

Almont Community Schools

2024 Plan Year

Recommended COBRA Rates

Tier	Monthly Gross Rates	2% Monthly COBRA Rates
PPO HSA Add 20% Coinsurance		
Employee Only	\$532.31	\$542.96
Employee + 1	\$1,277.54	\$1,303.09
Family	\$1,596.93	\$1,628.87
POS HSA Increase Ded to \$2,000		
Employee Only	\$435.11	\$443.81
Employee + 1	\$1,044.26	\$1,065.15
Family	\$1,305.32	\$1,331.43
HMO HSA Increase OOPM to \$4,000/\$8,000		
Employee Only	\$446.25	\$455.18
Employee + 1	\$1,071.00	\$1,092.42
Family	\$1,338.75	\$1,365.53
Dental Plan		
Employee Only	\$33.71	\$34.38
Employee + Family	\$101.93	\$103.97
Vision Plan		
Employee Only	\$6.51	\$6.64
Employee + 1	\$12.95	\$13.21
Family	\$19.55	\$19.94

Note: Above Rates include estimated taxes and fees for Health Care Reform.

Disclaimers and Disclosures:

This is a general outline of covered benefits and does not include all the benefits, limitations, and exclusions of the benefit programs. If there are any discrepancies between the illustrations contained herein and the benefit proposals or official benefit plan documents, the benefit proposals or official benefit plan documents prevail. See the official benefit plan documents for a full list of exclusions. Actual monthly and annual premium amounts may vary due to fluctuations in the enrollment counts and/or ages of covered persons over the previous and next year.

This analysis is for illustrative purposes only, and is not a guarantee of future expenses. There are many variables that can affect future health care costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases and more. Retention and Pooling Charges are based on most recent carrier renewal and are subject to change.

HIPAA Privacy Rule Disclosure:

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For the consideration and future planning of



2024 Final Decisions

Presented by:

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October 27, 2023

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Almont Community Schools

Cost Summary

Alternative 1

	Current Rates Cost 1/1/2023-12/31/2023	Projected Rates Cost 1/1/2024-12/31/2024	Dollar Change	% Change	Alt. 1 Final Decisions 1/1/2024-12/31/2024	Dollar Change	% Change
Medical Plan - BCBSM Premiums							
Total	\$1,055,414	\$1,303,098	\$247,685	23.5%	\$1,196,693	\$141,279	13.4%
Almont Community Schools Net Cost	\$1,055,414	\$1,286,270	\$230,856	21.9%	\$1,196,693	\$141,279	13.4%
Employee Contribution	\$0	\$16,829	\$16,829	n/a	\$0	\$0	n/a
Medical Plan - Employer HSA Contributions							
Total	\$375,156	\$175,904	(\$199,252)	-53.1%	\$265,480	(\$109,676)	-29.2%
Almont Community Schools Net Cost	\$375,156	\$175,904	(\$199,252)	-53.1%	\$265,480	(\$109,676)	-29.2%
Employee Contribution	\$0	\$0	\$0	n/a	\$0	\$0	n/a
Medical Opt-Out Credits							
Total	\$71,400	\$71,400	\$0	0.0%	\$71,400	\$0	0.0%
Almont Community Schools Net Cost	\$71,400	\$71,400	\$0	0.0%	\$71,400	\$0	0.0%
Employee Contribution	\$0	\$0	\$0	n/a	\$0	\$0	n/a
Adjustment for 2023 Renewal Credit							
Total	(\$29,974)	\$0	\$29,974	-100.0%	\$0	\$29,974	-100.0%
Almont Community Schools Net Cost	(\$29,974)	\$0	\$29,974	-100.0%	\$0	\$29,974	-100.0%
Employee Contribution	\$0	\$0	\$0	n/a	\$0	\$0	n/a
Dental Plan							
Total	\$108,842	\$108,842	\$0	0.0%	\$108,842	\$0	0.0%
Almont Community Schools Net Cost	\$108,842	\$108,842	\$0	0.0%	\$108,842	\$0	0.0%
Employee Contribution	\$0	\$0	\$0	n/a	\$0	\$0	n/a
Vision Plan							
Total	\$19,531	\$19,531	\$0	0.0%	\$19,531	\$0	0.0%
Almont Community Schools Net Cost	\$19,531	\$19,531	\$0	0.0%	\$19,531	\$0	0.0%
Employee Contribution	\$0	\$0	\$0	n/a	\$0	\$0	n/a

