EXECUTIVE SUMMARY

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The General Appropriations Act (Conference Report on Senate Bill 2600, Section 8, paragraph 2), and ch. 2005-97, *Laws of Florida*, (Committee Substitute for Senate Bill 424), mandates enhancement to the State Employee Health Insurance Program effective January 1, 2006. Benefit attributes and covered services currently offered by the Self-Insured PPO Health Plan and fully insured State-contracted HMOs will continue without change. There will be a 7.4% increase in employer contribution rates and a slight increase of 2.7% in employee contribution rates. Total premium will increase by approximately 6.5% with resultant increases to non-employee contribution rates.

Program enhancements include, in general, a low premium, high deductible Self-Insured PPO Health Plan with a Health Savings Account (HSA) option, and low premium, high deductible State-contracted HMO Plans (where available) also with an HSA option (an individual is required to be enrolled in a high deductible health plan to be eligible for HSA selection and participation). The benefit attributes for these plans will differ as compared to the traditional health plans, but the covered services will be the same. A detailed and comprehensive discussion about relevant design, funding, and federal taxation issues associated with HSAs is beyond the scope of this report. It is important to note, however, those active employees selecting this option will receive an employer contribution into the HSA of up to \$500 for individual coverage per year (\$41.66 per month) or up to \$1,000 for family coverage per year (\$83.33 per month).

For all plans, the employer's contribution rate for individual and family coverage is uniform. The employer's required HSA contribution amount for employees enrolling in a high deductible health plan, and electing to have an HSA, is included in the employer contribution rate. Employees and non-employees enrolling in a high deductible health plan will have contribution rates significantly lower than those for the standard health plans. The new premium rates by enrollment category and coverage for all health plans, and a schedule of benefit attributes by health plan are enclosed for reference purposes.

The Post-Session Outlook shows projected enrollment migration between the health plans, and the estimated impact to premium revenue, PPO Plan medical and pharmacy spend, State-contracted HMO premiums, and cash position. The Outlook also shows an estimate for the aggregate employer HSA contribution based on assumed employee enrollment in a low premium, high deductible health plan and electing to have an HSA. With the exception to the expense item, "DSGI Administrative Costs", all other revenue and expense items are unchanged from the March Estimating Conference. Previous financial forecast assumptions and growth rates are unchanged.

With the change to health plan offerings, benefit attributes, and premium rates, the forecasted ending cash balance for fiscal year 2005-06 is increased from \$86.3 million to \$113.0 million. An operating gain of \$3.6 million is estimated, up \$26.7 million from an operating deficit of \$23.1 million. The forecasted ending cash deficit for fiscal year 2006-07 is decreased from \$98.0 million to \$20.6 million, an improvement of \$77.4 million. An operating loss of \$133.6 million is estimated, up \$50.7 million from \$184.3 million.

Table 1. on the following page provides a summary of the Outlook by fiscal year.

State Employees' Group Health Self-Insurance Trust Fund

Post-Session Outlook

For the Fiscal Years Ending June 30, 2006 & 2007

July 2005

Prepared by: Department of Management Services
Division of State Group Insurance

Bureau of Accounting & Financial Management

EXECUTIVE SUMMARY

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Table 1. on the following page provides a summary of the Outlook by fiscal year.

Table 1. Financial Outlook

	FY <u>2004-05</u>	FY <u>2005-06</u>	FY <u>2006-07</u>
BEGINNING CASH BALANCE	58.3	109.4	113.0
REVENUES	1,203.6	1,300.9	1,337.9
EXPENSES	(1,152.5)	(1,297.3)	(1,471.5)
OPERATING GAIN/(LOSS)	<u>51.1</u>	3.6	(133.6)
ENDING CASH BALANCE	<u>109.4</u>	<u>113.0</u>	(20.6)
			Dollars in Millions

Overall enrollment for Fiscal Year 2005-06 is expected to be as follows:

- Self-Insured PPO Standard Health Plan 102,973
- Self-Insured PPO High Deductible Health Plan 6,695
- Total Self-Insured PPO Plan Enrollment 109,668
- State-Contracted HMO Standard Plans 59,757
- State-Contracted HMO High Deductible Health Plans 1.083
- Total State-Contracted HMO Plan Enrollment 60,840
- Total State Health Program Enrollment 170,508

Approximately 7,000 employees and 800 pre-Medicare retirees are expected to enroll in a low premium, high deductible health plan (5.3% of employee and pre-Medicare retiree covered population). HSA election and participation is expected to be high for this group due to the fixed and direct employer contribution. Overall enrollment is expected to approximate 64% enrollment in a self-insured PPO plan and 36% in a State-contracted HMO during the forecast period. Subscriber plan selection resulting from the 2005 Open Enrollment will provide base line enrollment counts by plan by enrollment category for future forecasting purposes.

