund is projected to remain solvent through FY 2022-23.

The ending cash balance for FY 2021-22 is \$606.6 million, a decrease of \$63.6 million from the \$670.2 million projected in the Prior Outlook, and the operating loss increased from \$50.6 million to \$114.2 million. For FY 2022-23, the beginning cash balance is adjusted up to \$808.6 million due to \$200.0 million being appropriated in the 2022 legislative session. With this adjustment, the forecasted ending cash balance increased from \$408.1 million to \$427.7 million. The estimated operating loss has increased from \$262.1 million to \$378.9 million. Ending cash balance deficits and operating losses are projected for FY 2023-24 through FY 2026-27.

Below is a summary of the Outlook for the Trust Fund through FY 2026-27:

	FY 2021-22 Estimate					FY 2024-25 Estimate			FY 2025-26 Estimate		FY 2026-27 Estimate
BEGINNING CASH BALANCE	\$ 720.8	\$	806.6	\$	427.7	\$	0.0	\$	0.0	\$	0.0
TOTAL REVENUES	\$ 2,828.1	\$	2,789.6	\$	2,846.6	\$	2,897.2	\$_	2,885.3	\$_	2,911.1
TOTAL EXPENSES	\$ 2,942.3	\$	3,168.5	\$	3,443.3	\$	3,763.6	\$	4,039.7	\$	4,352.1
OPERATING GAIN/(LOSS)	\$ (114.2)	\$	(378.9)	\$	(596.7)	\$	(866.4)	\$	(1,154.4)	\$	(1,441.0)
ENDING CASH BALANCE	\$ 606.6	\$	427.7	\$	(169.0)	\$	(866.4)	\$	(1,154.4)	\$	(1,441.0)

Note: Assumes no carry forward of negative cash balance.

#### **ENROLLMENT**

Final enrollment for FY 2021-22 reflects 169,791 subscribers and 179,923 dependents, totaling 349,717 covered lives. Approximately 47.3% of subscribers are enrolled in PPO plans, 51.5% are enrolled in HMO plans, and 1.2% are enrolled in a MAPD plan. Subscriber enrollment in individual coverage was 48.1%, and 51.9% were enrolled in family coverage, which had an average size of 3.04 members. Projected enrollment continues to decrease for FY 2022-23 due to the continued reductions in actual enrollment through June 2022. Based on the assumption that the continued reductions in state employment are a short-term situation and not a long-term systemic one, projected enrollment is tapered back to pre-COVID enrollment trend levels beginning in FY 2023-24, through FY 2026-27.

Compared to the Prior Outlook, FY 2021-22 actual enrollment decreased 1,006 subscribers. Enrollment for FY 2022-23 has a projected decrease of 3,985 subscribers, a decrease of 2,128 for FY 2023-24, a decrease of 38 for FY 2024-25, a decrease of 52 for FY 2025-26 and a decrease of 59 for FY 2026-27 compared to the Prior Outlook.

Enrollment patterns for FY 2021-22 through FY 2026-27 reflect an average annual increase of 39 subscribers for Active coverage, compared to a decrease of 93 subscribers in the Prior Outlook. Early Retiree enrollment is projected to decrease an average of 2 subscribers annually, compared to an increase of 21 subscribers projected in the Prior Outlook. Enrollment in the Medicare coverage categories, including the MAPD Plans, is expected to increase by an average of 353 subscribers annually, compared to an increase of 287 subscribers projected in the Prior Outlook. Total enrollment is projected to increase an average of 378 subscribers annually throughout the forecast period, compared to an increase of 189 subscribers annually, as projected in the Prior Outlook.

Overall enrollment projections across all years of the forecast reflect an average annual decrease of -0.3% in PPO plans, an average decrease of -0.9% in HMO plans and an average increase of 26.0% for the MAPD plan.

As of June 2022, approximately 5,055 subscribers (4,939 active employees) were enrolled in a High Deductible Health Plan (3.0% of total enrollment). Active employees account for 97.7% of these subscribers, of which 92.9% are participating in the integrated state-sponsored Health Savings Account (HSA) offering.

<sup>\*</sup>Per Ch. 2022-156 (HB 5001) - Section 199: \$200 million added to beginning balance.

#### STATE EMPLOYEES' GROUP HEALTH SELF-INSURANCE TRUST FUND

As of June 2022, a total of 25,793 eligible employees, or 15.9%, opted out of enrollment in the Program, with 42.5% of those employees in OPS positions.

#### **REVENUE**

Actual premium revenue received during FY 2021-22 was \$2.54 billion, \$47.4 million less than the Prior Outlook due to actual experience. Investment earnings received during FY 2021-22 were \$3.9 million, \$3.8 million lower than the Prior Outlook, based on lower actual investment earnings. Refunds received for medical claims overpayments were \$1.5 million more than the Prior Outlook, with actual receipts of \$17.1 million. Pharmacy Benefit Manager (PBM) rebates received during FY 2021-22 totaled \$211.5 million, \$13.7 million higher than the Prior Outlook based on actual rebates received. This forecast also reflects the year-end pretax transfer of \$23.6 million, required by Section 110.161(8), Florida Statutes. Medicare Part D drug subsidy payments received during FY 2021-22 were \$17.8 million, up \$3.4 million due to higher than projected subsidy collections. Other revenue received during the period was \$14.3 million, an increase of \$11.6 million due primarily to the collection of Performance Guarantee Penalties and PBM audit adjustments. Total revenues received during FY 2021-22 were \$2.83 billion, reflecting a decrease of \$18.0 million from the Prior Outlook.

Combined premium contribution revenues for FY 2022-23 through FY 2026-27 are \$149.5 million lower than projected in the Prior Outlook. Investment earnings decreased \$1.8 million for FY 2022-23 due to lower projected interest rates and cash balances. Third Party Administrator (TPA) refunds reflect an increase of \$1.3 million per year due to actual experience. PBM Rebates are projected to decrease by a combined total of \$9.6 million for FY 2022-23 through FY 2026-27. Medicare Part D drug subsidy payments for FY 2022-23 through FY 2026-27 increased by a combined \$0.7 million based on higher actual experience. Overall, Total Revenue changes in this outlook reflect a combined decrease of \$156.7 million compared to the Prior Outlook.

#### **SPEND**

Total expenses paid in FY 2021-22 for self-insured PPO and HMO medical claims were \$1.71 billion, which was \$37.2 million higher than the Prior Outlook due to higher than expected claims experience. ASO fee expenses paid during the fiscal year were \$42.8 million. Total pharmacy claim expenses were \$814.6 million, up \$10.9 million from the Prior Outlook due to higher than expected pharmacy claims. FY 2021-22 fully-insured premium expenses came in \$2.3 million lower than expected, at \$338.0 million. Medicare Advantage Prescription Drug (MAPD) plan premium cost was \$4.5 million for FY 2021-22. The Shared Savings Program expenses were \$11.6 million, \$1.2 million less than the Prior Outlook due to lower administrative cost. Health savings account expenses were \$8.1 million. Operating costs were \$3.7 million, \$0.8 million lower than the Prior Outlook. Premium refunds for the period were \$5.9 million, reflecting an increase of \$1.2 million due to higher actuals than previously forecasted. Other expenses for FY 2021-22 totaled \$1.0 million, same as the Prior Outlook.

The forecast of PPO expenses for FY 2022-23 through FY 2026-27 reflects a combined projected increase of \$239.3 million. PPO medical claims projections overall are \$172.6 million higher, reflecting a \$57.1 million decrease due to lower projected enrollment, a \$19.0 million increase due to higher growth trend used in FY 2022-23, and \$134.5 million in higher projected claims experience. PPO Pharmacy expenses projections are \$68.1 million higher, reflecting a \$33.9 million decrease due to lower projected enrollment, a \$11.7 million increase due to higher growth trends used, and \$90.3 million in higher projected claims experience. PPO Administrative Services Only (ASO) fees and PBM Administration fees are \$1.4 million lower than the Prior Outlook.

The forecast of FY 2022-23 through FY 2026-27 reflects a combined increase of \$310.5 million in fully-insured and self-insured HMO expenses. Fully-insured premium payments reflect a projected combined decrease totaling \$9.4 million due to lower projected enrollment. HMO medical claims projections overall are \$190.2 million higher, reflecting a \$58.5 million decrease due to lower projected enrollment, a \$20.5 million increase due to higher growth trend used in FY 2022-23, and \$152.2 million in higher projected claims experience. HMO pharmacy expenses projections reflect a combined increase of \$128.2 million, reflecting a \$21.9 million decrease due to lower projected enrollment, a \$11.4 million increase due to higher growth trends used, and \$117.7 million in higher projected claims experience. HMO ASO fees and PBM administration fees reflect a combined increase of \$1.5 million due to shifts between carriers.

Combined, PPO and HMO medical claims across all years of the forecast (including FY 2021-22), compared to the Prior Outlook, reflect a \$400.0 million increase. The net combined increase in pharmacy claims costs across all years is \$207.2 million higher compared to the Prior Outlook. The same medical trends are presented for this Outlook, except for FY 2022-23. For FY 2022-23, both the PPO and HMO medical trend used is the per-member rolling 12-month trend of 9.2% provided by the PPO Plan. All remaining out years used the same medical trends adopted for the Prior Outlook.

