

Self-Insurance Estimating Conference
State Employees' Group Health Self-Insurance Trust Fund
Executive Summary
August 5, 2020

The Outlook for the State Employees' Group Health Self-Insurance Trust Fund has been revised to reflect actual enrollment and cash flows through June 2020; revised growth factors for Preferred Provider Organization (PPO) and Health Maintenance Organization (HMO) pharmacy claims; revised growth factors for PPO and HMO medical claims for FY 2020-21; inclusion of new employer insurance premium contribution rates effective December 2020 for January 2021; revised projections for the Shared Savings program; inclusion of the reestablished Patient-Centered Outcomes Research Institute (PCORI) Fee. The fund is now expected to remain solvent through FY 2022-23, with increases in the ending cash balance for FY 2019-20 through FY 2024-25 when compared to the January 2020 Outlook. This is a substantial improvement from the last forecast where the Trust Fund was only expected to be solvent through FY 2020-21.

After the COVID-19 Public Health Emergency was declared on March 9, 2020, by Executive Order number 20-52, the Division noticed a reduction in medical claims expense and an increase in prescription drug expense in the 4th quarter of FY 2019-20. The reduction in medical claims is assumed to be a result of fewer doctor visits and elective procedures during the initial stages of the pandemic, while the increase in prescription drugs cost is attributed to members refilling prescriptions for longer periods due to stay at home orders and exposure concerns. Currently, there is insufficient data available to determine long-term patterns of utilization due to COVID-19. As a result, this forecast incorporates growth rate projections which are higher than the prior forecast to account for a possible increase in medical utilization later in FY 2020-21 as members seek medical services they delayed due to COVID-19. Additionally, cost assumptions for possible COVID-19 vaccines have not been incorporated at this time due to the uncertainty of the vaccine rollout, who will pay for the vaccine (federal, state or private pay), or what the member cost-share will be. The new forecast also does not consider the effects of the Chief Financial Officer's Directive 2020-05 relating to workers compensation claims due to COVID-19 for "Frontline State Employees," as the impact of claims to date has been minimal, according to the Department of Financial Services, Division of Workers Compensation. The Division of State Group Insurance will continue to track COVID-19 related impacts and will incorporate them as sufficient and material data becomes available.

For FY 2019-20, the ending cash balance increased from \$504.1 million to \$649.3 million. The difference was due to both higher than expected revenues and lower than expected expenses. For FY 2020-21, the ending cash balance increased from \$311.4 million to \$712.2 million; for FY 2021-22, the ending cash balance increased from negative \$103.2 million to positive \$657.8 million; and for FY 2022-23, the ending cash balance increased from negative \$653.4 million to positive \$400.2 million. The forecast for subsequent years shows that expenses are expected to exceed revenues by amounts that generate negative cash balances of \$82.0 million in FY 2023-24 and \$763.9 million in FY 2024-25. 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 December 2018 analysis of the Trust Fund's medical claims trend over the past five fiscal years relative to other national medical trend rates revealed that the Trust Fund's medical claims trends have closely mirrored the trends reported by CMS for the same time periods. As a result, in each subsequent forecast, the Estimating Conference principals decided to use a blend of medical trend

rates, with forecasted medical trend rates from CMS’s National Health Expenditure Report combined with the more traditional Conference approach, for the Trust Fund’s medical claims projections. The Conference adopted a higher growth rate for FY 2020-21, but no change was made in this forecast to the previously adopted medical trends starting in FY 2021-22.

A complete Executive Summary outlining all of the changes since the January 2020 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 2020 and January 2020 forecasts.

Financial Outlook for FY 2019-20 and 2020-21
Changes to Conference Forecast – January 2020 Compared to August 2020
(In Millions)

	FY 2019-20			FY 2020-21		
	20-Jan	20-Aug	Difference	20-Jan	20-Aug	Difference
Beginning Cash Balance	\$554.9	\$554.9	\$0.00	\$504.1	\$649.3	\$145.3
Total Revenues	\$2,740.7	\$2,793.7	\$53.0	\$2,740.4	\$2,881.6	\$141.2
Total Expenses	\$2,737.3	\$2,645.1	(\$92.2)	\$2,933.1	\$2,818.7	(\$114.4)
Ending Cash Balance	\$504.1	\$649.3	\$145.3	\$311.4	\$712.2	\$400.9

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, 2020 through June 30, 2025

**Adopted August 5, 2020, to the
Self-Insurance Estimating Conference**

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

STATE EMPLOYEES' GROUP HEALTH SELF-INSURANCE TRUST FUND

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, 2020, through June 30, 2025. The Outlook is prepared to assist in the State's planning and budgeting in accordance with section 216.136(9), Florida Statutes, and 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 2020 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 2020.
2. Revised growth factors for Preferred Provider Organization (PPO) and Health Maintenance Organization (HMO) pharmacy claims.
3. Revised growth factors for PPO and HMO medical claims for FY 2020-21.
4. Inclusion of new employer insurance premium contribution rates effective December 2020 for January 2021.
5. Revised projections for the Shared Savings program.
6. Inclusion of the reestablished Patient-Centered Outcomes Research Institute (PCORI) Fee.

After the COVID-19 Public Health Emergency was declared on March 9, 2020, through Executive Order number 20-52, the Division noticed a reduction in medical claims expense and an increase in prescription drug expense in the 4th quarter of FY 2019-20. The reduction in medical claims is assumed to be a result of fewer doctor visits and elective procedures during the pandemic, while the increase in prescription drugs cost is attributed to members refilling prescriptions for longer periods due to stay at home orders and exposure concerns. Currently, there is insufficient data available to determine long-term patterns of utilization due to COVID-19. As a result, this Outlook incorporates growth rate projections which are higher than the Prior Outlook to account for a possible increase in medical utilization later in FY 2020-21 as members may seek medical services they have delayed due to COVID-19. Additionally, cost assumptions for possible COVID-19 vaccines have not been incorporated at this time due to the uncertainty of the vaccine rollout, who will pay for the vaccine (federal, state or private pay), or what the member cost-share will be. This Outlook also does not consider the effects of the Chief Financial Officer's Directive 2020-05 relating to workers compensation claims due to COVID-19 for "Frontline State Employees," as the impact of claims to date has been minimal, according to the Department of Financial Services, Division of Workers Compensation. The Division of State Group Insurance will continue to track COVID-19 related impacts and will incorporate them as sufficient and material data becomes available.

This Outlook reflects an increase in revenues for FY 2019-20 and increases for all other years compared to the Prior Outlook. Expenses have been reduced for all years of the Outlook compared to the Prior Outlook. Increases in ending cash balances are reflected for all years of the Outlook. FY 2021-22 and FY 2022-23, projections now are for a positive ending cash balance compared to the deficit previously projected in the Prior Outlook. Operating deficits projected for FY 2023-24 and FY 2024-25 in the Prior Outlook have decreased. The Outlook reflects that the Trust Fund is projected to remain solvent through FY 2022-23.

The ending cash balance for FY 2019-20 is \$649.3 million, an increase of \$145.3 million for the Prior Outlook. The estimated operating gain of \$3.4 million is now a gain of \$148.7 million. For FY 2020-21, the forecasted ending cash balance is adjusted from \$311.4 million to \$712.2 million, and the estimated operating loss of \$192.7 is now a gain of \$62.9 million. The ending cash balance for FY 2021-22 is adjusted from a deficit of \$103.2 million to a positive balance of \$657.8 million. The estimated operating loss of \$414.6 million is decreased to \$54.4 million. For FY 2022-23, the ending cash balance is adjusted from a deficit of \$653.4 million to a positive balance of \$400.2 million, while the estimated operating loss of \$653.4 million is decreased to \$257.6 million. Ending cash balance deficits and operating losses are projected for FY 2023-24 through FY 2024-25.

Below is a summary of the Outlook for the Trust Fund through FY 2024-25:

	<u>FY 2019-20</u>	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>FY 2022-23</u>	<u>FY 2023-24</u>	<u>FY 2024-25</u>
	<u>Actual</u>	<u>Estimate</u>	<u>Estimate</u>	<u>Estimate</u>	<u>Estimate</u>	<u>Estimate</u>
BEGINNING CASH BALANCE	\$ 500.7	\$ 649.3	\$ 712.2	\$ 657.8	\$ 400.2	\$ 0.0
TOTAL REVENUES	\$ 2,793.7	\$ 2,881.6	\$ 2,977.6	\$ 2,992.1	\$ 2,999.7	\$ 3,026.3
TOTAL EXPENSES	\$ 2,645.1	\$ 2,818.7	\$ 3,032.0	\$ 3,249.7	\$ 3,481.9	\$ 3,790.2
OPERATING GAIN/(LOSS)	\$ 148.7	\$ 62.9	\$ (54.4)	\$ (257.6)	\$ (482.2)	\$ (763.9)
ENDING CASH BALANCE	\$ 649.3	\$ 712.2	\$ 657.8	\$ 400.2	\$ (82.0)	\$ (763.9)

Note: Assumes no carry forward of negative cash balance.

ENROLLMENT

Final enrollment for FY 2019-20 reflects 176,543 subscribers and 189,186 dependents, totaling 365,729 covered lives. Approximately 47.3% of subscribers enrolled in PPO plans, 52.5% enrolled in HMO plans, and 0.2% enrolled in a MAPD plan. Subscriber enrollment in individual coverage was 47.8%, and 52.2% were enrolled in family coverage, which had an average size of 3.05 members. Enrollment for FY 2019-20 through FY 2024-25 continues to reflect a flattening enrollment trend in the Active coverage category with growth of 0.02% annually. The Early Retiree coverage category is projected to decrease an average of

STATE EMPLOYEES' GROUP HEALTH SELF-INSURANCE TRUST FUND

2.3% annually, and enrollment in the Medicare coverage category is decreasing by 0.14%. Total enrollment is projected to decrease an average of 0.07% year over year throughout the forecast period.