It is noteworthy that the contractual agreements for Third-Party Administration, Pharmacy Benefits Management, and State-contracted HMOs are due to expire during the forecast period. Assumptions and projected growth rates used for the forecast could be impacted by the results of the procurements.

The exhibits that follow provide more in-depth information about projected enrollment, cash positions, and comparisons to previous forecasts.

Exhibit I Financial Outlook

By Fiscal Year (In Millions)

			FY 04-05	-	FY 05-06 ⁽¹⁾	FY	06-07 ⁽¹⁾
BEGINNING CASH BA	LANCE	\$	58.3	\$	109.4	\$	113.0
REVENUES:							
Insurance Premiums:							
Employer Contributi	ons	\$	888.1	\$	965.7	\$	994.9
Employee Contribut	ions		155.0		154.1		156.7
Medicare Contribution	ons		77.4		84.4		86.8
Early Retiree Contri	butions		45.6		51.3		53.9
COBRA Contribution			6.8		7.1		7.1
Subscriber HSA Cor	ntributions ⁽³⁾		0.0		0.0		0.0
Interest on Investmen	ts		2.6		3.2		1.0
TPA Refunds/PBM Re	ebates		14.1		19.5		20.8
Pretax Trust Fund Tra			14.0		14.0		14.0
Transfer: TRICARE S	urplus ⁽²⁾		0.0		1.6		2.7
Other Revenues		_	0.0	-	0.0		0.0
TOTAL REVENUES		\$	1,203.6	\$	1,300.9	\$	1,337.9
TOTAL CASH AVAILA	BLE	\$_	1,261.9	\$_	1,410.3	\$	1,450.9
EXPENSES:							
PPO Plan - Medical C	laims	\$	470.0	\$	521.3	\$	578.7
PPO Plan - Prescription	on Drug Claims		183.8		214.7		252.3
HMO Premiums			451.8		511.2		588.7
Employer HSA Contril	outions ⁽³⁾		0.0		2.7		5.4
ASO Fee - TPA			38.6		38.6		38.6
DSGI Administrative (Costs		4.2		4.7		3.7
Premium Refunds			4.0		4.0		4.0
Other Expenses		_	0.1	_	0.1		0.1
TOTAL EXPENSES		\$_	1,152.5	\$	1,297.3	\$	1,471.5
EXCESS OF REVENUE	S OVER EXPENSES	\$_	51.1	\$_	3.6	\$	(133.6)
ENDING CASH BALAN	ICE	\$ _	109.4	\$_	113.0	\$	(20.6)
	PPO Standard		108,532		102,973		102,973
Average Enrollment	PPO HDHP		0		6,695		6,695
by Plan	HMO Standard		60,500		59,757		59,757
	HMO HDHP		0	-	1,083		1,083
	Total		169,032	=	170,508		170,508
	Active\Cobra Standard		137,163 0		131,229		131,229
Average Enrollment	Active\Cobra HDHP Medicare		23,564		7,018 23,607		7,018 23,607
by Coverage Type	Early Retiree Standard		8,305		7,894		7,894
	Early Retiree HDHP		0		760	_	760
	Total		169,032	_	170,508		170,508

⁽¹⁾ Enrollment migration and certain financial projections have been prepared by contracted benefit \ acturial consultants in connection with the State Health Program redesign – Conference Report on SB 2600, Sec. 8, paragraph 2. Enrollment as of January 1, 2006.

⁽²⁾ Transfer of the supplemental TRICARE health benefit plan surplus from Cash Account 2668004.

⁽³⁾ Estimated subscriber HSA contributions have been intentionally excluded. HSA contributions will be estimated and included in future forecasts (pending election results from the 2005 Open Enrollment). Subscriber HSA contributions will be a pass-through with with no estimated impact to cash position.