MAPD premiums reflect an increase of \$7.6 million across all years of the forecast based on increased enrollment.

The forecast of FY 2022-23 through FY 2026-27 for the Shared Savings Program decreased \$8.3 million based on actual experience of Shared Saving program.

HSA Deposits reflect an increase of \$4.3 million across all years of the forecast due to higher enrollment in the High Deductible Plans.

Operating Costs and Administrative Assessment reflect an increase of \$13.0 million across all years of the forecast based on the FY 2022-23 budget adopted during the 2022 legislative session.

Premium Refunds reflect an increase of \$7.2 million across all years of the forecast based on increased refund activity.

Overall, expenses across all years of the forecast reflect a combined increase of \$619.0 million compared to the Prior Outlook.

#### Growth factors used to develop this Outlook are reflected below:

PPO MEDICAL												
Industry Range for CYs 20	020-22: 3.8	% - 7.7%										
	FY 2	21-22	FY 22-23	FY 23-24	FY 24-25	FY 25-26	FY 26-27					
	Applied	Actual YTD + Projected	Applied	Applied	Applied	Applied	Applied					
January 2022 Conference	7.40%	9.11%	6.85%	6.90%	6.90%	6.90%	6.90%					
August 2022 Conference	n/a	11.75%	9.20%	6.90%	6.90%	6.90%	6.90%					

		HMC	MEDICAL				
Industry Range for CYs 2	020-22: 3.8	% - 7.0%					
	FY 2	21-22	FY 22-23	FY 23-24	FY 24-25	FY 25-26	FY 26-27
	Applied	Actual YTD + Projected	Applied	Applied	Applied	Applied	Applied
January 2022 Conference	6.90%	10.84%	6.85%	6.90%	6.90%	6.90%	6.90%
August 2022 Conference	n/a	13.54%	9.20%	6.90%	6.90%	6.90%	6.90%

		Υ					
Industry Range for CYs 2	020-22: 5.2	% - 8.4%					
	FY 2	1-22	FY 22-23	FY 23-24	FY 24-25	FY 25-26	FY 26-27
	Applied	Actual YTD + Projected	Applied	Applied	Applied	Applied	Applied
January 2022 Conference	8.50%	9.41%	10.30%	10.80%	11.30%	11.50%	11.60%
August 2022 Conference	n/a	10.44%	12.90%	10.90%	11.30%	11.50%	11.60%

HMO PHARMACY												
Industry Range for CYs 2	020-22: 5.2	% - 8.4%										
	FY 2	21-22	FY 22-23	FY 23-24	FY 24-25	FY 25-26	FY 26-27					
	Applied	Actual YTD + Projected	Applied	Applied	Applied	Applied	Applied					
January 2022 Conference	9.20%	10.67%	11.00%	10.90%	11.80%	11.90%	12.10%					
August 2022 Conference	n/a	14.24%	13.40%	11.50%	11.80%	11.90%	12.10%					

FULLY INSURED HMO PREMIUM PAYMENTS													
Industry Range for CYs 2020-22: 4.4% - 5.9%													
	*CY 2022	CY 2023	CY 2024	CY 2025	CY 2026	CY 2027							
January 2022 Conference	4.60%	4.60%	4.60%	4.60%	4.60%	4.60%							
August 2022 Conference 4.60% 4.60% 4.60% 4.60% 4.60% 4.60%													

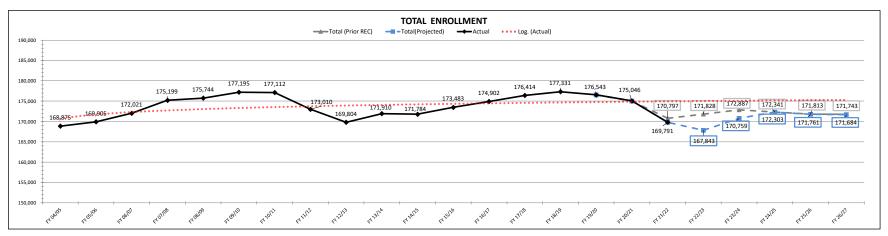
<sup>\*</sup>Actual trend rates

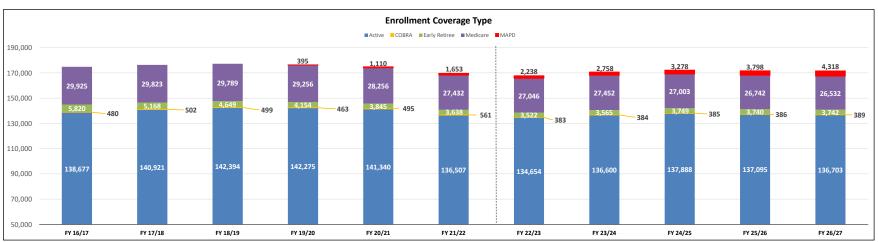
#### STATE EMPLOYEES' GROUP HEALTH SELF-INSURANCE TRUST FUND Exhibit I

#### **Enrollment Outlook by Fiscal Year**

Changes to Conferen		uaunt 2022 Comi	
Changes to Comeren	ce Forecast - A	ugust zozz Com	pared to January 2022

			Y 2021-22		FY 2022-23		FY 2023-24		FY 2024-25			FY 2025-26			FY 2026-27				
		Jan '22	Aug '22	Diff.	Jan '22	Aug '22	Diff.	Jan '22	Aug '22	Diff.	Jan '22	Aug '22	Diff.	Jan '22	Aug '22	Diff.	Jan '22	Aug '22	Diff.
	PPO Standard	76,790	76,411	(379)	77,339	75,344	(1,995)	77,917	76,535	(1,382)	77,801	77,232	(569)	77,690	76,992	(698)	77,630	76,801	(829)
Average Enrollment	PPO HDHP	3,674	3,722	48	3,718	3,800	82	3,757	3,851	94	3,753	3,893	140	3,749	3,890	141	3,747	3,888	141
by Plan	HMO Standard	87,441	86,724	(717)	87,524	85,199	(2,325)	87,615	86,343	(1,272)	86,843	86,616	(227)	86,083	85,795	(288)	85,722	85,382	(340)
	HMO HDHP	1,282	1,281	(1)	1,252	1,262	10	1,259	1,272	13	1,261	1,284	23	1,264	1,286	22	1,273	1,295	22
	MAPD	1,610	1,653	43	1,995	2,238	243	2,339	2,758	419	2,683	3,278	595	3,027	3,798	771	3,371	4,318	947
	Total	170,797	169,791	(1,006)	171,828	167,843	(3,985)	172,887	170,759	(2,128)	172,341	172,303	(38)	171,813	171,761	(52)	171,743	171,684	(59)
	Active (Non-OPS) Standard	125,959	125,382	(577)	126,567	123,824	(2,743)	127,309	125,629	(1,680)	126,552	126,820	268	125,805	126,057	252	125,428	125,671	243
	Active (Non-OPS) HDHP	4,282	4,338	56	4,293	4,429	136	4,332	4,485	153	4,330	4,529	199	4,329	4,528	199	4,334	4,533	199
A Fanallarant	OPS Standard	6,325	6,243	(82)	6,386	5,883	(503)	6,418	5,964	(454)	6,383	6,015	(368)	6,350	5,986	(364)	6,334	5,973	(361)
Average Enrollment by Coverage Type	OPS HDHP	548	544	(4)	544	518	(26)	548	522	(26)	548	524	(24)	548	524	(24)	550	526	(24)
by coverage type	COBRA	590	561	(29)	569	383	(186)	571	384	(187)	573	385	(188)	576	386	(190)	580	389	(191)
	Early Retiree	3,750	3,638	(112)	3,764	3,522	(242)	3,755	3,565	(190)	3,748	3,749	1	3,739	3,740	1	3,741	3,742	1
	Medicare	27,733	27,432	(301)	27,710	27,046	(664)	27,615	27,452	(163)	27,524	27,003	(521)	27,439	26,742	(697)	27,405	26,532	(873)
	MAPD	1,610	1,653	43	1,995	2,238	243	2,339	2,758	419	2,683	3,278	595	3,027	3,798	771	3,371	4,318	947
	Total	170,797	169,791	(1,006)	171,828	167,843	(3,985)	172,887	170,759	(2,128)	172,341	172,303	(38)	171,813	171,761	(52)	171,743	171,684	(59)





#### STATE EMPLOYEES' GROUP HEALTH SELF-INSURANCE TRUST FUND Exhibit II

### Financial Outlook by Fiscal Year <sup>(1)</sup> Changes to Conference Forecast - August 2022 Compared to January 2022 (In Millions)