Overall enrollment projections across all years of the forecast reflect an average annual decrease of 0.28% in PPO plans, an average decrease of 0.03% in HMO plans and average increase of 22.4% for the new MAPD plan.

As of June 2020, approximately 4,551 subscribers (4,440 active employees) were enrolled in a High Deductible Health Plan (2.3% of total enrollment). Active employees account for 97.6% of these subscribers, of which 90.2% are participating in the integrated state-sponsored Health Savings Account (HSA) offering.

As of June 2020, a total of 25,348 eligible employees, or 14.73%, opted out of enrollment in the Program, with 40.70% of those employees in OPS positions. The Prior Outlook reflected that 16.74% of eligible employees opted out of coverage and 43.31% were in OPS positions.

REVENUE

Actual premium revenue received during FY 2019-20 was \$2.49 billion, \$43.0 million more than projected in the Prior Outlook due to shifts in enrollment categories. Investment earnings received during FY 2019-20 were \$15.4 million, \$0.8 million higher than the Prior Outlook, based on higher actual investment earnings. Refunds received for medical claims overpayments were \$4.6 million less than the Prior Outlook, with actual receipts of \$18.2 million. Pharmacy rebates received during FY 2019-20 totaled \$176.6 million, \$15.2 million higher than the Prior Outlook based on actual rebates received. This amount does not include the \$29.2 million quarterly Pharmacy Benefit Manager (PBM) rebates which are reported on separately. This forecast also reflects the year-end pretax transfer of \$21.7 million, required by Section 110.161(8), Florida Statutes. Medicare drug subsidy payments received during FY 2019-20 were \$18.6 million, which was the same as the Prior Outlook. Other revenues collected were \$21.2 million, an increase of \$0.2 million due primarily to the collection of network discount guarantee payments received from the current Pharmacy Benefits Manager (PBM). Total revenues received during FY 2019-20 were \$2.79 billion, reflecting an increase of \$53.0 million from the Prior Outlook.

Changes in insurance premiums in this forecast are primarily driven by changes in employer contribution rates established in the General Appropriations Act enacted during the 2020 Legislative Session. Combined premium contribution revenues for FY 2020-21 through FY 2024-25 are \$933.3 million higher than projected in the Prior Outlook. Investment earnings increased \$45.2 million for FY 2020-21 through FY 2022-23 due to higher projected cash balances. TPA Refunds reflect a decrease of \$6.0 million per year due to actual experience in FY 2019-20. PBM Rebates are projected to increase by a combined total of \$136.2 million. Medicare drug subsidy payments decreased by a combined \$5.1 million across all years of the Outlook due to lower projected Medicare enrollment. Overall, Total Revenue changes in this outlook (including FY 2019-20) reflect a combined increase of \$1.13 billion compared to the Prior Outlook.

SPEND

Total expenses paid in FY 2019-20 for self-insured PPO and HMO medical claims were \$1.52 billion, which was \$98.3 million lower than the Prior Outlook due to lower than expected claims experience. ASO fee expenses paid during the fiscal year were \$43.0 million. Total pharmacy claim expenses were \$731.7 million, up \$17.1 million from the Prior Outlook due to higher than expected pharmacy claims. FY 2019-20 fully insured premium expense came in \$0.3 million higher than expected, at \$325.0 million, and MAPD premium cost was \$0.9 million for FY 2019-20. The Shared Savings Program expenses were \$7.7 million, \$6.7 million less than the Prior Outlook due to lower than expected utilization. Health savings account expenses came in as projected at \$6.7 million. Operating costs were \$4.0 million, \$0.1 million higher than the Prior Outlook. Premium refunds for the period were \$5.3 million, reflecting a decrease of \$1.9 million due to lower actuals than previously forecasted. Other expenses for FY 2019-20 totaled \$1.1 million, up \$0.1 million from the Prior Outlook.

The forecast of PPO expenses for FY 2020-21 through FY 2024-25 reflect a combined projected decrease of \$390.3 million. PPO medical claims projections overall are \$233.9 million lower, reflecting a \$22.4 million decrease due to lower projected enrollment. PPO Pharmacy expenses are \$155.0 million lower, due to lower projected enrollment, claims experience, and lower trend rates. PPO Administrative Services Only (ASO) fees and PBM Administration fees reflect a combined decrease of \$1.4 million due to decreased enrollment projections.

The forecast of FY 2020-21 through FY 2024-25 reflects a combined decrease of \$429.0 million in fully insured and self-insured HMO expenses. Fully insured premium payments reflect a combined decrease across all years totaling \$4.1 million due to lower projected enrollment. HMO medical claims projections overall are \$362.8 million lower, reflecting a \$29.2 million decrease due to lower projected enrollment. HMO pharmacy expenses reflect a combined decrease across all years of \$56.9 million due to lower projected enrollment, claims experience, and lower trend rates. HMO ASO fees and PBM administration fees reflect a combined decrease of \$5.2 million due to shifts between carriers.

Combined, PPO and HMO medical claims across all years of the forecast (including FY 2019-20), compared to the Prior Outlook, reflect a \$695.0 million decrease. The net combined decrease in pharmacy claims costs across all years is \$194.8 million compared to the Prior Outlook.

STATE EMPLOYEES' GROUP HEALTH SELF-INSURANCE TRUST FUND

The same medical trends are presented for this Outlook, except for FY 2020-21. For FY 2020-21, the PPO medical trend used is the per-member rolling 12-month trend of 7.9% provided by the PPO Plan. The HMO medical trend is 7.2%, which is the blended projected trend provided by the HMO vendors. All remaining out years used the same medical trends adopted for the Prior Outlook.

HSA Deposits reflect an increase of \$3.9 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 \$3.5 million for FY 2020-21 through FY 2022-23, based on the FY 2020-21 budget adopted during the 2020 legislative session. Including FY 2019-20, the total increase is \$3.6 million.

Premium Refunds reflect a decrease of \$11.4 million across all years of the forecast (including FY 2019-20) based on decreased refund activity.

Other Expenses reflect an increase of \$0.9 million per year due to the reestablishment of Patient-Centered Outcomes Research Institute (PCORI) Fees by Congress.

Growth factors used to develop this Outlook are reflected below:

PPO MEDICAL							
Industry Range for CYs 2018-20: 3.8% - 7.7%							
	FY 19-20		FY 20-21	FY 21-22	FY 22-23	FY 23-24	FY 24-25
	Applied	Actual YTD + Projected	Applied	Applied	Applied	Applied	Applied
January 2020 Conference	7.90%	6.92%	6.85%	6.90%	6.85%	6.90%	6.90%
August 2020 Conference	n/a	0.57%	7.90%	6.90%	6.85%	6.90%	6.90%

HMO MEDICAL							
Industry Range for CYs 2018-20: 3.8% - 6.9%							
	FY 19-20		FY 20-21	FY 21-22	FY 22-23	FY 23-24	FY 24-25
	Applied	Actual YTD + Projected	Applied	Applied	Applied	Applied	Applied
January 2020 Conference	6.88%	8.64%	6.85%	6.90%	6.85%	6.90%	6.90%
August 2020 Conference	n/a	0.89%	7.20%	6.90%	6.85%	6.90%	6.90%

PPO PHARMACY							
Industry Range for CYs 2018-20: 3.3% - 12.0%							
	FY 19-20		FY 20-21	FY 21-22	FY 22-23	FY 23-24	FY 24-25
	Applied	Actual YTD + Projected	Applied	Applied	Applied	Applied	Applied
January 2020 Conference	4.40%	-0.83%	10.90%	11.60%	12.30%	13.40%	14.40%
August 2020 Conference	n/a	0.66%	7.50%	10.40%	9.80%	11.20%	12.80%

HMO PHARMACY							
Industry Range for CYs 2018-20: 3.3% - 12.0%							
	FY 19-20		FY 20-21	FY 21-22	FY 22-23	FY 23-24	FY 24-25
	Applied	Actual YTD + Projected	Applied	Applied	Applied	Applied	Applied
January 2020 Conference	4.00%	2.57%	10.70%	11.40%	12.10%	12.80%	13.90%
August 2020 Conference	n/a	6.36%	7.60%	10.70%	10.10%	10.70%	13.10%

FULLY INSURED HMO PREMIUM PAYMENTS							
Industry Range for CYs 2018-20: 3.5% - 8.0%							
	CY 2019	CY 2020	CY 2021	CY 2022	CY 2023	CY 2024	CY 2025
January 2020 Conference	4.00%*	4.00%	4.00%	4.00%	4.00%	4.00%	4.00%
August 2020 Conference	4.00%*	4.00%	4.00%	4.00%	4.00%	4.00%	4.00%