	Current Rates Cost 1/1/2023-12/31/2023	Projected Rates Cost 1/1/2024-12/31/2024	Dollar Change	% Change	Alt. 1 Final Decisions 1/1/2024-12/31/2024	Dollar Change	% Change
Basic Life / AD&D Plan							
Total	\$13,815	\$13,815	\$0	0.0%	\$13,815	\$0	0.0%
Almont Community Schools Net Cost	\$13,815	\$13,815	\$0	0.0%	\$13,815	\$0	0.0%
Employee Contribution	\$0	\$0	\$0	n/a	\$0	\$0	n/a
LTD Plan							
Total	\$11,041	\$11,041	\$0	0.0%	\$11,041	\$0	0.0%
Almont Community Schools Net Cost	\$11,041	\$11,041	\$0	0.0%	\$11,041	\$0	0.0%
Employee Contribution	\$0	\$0	\$0	n/a	\$0	\$0	n/a
Voluntary Life and AD&D Plan							
Total	\$9,682	\$9,682	\$0	0.0%	\$9,682	\$0	0.0%
Almont Community Schools Net Cost	\$0	\$0	\$0	n/a	\$0	\$0	n/a
Employee Contribution	\$9,682	\$9,682	\$0	0.0%	\$9,682	\$0	0.0%
TOTAL BENEFIT PLAN COST							
Total Plan Cost	\$1,634,907	\$1,713,314	\$78,407	4.8%	\$1,696,484	\$61,577	3.8%
Total Almont Community Schools Net Cost	\$1,625,225	\$1,686,803	\$61,578	3.8%	\$1,686,802	\$61,577	3.8%
Total Employee Contribution	\$9,682	\$26,511	\$16,829	173.8%	\$9,682	\$0	0.0%
Total Change from Current Rates (\$)		\$78,407			\$61,577		
Total Almont Community Schools Change From Current Rates (\$)		\$61,578			\$61,577		
Total Employee Change From Current Rates (\$)		\$16,829			\$0		
Total Change from Current Rates (%)		4.8%			3.8%		
Total Almont Community Schools Change From Current Rates (%)		3.8%			3.8%		
Total Employee Change From Current Rates (%)		173.8%			0.0%		

Almont Community Schools

Medical and Prescription Drugs

Net Cost Analysis: 2023 Current Rates vs 2024 Renewal Rates

Using claims through 8/31/2023

Alternate Option 1, ER cost capped at PA 152 Maximum

Enrollment and Rates				2023 Current Rates			2024 Renewal Rates			Change in	
	Current Enrolled	2023 Current Rates	2024 Renewal Rates	Employer Net Cost	Employee Contribution Mo.	Employee Contribution %	Employer Net Cost	Employee Contribution Mo.	Employee Contribution %	Employee Contribution Mo.	Employee Contribution %
PPO HSA - Alt 1 Add 20% Coinsurance											rates from PA-MedPPOHSA
Employee Only	1	\$522.27	\$532.31	\$522.27	\$0.00	0.0%	\$532.31	\$0.00	0.0%	\$0.00	0.0%
Employee + 1	4	\$1,253.45	\$1,277.54	\$1,253.45	\$0.00	0.0%	\$1,277.54	\$0.00	0.0%	\$0.00	0.0%
Family	23	\$1,566.83	\$1,596.93	\$1,566.83	\$0.00	0.0%	\$1,596.93	\$0.00	0.0%	\$0.00	0.0%
Monthly Costs	28	\$41,573	\$42,372	\$41,573	\$0	0.0%	\$42,372	\$0	0.0%	\$0	0.0%
POS HSA - Alt 1 Increase Ded to \$2,000											rates from PA-MedPOSHSA
Employee Only	4	\$340.60	\$435.11	\$340.60	\$0.00	0.0%	\$435.11	\$0.00	0.0%	\$0.00	0.0%
Employee + 1	3	\$817.45	\$1,044.26	\$817.45	\$0.00	0.0%	\$1,044.26	\$0.00	0.0%	\$0.00	0.0%
Family	8	\$1,021.82	\$1,305.32	\$1,021.82	\$0.00	0.0%	\$1,305.32	\$0.00	0.0%	\$0.00	0.0%
Monthly Costs	15	\$11,989	\$15,316	\$11,989	\$0	0.0%	\$15,316	\$0	0.0%	\$0	0.0%
HMO HSA - Alt 1 Increase OOPM to \$4,000/\$8,000											rates from PA-MedHMOHSA
Employee Only	3	\$365.06	\$446.25	\$365.06	\$0.00	0.0%	\$446.25	\$0.00	0.0%	\$0.00	0.0%
Employee + 1	3	\$876.15	\$1,071.00	\$876.15	\$0.00	0.0%	\$1,071.00	\$0.00	0.0%	\$0.00	0.0%
Family	28	\$1,095.18	\$1,338.75	\$1,095.18	\$0.00	0.0%	\$1,338.75	\$0.00	0.0%	\$0.00	0.0%
Monthly Costs	34	\$34,389	\$42,037	\$34,389	\$0	0.0%	\$42,037	\$0	0.0%	\$0	0.0%
Projected Medical/Rx Cost - BCBSM Premiums											
Total Monthly Costs:	77	\$87,951	\$99,724	\$87,951	\$0	0.0%	\$99,724	\$0	0.0%		
Total Annual Costs:		\$1,055,414	\$1,196,693	\$1,055,414	\$0		\$1,196,693	\$0			
Annual Cost Per Enrolled:		\$13,707	\$15,541	\$13,707	\$0		\$15,541	\$0			
Dollar Share of Cost Change:							\$141,279	\$0			
Cost Share Percentage:				100.0%	0.0%		100.0%	0.0%			
Total Percentage Change:			13.4%				13.4%	0.0%			