	1	FY 2021-22	!		FY 2022-23			FY 2023-24			FY 2024-25	;		FY 2025-26			FY 2026-27	
	Jan '22	Aug '22	Diff.	Jan '22	Aug '22	Diff.	Jan '22	Aug '22	Diff.	Jan '22	Aug '22	Diff.	Jan '22	Aug '22	Diff.	Jan '22	Aug '22	Diff.
BEGINNING CASH BALANCE (12)	\$ 720.8	\$ 720.8	\$ -	\$ 670.2	\$ 606.6	\$ (63.6)	\$ 408.1	\$ 427.7	\$ 19.6	\$ 0.0	\$ 0.0	(2) \$ -	\$ 0.0 (2)	\$ 0.0	(2) \$ -	\$ 0.0 (2	\$ 0.0	\$ -
Ch. 2022-156 (HB 5001) - Section 199 (12)				\$ 0.0	\$ 200.0	\$ 200.0												
REVENUES:																		
Insurance Premiums (3)	\$ 2,565.1	\$ 2,517.7	\$ (47.4)	\$ 2,582.4	\$ 2,510.8	\$ (71.6)	\$ 2,594.4	\$ 2,547.6	\$ (46.8)	\$ 2,582.6	\$ 2,573.1	\$ (9.5)	\$ 2,572.1	\$ 2,561.7	\$ (10.4)	\$ 2,567.6	\$ 2,556.4	\$ (11.2)
Prior Year Premium Collection (11)	\$ 22.2	\$ 22.2	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	#\$ -	\$ -
Investment Earnings	7.7	3.9	(3.8)	5.9	4.1	(1.8)	-	-	-	-	-	-	-	-	-	-	-	-
TPA & Self-Insured HMO Refunds	15.6	17.1	1.5	15.6	16.9	1.3	15.6	16.9	1.3	15.6	16.9	1.3	15.6	16.9	1.3	15.6	16.9	1.3
PBM Rebates	197.8	211.5	13.7	220.9	217.6	(3.3)	241.8	241.6	(0.2)	263.6	266.7	3.1	280.3	266.3	(14.0)	292.7	297.5	4.8
Pretax Trust Fund Transfer	20.6	23.6	3.0	20.6	23.6	3.0	20.6	23.6	3.0	20.6	23.6	3.0	20.6	23.6	3.0	20.6	23.6	3.0
Medicare Part D Subsidy	14.4	17.8	3.4	16.7	16.6	(0.1)	16.7	16.9	0.2	16.6	16.9	0.3	16.6	16.8	0.2	16.6	16.7	0.1
Other Revenues	2.7	14.3	11.6		-			-			-			-			-	
TOTAL REVENUES	\$ 2,846.1	\$ 2,828.1	\$ (18.0)	\$ 2,862.1	\$ 2,789.6	\$ (72.5)	\$ 2,889.1	\$ 2,846.6	\$ (42.5)	\$ 2,899.0	\$ 2,897.2	\$ (1.8)	\$ 2,905.2	\$ 2,885.3	\$ (19.9)	\$ 2,913.1	\$ 2,911.1	\$ (2.0)
TOTAL CASH AVAILABLE	\$ 3,566.9	\$ 3,548.9	\$ (18.0)	\$ 3,532.3	\$ 3,596.2	\$ 63.9	\$ 3,297.2	\$ 3,274.3	\$ (22.9)	\$ 2,899.0	\$ 2,897.2	\$ (1.8)	\$ 2,905.2	\$ 2,885.3	\$ (19.9)	\$ 2,913.1	\$ 2,911.1	\$ (2.0)
EXPENSES:																		
PPO Plan	\$ 1,252.9	\$ 1,274.6	\$ 21.7	\$ 1,362.1	\$ 1,384.9	\$ 22.8	\$ 1,484.8	\$ 1,522.1	\$ 37.3	\$ 1,607.3	\$ 1,665.2	\$ 57.9	\$ 1,741.9	\$ 1,801.7	\$ 59.8	\$ 1,890.7	\$ 1,952.2	\$ 61.5
Medical Claims	798.0	817.5	19.5	858.8	877.8	19.0	925.1	953.2	28.1	987.6	1,028.4	40.8	1,054.2	1,096.1	41.9	1,126.0	1,168.8	42.8
ASO Fee	17.7	17.6	(0.1)	17.8	17.3	(0.5)	17.9	17.5	(0.4)	17.8	17.7	(0.1)	17.8	17.6	(0.2)	17.8	17.6	(0.2)
Prescription Drug Claims	435.1	437.4	2.3	483.4	487.7	4.3	539.7	549.3	9.6	599.8	617.0	17.2	667.8	685.9	18.1	744.8	763.7	18.9
PBM Claims Administration	2.1	2.1	-	2.1	2.1	-	2.1	2.1	-	2.1	2.1	-	2.1	2.1	-	2.1	2.1	-
HMO Plan	\$ 1,608.5	\$ 1,632.9	·	\$ 1,725.7	\$ 1,742.3	\$ 16.6	\$ 1,836.5	\$ 1,879.5	\$ 43.0	\$ 1,976.9	\$ 2,055.0	\$ 78.1	\$ 2,109.5	\$ 2,192.7	\$ 83.2	\$ 2,263.2	\$ 2,352.8	\$ 89.6
Premium Payments	340.3	338.0	(2.3)	356.0	348.3	(7.7)	355.1	351.8	(3.3)	386.6	387.4	0.8	400.9	401.4	0.5	417.6	417.9	0.3
Medical Claims	872.8	890.5	17.7	933.4	947.9	14.5	999.6	1,026.8	27.2	1,059.3	1,106.2	46.9	1,122.8	1,172.1	49.3	1,195.9	1,248.2	52.3
ASO Fee	24.8	25.2	0.4	24.8	24.7	(0.1)	24.9	25.1	0.2	24.7	25.3	0.6	24.5	25.0	0.5	24.4	24.9	0.5
Prescription Drug Claims	368.6	377.2	8.6	409.5	419.5	10.0	454.9	473.9	19.0	504.3	534.1	29.8	559.4	592.3	32.9	623.4	659.9	36.5
PBM Claims Administration	2.0	2.0	-	2.0	1.9	(0.1)	2.0	1.9	(0.1)	2.0	2.0	-	1.9	1.9	-	1.9	1.9	-
MA-PD Plan	\$ 4.5 \$ 12.8	\$ 4.5 \$ 11.6	\$ - \$ (1.2)	\$ 5.4 \$ 13.1	\$ 6.0 \$ 11.5	\$ 0.6 \$ (1.6)	\$ 6.3 \$ 13.5	\$ 7.4	\$ 1.1 \$ (1.7)	\$ 7.2 \$ 13.9	\$ 8.7 \$ 12.2	\$ 1.5 \$ (1.7)	\$ 8.1 \$ 14.4	\$ 10.1 \$ 12.7	\$ 2.0	\$ 9.0 \$ 14.8	\$ 11.4 \$ 13.2	\$ 2.4
Shared Savings Program	,							\$ 11.8	+ (,				'		\$ (1.7)			\$ (1.6)
Medical Claims Administrative Fees (4)	4.0 7.7	4.3 5.8	0.3 (1.9)	4.2 7.7	4.2 5.8	(1.9)	4.5 7.7	4.4 5.8	(0.1)	4.8 7.7	4.7 5.8	(0.1) (1.9)	5.2 7.7	5.1 5.8	(0.1) (1.9)	5.5 7.7	5.4 5.8	(0.1) (1.9)
Shared Savings to Employees	1.1	1.5	0.4	1.2	1.5	0.3	1.3	1.6	0.3	1.4	1.7	0.3	1.5	1.8	0.3	1.6	2.0	0.4
HSA Deposits (3)	7.8	8.1	0.4	7.8	8.6	0.8	7.8	8.6	0.8	7.8	8.6	0.8	7.8	8.6	0.8	7.8	8.6	0.4
Operating Costs & Admin Assessment	4.5	3.7	(0.8)	4.5	8.3	3.8	4.5	7.0	2.5	4.5	7.0	2.5	4.5	7.0	2.5	4.5	7.0	2.5
Premium Refunds	4.7	5.9	1.2	4.7	5.9	1.2	4.7	5.9	1.2	4.7	5.9	1.2	4.7	5.9	1.2	4.7	5.9	1.2
Other Expenses (5)	1.0	1.0	-	0.9	1.0	0.1	0.9	1.0	0.1	0.9	1.0	0.1	0.9	1.0	0.1	0.9	1.0	0.1
TOTAL EXPENSES	\$ 2,896.7	\$ 2,942.3	\$ 45.6	\$ 3,124.2	\$ 3,168.5	\$ 44.3	\$ 3,359.0	\$ 3,443.3	\$ 84.3	\$ 3,623.2	\$ 3,763.6	\$ 140.4	\$ 3,891.8	\$ 4,039.7	\$ 147.9	\$ 4,195.6	\$ 4,352.1	\$ 156.5
EXCESS OF REV. OVER EXP.	\$ (50.6)	\$ (114.2)	\$ (63.6)	\$ (262.1)	\$ (378.9)	\$ (116.8)	\$ (469.9)	\$ (596.7)	\$ (126.8)	\$ (724.2)	\$ (866.4)	\$ (142.2)	\$ (986.6)	\$ (1,154.4)	\$ (167.8)	\$ (1,282.5)	\$ (1,441.0)	\$ (158.5)
	· (cont)	* ()	* (55.5)	<del>+ ()</del>	+ (====)	<del>+ (11117)</del>	<u> </u>	* (/	<u> </u>	<del>+ (</del>	+ (,	<del>+ ()</del>	+ (55515)	+ (.,,	+ (::::)	* (1,222.0)	+ (.,)	+ (13313)
ENDING CASH BALANCE (6)	\$ 670.2	\$ 606.6	\$ (63.6)	\$ 408.1	\$ 427.7	\$ 19.6	\$ (61.8)	\$ (169.0)	\$ (107.2)	\$ (724.2)	\$ (866.4)	\$ (142.2)	\$ (986.6)	\$ (1,154.4)	\$ (167.8)	\$ (1,282.5)	\$ (1,441.0)	\$ (158.5)
-			. ()				. (				. ()							
ADDITONAL INFORMATION																		
Shared Savings Credits (7)	\$ 0.8	\$ 1.0	\$ 0.2	\$ 0.9	\$ 1.1	\$ 0.2	\$ 1.0	\$ 1.2	\$ 0.2	\$ 1.0	\$ 1.3	\$ 0.3	\$ 1.1	\$ 1.3	\$ 0.2	\$ 1.2	\$ 1.4	\$ 0.2
Unreported PPO Plan Claims Liability (8)	\$ 71.8	81.8	10.0	\$ 76.6	87.8	11.2	\$ 81.8	85.8	4.0	\$ 87.3	92.6	5.3	\$ 93.2	98.6	5.4	\$ 99.5	105.2	5.7
Unreported HMO Plan Claims Liability (9)	139.6	151.4	11.8	147.7	161.1	13.4	156.4	174.6	18.2	165.8	188.1	22.3	175.7	199.3	23.6	187.1	212.2	25.1
Unreported PBM Claims Liability (10)	8.1	8.2	0.1	8.9	9.1	0.2	9.9	10.2	0.3	11.0	11.5	0.5	12.3	12.8	0.5	13.6	14.2	0.6
Total Unreported Claims Liability	\$ 220.3	\$ 242.4	\$ 22.1	\$ 234.1	\$ 259.1	\$ 25.0	\$ 249.1	\$ 271.8	\$ 22.7	\$ 265.1	\$ 293.5	\$ 28.4	\$ 282.3	\$ 312.0	\$ 29.7	\$ 301.4	\$ 333.0	\$ 31.6