*Actual trend rates

STATE EMPLOYEES' GROUP HEALTH SELF-INSURANCE TRUST FUND

Exhibit I

Financial Outlook by Fiscal Year ⁽¹⁾

**Changes to Conference Forecast - August 2020 Compared to January 2020
(In Millions)**

	FY 2019-20			FY 2020-21			FY 2021-22			FY 2022-23			FY 2023-24			FY 2024-25		
	Jan '20	Aug '20	Diff.	Jan '20	Aug '20	Diff.	Jan '20	Aug '20	Diff.	Jan '20	Aug '20	Diff.	Jan '20	Aug '20	Diff.	Jan '20	Aug '20	Diff.
BEGINNING CASH BALANCE	\$ 554.9	\$ 554.9	\$ -	\$ 504.1	\$ 649.3	\$ 145.3	\$ 311.4	\$ 712.2	\$ 400.9	\$ 0.0 ⁽²⁾	\$ 657.8	\$ 657.8	\$ 0.0 ⁽²⁾	\$ 400.2	\$ 400.2	\$ 0.0 ⁽²⁾	\$ 0.0 ⁽²⁾	\$ -
ADJUSTMENT TO BEGINNING CASH ⁽¹²⁾	\$ (54.2)	\$ (54.2)																
REVENUES:																		
Insurance Premiums ⁽³⁾	\$ 2,449.9	\$ 2,492.9	\$ 43.0	\$ 2,490.2	\$ 2,626.7	\$ 136.5	\$ 2,494.6	\$ 2,696.0	\$ 201.4	\$ 2,495.3	\$ 2,694.6	\$ 199.3	\$ 2,498.6	\$ 2,697.3	\$ 198.7	\$ 2,501.4	\$ 2,698.8	\$ 197.4
Investment Earnings	14.6	15.4	0.8	11.8	20.5	8.7	-	20.6	20.6	-	15.9	15.9	-	-	-	-	-	
TPA & Self-Insured HMO Refunds	22.8	18.2	(4.6)	22.8	16.8	(6.0)	22.8	16.8	(6.0)	22.8	16.8	(6.0)	22.8	16.8	(6.0)	22.8	16.8	(6.0)
PBM Rebates	161.4	176.6	15.2	174.4	179.0	4.6	190.8	205.5	14.7	199.6	226.1	26.5	209.1	246.9	37.8	219.3	271.9	52.6
Prior Year Rebate Collection	29.2	29.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Pretax Trust Fund Transfer	23.2	21.7	(1.5)	23.2	21.7	(1.5)	23.2	21.7	(1.5)	23.2	21.7	(1.5)	23.2	21.7	(1.5)	23.2	21.7	(1.5)
Medicare Part D Subsidy	18.6	18.6	-	18.0	16.9	(1.1)	18.0	17.0	(1.0)	18.0	17.0	(1.0)	18.0	17.0	(1.0)	18.1	17.1	(1.0)
Other Revenues	21.0	21.2	0.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
TOTAL REVENUES	\$ 2,740.7	\$ 2,793.7	\$ 53.0	\$ 2,740.4	\$ 2,881.6	\$ 141.2	\$ 2,749.4	\$ 2,977.6	\$ 228.2	\$ 2,758.9	\$ 2,992.1	\$ 233.2	\$ 2,771.7	\$ 2,999.7	\$ 228.0	\$ 2,784.8	\$ 3,026.3	\$ 241.5
TOTAL CASH AVAILABLE	\$ 3,241.4	\$ 3,294.4	\$ 53.0	\$ 3,244.5	\$ 3,530.9	\$ 286.5	\$ 3,060.8	\$ 3,689.8	\$ 629.1	\$ 2,758.9	\$ 3,649.9	\$ 891.0	\$ 2,771.7	\$ 3,399.9	\$ 628.2	\$ 2,784.8	\$ 3,026.3	\$ 241.5
EXPENSES:																		
PPO Plan	\$ 1,168.8	\$ 1,132.2	\$ (36.6)	\$ 1,256.0	\$ 1,207.9	\$ (48.1)	\$ 1,364.4	\$ 1,305.4	\$ (59.0)	\$ 1,480.4	\$ 1,404.9	\$ (75.5)	\$ 1,618.0	\$ 1,524.0	\$ (94.0)	\$ 1,775.7	\$ 1,662.0	\$ (113.7)
Medical Claims	759.4	717.4	(42.0)	805.5	765.9	(39.6)	862.9	819.2	(43.7)	920.6	873.9	(46.7)	985.2	935.2	(50.0)	1,054.0	1,000.1	(53.9)
ASO Fee	18.0	17.9	(0.1)	18.2	18.0	(0.2)	18.4	18.1	(0.3)	18.3	18.1	(0.2)	18.4	18.1	(0.3)	18.4	18.1	(0.3)
Prescription Drug Claims	389.2	394.7	5.5	430.2	421.9	(8.3)	481.0	466.0	(15.0)	539.4	510.8	(28.6)	612.3	568.6	(43.7)	701.1	641.7	(59.4)
PBM Claims Administration	2.2	2.2	-	2.1	2.1	-	2.1	2.1	-	2.1	2.1	-	2.1	2.1	-	2.2	2.1	(0.1)
HMO Plan	\$ 1,534.3	\$ 1,487.3	\$ (47.0)	\$ 1,642.6	\$ 1,579.7	\$ (62.9)	\$ 1,763.3	\$ 1,694.0	\$ (69.3)	\$ 1,895.0	\$ 1,811.9	\$ (83.1)	\$ 2,024.5	\$ 1,924.7	\$ (99.8)	\$ 2,208.5	\$ 2,094.6	\$ (113.9)
Premium Payments	324.7	325.0	0.3	337.8	337.3	(0.5)	352.6	352.0	(0.6)	367.0	366.3	(0.7)	365.0	364.1	(0.9)	399.8	398.4	(1.4)
Medical Claims	854.5	798.2	(56.3)	913.9	851.8	(62.1)	978.2	911.3	(66.9)	1,046.3	974.2	(72.1)	1,119.5	1,041.8	(77.7)	1,197.8	1,113.8	(84.0)
ASO Fee	27.7	25.1	(2.6)	27.9	26.1	(1.8)	27.9	27.1	(0.8)	27.9	27.1	(0.8)	28.0	27.1	(0.9)	28.0	27.1	(0.9)
Prescription Drug Claims	325.4	337.0	11.6	361.0	362.5	1.5	402.6	401.6	(1.0)	451.8	442.3	(9.5)	510.0	489.7	(20.3)	580.9	553.3	(27.6)
PBM Claims Administration	2.0	2.0	-	2.0	2.0	-	2.0	2.0	-	2.0	2.0	-	2.0	2.0	-	2.0	2.0	-
MA-PD Plan	\$ 1.1	\$ 0.9	\$ (0.2)	\$ 2.1	\$ 2.5	\$ 0.4	\$ 2.1	\$ 2.5	\$ 0.4	\$ 2.1	\$ 2.5	\$ 0.4	\$ 2.1	\$ 2.5	\$ 0.4	\$ 2.1	\$ 2.5	\$ 0.4
Shared Savings Program	\$ 14.3	\$ 7.7	\$ (6.7)	\$ 15.0	\$ 10.7	\$ (4.3)	\$ 16.8	\$ 12.2	\$ (4.6)	\$ 17.4	\$ 12.5	\$ (4.9)	\$ 18.1	\$ 12.8	\$ (5.3)	\$ 18.7	\$ 13.2	\$ (5.5)
Medical Claims	7.6	1.6	(6.0)	8.2	4.1	(4.1)	8.7	4.3	(4.4)	9.3	4.6	(4.7)	10.0	4.9	(5.1)	10.6	5.3	(5.3)
Administrative Fees ⁽⁴⁾	6.4	5.7	(0.7)	6.4	6.4	-	7.7	7.7	-	7.7	7.7	-	7.7	7.7	-	7.7	7.7	-
Shared Savings to Employees	0.3	0.4	0.1	0.4	0.2	(0.2)	0.4	0.2	(0.2)	0.4	0.2	(0.2)	0.4	0.2	(0.2)	0.4	0.2	(0.2)
HSA Deposits ⁽⁵⁾	6.7	6.7	(0.0)	6.3	7.1	0.8	6.3	7.1	0.8	6.3	7.1	0.8	6.3	7.1	0.8	6.4	7.1	0.7
Operating Costs & Admin Assessment	3.9	4.0	0.1	3.9	4.6	0.7	3.9	4.6	0.7	3.9	4.6	0.7	3.9	4.6	0.7	3.9	4.6	0.7
Premium Refunds	7.2	5.3	(1.9)	7.2	5.3	(1.9)	7.2	5.3	(1.9)	7.2	5.3	(1.9)	7.2	5.3	(1.9)	7.2	5.3	(1.9)
Other Expenses ⁽⁶⁾	1.0	1.1	0.1	-	0.9	0.9	-	0.9	0.9	-	0.9	0.9	-	0.9	0.9	-	0.9	0.9
TOTAL EXPENSES	\$ 2,737.3	\$ 2,645.1	\$ (92.2)	\$ 2,933.1	\$ 2,818.7	\$ (114.4)	\$ 3,164.0	\$ 3,032.0	\$ (132.0)	\$ 3,412.3	\$ 3,249.7	\$ (162.6)	\$ 3,680.1	\$ 3,481.9	\$ (198.2)	\$ 4,022.5	\$ 3,790.2	\$ (232.3)
EXCESS OF REV. OVER EXP.	\$ 3.4	\$ 148.7	\$ 145.3	\$ (192.7)	\$ 62.9	\$ 255.6	\$ (414.6)	\$ (54.4)	\$ 360.2	\$ (653.4)	\$ (257.6)	\$ 395.8	\$ (908.4)	\$ (482.2)	\$ 426.2	\$ (1,237.7)	\$ (763.9)	\$ 473.8
ENDING CASH BALANCE ⁽⁶⁾	\$ 504.1	\$ 649.3	\$ 145.3	\$ 311.4	\$ 712.2	\$ 400.9	\$ (103.2)	\$ 657.8	\$ 761.1	\$ (653.4)	\$ 400.2	\$ 1,053.6	\$ (908.4)	\$ (82.0)	\$ 826.4	\$ (1,237.7)	\$ (763.9)	\$ 473.8
ADDITIONAL INFORMATION																		
Shared Savings Credits ⁽⁷⁾	\$ 6.2	\$ 0.6	\$ (5.6)	\$ 7.4	\$ 3.7	\$ (3.7)	\$ 8.0	\$ 3.9	\$ (4.1)	\$ 8.0	\$ 3.9	\$ (4.1)	\$ 8.0	\$ 3.9	\$ (4.1)	\$ 8.0	\$ 3.9	\$ (4.1)
Unreported PPO Plan Claims Liability ⁽⁸⁾	\$ 60.9	64.6	3.7	\$ 64.6	76.6	12.0	\$ 69.2	81.9	12.7	\$ 73.8	87.4	13.6	\$ 79.0	93.5	14.5	\$ 84.6	100.9	15.4
Unreported HMO Plan Claims Liability ⁽⁹⁾	110.6	111.7	1.1	118.2	119.2	1.0	126.5	127.5	1.0	135.4	136.3	0.9	144.8	145.8	1.0	155.0	155.9	0.9
Unreported PBM Claims Liability ⁽¹⁰⁾	7.2	7.3	0.1	7.9	7.8	(0.1)	8.8	8.7	(0.1)	9.9	9.5	(0.4)	11.2	10.6	(0.6)	12.8	11.9	(0.9)
Total Unreported Claims Liability	\$ 184.9	\$ 184.2	\$ (0.7)	\$ 198.1	\$ 207.3	\$ 9.2	\$ 212.5	\$ 222.0	\$ 9.5	\$ 227.1	\$ 237.1	\$ 10.0	\$ 243.0	\$ 253.8	\$ 10.8	\$ 260.4	\$ 271.7	\$ 11.3