Almont Community Schools

Medical and Prescription Drugs

Net Cost Analysis: 2023 Current Rates vs 2024 Renewal Rates

Using claims through 8/31/2023

Alternate Option 1, ER cost capped at PA 152 Maximum

Enrollment and Rates				2023 Current Rates			2024 Renewal Rates			Change in	
	Current Enrolled	2023 Current Rates	2024 Renewal Rates	Employer Net Cost	Employee Contribution Mo.	Employee Contribution %	Employer Net Cost	Employee Contribution Mo.	Employee Contribution %	Employee Contribution Mo.	Employee Contribution %
PPO HSA ER Contribution - Alt 1											
m PA-MedPPOHSAERCont.											
Employee Only	1	\$109.14	\$109.59	\$109.14	\$0.00	0.0%	\$109.59	\$0.00	0.0%	\$0.00	0.0%
Employee + 1	4	\$71.59	\$64.88	\$71.59	\$0.00	0.0%	\$64.88	\$0.00	0.0%	\$0.00	0.0%
Family	23	\$159.48	\$153.72	\$159.48	\$0.00	0.0%	\$153.72	\$0.00	0.0%	\$0.00	0.0%
Monthly Costs		\$4,064	\$3,905	\$4,064	\$0	0.0%	\$3,905	\$0	0.0%	\$0	0.0%
POS HSA ER Contribution - Alt 1											
m PA-MedPOSHAERCont.											
Employee Only	4	\$285.72	\$206.79	\$285.72	\$0.00	0.0%	\$206.79	\$0.00	0.0%	\$0.00	0.0%
Employee + 1	3	\$495.38	\$298.16	\$495.38	\$0.00	0.0%	\$298.16	\$0.00	0.0%	\$0.00	0.0%
Family	8	\$645.83	\$445.33	\$645.83	\$0.00	0.0%	\$445.33	\$0.00	0.0%	\$0.00	0.0%
Monthly Costs		\$7,796	\$5,284	\$7,796	\$0	0.0%	\$5,284	\$0	0.0%	\$0	0.0%
HMO HSA ER Contribution - Alt 1											
n PA-MedHMOHSAERCont.											
Employee Only	3	\$261.96	\$195.65	\$261.96	\$0.00	0.0%	\$195.65	\$0.00	0.0%	\$0.00	0.0%
Employee + 1	3	\$438.35	\$271.42	\$438.35	\$0.00	0.0%	\$271.42	\$0.00	0.0%	\$0.00	0.0%
Family	28	\$617.96	\$411.90	\$617.96	\$0.00	0.0%	\$411.90	\$0.00	0.0%	\$0.00	0.0%
Monthly Costs		\$19,404	\$12,934	\$19,404	\$0	0.0%	\$12,934	\$0	0.0%	\$0	0.0%
Projected Medical/Rx Cost - Employer HSA Contributions											
Total Monthly Costs:	0	\$31,263	\$22,123	\$31,263	\$0	0.0%	\$22,123	\$0	0.0%		
Total Annual Costs:		\$375,156	\$265,480	\$375,156	\$0		\$265,480	\$0			
Annual Cost Per Enrolled:	--	--	--	--	--		--	--			
Dollar Share of Cost Change:							(\$109,676)	\$0			
Cost Share Percentage:				100.0%	0.0%		100.0%	0.0%			
Total Percentage Change:			(29.2%)				(29.2%)	0.0%			
Opt-Out Credit - Current Plan											
Rates from PA-MedOpt-Out											
Employee Only	14	\$425.00	\$425.00	\$425.00	\$0.00	0.0%	\$425.00	\$0.00	0.0%	\$0.00	0.0%
Monthly Costs		\$5,950	\$5,950	\$5,950	\$0	0.0%	\$5,950	\$0	0.0%	\$0	0.0%
Adjustment for 2023 Renewal Credit - Alt 1											
Rates from PA-MedOpt-Out											
Employee Only	1	(\$2,497.84)	\$0.00	(\$2,497.84)	\$0.00	0.0%	\$0.00	\$0.00	0.0%	\$0.00	0.0%
Monthly Costs		(\$2,498)	\$0	(\$2,498)	\$0	0.0%	\$0	\$0	0.0%	\$0	0.0%
Total Combined Medical/Rx Cost											
Total Monthly Costs:	77	\$122,666	\$127,798	\$122,666	\$0	0.0%	\$127,798	\$0	0.0%		
Total Annual Costs:		\$1,471,996	\$1,533,573	\$1,471,996	\$0		\$1,533,573	\$0			
Annual Cost Per Enrolled:		\$19,117	\$19,917	\$19,117	\$0		\$19,917	\$0			
Dollar Share of Cost Change:							\$61,577	\$0			
Cost Share Percentage:				100.0%	0.0%		100.0%	0.0%			
Total Percentage Change:			4.2%				4.2%	0.0%			