Highlights of Changes to Forecast

A) Inclusion of actual enrollment and cash flows through June 2022.
 B) Revised Investment Earnings rates.
 C) Revised growth factors for Preferred Provider Organization (PPO) and Health Maintenance Organization (HMO) pharmacy claims.
 D) Revised growth factors for PPO and HMO medical claims for FY 2022-23.
 G) Revised projections for the Shared Savings program.

#### STATE EMPLOYEES' GROUP HEALTH SELF-INSURANCE TRUST FUND

#### Exhibit III

### Financial Outlook by Fiscal Year <sup>(1)</sup> <sub>(In Millions)</sub>

		<u> </u>	FY 2021-22	<u>!</u>	FY 2022-23	<u>!</u>	FY 2023-24		FY 2024-25		FY 2025-26	_	FY 2026-27
		_	Estimate	_	Estimate	_	Estimate		Estimate		Estimate	_	Estimate
BEGINNING CAS		\$	720.8	\$	606.6	\$	427.7	\$	0.0 (2)	\$	0.0 (2)	\$	0.0 (2)
Ch. 2022-156 (HB 500	01) - Section 199 <sup>(12)</sup>				200.0								
REVENUES:	umo:												
Insurance Premi	ums:	\$	2.113.3	\$	2,111.6	\$	2,140.7	\$	2.160.9	\$	2,148.3	\$	2,142.1
Employee		Ψ	163.5	Ψ	161.3	Ψ	163.5	Ψ	165.0	Ψ	164.1	Ψ	163.6
HSA Contributi	ons <sup>(3)</sup>		8.1		8.6		8.6		8.6		8.6		8.6
COBRA			7.5		5.3		5.3		5.3		5.3		5.3
Early Retiree			45.1		43.9		44.3		47.8		47.8		47.9
Medicare			180.2		180.1		185.2		185.5		187.6		188.9
Prior Year Prer			22.2		0.0		0.0		0.0		0.0 0.0		0.0
Investment Earni PPO - TPA Refu	•		3.9 9.2		4.1 9.0		0.0 9.0		0.0 9.0		9.0		0.0 9.0
PPO - PBM Reb			106.0		116.2		129.1		142.6		133.3		157.9
HMO - Self-Insur			7.9		7.9		7.9		7.9		7.9		7.9
HMO - PBM Reb	oates		105.5		101.4		112.5		124.1		133.0		139.6
Pretax Trust Fun	d Transfer		23.6		23.6		23.6		23.6		23.6		23.6
PPO - Medicare	•		16.4		15.3		15.5		15.5		15.4		15.4
HMO - Medicare	Part D Subsidy		1.4		1.3		1.4		1.4		1.4		1.3
Other Revenues	-0	_	14.3	_	0.0	_	0.0		0.0	•	0.0	_	0.0
TOTAL CASH AV		\$	2,828.1	\$	2,789.6	\$	2,846.6	\$	2,897.2	\$	2,885.3	\$	2,911.1
TOTAL CASH AV EXPENSES:	AILABLE	\$_	3,548.9	\$_	3,596.2	\$_	3,274.3	\$	2,897.2	\$	2,885.3	\$	2,911.1
State PPO Plan:													
Medical Claims		\$	817.5	\$	877.8	\$	953.2	\$	1,028.4	\$	1,096.1	\$	1,168.8
ASO Fee			17.6		17.3		17.5		17.7		17.6		17.6
Prescription Dr	ug Claims		437.4		487.7		549.3		617.0		685.9		763.7
PBM Claims Ad	dministration		2.1		2.1		2.1		2.1		2.1		2.1
HMO Plan:													
Premium Paym			338.0		348.3		351.8		387.4		401.4		417.9
Medical Claims ASO Fee	<b>;</b>		890.5 25.2		947.9 24.7		1,026.8 25.1		1,106.2 25.3		1,172.1 25.0		1,248.2 24.9
Prescription Dr	ua Claims		377.2		419.5		473.9		25.3 534.1		592.3		659.9
PBM Claims A	•		2.0		1.9		1.9		2.0		1.9		1.9
	tage Prescripton Drug Plan		4.5		6.0		7.4		8.7		10.1		11.4
Shared Savings	Program:												
Medical Claims			4.3		4.2		4.4		4.7		5.1		5.4
Administrative			5.8		5.8		5.8		5.8		5.8		5.8
Shared Savings HSA Deposits (3	s to Employees		1.5		1.5		1.6		1.7		1.8		2.0
	& Admin Assessment		8.1 3.7		8.6 8.3		8.6 7.0		8.6 7.0		8.6 7.0		8.6 7.0
Premium Refund			5.9		5.9		5.9		5.9		7.0 5.9		5.9
Other Expenses	(=)		1.0		1.0		1.0		1.0		1.0		1.0
TOTAL EXPENSE		\$	2,942.3	\$	3,168.5	\$	3,443.3	\$	3,763.6	\$	4,039.7	\$	4,352.1
	ENUES OVER EXPENSES	\$	(114.2)	\$	(378.9)	\$	(596.7)	\$	(866.4)	\$	(1,154.4)	\$	(1,441.0)
ENDING CASH B	ALANCE (6)	\$	606.6	\$	427.7	\$	(169.0)	\$	(866.4)	\$	(1,154.4)	\$	(1,441.0)
	NAL INFORMATION									_		_	
Total Unreported	Claims Liability	\$_	242.4	\$_	259.1	\$_	271.8	\$ .	293.5	\$	312.0	\$_	333.0
	PPO Standard		76,411		75,344		76,535		77,232		76,992		76,801
Average	PPO HDHP		3,722		3,800		3,851		3,893		3,890		3,888
Enrollment by	HMO Standard		86,724		85,199		86,343		86,616		85,795		85,382
Plan	HMO HDHP		1,281		1,262		1,272		1,284		1,286		1,295
	MAPD		1,653	_	2,238	_	2,758		3,278		3,798	_	4,318
	Total		169,791	-	167,843	-	170,759	•	172,303		171,761	-	171,684
	Active (Non-OPS) Standard	1	125,382		123,824		125,629		126,820		126,057		125,671
	Active (Non-OPS) HDHP OPS Standard		4,338 6.243		4,429 5,883		4,485 5.064		4,529 6.015		4,528 5.086		4,533 5,973
Average	OPS Standard OPS HDHP		6,243 544		5,883 518		5,964 522		6,015 524		5,986 524		5,973 526
Enrollment by	COBRA		561		383		384		385		386		389
Coverage Type	Early Retiree		3,638		3,522		3,565		3,749		3,740		3,742
	Medicare		27,432		27,046		27,452		27,003		26,742		26,532
	MAPD		1,653	_	2,238	_	2,758		3,278		3,798	_	4,318
	Total		169,791	_	167,843	_	170,759		172,303		171,761	-	171,684