Exhibit II

Financial Outlook

Fiscal Year 2005-06 (In Millions)

		_	(A) March '05		(B) July ' 05 ⁽¹⁾		(B) - (A) Difference
BEGINNING CASH BA	LANCE	\$	109.4	\$	109.4	\$	0.0
REVENUES:							
Insurance Premiums:							
Employer Contributi	ons	\$	934.2	\$	965.7	\$	31.5
Employee Contribut	ions		154.3		154.1		(0.2)
Medicare Contribution	ons		83.5		84.4		0.9
Early Retiree Contri	butions		49.5		51.3		1.8
COBRA Contribution			7.1		7.1		0.0
Subscriber HSA Co	ntributions ⁽³⁾		0.0		0.0		0.0
Interest on Investmen			3.2		3.2		0.0
TPA Refunds/PBM Re			19.5		19.5		0.0
Pretax Trust Fund Tra			14.0		14.0		0.0
Transfer: TRICARE S	urplus (2)		1.6		1.6		0.0
Other Revenues		_	0.0	_	0.0	-	0.0
TOTAL REVENUES		\$	1,266.9	\$	1,300.9	\$	34.0
TOTAL CASH AVAILA	BLE	\$_	1,376.3	\$_	1,410.3	\$	34.0
EXPENSES:							
PPO Plan - Medical C	laims	\$	519.9	\$	521.3	\$	1.4
PPO Plan - Prescription	on Drug Claims		213.9		214.7		8.0
HMO Premiums			509.3		511.2		1.9
Employer HSA Contril	butions ⁽³⁾		0.0		2.7		2.7
ASO Fee - TPA			38.6		38.6		0.0
DSGI Administrative (Costs		4.2		4.7		0.5
Premium Refunds			4.0		4.0		0.0
Other Expenses		_	0.1	_	0.1	-	0.0
TOTAL EXPENSES		\$_	1,290.0	\$	1,297.3	\$_	7.3
EXCESS OF REVENUE	ES OVER EXPENSES	\$_	(23.1)	\$_	3.6	\$_	26.7
ENDING CASH BALAN	ICE	\$_	86.3	\$ _	113.0	\$	26.7
	DDO Clander		400.005	_	400.070	I	
Averege Frankling (PPO Standard		108,205		102,973		
Average Enrollment by Plan	PPO HDHP		64.722		6,695		
	HMO Standard		61,723		59,757		
	HMO HDHP Total		0 169,928	_	1,083 170,508		
	Iotal		100,020	_	170,500	I	

⁽¹⁾ Enrollment migration and certain financial projections have been prepared by contracted benefit \ acturial consultants in connection with the State Health Program redesign – Conference Report on SB 2600, Sec. 8, paragraph 2. Enrollment as of January 1, 2006.

⁽²⁾ Transfer of the supplemental TRICARE health benefit plan surplus from Cash Account 2668004.

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Exhibit III

Financial Outlook

Fiscal Year 2006-07 (In Millions)

		_	(A) March '05	_	(B) July ' 05 ⁽¹⁾	[_	(B) - (A) Difference
BEGINNING CASH BA	LANCE	\$	86.3	\$	113.0	\$	26.7
REVENUES:							
Insurance Premiums:							
Employer Contributi	ons	\$	931.9	\$	994.9	\$	63.0
Employee Contribut	ions		153.6		156.7		3.1
Medicare Contribution	ons		86.6		86.8		0.2
Early Retiree Contri	butions		52.4		53.9		1.5
COBRA Contribution	ns		7.1		7.1		0.0
Subscriber HSA Co	ntributions ⁽³⁾		0.0		0.0		0.0
Interest on Investmen	ts		1.0		1.0		0.0
TPA Refunds/PBM Re	ebates		20.8		20.8		0.0
Pretax Trust Fund Tra			14.0		14.0		0.0
Transfer: TRICARE S	urplus ⁽²⁾		2.7		2.7		0.0
Other Revenues		_	0.0	_	0.0	_	0.0
TOTAL REVENUES		\$	1,270.1	\$	1,337.9	\$	67.8
TOTAL CASH AVAILABLE		\$_	1,356.4	\$_	1,450.9	\$_	94.5
EXPENSES:							
PPO Plan - Medical C	laims	\$	576.2	\$	578.7	\$	2.5
Employer HSA Contril	butions ⁽³⁾		249.7		252.3		2.6
HMO Premiums			581.6		588.7		7.1
Employer HSA Contril	butions		0.0		5.4		5.4
ASO Fee - TPA			38.6		38.6		0.0
DSGI Administrative (Costs		4.2		3.7		(0.5)
Premium Refunds			4.0		4.0		0.0
Other Expenses		_	0.1	_	0.1	_	0.0
TOTAL EXPENSES		\$_	1,454.4	\$_	1,471.5	\$_	17.1
EXCESS OF REVENUE	ES OVER EXPENSES	\$_	(184.3)	\$_	(133.6)	\$_	50.7
ENDING CASH BALANCE		\$_	(98.0)	\$_	(20.6)	\$_	77.4
	PPO Standard		107,866		102,973		
Average Enrollment	PPO HDHP		0		6,695		
by Plan	HMO Standard		63,113		59,757		
	HMO HDHP		0		1,083		
	Total		170,979	_	170,508		