Highlights of Changes to Forecast

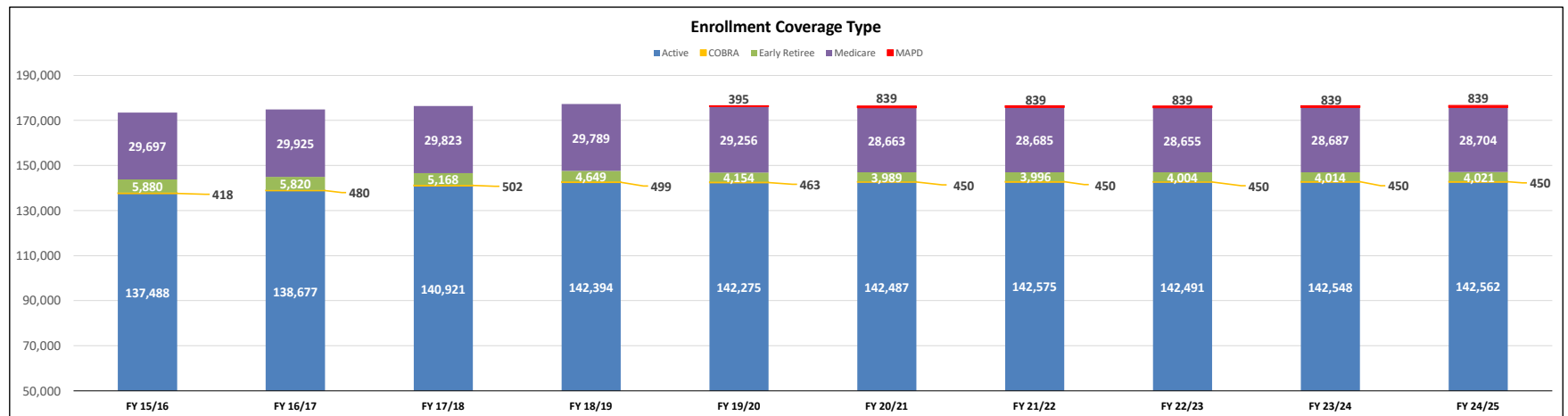
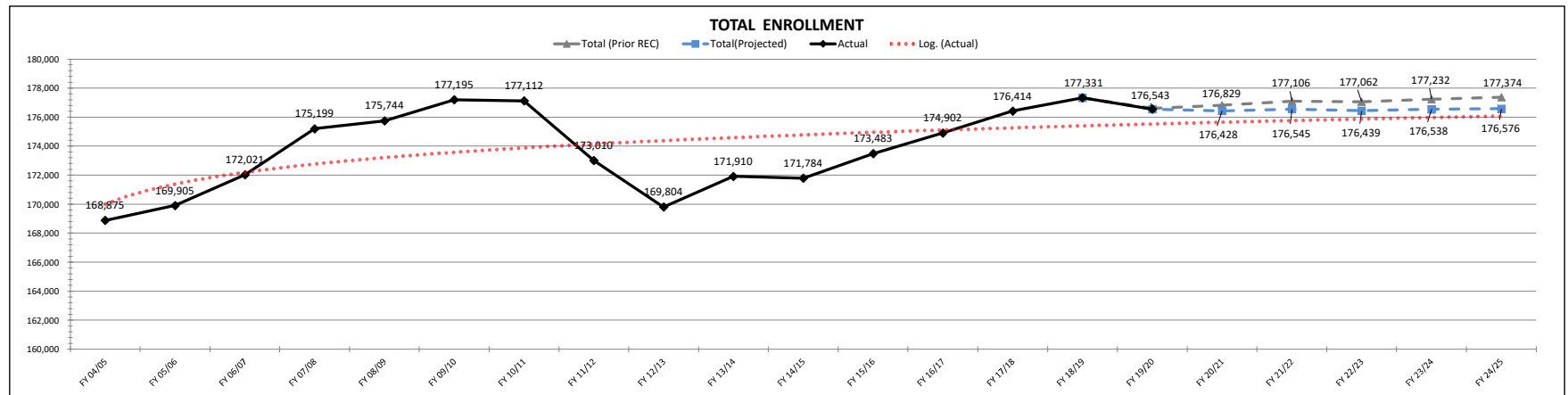
- A) Inclusion of actual enrollment and cash flows through June 2020
- B) Revised growth factors for Preferred Provider Organization (PPO) and Health Maintenance Organization (HMO) pharmacy claims.
- C) Revised growth factors for PPO and HMO medical claims for FY 2020-21
- D) Inclusion of new employer insurance premium contribution rates effective December 2020 for January 2021
- E) Revised projections for the Shared Savings program
- F) Inclusion of the reestablished Patient-Centered Outcomes Research Institute (PCORI) Fee

STATE EMPLOYEES' GROUP HEALTH SELF-INSURANCE TRUST FUND

Exhibit II

Enrollment Outlook by Fiscal Year
Changes to Conference Forecast - August 2020 Compared to January 2020

		FY 2019-20			FY 2020-21			FY 2021-22			FY 2022-23			FY 2023-24			FY 2024-25		
		Jan '20	Aug '20	Diff.	Jan '20	Aug '20	Diff.	Jan '20	Aug '20	Diff.	Jan '20	Aug '20	Diff.	Jan '20	Aug '20	Diff.	Jan '20	Aug '20	Diff.
Average Enrollment by Plan	PPO Standard	80,360	80,234	(126)	80,103	79,660	(443)	80,272	79,711	(561)	80,143	79,570	(573)	80,234	79,650	(584)	80,299	79,686	(613)
	PPO HDHP	3,251	3,306	55	3,223	3,396	173	3,227	3,396	169	3,225	3,396	171	3,228	3,401	173	3,231	3,401	170
	HMO Standard	91,414	91,363	(51)	91,594	91,288	(306)	91,687	91,340	(347)	91,763	91,363	(400)	91,829	91,365	(464)	91,893	91,355	(538)
	HMO HDHP	1,226	1,245	19	1,193	1,245	52	1,204	1,259	55	1,215	1,271	56	1,225	1,283	58	1,235	1,295	60
	MAPD ⁽¹⁾	358	395	37	716	839	123	716	839	123	716	839	123	716	839	123	716	839	123
Total	176,609	176,543	(66)	176,829	176,428	(401)	177,106	176,545	(561)	177,062	176,439	(623)	177,232	176,538	(694)	177,374	176,576	(798)	
Average Enrollment by Coverage Type	Active (Non-OPS) Standard	132,314	132,587	273	132,490	132,770	280	132,667	132,834	167	132,627	132,730	103	132,725	132,759	34	132,802	132,753	(49)
	Active (Non-OPS) HDHP	3,955	4,030	75	3,896	4,107	211	3,910	4,121	211	3,918	4,133	215	3,930	4,150	220	3,942	4,162	220
	OPS Standard	5,386	5,248	(138)	5,524	5,183	(341)	5,534	5,193	(341)	5,537	5,201	(336)	5,547	5,212	(335)	5,557	5,220	(337)
	OPS HDHP	411	410	(1)	414	427	13	415	427	12	416	427	11	417	427	10	418	427	9
	COBRA	472	463	(9)	460	450	(10)	461	450	(11)	462	450	(12)	463	450	(13)	464	450	(14)
	Early Retiree	4,226	4,154	(72)	4,156	3,989	(167)	4,169	3,996	(173)	4,176	4,004	(172)	4,187	4,014	(173)	4,198	4,021	(177)
	Medicare	29,487	29,256	(231)	29,173	28,663	(510)	29,234	28,685	(549)	29,210	28,655	(555)	29,247	28,687	(560)	29,277	28,704	(573)
	MAPD ⁽¹⁾	358	395	37	716	839	123	716	839	123	716	839	123	716	839	123	716	839	123
	Total	176,609	176,543	(66)	176,829	176,428	(401)	177,106	176,545	(561)	177,062	176,439	(623)	177,232	176,538	(694)	177,374	176,576	(798)