### Exhibit IV Notes to the Financial Outlook

- 1) Actual results may differ from projected values with increasing likelihood of variance in future periods.
- 2) Assumes no carry forward of a negative ending cash balance from prior year.
- 3) Includes HSA contributions which approximate a split between employer and employee of 43% and 57%, respectively.
- 4) Administrative expenses for Health Reimbursement Arrangement (HRA) account administration, transparency services entity, and comprehensive surgical and medical procedures entity.
- 5) Other Expenses include the estimated impact of Patient-Centered Outcomes Research Institute (PCORI) fees.
- 6) Includes funds held in accounts outside of the Trust Fund at the Department of Financial Services, Division of Treasury, for the purpose of paying medical claims.
- 7) Includes funds designated for employee HRA accounts as a result of shared savings and employer funds designated for, but not yet transferred to the Pre-Tax Trust Fund, for employee Flexible Spending Account (FSA) accounts as a result of shared savings. Projected amounts of bundled service medical claims and shared savings to employees is unknown and expenditures have not been included at this time.
- 8) Includes estimated HMO IBNR medical claims and outstanding drafts.
- 9) Includes estimated PPO and HMO IBNR Rx claims.
- 10) Includes estimated PPO Plan and Self-Insured HMO Plans Incurred but not Reported (IBNR) claims and outstanding drafts, HRA account balances, and shared savings designated for FSA accounts not yet transferred to the Pre-Tax Trust Fund.
- 11) DSGI received \$22,198,825.76 in premium revenue receipts for June 2021 but was received after the fiscal year cutoff and was processed in July 2021.
- 12) Ch. 2022-156 (HB 5001) General Appropriations Act: SECTION 199. The Chief Financial Officer shall transfer \$200,000,000 from the General Revenue Fund to the State Employees' Health Insurance Trust Fund for Fiscal Year 2022-2023.

#### Exhibit V

#### **Comparison of Financial Outlooks**

#### Fiscal Year 2021-22

(In Millions)

#### \$ 670.2 - Previous Ending Cash Balance Forecast<sup>(i)</sup>

#### (18.0) - Decrease in Revenue Forecast

(47.4) - Net Decrease in Insurance Premiums

- (25.4) Decrease in employer and enrollee Insurance Premiums due to lower actual enrollment from 170,797 to 169,791
  - 0.3 Increase in employer and enrollee HSA contributions
- (22.3) Decrease in Insurance Premiums due to shifts in enrollment categories
- (3.8) Decrease in Investment Earnings due to lower actual cash balance
- 1.4 Increase in PPO TPA Refunds due to higher actual than projected activity
- 0.6 Increase in PPO PBM Rebates
  - (0.4) Decrease due to lower actual enrollment from 80,464 to 80,133
  - 1.0 Increase due to higher actual activity
- 0.1 Increase in HMO Self-Insured Refunds
  - (0.1) Decrease due to lower actual enrollment from 58,478 to 57,950
  - 0.2 Increase due to higher actual experience
- 13.1 Increase in HMO PBM Rebates
  - (0.9) Decrease due to lower actual enrollment from 82,962 to 82,262
  - 14.0 Increase due to higher actual activity
- 3.0 Increase in Pretax Trust Fund Transfer due to higher actual than projected FY 2021-22
- 3.2 Increase in PPO Medicare Part D Subsidy
  - (0.2) Decrease due to a lower actual enrollment from 20,155 to 19,913
  - 3.4 Increase due to higher projected per member subsidy
- 0.2 Increase in HMO Medicare Part D Subsidy due to higher actual per member subsidy
- 11.6 Increase in Other Revenues
  - 5.8 Increase due to Performance Guarantee Penalties
  - 4.9 Increase due to PBM Audits Adjustments
  - 0.1 Increase due to Litigation Settlements
  - 0.9 Increase due to Other Revenue

#### 45.6 - Increase in Expense Forecast

#### 21.7 - Increase in State PPO Plan

- 19.5 Increase in Medical Claims
  - (3.4) Decrease due to lower actual enrollment from 80,464 to 80,133
  - 22.9 Increase due to higher claims experience
- (0.1) Decrease in ASO Fee Expense due to lower actual enrollment from 80,464 to 80,133
- 2.3 Increase in Prescription Drug Claims
  - (1.8) Decrease due to lower actual enrollment from 80,464 to 80,133
  - 4.1 Increase due to higher claims experience

#### 24.4 - Increase in HMO Plan

- (2.3) Decrease in Premium Payments
  - (2.1) Decrease due to lower actual enrollment from 30,243 to 30,053
  - $\left( 0.2\right)$  Decrease due to shifts in enrollment categories
- 17.7 Increase in Medical Claims
  - (7.9) Decrease due to lower actual enrollment from 58,478 to 57,950
  - 25.6 Increase due to higher actual claims experience
- 0.4 Increase in ASO Fees
  - (0.2) Decrease due to lower actual enrollment from 58,478 to 57,950
  - 0.6 Increase due to shifts in enrollment between HMO plans
- 8.6 Increase in Prescription Drug Claims
  - (3.1) Decrease due to lower actual enrollment from 82,962 to 82,262
  - 11.7 Increase due to higher claims experience

#### (1.2) - Decrease in Shared Savings Program

- 0.3 Increase due to higher actual Bundled Surgical Service claims
- (1.9) Decrease in Administrative Fees for HRA plan administrator
  - (1.5) Decrease due to actual Bundled Services provider fees
  - (0.1) Decrease due to actual Transparency Services provider fees
  - (0.3) Decrease due to actual HRA plan administrator fees

#### 0.4 - Increase in Shared Savings to Employees

#### 0.7 - Increase in Other Expense Categories

- 0.3 Increase due to higher actual employer and enrollee HSA Deposits
- (0.8) Decrease in Operating Costs and Administrative Assessments based on actual cost.
- 1.2 Increase in Premium Refunds due to higher actual activity

#### 606.6 - Ending Cash Balance<sup>(1)</sup>

<sup>(</sup>i) Self Insurance Estimating Conference held in January 2022.

#### Exhibit VI

#### Comparison of Financial Outlooks

#### Fiscal Year 2022-23

(In Millions)

#### \$ 408.1 - Previous Ending Cash Balance Forecast (1)

- (63.6) Decrease in Beginning Cash Balance Forecast
- 200.0 Adjustment to Beginning Cash due to Ch. 2022-156 (HB 5001) Section 199
- (72.5) Decrease in Revenue Forecast
  - (71.6) Net Decrease in Insurance Premiums
    - (61.4) Decrease in employer and enrollee Insurance Premiums due to lower projected enrollment from 171,828 to 167,843
    - 0.8 Increase in projected employer and enrollee HSA contributions
    - (11.0) Decrease in Insurance Premiums due to shifts in enrollment categories
  - (1.8) Decrease in Investment Earnings
    - (1.6) Decrease due to lower projected interest rates from 1.1% to 0.8%
    - (0.2) Decrease due to lower projected cash balance
  - 1.2 Increase in PPO TPA Refunds
    - (0.2) Decrease due to lower projected enrollment from 81,057 to 79,144
      - 1.4 Increase due to higher projected activity
  - (2.1) Decrease in PPO PBM Rebates
    - (2.7) Decrease due to lower projected enrollment from 81,057 to 79,144
    - 0.6 Increase due to higher projected activity
  - 0.1 Increase in HMO Self-Insured Refunds
    - (0.2) Decrease due to lower projected enrollment from 58,528 to 56,760
    - 0.3 Increase due to higher projected activity
  - (1.2) Decrease in HMO PBM Rebates
    - (2.9) Decrease due to lower projected enrollment from 83,032 to 80,661
    - 1.7 Increase due to higher projected activity
  - 3.0 Increase in Pretax Trust Fund Transfer due to higher actual than projected FY 2021-22
  - (0.1) Decrease in PPO Medicare Part D Subsidy
    - (0.5) Decrease due to a lower projected enrollment from 20,142 to 19,475
    - 0.4 Increase due to higher projected per member subsidy

#### 44.3 - Increase in Expense Forecast

- 22.8 Increase in State PPO Plan
  - 19.0 Increase in Medical Claims
    - (20.4) Decrease due to lower projected enrollment from 81,057 to 79,144
    - 19.0 Increase due to higher growth factor from 6.85% to 9.20%
    - 20.4 Increase due to higher claims experience
  - (0.5) Decrease in ASO Fee Expense due to lower projected enrollment from 81,057 to 79,144
  - 4.3 Increase in Prescription Drug Claims
    - (11.4) Decrease due to lower projected enrollment from 81,057 to 79,144
    - 11.2 Increase due to higher growth factor from 10.30% to 12.9%
    - 4.5 Increase due to higher claims experience