Note: Above Enrollment is based on Enrollment as of 8/1/2023 (most recent mo. enrollment from vendor(s))

Almont Community Schools

Dental

Net Cost Analysis: 2023 Current Rates vs 2024 Renewal Rates

	Enrollment and Rates				2023 Current Rates			2024 Renewal Rates			Change in	
	Current Enrolled	2023 Current Rates	Proj. Enrolled	2024 Renewal Rates	Employer Net Cost	Employee Contribution Mo.	Employee Contribution %	Employer Net Cost	Employee Contribution Mo.	Employee Contribution %	Employee Contribution Mo.	Employee Contribution %
Dental Plan												
Employee Only	6	\$33.71	6	\$33.71	\$33.71	\$0.00	0.0%	\$33.71	\$0.00	0.0%	\$0.00	0.0%
Employee + Family	87	\$101.93	87	\$101.93	\$101.93	\$0.00	0.0%	\$101.93	\$0.00	0.0%	\$0.00	0.0%
Monthly Costs	93	\$9,070	93	\$9,070	\$9,070	\$0	0.0%	\$9,070	\$0	0.0%	\$0	0.0%
Projected Dental Cost												
Total Monthly Costs:	93	\$9,070	93	\$9,070	\$9,070	\$0	0.0%	\$9,070	\$0	0.0%		
Total Annual Costs:		\$108,842		\$108,842	\$108,842	\$0		\$108,842	\$0			
Annual Cost Per Enrolled:		\$1,170		\$1,170	\$1,170	\$0		\$1,170	\$0			
Dollar Share of Cost Change:								\$0	\$0			
Cost Share Percentage:					100.0%	0.0%		100.0%	0.0%			
Total Percentage Change:				0.0%				0.0%	0.0%			

Note: Above Enrollment is based on Enrollment as of 8/1/2023 (most recent mo. enrollment from vendor(s))