STATE EMPLOYEES' GROUP HEALTH SELF-INSURANCE TRUST FUND

**Exhibit III
Financial Outlook by Fiscal Year ⁽¹⁾
(In Millions)**

	<u>FY 2019-20</u>	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>FY 2022-23</u>	<u>FY 2023-24</u>	<u>FY 2024-25</u>
	<u>Actual</u>	<u>Estimate</u>	<u>Estimate</u>	<u>Estimate</u>	<u>Estimate</u>	<u>Estimate</u>
BEGINNING CASH BALANCE	\$ 554.9	\$ 649.3	\$ 712.2	\$ 657.8	\$ 400.2	\$ 0.0 ⁽²⁾
ADJUSTMENT TO BEGINNING CASH ⁽¹²⁾	(54.2)					
REVENUES:						
Insurance Premiums:						
Employer	\$ 2,079.3	\$ 2,205.0	\$ 2,268.2	\$ 2,266.8	\$ 2,267.9	\$ 2,268.1
Employee	174.2	174.1	174.2	174.0	174.1	174.1
HSA Contributions ⁽³⁾	6.5	7.1	7.1	7.1	7.1	7.1
COBRA	5.9	6.0	6.1	6.1	6.1	6.1
Early Retiree	47.3	48.1	49.5	49.6	49.8	49.9
Medicare	179.7	186.4	190.9	191.0	192.3	193.5
Investment Earnings	15.4	20.5	20.6	15.9	0.0	0.0
PPO - TPA Refunds	8.3	8.4	8.4	8.4	8.4	8.4
PPO - PBM Rebates	96.3	96.1	110.0	120.9	132.1	144.8
HMO - Self-Insured Refunds	9.8	8.4	8.4	8.4	8.4	8.4
HMO - PBM Rebates	80.3	82.9	95.5	105.2	114.8	127.1
Prior Year Rebate Collection	29.2	0.0	0.0	0.0	0.0	0.0
Pretax Trust Fund Transfer	21.7	21.7	21.7	21.7	21.7	21.7
PPO - Medicare Part D Subsidy	17.2	15.6	15.7	15.7	15.7	15.8
HMO - Medicare Part D Subsidy	1.4	1.3	1.3	1.3	1.3	1.3
Other Revenues	21.2	0.0	0.0	0.0	0.0	0.0
TOTAL REVENUES	\$ 2,793.7	\$ 2,881.6	\$ 2,977.6	\$ 2,992.1	\$ 2,999.7	\$ 3,026.3
TOTAL CASH AVAILABLE	\$ 3,294.4	\$ 3,530.9	\$ 3,689.8	\$ 3,649.9	\$ 3,399.9	\$ 3,026.3
EXPENSES:						
State PPO Plan:						
Medical Claims	\$ 717.4	\$ 765.9	\$ 819.2	\$ 873.9	\$ 935.2	\$ 1,000.1
ASO Fee	17.9	18.0	18.1	18.1	18.1	18.1
Prescription Drug Claims	394.7	421.9	466.0	510.8	568.6	641.7
PBM Claims Administration	2.2	2.1	2.1	2.1	2.1	2.1
HMO Plan:						
Premium Payments	325.0	337.3	352.0	366.3	364.1	398.4
Medical Claims	798.2	851.8	911.3	974.2	1,041.8	1,113.8
ASO Fee	25.1	26.1	27.1	27.1	27.1	27.1
Prescription Drug Claims	337.0	362.5	401.6	442.3	489.7	553.3
PBM Claims Administration	2.0	2.0	2.0	2.0	2.0	2.0
Medicare Advantage Prescription Drug Plan	0.9	2.5	2.5	2.5	2.5	2.5
Shared Savings Program:						
Medical Claims	1.6	4.1	4.3	4.6	4.9	5.3
Administrative Fees ⁽⁴⁾	5.7	6.4	7.7	7.7	7.7	7.7
Shared Savings to Employees	0.4	0.2	0.2	0.2	0.2	0.2
HSA Deposits ⁽³⁾	6.7	7.1	7.1	7.1	7.1	7.1
Operating Costs & Admin Assessment	4.0	4.6	4.6	4.6	4.6	4.6
Premium Refunds	5.3	5.3	5.3	5.3	5.3	5.3
Other Expenses ⁽⁵⁾	1.1	0.9	0.9	0.9	0.9	0.9
TOTAL EXPENSES	\$ 2,645.1	\$ 2,818.7	\$ 3,032.0	\$ 3,249.7	\$ 3,481.9	\$ 3,790.2
EXCESS OF REVENUES OVER EXPENSES	\$ 148.7	\$ 62.9	\$ (54.4)	\$ (257.6)	\$ (482.2)	\$ (763.9)
ENDING CASH BALANCE ⁽⁶⁾	\$ 649.3	\$ 712.2	\$ 657.8	\$ 400.2	\$ (82.0)	\$ (763.9)

ADDITIONAL INFORMATION

Total Unreported Claims Liability ⁽¹¹⁾	\$ 184.2	\$ 207.3	\$ 222.0	\$ 237.1	\$ 253.8	\$ 271.7
Average Enrollment by Plan						
PPO Standard	80,234	79,660	79,711	79,570	79,650	79,686
PPO HDHP	3,306	3,396	3,396	3,396	3,401	3,401
HMO Standard	91,363	91,288	91,340	91,363	91,365	91,355
HMO HDHP	1,245	1,245	1,259	1,271	1,283	1,295
MAPD	395	839	839	839	839	839
Total	176,543	176,428	176,545	176,439	176,538	176,576
Average Enrollment by Coverage Type						
Active (Non-OPS) Standard	132,587	132,770	132,834	132,730	132,759	132,753
Active (Non-OPS) HDHP	4,030	4,107	4,121	4,133	4,150	4,162
OPS Standard	5,248	5,183	5,193	5,201	5,212	5,220
OPS HDHP	410	427	427	427	427	427
COBRA	463	450	450	450	450	450
Early Retiree	4,154	3,989	3,996	4,004	4,014	4,021
Medicare	29,256	28,663	28,685	28,655	28,687	28,704
MAPD	395	839	839	839	839	839
Total	176,543	176,428	176,545	176,439	176,538	176,576

**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 47% and 53%, respectively.
- 4) Administrative expenses for 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 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) Medicare Advantage Prescription Drug Plans (MAPD) became available to Medicare eligible members on January 1, 2020. The initial MAPD enrollment is 716 members and is held flat for the Outlook. For FY 2019-20, the average annual enrollment is reported as 358 subscribers as the program was only active for 6 months of the year.
- 12) Decrease in Beginning Cash Balance Forecast due to audit reconciliation. In the Fall of 2019, Division staff discovered that the model that had been set up in 2011 to create cash flow statements was not properly capturing the medical claims expense side of entries made in FLAIR to account for monthly medical claims offsets and self-insured HMO refunds by two self-insured HMO vendors. After extensive research, the Division determined that self-insured HMO medical claims expenses had been underreported in prior Outlooks in the cumulative amount of \$52.6 million, for the period of January 2012 through June 2019. Staff also determined that there was a cumulative \$1.6 million variance in cash reporting balances due to rounding. Therefore, this Outlook reflects an adjustment of \$54.2 million to the FY 2019-20 beginning cash balance. Below is a summary of the \$52.6 million in self-insured HMO medical claim adjustments made by fiscal year.

See note 12 above:

ADJUSTMENT BY FISCAL YEAR	
FY 12-13	\$ 500,274.27
FY 13-14	\$ 916,355.33
FY 14-15	\$ 1,098,668.49
FY 15-16	\$ 2,721,847.64
FY 16-17	\$ 5,643,869.37
FY 17-18	\$ 9,225,225.85
FY 18-19	\$ 32,454,705.56
Total	\$ 52,560,946.51

Exhibit V
Comparison of Financial Outlooks
Fiscal Year 2019-20
(In Millions)

\$ 504.1 - Previous Ending Cash Balance Forecast ⁽ⁱ⁾

- 53.0 - Increase in Revenue Forecast
 - 43.0 - Net Increase in Insurance Premiums
 - (0.2) - Decrease in employer and enrollee HSA contributions
 - 43.2 - Increase in Insurance Premiums due to shifts in enrollment categories
 - 0.8 - Increase in Investment Earnings due to higher actual cash balance than projected
 - (0.7) - Decrease in PPO - TPA Refunds
 - (0.1) - Decrease due to lower projected enrollment from 83,611 to 83,540
 - (0.6) - Decrease due to lower actual activity than projected
 - 9.1 - Increase in PPO - PBM Rebates
 - (0.1) - Decrease due to lower actual than projected enrollment from 83,611 to 83,540
 - 9.2 - Increase due to higher actual activity than projected
 - (4.0) - Decrease in HMO - Self-Insured Refunds due to lower actual than projected activity
 - 6.1 - Increase in HMO - PBM Rebates due to higher actual than projected activity
 - (1.5) - Decrease in Pretax Trust Fund Transfer due to lower actual than projected FY 2019-20
 - 0.2 - Increase in Other Revenues due to audit findings and non-recurring activity
- (92.2) - Decrease in Expense Forecast
 - (36.6) - Decrease in State PPO Plan
 - (42.0) - Decrease in Medical Claims
 - (0.7) - Decrease due to lower actual than projected enrollment from 83,611 to 83,540
 - (1.1) - Decrease due to Shared Savings Program
 - (40.2) - Decrease due to lower actual claims experience
 - (0.1) - Decrease in ASO Fee Expense due to lower actual than projected enrollment from 83,611 to 83,540
 - 5.5 - Increase in Prescription Drug Claims
 - (0.7) - Decrease due to lower actual enrollment from 83,611 to 83,540
 - 6.2 - Increase due to higher actual claims experience
 - (47.0) - Decrease in HMO Plan
 - 0.3 - Increase in Premium Payments
 - 0.2 - Increase due to higher actual enrollment from 31,398 to 31,414
 - 0.1 - Increase due to shifts in enrollment categories
 - (56.3) - Decrease in Medical Claims
 - (0.7) - Decrease due to lower actual enrollment from 61,240 to 61,190
 - (1.3) - Decrease due to Shared Savings Program
 - (54.3) - Decrease due to lower actual claims experience
 - (2.6) - Decrease in ASO Fees due to lower actual enrollment and shifts between HMO plans
 - 11.6 - Increase in Prescription Drug Claims
 - (0.4) - Decrease due to lower actual enrollment from 87,025 to 86,981
 - 12.0 - Increase due to higher actual claims experience
 - (0.2) - Decrease in MAPD Premium Payments due to lower actual than projected payments
 - (6.7) - Decrease in Shared Savings Program
 - (6.0) - Decrease due to lower actual then projected Bundled Surgical Service claims
 - (0.7) - Decrease in Administrative Fees for HRA plan administrator
 - 0.1 - Increase in Shared Savings to Employees
 - (1.8) - Decrease in Other Expense Categories
 - 0.1 - Increase in Operating Costs and Administrative Assessments based on actual cost.
 - (1.9) - Decrease in Premium Refunds due to lower actual activity
 - 0.1 - Increase in Other Expenses due to higher actual experience

649.3 - Ending Cash Balance⁽¹⁾

⁽ⁱ⁾ Self Insurance Estimating Conference held in January 2020.