#### 16.6 - Increase in HMO Plan

- (7.7) Decrease in Premium Payments
  - (6.3) Decrease due to lower projected enrollment from 30,249 to 29,698
  - (1.4) Decrease due to shifts in enrollment categories
- 14.5 Increase in Medical Claims
  - (28.3) Decrease due to lower projected enrollment from 58,528 to 56,760
  - 0.2 Increase due to lower projected Shared Savings
  - 20.5 Increase due to higher growth factor from 6.85% to 9.20%
  - 22.1 Increase due to higher projected claims experience
- (0.1) Decrease in ASO Fees
  - (0.7) Decrease due to lower projected enrollment from 58,528 to 56,760
  - 0.6 Increase due to shifts in enrollment between HMO plans
- 10.0 Increase in Prescription Drug Claims
  - (11.7) Decrease due to lower projected enrollment from 83,032 to 80,661
  - 8.9 Increase due to higher growth factor from 11.00% to 13.40%
  - 12.8 Increase due to higher claims experience
- (0.1) Decrease in PBM Claims Administration due to lower projected enrollment from 83,032 to 80,661
- 0.6 Increase in MAPD Premium Payments
  - 0.7 Increase due to higher projected enrollment from 1,995 to 2,238
  - (0.1) Decrease due to shifts in enrollment categories
- (1.6) Decrease in Shared Savings Program
  - (1.9) Decrease in Administrative Fees due to actual experience
  - 0.3 Increase in Shared Savings rewards to Employees
- 5.9 Increase in Other Expense Categories
  - 0.8 Increase due to higher projected employer and enrollee HSA Deposits
  - 3.8 Increase in Operating Costs and Administrative Assessments based on FY 2022-23 budget
  - 1.2 Increase in Premium Refunds due to higher projected activity
  - 0.1 Increase in Other Expenses due to the Patient-Centered Outcomes Research Institute (PCORI) Fees

#### 427.7 - Ending Cash Balance<sup>(1)</sup>

Self Insurance Estimating Conference held in January 2022.

#### Exhibit VII

#### **Comparison of Financial Outlooks**

#### Fiscal Year 2023-24

(In Millions)

#### \$ (61.8) - Previous Ending Cash Balance Forecast (i)

- 19.6 Increase in Beginning Cash Balance Forecast
- (42.5) Decrease in Revenue Forecast
  - (46.8) Net Decrease in Insurance Premiums
    - (37.4) Decrease in employer and enrollee Insurance Premiums due to lower projected enrollment from 172.887 to 170.759
      - 0.8 Increase in projected employer and enrollee HSA contributions
    - (10.2) Decrease in Insurance Premiums due to shifts in enrollment categories
  - 1.2 Increase in PPO TPA Refunds
    - (0.1) Decrease due to lower projected enrollment from 81,674 to 80,386
    - 1.3 Increase due to higher projected activity
  - (0.9) Decrease in PPO PBM Rebates
    - (2.0) Decrease due to lower projected enrollment from 81,674 to 80,386
    - 1.1 Increase due to higher projected activity
  - 0.1 Increase in HMO Self-Insured Refunds
    - (0.2) Decrease due to lower projected enrollment from 58,634 to 57,512
    - 0.3 Increase due to higher projected activity
  - 0.7 Increase in HMO PBM Rebates
    - (2.0) Decrease due to lower projected enrollment from 83,187 to 81,736
    - 2.7 Increase due to higher projected activity
  - 3.0 Increase in Pretax Trust Fund Transfer due to higher actual than projected FY 2021-22
  - 0.1 Increase in PPO Medicare Part D Subsidy

28.1 - Increase in Medical Claims

- (0.3) Decrease due to a lower projected enrollment from 20,115 to 19,788
- 0.4 Increase due to higher projected per member subsidy
- $0.1 \hspace{0.3cm} \hbox{- Increase in HMO-Medicare Part D Subsidy due to higher projected per member subsidy} \\$

#### 84.3 - Increase in Expense Forecast

- 37.3 Increase in State PPO Plan
  - (14.7) Decrease due to lower projected enrollment from 81,674 to 80,386
  - 42.8 Increase due to higher claims experience
  - (0.4) Decrease in ASO Fee Expense due to lower projected enrollment from 81,674 to 80,386
  - 9.6 Increase in Prescription Drug Claims
    - (8.5) Decrease due to lower projected enrollment from 81,674 to 80,386
    - 0.5~ Increase due to higher growth factor from 10.80% to 10.90%
    - 17.6 Increase due to higher claims experience

#### 43.0 - Increase in HMO Plan

- (3.3) Decrease in Premium Payments
  - (1.7) Decrease due to lower projected enrollment from 30,240 to 30,098
  - (1.6) Decrease due to shifts in enrollment categories
- 27.2 Increase in Medical Claims
  - (19.2) Decrease due to lower projected enrollment from 58,634 to 57,512
  - 0.2 Increase due to lower Shared Savings
  - 46.2 Increase due to higher projected claims experience
- 0.2 Increase in ASO Fees
  - (0.5) Decrease due to lower projected enrollment from 58,634 to 57,512
  - 0.7 Increase due to shifts between HMO plans
- 19.0 Increase in Prescription Drug Claims
  - (7.9) Decrease due to lower projected enrollment from 83,187 to 81,736
  - $2.6\;$  Increase due to higher growth factor from 10.90% to 11.50%
  - 24.3 Increase due to higher claims experience
- (0.1) Decrease in PBM Claims Administration due to shifts in enrollment from 83,187 to 81,736
- 1.1 Increase in MAPD Premium Payments
  - 1.3 Increase due to higher projected enrollment from 2,339 to 2,758
  - (0.2) Decrease due to shifts in enrollment categories
- (1.7) Decrease in Shared Savings Program
  - (0.1) Decrease in Bundled Service claims based on lower projected utilization
  - (1.9) Decrease in Administrative Fees due to actual experience
  - 0.3 Increase in Shared Savings rewards to Employees
- 4.6 Increase in Other Expense Categories
  - 0.8 Increase due to higher projected employer and enrollee HSA Deposits
  - 2.5 Increase in Operating Costs and Administrative Assessments based on recurring FY 2022-23 budget
  - 1.2 Increase in Premium Refunds due to higher projected activity
  - 0.1 Increase in Other Expenses due to the Patient-Centered Outcomes Research Institute (PCORI) Fees

#### (169.0) - Ending Cash Balance<sup>(1)</sup>

<sup>(</sup>i) Self Insurance Estimating Conference held in January 2022.

#### **Exhibit VIII**

#### **Comparison of Financial Outlooks**

#### Fiscal Year 2024-25

(In Millions)

#### \$ (724.2) - Previous Ending Cash Balance Forecast (i)

#### (1.8) - Decrease in Revenue Forecast

- (9.5) Net Decrease in Insurance Premiums
  - (0.8) Decrease in employer and enrollee Insurance Premiums due to lower projected enrollment from 172,341 to 172,303
  - 0.8 Increase in projected employer and enrollee HSA contributions
  - (9.5) Decrease in Insurance Premiums due to shifts in enrollment categories
- 1.2 Increase in PPO TPA Refunds due to higher than projected activity
- 0.7 Increase in PPO PBM Rebates
  - (0.8) Decrease due to lower projected enrollment from 81,554 to 81,125
  - 1.5 Increase due to lower projected activity
- 0.1 Increase in HMO Self-Insured Refunds due to higher projected activity
- 2.4 Increase in HMO PBM Rebates
  - (0.1) Decrease due to lower projected enrollment from 82,472 to 82,385
  - 2.5 Increase due to higher projected activity
- 3.0 Increase in Pretax Trust Fund Transfer due to higher actual than projected FY 2021-22
- 0.2 Increase in PPO Medicare Part D Subsidy
  - (0.3) Decrease due to lower projected Medicare enrollment from 20,088 to 19,732
  - 0.5 Increase due to higher projected per member subsidy
- 0.1 Increase in HMO Medicare Part D Subsidy due to higher projected per member subsidy

#### 140.4 - Increase in Expense Forecast

- 57.9 Increase in State PPO Plan
  40.8 Increase in Medical Claims
  - (5.2) Decrease due to lower projected enrollment from 81,554 to 81,125
  - 46.0 Increase due to higher claims experience
  - (0.1) Decrease in ASO Fee Expense due to shifts in enrollment
    - from 81,554 to 81,125
  - 17.2 Increase in Prescription Drug Claims
    - $\left(3.2\right)$  Decrease due to lower projected enrollment from 81,554 to 81,125
    - 20.4 Increase due to higher claims experience

#### 78.1 - Increase in HMO Plan

- 0.8 Increase in Premium Payments
  - (0.5) Decrease due to lower projected enrollment from 29,974 to 29,937
  - 1.3 Increase due to shifts in enrollment categories
- 46.9 Increase in Medical Claims
  - (3.2) Decrease due to lower projected enrollment from 58,131 to 57,959
  - 0.2 Increase due to lower projected Shared Savings
  - 49.9 Increase due to higher projected claims experience
- 0.6 Increase in ASO Fees
  - (0.1) Decrease due to lower projected enrollment from 58,131 to 57,959
  - 0.7 Increase due to shifts between HMO plans
- 29.8 Increase in Prescription Drug Claims
  - (0.5) Decrease due to lower projected enrollment from 82,472 to 82,385
  - 30.3 Increase due to higher claims experience

#### 1.5 - Increase in MAPD Premium Payments

- 1.9 Increase due to higher projected enrollment from 2,683 to 3,278
- (0.4) Decrease due to shifts in enrollment categories

#### (1.7) - Decrease in Shared Savings Program

- (0.1) Decrease in Bundled Service claims based on lower projected utilization
- (1.9) Decrease in Administrative Fees due to actual experience
- 0.3 Increase in Shared Savings to Employees due to higher utilization

#### 4.6 - Increase in Other Expense Categories

- $0.8\,\,$  Increase due to higher projected employer and enrollee HSA Deposits
- Increase in Operating Costs and Administrative Assessments based on recurring FY 2022-23 budget
- 1.2 Increase in Premium Refunds due to higher projected activity
- 0.1 Increase in Other Expenses due to the Patient-Centered Outcomes Research Institute (PCORI) Fees

#### (866.4) - Ending Cash Balance<sup>(1)</sup>

<sup>(</sup>i) Self Insurance Estimating Conference held in January 2022.