⁽¹⁾ Enrollment migration and certain financial projections have been prepared by contracted benefit \ acturial consultants in connection with the State Health Program redesign – Conference Report on SB 2600, Sec. 8, paragraph 2. Enrollment as of January 1, 2006.

⁽²⁾ Transfer of the supplemental TRICARE health benefit plan surplus from Cash Account 2668004.

⁽³⁾ Estimated subscriber HSA contributions have been intentionally excluded. HSA contributions will be estimated and included in future forecasts (pending election results from the 2005 Open Enrollment). Subscriber HSA contributions will be a pass-through with with no estimated impact to cash position.

Exhibit IV Premium Rate Table

Current												
	Coverage PPO/HMO Standard											
Category	Туре	Er	nployer	Е	nrollee	Total						
(1)	Single	\$	322.44	\$	48.68	\$	371.12					
Full -Time Employees ⁽¹⁾ (Monthly)	Family	\$	666.84	\$	175.14	\$	841.98					
	Spouse	\$	841.98	\$	0.00	\$	841.98					
(4)	Single	\$	161.22	\$	24.34	\$	185.56					
Full -Time Employees ⁽¹⁾ (Bi-Weekly)	Family	\$	333.42	\$	87.57	\$	420.99					
	Spouse	\$	420.99	\$	0.00	\$	420.99					
COBRA Participants (2)	Single	\$	0.00	\$	378.54	\$	378.54					
(Monthly)	Family	\$	0.00	\$	858.82	\$	858.82					
Early Retirees	Single	\$	0.00	\$	371.12	\$	371.12					
(Monthly)	Family	\$	0.00	\$	841.98	\$	841.98					
	(I) One Eligible	\$	0.00	\$	197.36	\$	197.36					
Medicare Participants ⁽³⁾ (Monthly)	(II) One Under/Over	\$	0.00	\$	568.48	\$	568.48					
(monuny)	(III) Both Eligible	\$	0.00	\$	394.72	\$	394.72					

	Effective January 1, 2006														
	Coverage	PPO/HMO Standard							PP	O/HMO HDHP (4)					
Category	Туре	Er	nployer	Е	nrollee		Total	Eı	mployer	Enrollee			Total		
(1)	Single	\$	346.16	\$	50.00	\$	396.16	\$	346.16	\$	15.00	\$	361.16		
Full -Time Employees ⁽¹⁾ (Monthly)	Family	\$	715.92	\$	180.00	\$	895.92	\$	715.92	\$	64.30	\$	780.22		
(Spouse	\$	895.92	\$	0.00	\$	895.92	\$	780.22	\$	0.00	\$	780.22		
	Single	\$	173.08	\$	25.00	\$	198.08	\$	173.08	\$	7.50	\$	180.58		
Full -Time Employees ⁽¹⁾ (Bi-Weekly)	Family	\$	357.96	\$	90.00	\$	447.96	\$	357.96	\$	32.15	\$	390.11		
(Bi Wookly)	Spouse	\$	447.96	\$	0.00	\$	447.96	\$	390.11	\$	0.00	\$	390.11		
COBRA Participants (2)	Single	\$	0.00	\$	404.08	\$	404.08	\$	0.00	\$	325.88	\$	325.88		
(Monthly)	Family	\$	0.00	\$	913.84	\$	913.84	\$	0.00	\$	710.82	\$	710.82		
Early Retirees	Single	\$	0.00	\$	396.16	\$	396.16	\$	0.00	\$	319.48	\$	319.48		
(Monthly)	Family	\$	0.00	\$	895.92	\$	895.92	\$	0.00	\$	696.88	\$	696.88		
(3)	(I) One Eligible	\$	0.00	\$	210.34	\$	210.34	\$	0.00	\$	154.16	\$	154.16		
Medicare Participants ⁽³⁾ (Monthly)	(II) One Under/Over	\$	0.00	\$	606.50	\$	606.50	\$	0.00	\$	515.32	\$	515.32		
(Worldiny)	(III) Both Eligible	\$	0.00	\$	420.69	\$	420.69	\$	0.00	\$	308.32	\$	308.32		