Exhibit VI
Comparison of Financial Outlooks
Fiscal Year 2020-21
(In Millions)

\$ 311.4 - Previous Ending Cash Balance Forecast ⁽ⁱ⁾

- 145.3 - Increase in Beginning Cash Balance Forecast
- 141.2 - Increase in Revenue Forecast
 - 136.5 - Net Increase in Insurance Premiums
 - (1.7) - Decrease in employer and enrollee Insurance Premiums due to lower projected enrollment from 176,829 to 176,428
 - 0.8 - Increase in projected employer and enrollee HSA contributions
 - 94.7 - Increase in Insurance Premiums rates effective December 2020 for January 2021 coverage
 - 42.7 - Increase in Insurance Premiums due to shifts in enrollment categories
 - 8.7 - Increase in Investment Earnings due to higher actual cash balance
 - (0.6) - Decrease in PPO - TPA Refunds due to lower projected activity
 - 3.2 - Increase in PPO - PBM Rebates
 - (0.3) - Decrease due to lower projected enrollment from 83,326 to 83,056
 - 3.5 - Increase due to higher projected activity
 - (5.4) - Decrease in HMO - Self-Insured Refunds due to lower projected activity
 - 1.4 - Increase in HMO - PBM Rebates
 - (0.3) - Decrease due to lower projected enrollment from 87,285 to 86,957
 - 1.7 - Increase due to higher projected activity
 - (1.5) - Decrease in Pretax Trust Fund Transfer due to lower actual than projected FY 2019-20
 - (1.1) - Decrease in PPO - Medicare Part D Subsidy
 - (0.4) - Decrease due to a lower projected enrollment from 21,830 to 21,293
 - (0.7) - Decrease due to lower projected per member subsidy
- (114.4) - Decrease in Expense Forecast
 - (48.1) - Decrease in State PPO Plan
 - (39.6) - Decrease in Medical Claims
 - (2.6) - Decrease due to lower projected enrollment from 83,326 to 83,056
 - (3.7) - Decrease due to Shared Savings Program
 - 7.5 - Increase due to higher growth factor from 6.85% to 7.90%
 - (40.8) - Decrease due to lower projected claims experience
 - (0.2) - Decrease in ASO Fees due to lower projected enrollment from 83,326 to 83,056
 - (8.3) - Decrease in Prescription Drug Claims
 - (1.4) - Decrease due to lower projected enrollment from 83,326 to 83,056
 - (13.3) - Decrease due to lower growth factor from 10.90% to 7.50%
 - 6.4 - Increase due to higher actual claims experience
 - (62.9) - Decrease in HMO Plan
 - (0.5) - Decrease in Premium Payments
 - 0.2 - Increase due to higher projected enrollment from 31,286 to 31,301
 - (0.7) - Decrease due to shifts in enrollment categories
 - (62.1) - Decrease in Medical Claims
 - (4.1) - Decrease due to lower projected enrollment from 63,501 to 61,231
 - (4.5) - Decrease due to Shared Savings Program
 - 2.8 - Increase due to higher growth factor from 6.85% to 7.20%
 - (56.3) - Decrease due to lower projected claims experience
 - (1.8) - Decrease in ASO Fees
 - (0.1) - Decrease due to lower projected enrollment from 61,501 to 61,231
 - (1.7) - Decrease due to shifts in between HMO plans
 - 1.5 - Increase in Prescription Drug Claims
 - (1.4) - Decrease due to lower projected enrollment from 87,285 to 86,957
 - (10.4) - Decrease due to lower growth factor from 10.70% to 7.60%
 - 13.3 - Increase due to higher projected claims experience
 - 0.4 - Increase in MAPD Premium Payments due to higher projected enrollment from 716 to 839
 - (4.3) - Decrease in Shared Savings Program
 - (4.1) - Decrease in Bundled Service claims based on lower projected utilization
 - (0.2) - Decrease in Shared Savings to Employees due to lower utilization
 - 0.5 - Increase in Other Expense Categories
 - 0.8 - Increase due to higher projected employer and enrollee HSA Deposits
 - 0.7 - Increase in Operating Costs and Administrative Assessments based on FY 2020-21 budget
 - (1.9) - Decrease in Premium Refunds due to lower projected activity
 - 0.9 - Increase in Other Expenses due to reestablishment of Patient-Centered Outcomes Research Institute (PCORI) Fees

712.2 - Ending Cash Balance ⁽¹⁾⁽ⁱ⁾ Self Insurance Estimating Conference held in January 2020.

Exhibit VII
Comparison of Financial Outlooks
Fiscal Year 2021-22
(In Millions)

\$ (103.2) - Previous Ending Cash Balance Forecast⁽ⁱ⁾

- 400.9 - Increase in Beginning Cash Balance Forecast
- 228.2 - Increase in Revenue Forecast
 - 201.4 - Net Increase in Insurance Premiums
 - (3.9) - Decrease in employer and enrollee Insurance Premiums due to lower projected enrollment from 177,106 to 176,545
 - 0.8 - Increase in projected employer and enrollee HSA contributions
 - 162.0 - Increase in Insurance Premiums rates effective December 2020 for January 2021 coverage
 - 42.5 - Increase in Insurance Premiums due to shifts in enrollment categories
 - 20.6 - Increase in Investment Earnings due to higher projected cash balance
 - (0.6) - Decrease in PPO - TPA Refunds due to lower projected activity
 - 9.5 - Increase in PPO - PBM Rebates
 - (0.5) - Decrease due to lower projected enrollment from 83,499 to 83,107
 - 10.0 - Increase due to higher projected activity
 - (5.4) - Decrease in HMO - Self-Insured Refunds due to lower projected activity
 - 5.2 - Increase in HMO - PBM Rebates
 - (0.4) - Decrease due to lower projected enrollment from 87,384 to 87,024
 - 5.6 - Increase due to higher projected activity
 - (1.5) - Decrease in Pretax Trust Fund Transfer due to lower actual than projected FY 2019-20
 - (1.0) - Decrease in PPO - Medicare Part D Subsidy
 - (0.4) - Decrease due to a lower projected enrollment from 22,877 to 21,306
 - (0.6) - Decrease due to lower projected per member subsidy
- (132.0) - Decrease in Expense Forecast
 - (59.0) - Decrease in State PPO Plan
 - (43.7) - Decrease in Medical Claims
 - (4.1) - Decrease due to lower projected enrollment from 83,499 to 83,107
 - (4.0) - Decrease due to Shared Savings Program
 - (35.6) - Decrease due to lower projected claims experience
 - (0.3) - Decrease in ASO Fees due to lower projected enrollment from 83,499 to 83,107
 - (15.0) - Decrease in Prescription Drug Claims
 - (2.3) - Decrease due to lower projected enrollment from 83,499 to 83,107
 - (5.1) - Decrease due to lower growth factor from 11.60% to 10.40%
 - (7.6) - Decrease due to lower projected claims experience
 - (69.3) - Decrease in HMO Plan
 - (0.6) - Decrease in Premium Payments due to shifts in enrollment categories
 - (66.9) - Decrease in Medical Claims
 - (4.7) - Decrease due to lower projected enrollment from 64,249 to 61,577
 - (4.8) - Decrease due to Shared Savings Program
 - (57.4) - Decrease due to lower projected claims experience
 - (0.8) - Decrease in ASO Fees
 - (0.1) - Decrease due to lower projected enrollment from 61,577 to 61,283
 - (0.7) - Decrease due to shifts between HMO plans
 - (1.0) - Decrease in Prescription Drug Claims
 - (1.7) - Decrease due to lower projected enrollment from 87,384 to 87,024
 - (2.5) - Decrease due to lower growth factor from 11.40% to 10.70%
 - 3.2 - Increase due to higher projected claims experience
 - 0.4 - Increase in MAPD Premium Payments due to higher projected enrollment from 716 to 839
 - (4.6) - Decrease in Shared Savings Program
 - (4.4) - Decrease in Bundled Service claims based on lower projected utilization
 - (0.2) - Decrease in Shared Savings to Employees due to lower utilization
 - 0.5 - Increase in Other Expense Categories
 - 0.8 - Increase due to higher projected employer and enrollee HSA Deposits
 - 0.7 - Increase in Operating Costs and Administrative Assessments based on FY 2020-21 budget
 - (1.9) - Decrease in Premium Refunds due to lower projected activity
 - 0.9 - Increase in Other Expenses due to reestablishment of Patient-Centered Outcomes Research Institute (PCORI) Fees

657.8 - Ending Cash Balance⁽¹⁾⁽ⁱ⁾ Self Insurance Estimating Conference held in January 2020.