#### **Exhibit IX**

#### **Comparison of Financial Outlooks**

#### Fiscal Year 2025-26

(In Millions)

#### \$ (986.6) - Previous Ending Cash Balance Forecast<sup>(i)</sup>

#### (19.9) - Decrease in Revenue Forecast

(10.4) - Net Decrease in Insurance Premiums

- (1.1) Decrease in employer and enrollee Insurance Premiums due to lower projected enrollment from 171,813 to 171,761
- 0.8 Increase in projected employer and enrollee HSA contributions
- (10.1) Decrease in Insurance Premiums due to shifts in enrollment categories
- 1.2 Increase in PPO TPA Refunds
  - (0.1) Decrease due to lower projected enrollment from 81,439 to 80,882
  - 1.3 Increase due to higher projected activity
- (17.9) Decrease in PPO PBM Rebates
  - (0.9) Decrease due to lower projected enrollment from 81,439 to 80,882
  - (17.0) Decrease due to lower projected activity
  - 0.1 Increase in HMO Self-Insured Refunds due to higher projected activity
  - 3.9 Increase in HMO PBM Rebates
    - (0.2) Decrease due to lower projected enrollment from 81,766 to 81,656
    - 4.1 Increase due to higher actual activity
  - 3.0 Increase in Pretax Trust Fund Transfer due to higher actual than projected FY 2021-22
  - 0.1 Increase in PPO Medicare Part D Subsidy
    - (0.4) Decrease due to lower projected Medicare enrollment from 20,063 to 19,578
    - 0.5 Increase due to higher projected per member subsidy
- 0.1 Increase in HMO Medicare Part D Subsidy due to higher projected per member subsidy

#### 147.9 - Increase in Expense Forecast

- 59.8 Increase in State PPO Plan 41.9 - Increase in Medical Claims
  - (7.2) Decrease due to lower projected enrollment from 81,439 to 80,882
  - 49.1 Increase due to higher claims experience
  - (0.2) Decrease in ASO Fee Expense due to lower projected enrollment from 81,439 to 80,882
  - 18.1 Increase in Prescription Drug Claims
    - (4.6) Decrease due to lower projected enrollment from 81,439 to 80,882
    - 22.7 Increase due to higher claims experience

#### 83.2 - Increase in HMO Plan

- 0.5 Increase in Premium Payments
  - (1.1) Decrease due to lower projected enrollment from 29,712 to 29,631
  - 1.6 Increase due to shifts in enrollment categories
- 49.3 Increase in Medical Claims
  - (3.6) Decrease due to lower projected enrollment from 57,634 to 57,448
  - 0.2 Increase due to lower projected Shared Savings
  - 52.7 Increase due to higher projected claims experience
- 0.5 Increase in ASO Fees
  - (0.1) Decrease due to lower projected enrollment from 57,634 to 57,448
  - 0.6 Increase due to shifts between HMO plans
- 32.9 Increase in Prescription Drug Claims
  - (0.8) Decrease due to lower projected enrollment from 81,766 to 81,656
  - 33.7 Increase due to higher claims experience

#### 2.0 - Increase in MAPD Premium Payments

- 2.6 Increase due to higher projected enrollment from 3,027 to 3,798
- (0.6) Decrease due to shifts in enrollment categories

#### (1.7) - Decrease in Shared Savings Program

- (0.1) Decrease in Bundled Service claims based on lower projected utilization
- (1.9) Decrease in Administrative Fees due to actual experience
- 0.3 Increase in Shared Savings rewards to Employees

#### 4.6 - Increase in Other Expense Categories

- 0.8 Increase due to higher projected employer and enrollee HSA Deposits
- Increase in Operating Costs and Administrative Assessments based on recurring FY 2022-23 budget
- 1.2 Increase in Premium Refunds due to higher projected activity
- 0.1 Increase in Other Expenses due to the Patient-Centered Outcomes Research Institute (PCORI) Fees

#### (1,154.4) - Ending Cash Balance<sup>(1)</sup>

<sup>(</sup>i) Self Insurance Estimating Conference held in January 2022.

#### Exhibit X

#### **Comparison of Financial Outlooks**

#### Fiscal Year 2026-27

(In Millions)

#### \$ (1,282.5) - Previous Ending Cash Balance Forecast (1)

#### (2.0) - Decrease in Revenue Forecast

- (11.2) Net Decrease in Insurance Premiums
  - (9.3) Decrease in employer and enrollee Insurance Premiums due to lower projected enrollment from 171,743 to 171,684
  - 0.8 Increase in projected employer and enrollee HSA contributions
  - (2.7) Decrease in Insurance Premiums due to shifts in enrollment categories
  - 1.2 Increase in PPO TPA Refunds
    - (0.1) Decrease due to lower projected enrollment from 81,378 to 80,689
    - 1.3 Increase due to higher projected activity
  - 0.1 Increase in HMO Self-Insured Refunds
- 4.8 Increase in HMO PBM Rebates
  - (0.2) Decrease due to lower projected enrollment from 81,283 to 81,148
  - 5.0 Increase due to higher projected activity
- 3.0 Increase in Pretax Trust Fund Transfer due to higher actual than projected FY 2021-22
- 0.1 Increase in PPO Medicare Part D Subsidy
  - (0.5) Decrease due to lower projected Medicare enrollment from 20,052 to 19,438
  - 0.6 Increase due to higher projected per member subsidy

#### 156.5 - Increase in Expense Forecast

#### 61.5 - Increase in State PPO Plan

- 42.8 Increase in Medical Claims
  - (9.6) Decrease due to lower projected enrollment from 81,378 to 80,689
  - 52.4 Increase due to higher claims experience
- (0.2) Decrease in ASO Fee Expense due to lower projected enrollment from 81,378 to 80,689
- 18.9 Increase in Prescription Drug Claims
  - (6.3) Decrease due to lower projected enrollment from 81,378 to 80,689
  - 25.2 Increase due to higher claims experience

#### 89.6 - Increase in HMO Plan

- 0.3 Increase in Premium Payments
  - (1.7) Decrease due to lower projected enrollment from 29,587 to 29,465
  - 2.0 Increase due to shifts in enrollment categories
- 52.3 Increase in Medical Claims
  - (4.2) Decrease due to lower projected enrollment from 57,429 to 57,229
  - 0.2 Increase due to lower projected Shared Savings
  - 56.3 Increase due to higher projected claims experience
- 0.5 Increase in ASO Fees
  - (0.1) Decrease due to lower projected enrollment from 57,429 to 57,229
  - 0.6 Increase due to shifts between HMO plans
- 36.5 Increase in Prescription Drug Claims
  - (1.0) Decrease due to lower projected enrollment from 81,283 to 81,148
  - 37.5 Increase due to higher claims experience

#### 2.4 - Increase in MAPD Premium Payments

- 3.2 Increase due to higher projected enrollment from 3,371 to 4,318
- (0.8) Decrease due to lower actual premiums paid

#### (1.6) - Decrease in Shared Savings Program

- (0.1) Decrease in Bundled Service claims based on lower projected utilization
- (1.9) Decrease in Administrative Fees due to actual experience
- $0.4\,\,$  Increase in Shared Savings to Employees due to higher utilization

#### 4.6 - Increase in Other Expense Categories

- 0.8 Increase in projected employer and enrollee HSA Deposits
- 2.5 Increase in Operating Costs and Administrative Assessments based on recurring FY 2022-23 budget
- 1.2 Increase in Premium Refunds due to higher projected activity
- 0.1 Increase in Other Expenses due to the Patient-Centered Outcomes Research Institute (PCORI) Fees

#### (1,441.0) - Ending Cash Balance<sup>(1)</sup>

<sup>(</sup>i) Self Insurance Estimating Conference held in January 2022.