Notes:

- (1) Premium contribution for Part-Time Employees 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) Includes an additional 2% for administrative costs as permitted by federal regulations.
- (3) The actual premium rate for some retirees participating in an HMO plan may differ from what is presented.
- (4) Employer monthly HSA contribution for employees is \$41.66 for single coverage (\$500 annually) and \$83.33 for family coverage (\$1,000 annually).

STATE EMPLOYEES' GROUP HEALTH SELF-INSURANCE TRUST FUND

2006 Plan Designs Exhibit V

		Curren	t Plan		New Plan Option						
	Р	PO	HM		HDHF	P I (PPO)	HDHP II (HMO)				
		Out-of-		Out-of-		Out-of-		Out-of-			
Attribute	Network	Network	Network	Network	Network	Network	Network	Network			
HSA											
Individual	١	I/A	N/	A	\$	500	\$50	00			
Family	١	I/A	N/A		\$1	,000	\$1,0	000			
Annual Deductible						Aggregate Fan	nily Deductible				
	#250	Ф7 ЕО	N/A	N/A	¢4 050		·	N/A			
Individual Family	\$250 \$500	\$750 \$1,500	N/A N/A	N/A N/A	\$1,250 \$2,500	\$2,500 \$5,000	\$1,250 \$2,500	N/A N/A			
Faililly	φ500	\$1,500	IN/A	IN/A	\$2,500	φ5,000	\$2,500	IN/A			
Coinsurance	20%	40%	N/A	N/A	20%	40%	20%	N/A			
Coinsurance Maximum											
Individual	\$2,500	Embedded	N/A	N/A	\$3,000	\$7,500	\$3,000	N/A			
Family	\$5,000	Embedded	N/A	N/A	\$6,000	\$15,000	\$6,000	N/A			
Office Visit Coinsurance - PCP	\$15	40%	\$15	N/A	20%	40%	20%	N/A			
Office Visit Coinsurance - SCP	\$25	40%	\$25	N/A	20%	40%	20%	N/A			
	Ψ=0	.0,0	V 20		2070	.0,0	20,0				
Hospital Admission Copay	\$250, then	\$500, then	\$250	N/A	20%	\$1,000, then	20%	N/A			
1103pital Admission Copay	coinsurance	coinsurance				coinsurance					
Emergency Room Copay	\$ 50 (waived	30%	\$ 50 (waived	N/A	20%	40%	20%	N/A			
Emergency Room Copay	if admitted)	30 /6	if admitted)	IN/A	2076	40 /6	2076	IN/A			
Preventive Care	Enhanced	30%	Included	N/A	Enhanced	40%	Included	N/A			
Prescription Drugs (Retail)	Copay		Copay		After D	eductible	After De	ductible			
Generic	\$10	N/A	\$10	N/A	30%	N/A	30%	N/A			
Preferred Brand	\$25	N/A	\$25	N/A	30%	N/A	30%	N/A			
Non-Preferred Brand	\$40	N/A	\$40	N/A	50%	N/A	50%	N/A			
Prescription Drugs (Mail)					After D	eductible	After De	ductible			
Generic	\$20	N/A	N/A	N/A	30%	N/A	30%	N/A			
Preferred Brand	\$50	N/A	N/A	N/A	30%	N/A	30%	N/A			
Non-Preferred Brand	\$80	N/A	N/A	N/A	50%	N/A	50%	N/A			
Lifetime Maximum	\$2.0	00,000	Unlim	nited	\$2.0	00,000	Unlim	nited			