Exhibit VIII
Comparison of Financial Outlooks
Fiscal Year 2022-23
(In Millions)

\$ (653.4) - Previous Ending Cash Balance Forecast⁽¹⁾

- 657.8 - Increase in Beginning Cash Balance Forecast
- 233.2 - Increase in Revenue Forecast
 - 199.3 - Net Increase in Insurance Premiums
 - (5.0) - Decrease in employer and enrollee Insurance Premiums due to lower projected enrollment from 177,062 to 176,439
 - 0.8 - Increase in projected employer and enrollee HSA contributions
 - 161.9 - Increase in Insurance Premiums rates effective December 2020 for January 2021 coverage
 - 41.6 - Increase in Insurance Premiums due to shifts in enrollment categories
 - 15.9 - Increase in Investment Earnings due to higher projected cash balance
 - (0.6) - Decrease in PPO - TPA Refunds due to lower projected activity
 - 16.9 - Increase in PPO - PBM Rebates
 - (0.6) - Decrease due to lower projected enrollment from 83,369 to 82,966
 - 17.5 - Increase due to higher projected activity
 - (5.4) - Decrease in HMO - Self-Insured Refunds due to lower projected activity
 - 9.6 - Increase in HMO - PBM Rebates
 - (0.5) - Decrease due to lower projected enrollment from 87,468 to 87,057
 - 10.1 - Increase due to higher projected activity
 - (1.5) - Decrease in Pretax Trust Fund Transfer due to lower actual than projected FY 2019-20
 - (1.0) - Decrease in PPO - Medicare Part D Subsidy
 - (0.4) - Decrease due to lower projected Medicare enrollment from 21,842 to 21,267
 - (0.6) - Decrease due to lower projected per member subsidy
- (162.6) - Decrease in Expense Forecast
 - (75.5) - Decrease in State PPO Plan
 - (46.7) - Decrease in Medical Claims
 - (4.5) - Decrease due to lower projected enrollment from 83,369 to 82,966
 - (4.2) - Decrease due to Shared Savings Program
 - (38.0) - Decrease due to lower projected claims experience
 - (0.2) - Decrease in ASO Fees due to lower projected enrollment from 83,369 to 82,966
 - (28.6) - Decrease in Prescription Drug Claims
 - (2.6) - Decrease due to lower projected enrollment from 83,369 to 82,966
 - (11.6) - Decrease due to lower growth factor from 12.30% to 9.80%
 - (14.4) - Decrease due to lower projected claims experience
 - (83.1) - Decrease in HMO Plan
 - (0.7) - Decrease in Premium Payments
 - (0.2) - Decrease due to lower projected enrollment from 31,335 to 31,320
 - (0.5) - Decrease due to shifts in enrollment categories
 - (72.1) - Decrease in Medical Claims
 - (5.6) - Decrease due to lower projected enrollment from 61,640 to 61,314
 - (5.2) - Decrease due to Shared Savings Program
 - (61.3) - Decrease due to lower projected claims experience
 - (0.8) - Decrease in ASO Fees
 - (0.1) - Decrease due to lower projected enrollment from 61,640 to 61,314
 - (0.7) - Decrease due to shifts between HMO plans
 - (9.5) - Decrease in Prescription Drug Claims
 - (2.1) - Decrease due to lower projected enrollment from 87,468 to 87,057
 - (8.0) - Increase due to higher growth factor from 12.10% to 10.10%
 - 0.6 - Increase due to higher projected claims experience
 - 0.4 - Increase in MAPD Premium Payments due to higher projected enrollment from 716 to 839
 - (4.9) - Decrease in Shared Savings Program
 - (4.7) - Decrease in Bundled Service claims based on lower projected utilization
 - (0.2) - Decrease in Shared Savings to Employees due to lower utilization
 - 0.5 - Increase in Other Expense Categories
 - 0.8 - Increase due to higher projected employer and enrollee HSA Deposits
 - 0.7 - Increase in Operating Costs and Administrative Assessments based on FY 2020-21 budget
 - (1.9) - Decrease in Premium Refunds due to lower projected activity
 - 0.9 - Increase in Other Expenses due to reestablishment of Patient-Centered Outcomes Research Institute (PCORI) Fees

400.2 - Ending Cash Balance⁽¹⁾⁽¹⁾ Self Insurance Estimating Conference held in January 2020.

Exhibit IX
Comparison of Financial Outlooks
Fiscal Year 2023-24
(In Millions)

\$ (908.4) - Previous Ending Cash Balance Forecast⁽ⁱ⁾

400.2	- Increase in Beginning Cash Balance Forecast
228.0	- Increase in Revenue Forecast
198.7	- Net Increase in Insurance Premiums
(6.0)	- Decrease in employer and enrollee Insurance Premiums due to lower projected enrollment from 177,232 to 176,538
0.8	- Increase in projected employer and enrollee HSA contributions
162.1	- Increase in Insurance Premiums rates effective December 2020 for January 2021 coverage
41.8	- Increase in Insurance Premiums due to shifts in enrollment categories
(0.6)	- Decrease in PPO - TPA Refunds due to lower projected activity
24.4	- Increase in PPO - PBM Rebates
(0.7)	- Decrease due to lower projected enrollment from 83,462 to 83,051
25.1	- Increase due to higher projected activity
(5.4)	- Decrease in HMO - Self-Insured Refunds due to lower projected activity
(1.0)	- Decrease due to lower projected enrollment from 61,699 to 61,331
(4.4)	- Decrease due to lower projected activity
13.4	- Increase in HMO - PBM Rebates
(0.6)	- Decrease due to lower projected enrollment from 87,543 to 87,072
14.0	- Increase due to higher projected activity
(1.5)	- Decrease in Pretax Trust Fund Transfer due to lower actual than projected FY 2019-20
(1.0)	- Decrease in PPO - Medicare Part D Subsidy
(0.4)	- Decrease due to lower projected Medicare enrollment from 21,867 to 21,290
(0.6)	- Decrease due to lower projected per member subsidy
(198.2)	- Decrease in Expense Forecast
(94.0)	- Decrease in State PPO Plan
(50.0)	- Decrease in Medical Claims
(4.9)	- Decrease due to lower projected enrollment from 83,462 to 83,051
(4.5)	- Decrease due to Shared Savings Program
(40.6)	- Decrease due to lower projected claims experience
(0.3)	- Decrease in ASO Fees due to lower projected enrollment from 83,462 to 83,051
(43.7)	- Decrease in Prescription Drug Claims
(3.0)	- Decrease due to lower projected enrollment from 83,462 to 83,051
(11.3)	- Decrease due to lower growth factor from 13.40% to 11.20%
(29.4)	- Decrease due to lower projected claims experience
(99.8)	- Decrease in HMO Plan
(0.9)	- Decrease in Premium Payments
(0.4)	- Decrease due to lower projected enrollment from 31,353 to 31,316
(0.5)	- Decrease due to shifts in enrollment categories
(77.7)	- Decrease in Medical Claims
(6.7)	- Decrease due to lower projected enrollment from 61,699 to 61,331
(5.5)	- Decrease due to Shared Savings Program
(65.5)	- Decrease due to lower projected claims experience
(0.9)	- Decrease in ASO Fees
(0.2)	- Decrease due to lower projected enrollment from 61,699 to 61,331
(0.7)	- Decrease due to shifts between HMO plans
(20.3)	- Decrease in Prescription Drug Claims
(2.7)	- Decrease due to lower projected enrollment from 87,543 to 87,072
(9.3)	- Decrease due to lower growth factor from 12.80% to 10.70%
(8.3)	- Decrease due to lower projected claims experience
0.4	- Increase in MAPD Premium Payments due to higher projected enrollment from 716 to 839
(5.3)	- Decrease in Shared Savings Program
(5.1)	- Decrease in Bundled Service claims based on lower projected utilization
(0.2)	- Decrease in Shared Savings to Employees due to lower utilization
0.5	- Increase in Other Expense Categories
0.8	- Increase due to higher projected employer and enrollee HSA Deposits
0.7	- Increase in Operating Costs and Administrative Assessments based on FY 2020-21 budget
(1.9)	- Decrease in Premium Refunds due to lower projected activity
0.9	- Increase in Other Expenses due to reestablishment of Patient-Centered Outcomes Research Institute (PCORI) Fees

(82.0) - Ending Cash Balance⁽¹⁾⁽ⁱ⁾ Self Insurance Estimating Conference held in January 2020.