### Premium Rate Table Effective December 2020 for January 2021 Coverage

(Premium rate change for all participants)

Subse	criber Category /	Coverage	PPC	D/HMO Stand	ard	PPO/HMO HDHP						
Con	tribution Cycle	Type	Employer	Enrollee	Total	Employer <sup>(4)</sup>	Enrollee	Total				
		Single	763.46	50.00	813.46	763.46	15.00	778.46				
	Monthly Full -Time Employees <sup>(1)</sup>	Family	1,651.08	180.00	1,831.08	1,651.08	64.30	1,715.38				
Career Service /		Spouse	1,801.08	30.00	1,831.08	1,685.40	30.00	1,715.40				
OPS		Single	381.73	25.00	406.73	381.73	7.50	389.23				
	Bi-Weekly Full -Time Employees <sup>(1)</sup>	Family	825.54	90.00	915.54	825.54	32.15	857.69				
	Limpleyees	Spouse	900.54	15.00	915.54	842.70	15.00	857.70				
	Monthly Full -Time	Single	805.12	8.34	813.46	770.12	8.34	778.46				
SES / SMS	Employees (1,2)	Family	1,801.08	30.00	1,831.08	1,685.38	30.00	1,715.38				
SES / SIVIS	Bi-Weekly Full -Time	Single	402.56	4.17	406.73	385.06	4.17	389.23				
	Employees (1,2)	Family	900.54	15.00	915.54	842.69	15.00	857.69				
COBRA (Non-	(3)	Single	0.00	829.73	829.73	0.00	751.54	751.54				
Medicare)	Monthly <sup>(3)</sup>	Family	0.00	1,867.70	1,867.70	0.00	1,664.69	1,664.69				
Early	Monthly	Single	0.00	813.46	813.46	0.00	736.80	736.80				
Retirees	' I IVIONINIV		0.00	1,831.08	1,831.08	0.00	1,632.05	1,632.05				
Over	Overage Dependents		0.00	813.46	813.46	0.00	736.80	736.80				

Medicare Monthly Premium Rates						
Plan Name	Plan Type	Medicare I One Eligible <sup>(5)</sup>	Medicare II One Under/Over <sup>(6)</sup>	Medicare III Both Eligible <sup>(7)</sup>		
Self-Insured PPO/HMO	Standard	430.18	1,243.63	860.35		
	HDHP	324.26	1,061.06	648.52		
Capital Health Plan <sup>(8)</sup>	Standard	282.62	1,038.30	565.24		
	HDHP	257.23	936.15	514.46		
COBRA Self-Insured PPO/HMO (3)	Standard	438.78	1,268.50	877.56		
	HDHP	330.75	1,082.28	661.49		
COBRA Capital Health Plan (3,8)	Standard	288.27	1,059.07	576.54		
	HDHP	262.37	954.87	524.75		

#### Notes

- (1) Premium contribution for Part-Time Employees (FTE < 0.75) is to be calculated as follows:
  - Step 1. State Contribution x FTE% = Calculated State Contribution
  - Step 2. Total Contribution Calculated State Contribution = Employee Contribution
- (2) SES/SMS Includes executive, legislative and judicial branch agencies for employees with enhanced benefits, excluding Spouse Program participants.
- (3) Includes an additional 2% for administrative costs as permitted by federal regulations.
- (4) The employer monthly HSA contribution of \$41.66/single (\$500 annually) and \$83.33/family (\$1,000 annually) is included in the listed employer rates.
- (5) Single coverage for participant eligible for Medicare Parts A and B. Does not include monthly Medicare Part B premium.
- (6) Family coverage for two or more participants, if at least one participant is eligible for Medicare Parts A and B. Does not include Medicare Part B premium.
- (7) Family coverage for two participants and both are eligible for Medicare Parts A and B. Does not include Medicare Part B premium.
- (8) Must be enrolled in Medicare and must complete the HMO's Retiree Advantage application process to be eligible for this coverage.

### Medicare Advantage and Prescription Drug (MA-PD) Plans Premium Rate Table

#### Effective December 2020 for January 2021 Coverage

MA-PD Plan Premium Rates						
Plan Name	Plan Type	Monthly Cost Per Member	Monthly Cost Per Member through COBRA			
Capital Health Plan - MA-PD	MA-PD	165.00	168.30			
Humana - MA-PD	MA-PD	33.86	34.54			
UnitedHealthcare - MA-PD	MA-PD	209.97	214.17			

#### **Important Information:**

You must be **enrolled** in Medicare Parts A&B to be eligible for an MA-PD plan. If you are enrolled in family coverage, all covered family members must be enrolled in Medicare Parts A&B to be eligible for one of these MA-PD plans. The premiums listed above are per member. If you have yourself and a dependent under your family plan, multiply the premium by 2, etc.

Premiums do not include your Medicare Part B premium.

COBRA premiums include an additional 2% for administrative costs as permitted by federal regulations.

The People First Service Center **must** have your Medicare information. If your Medicare enrollment cannot be verified, you will be moved to the PPO plan through Florida Blue. Call the People First Service Center to confirm your Medicare information is on file if you have not done so.

### STATE EMPLOYEES' GROUP HEALTH SELF-INSURANCE TRUST FUND PREMIUM RATE TABLE



Premium rate change for all participants effective December 2021 for January 2022 coverage.

Subscriber Category/Contribution Cycle		Coverage	PPO/HMO Standard			PPO/HMO HDHP		
		Types	Employer	Enrollee	Total	Employer (4)	Enrollee	Total
	Monthly Full-Time Employees (1)	Single	763.46	50.00	813.46	763.46	15.00	778.46
		Family	1,651.08	180.00	1,831.08	1,651.08	64.30	1,715.38
Career Service/OPS		Spouse	1,801.08	30.00	1,831.08	1,685.40	30.00	1,715.40
Career Service/OF3	Bi-Weekly	Single	381.73	25.00	406.73	381.73	7.50	389.23
	Full-Time Employees	Family	825.54	90.00	915.54	825.54	32.15	857.69
	(1)	Spouse	900.54	15.00	915.54	842.70	15.00	857.70
SES/SMS	Monthly Full-Time	Single	805.12	8.34	813.46	770.12	8.34	778.46
	Employees (1,2)	Family	1,801.08	30.00	1,831.08	1,685.38	30.00	1,715.38
	Bi-Weekly	Single	402.56	4.17	406.73	385.06	4.17	389.23
	Full-Time Employees	Family	900.54	15.00	915.54	842.69	15.00	857.69
COBRA	Monthly (3)	Single	0.00	829.73	829.73	0.00	751.54	751.54
(Non-Medicare)		Family	0.00	1,867.70	1,867.70	0.00	1,664.69	1,664.69
Early Retirees/	Monthly	Single	0.00	813.46	813.46	0.00	736.80	736.80
Eligible Former Employees		Family	0.00	1,831.08	1,831.08	0.00	1,632.05	1,632.05
Over-age Dependents		Single	0.00	813.46	813.46	0.00	736.80	736.80

Medicare Monthly Premium Rates							
Plan Name	Plan Type	Medicare I One Eligible <sup>(5)</sup>	Medicare II One Under/Over <sup>(6)</sup>	Medicare III Both Eligible <sup>(7)</sup>	MA-PD Plan		
Self-Insured PPO/HMO	Standard	430.18	1,243.63	860.35			
	HDHP	324.26	1,061.06	648.52			
Capital Health Plan (8)	Standard	282.62	1,075.70	565.24			
	HDHP	257.23	969.75	514.46			
	MA-PD (9)				165.00		
Humana	MA-PD (9)		35.98				
UnitedHealthcare	MA-PD <sup>(9)</sup>				195.00		
COBRA Self-Insured PPO/HMO (3)	Standard	438.78	1,268.50	877.56			
	HDHP	330.75	1,082.28	661.49			
COBRA Capital Health Plan (3,8)	Standard	288.27	1,097.21	576.54			
	HDHP	262.37	989.15	524.75			

#### **Notes**

- (1) Premium contribution for Part-Time Employees (FTE < 0.75) is to be calculated as follows:
  - Step 1. State Contribution x FTE% = Calculated State Contribution
  - Step 2. Total Contribution Calculated State Contribution = Employee Contribution
- (2) SES/SMS Includes executive, legislative and judicial branch agencies for employees with enhanced benefits, excluding Spouse Program participants.
- (3) Includes an additional 2% for administrative costs as permitted by federal regulations.
- (4) The employer monthly HSA contribution of \$41.66/single (\$500 annually) and \$83.33/family (\$1,000 annually) is included in the listed employer rates.
- (5) Single coverage for participant eligible for Medicare Parts A&B. Does not include monthly Medicare Part B premium.
- (6) Family coverage for two or more participants, if at least one participant is eligible for Medicare Parts A&B. Does not include Medicare Part B premium.
- (7) Family coverage for two participants and both are eligible for Medicare Parts A&B. Does not include Medicare Part B premium.
- (8) Must be enrolled in Medicare and must complete the HMO's Retiree Advantage application process to be eligible for this coverage.
- (9) You must be enrolled in Medicare Parts A&B to be eligible for an MA-PD plan. If you are enrolled in family coverage, all covered family members must be enrolled in Medicare Parts A&B to be eligible for an MA-PD plan. The premiums listed above are per member. Multiply the premium by the number of members covered under your plan to calculate total cost. Premiums do not include Medicare Part B. COBRA premiums include an additional 2% for administrative costs as permitted by federal regulations. The People First Service Center must have your Medicare information on file. If your Medicare enrollment cannot be verified, you will be moved to the PPO plan through Florida Blue. To confirm your Medicare information is on file, contact the People First Service Center.