Exhibit X

Comparison of Financial Outlooks

Fiscal Year 2024-25

(In Millions)

\$ (1,237.7) - Previous Ending Cash Balance Forecast ⁽ⁱ⁾

0.0	- No Change in Beginning Cash Balance Forecast
241.5	- Increase in Revenue Forecast
197.4	- Net Increase in Insurance Premiums
(7.6)	- Decrease in employer and enrollee Insurance Premiums due to lower projected enrollment from 177,374 to 176,576
0.7	- Increase in projected employer and enrollee HSA contributions
162.1	- Increase in Insurance Premiums rates effective December 2020 for January 2021 coverage
42.2	- Increase in Insurance Premiums due to shifts in enrollment categories
(0.6)	- Decrease in PPO - TPA Refunds due to lower projected activity
33.1	- Increase in PPO - PBM Rebates
(0.8)	- Decrease due to lower projected enrollment from 83,527 to 83,086
33.9	- Increase due to higher projected activity
(5.4)	- Decrease in HMO - Self-Insured Refunds
(0.1)	- Decrease due to lower projected enrollment from 61,754 to 61,339
(5.3)	- Decrease due to lower projected activity
19.5	- Increase in HMO - PBM Rebates
(0.8)	- Decrease due to lower projected enrollment from 87,537 to 86,985
20.3	- Increase due to higher projected activity
(1.5)	- Decrease in Pretax Trust Fund Transfer due to lower actual than projected FY 2019-20
(1.0)	- Decrease in PPO - Medicare Part D Subsidy
(0.4)	- Decrease due to lower projected Medicare enrollment from 21,885 to 21,300
(0.6)	- Decrease due to lower projected per member subsidy
(232.3)	- Decrease in Expense Forecast
(113.7)	- Decrease in State PPO Plan
(53.9)	- Decrease in Medical Claims
(5.6)	- Decrease due to lower projected enrollment from 83,527 to 83,086
(4.8)	- Decrease due to Shared Savings Program
(43.5)	- Decrease due to lower projected claims experience
(0.3)	- Decrease in ASO Fees due to lower projected enrollment from 83,527 to 83,086
(59.4)	- Decrease in Prescription Drug Claims
(3.7)	- Decrease due to lower projected enrollment from 83,527 to 83,086
(9.1)	- Decrease due to lower growth factor from 14.40% to 12.80%
(46.6)	- Decrease due to lower projected claims experience
(0.1)	- Decrease in PBM Claims Administration due to lower actual claims experience
(113.9)	- Decrease in HMO Plan
(1.4)	- Decrease in Premium Payments
(0.8)	- Decrease due to lower projected enrollment from 31,372 to 31,311
(0.6)	- Decrease due to shifts in enrollment categories
(84.0)	- Decrease in Medical Claims
(8.1)	- Decrease due to lower projected enrollment from 61,754 to 61,339
(5.9)	- Decrease due to Shared Savings Program
(70.0)	- Decrease due to lower projected claims experience
(0.9)	- Decrease in ASO Fees
(0.2)	- Decrease due to lower projected enrollment from 61,754 to 61,339
(0.7)	- Decrease due to shifts between HMO plans
(27.6)	- Decrease in Prescription Drug Claims
(3.7)	- Decrease due to lower projected enrollment from 87,537 to 86,985
(3.9)	- Decrease due to lower growth factor from 13.90% to 13.10%
(20.0)	- Decrease due to lower projected claims experience
0.4	- Increase in MAPD Premium Payments due to higher projected enrollment from 716 to 839
(5.5)	- Decrease in Shared Savings Program
(5.3)	- Decrease in Bundled Service claims based on lower projected utilization
(0.2)	- Decrease in Shared Savings to Employees due to lower utilization
0.4	- Increase in Other Expense Categories
0.7	- Increase in projected employer and enrollee HSA Deposits
0.7	- Increase in Operating Costs and Administrative Assessments based on FY 2020-21 budget
(1.9)	- Decrease in Premium Refunds due to lower projected activity
0.9	- Increase in Other Expenses due to reestablishment of Patient-Centered Outcomes Research Institute (PCORI) Fees

(763.9) - Ending Cash Balance ⁽¹⁾⁽ⁱ⁾ Self Insurance Estimating Conference held in January 2020.

STATE EMPLOYEES' GROUP HEALTH SELF-INSURANCE TRUST FUND

Premium Rate Table

Effective December 2018 for January 2019 Coverage

(Premium rate change for CHP participants ONLY)

Subscriber Category / Contribution Cycle		Coverage Type	PPO/HMO Standard			PPO/HMO HDHP		
			Employer	Enrollee	Total	Employer ⁽⁴⁾	Enrollee	Total
Career Service / OPS	Monthly Full -Time Employees ⁽¹⁾	Single	684.42	50.00	734.42	684.42	15.00	699.42
		Family	1,473.18	180.00	1,653.18	1,473.18	64.30	1,537.48
		Spouse	1,623.20	30.00	1,653.20	1,507.48	30.00	1,537.48
	Bi-Weekly Full -Time Employees ⁽¹⁾	Single	342.21	25.00	367.21	342.21	7.50	349.71
		Family	736.59	90.00	826.59	736.59	32.15	768.74
		Spouse	811.60	15.00	826.60	753.74	15.00	768.74
SES / SMS	Monthly Full -Time Employees ^(1,2)	Single	726.08	8.34	734.42	691.08	8.34	699.42
		Family	1,623.20	30.00	1,653.20	1,507.48	30.00	1,537.48
	Bi-Weekly Full -Time Employees ^(1,2)	Single	363.04	4.17	367.21	345.54	4.17	349.71
		Family	811.60	15.00	826.60	753.74	15.00	768.74
COBRA (Non-Medicare)	Monthly ⁽³⁾	Single	0.00	749.11	749.11	0.00	670.92	670.92
		Family	0.00	1,686.24	1,686.24	0.00	1,483.23	1,483.23
Early Retirees	Monthly	Single	0.00	734.42	734.42	0.00	657.76	657.76
		Family	0.00	1,653.18	1,653.18	0.00	1,454.15	1,454.15
Overage Dependents		Single	0.00	734.42	734.42	0.00	657.76	657.76

Medicare Monthly Premium Rates				
Plan Name	Plan Type	Medicare I One Eligible ⁽⁵⁾	Medicare II One Under/Over ⁽⁶⁾	Medicare III Both Eligible ⁽⁷⁾
Self-Insured PPO / HMO	Standard	388.38	1,119.85	776.76
	HDHP	292.76	917.13	585.51
Capital Health Plan ⁽⁸⁾	Standard	282.62	945.62	565.24
	HDHP	257.23	852.80	514.46

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) Medicare eligible retirees must complete the HMO's Medicare Advantage Plan application process to be eligible for this coverage.

STATE EMPLOYEES' GROUP HEALTH SELF-INSURANCE TRUST FUND

Premium Rate Table

Effective December 2019 for January 2020 Coverage

(Premium rate change for all participants)

Subscriber Category / Contribution Cycle		Coverage Type	PPO/HMO Standard			PPO/HMO HDHP		
			Employer	Enrollee	Total	Employer ⁽⁴⁾	Enrollee	Total
Career Service / OPS	Monthly Full -Time Employees ⁽¹⁾	Single	713.80	50.00	763.80	713.80	15.00	728.80
		Family	1,539.32	180.00	1,719.32	1,539.32	64.30	1,603.62
		Spouse	1,689.32	30.00	1,719.32	1,573.64	30.00	1,603.64
	Bi-Weekly Full -Time Employees ⁽¹⁾	Single	356.90	25.00	381.90	356.90	7.50	364.40
		Family	769.66	90.00	859.66	769.66	32.15	801.81
		Spouse	844.66	15.00	859.66	786.82	15.00	801.82
SES / SMS	Monthly Full -Time Employees ^(1,2)	Single	755.46	8.34	763.80	720.46	8.34	728.80
		Family	1,689.32	30.00	1,719.32	1,573.62	30.00	1,603.62
	Bi-Weekly Full -Time Employees ^(1,2)	Single	377.73	4.17	381.90	360.23	4.17	364.40
		Family	844.66	15.00	859.66	786.81	15.00	801.81
COBRA (Non-Medicare)	Monthly ⁽³⁾	Single	0.00	779.08	779.08	0.00	700.88	700.88
		Family	0.00	1,753.71	1,753.71	0.00	1,550.70	1,550.70
Early Retirees	Monthly	Single	0.00	763.80	763.80	0.00	687.14	687.14
		Family	0.00	1,719.32	1,719.32	0.00	1,520.29	1,520.29
Overage Dependents		Single	0.00	763.80	763.80	0.00	687.14	687.14

Medicare Monthly Premium Rates				
Plan Name	Plan Type	Medicare I One Eligible ⁽⁵⁾	Medicare II One Under/Over ⁽⁶⁾	Medicare III Both Eligible ⁽⁷⁾
Self-Insured PPO/HMO	Standard	403.92	1,167.71	807.83
	HDHP	304.47	991.61	608.94
Capital Health Plan ⁽⁸⁾	Standard	282.62	1,000.47	565.24
	HDHP	257.23	902.17	514.46
COBRA Self-Insured PPO/HMO ⁽³⁾	Standard	412.00	1,191.06	823.99
	HDHP	310.56	1,011.44	621.12
COBRA Capital Health Plan ^(3,8)	Standard	288.27	1,020.48	576.54
	HDHP	262.37	920.21	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 2019 for January 2020 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	40.47	41.28
UnitedHealthcare - MA-PD	MA-PD	219.97	224.37

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

Effective December 2020 for January 2021 Coverage

(Premium rate change for all participants)

Subscriber Category / Contribution Cycle		Coverage Type	PPO/HMO Standard			PPO/HMO HDHP		
			Employer	Enrollee	Total	Employer ⁽⁴⁾	Enrollee	Total
Career Service / OPS	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
		Spouse	1,801.08	30.00	1,831.08	1,685.40	30.00	1,715.40
	Bi-Weekly Full -Time Employees ⁽¹⁾	Single	381.73	25.00	406.73	381.73	7.50	389.23
		Family	825.54	90.00	915.54	825.54	32.15	857.69
		Spouse	900.54	15.00	915.54	842.70	15.00	857.70
SES / SMS	Monthly Full -Time Employees ^(1,2)	Single	805.12	8.34	813.46	770.12	8.34	778.46
		Family	1,801.08	30.00	1,831.08	1,685.38	30.00	1,715.38
	Bi-Weekly Full -Time Employees ^(1,2)	Single	402.56	4.17	406.73	385.06	4.17	389.23
		Family	900.54	15.00	915.54	842.69	15.00	857.69
COBRA (Non-Medicare)	Monthly ⁽³⁾	Single	0.00	829.73	829.73	0.00	751.54	751.54
		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
		Family	0.00	1,831.08	1,831.08	0.00	1,632.05	1,632.05
Overage 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 ⁽⁵⁾	Medicare II One Under/Over ⁽⁶⁾	Medicare III Both Eligible ⁽⁷⁾
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	1,000.47	565.24
	HDHP	257.23	902.17	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	1,020.48	576.54
	HDHP	262.37	920.21	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.