Almont Community Schools

Vision

Net Cost Analysis: 2023 Current Rates vs 2024 Renewal Rates

	Enrollment and Rates				2023 Current Rates			2024 Renewal Rates			Change in	
	Current Enrolled	2023 Current Rates	Proj. Enrolled	2024 Renewal Rates	Employer Net Cost	Employee Contribution Mo.	%	Employer Net Cost	Employee Contribution Mo.	%	Employee Contribution Mo.	%
Vision Plan												
Employee Only	7	\$6.51	7	\$6.51	\$6.51	\$0.00	0.0%	\$6.51	\$0.00	0.0%	\$0.00	0.0%
Employee + 1	18	\$12.95	18	\$12.95	\$12.95	\$0.00	0.0%	\$12.95	\$0.00	0.0%	\$0.00	0.0%
Family	69	\$19.55	69	\$19.55	\$19.55	\$0.00	0.0%	\$19.55	\$0.00	0.0%	\$0.00	0.0%
Monthly Costs	94	\$1,628	94	\$1,628	\$1,628	\$0	0.0%	\$1,628	\$0	0.0%	\$0	0.0%
Projected Vision Cost												
Total Monthly Costs:	94	\$1,628	94	\$1,628	\$1,628	\$0	0.0%	\$1,628	\$0	0.0%		
Total Annual Costs:		\$19,531		\$19,531	\$19,531	\$0		\$19,531	\$0			
Annual Cost Per Enrolled:		\$208		\$208	\$208	\$0		\$208	\$0			
Dollar Share of Cost Change:								\$0	\$0			
Cost Share Percentage:					100.0%	0.0%		100.0%	0.0%			
Total Percentage Change:				0.0%				0.0%	0.0%			

Note: Above Enrollment is based on Enrollment as of 8/1/2023 (most recent mo. enrollment from vendor(s))

Almont Community Schools

Life & Disability - The Standard

	Lives	Volume	Rates	Monthly Cost	Annualized Cost	Avg Cost Per Employee	Annual Difference \$	%
2023 Current Rates - The Standard								
Basic Life	97	\$9,210,000	\$0.110	\$1,013	\$12,157	\$125		
Basic AD&D	97	\$9,210,000	\$0.015	\$138	\$1,658	\$17		
Long Term Disability	94	\$438,126	\$0.210	\$920	\$11,041	\$117		
TOTAL ANNUALIZED COST (EMPLOYER PAID COVERAGE)				\$2,071	\$24,856	\$256		

	Lives	Volume	Rates	Monthly Cost	Annualized Cost	Avg Cost Per Employee	Annual Difference \$	%
2024 Renewal Rates - The Standard (In Rate Guarantee Until 12/31/2025)								
Basic Life	97	\$9,210,000	\$0.110	\$1,013	\$12,157	\$125	-	-
Basic AD&D	97	\$9,210,000	\$0.015	\$138	\$1,658	\$17	-	-
Long Term Disability	94	\$438,126	\$0.210	\$920	\$11,041	\$117	-	-
TOTAL ANNUALIZED COST (EMPLOYER PAID COVERAGE)				\$2,071	\$24,856	\$256		

Almont Community Schools

HSA Contribution Analysis - 2024 Alternative 1 Final Decisions

	Monthly Premium	Monthly Premium with Credit	Annual Premium with Credit	2024 PA 152 Hard Cap	HSA Employer Load	Monthly HSA Employer Load	EE Monthly Cost	EE Contribution Max	Annual Difference	Max EE Monthly HSA Contribution	Catch up Amount for 55 and Over	Max EE HSA Contribution if 55 or Over	Max EE HSA Contribution if 55 or Over
BCBSM SB PPO \$2000-0% - Alt 1 - Add 20% Coinsurance													
Single	\$532.31	\$532.31	\$6,388	\$7,703	\$1,315	\$109.59	\$0.00	\$4,150.00	\$2,834.87	\$236.24	\$1,000.00	\$3,834.87	\$319.57
Two Person	\$1,277.54	\$1,277.54	\$15,330	\$16,109	\$779	\$64.88	\$0.00	\$8,300.00	\$7,521.42	\$626.79	\$1,000.00	\$8,521.42	\$710.12
Family	\$1,596.93	\$1,596.93	\$19,163	\$21,008	\$1,845	\$153.72	\$0.00	\$8,300.00	\$6,455.33	\$537.94	\$1,000.00	\$7,455.33	\$621.28
BCN POS \$1600-20% - Alt 1 - Increase Deductible to \$2,000/\$4,000													
Single	\$435.11	\$435.11	\$5,221	\$7,703	\$2,482	\$206.79	\$0.00	\$4,150.00	\$1,668.47	\$139.04	\$1,000.00	\$2,668.47	\$222.37
Two Person	\$1,044.26	\$1,044.26	\$12,531	\$16,109	\$3,578	\$298.16	\$0.00	\$8,300.00	\$4,722.06	\$393.51	\$1,000.00	\$5,722.06	\$476.84
Family	\$1,305.32	\$1,305.32	\$15,664	\$21,008	\$5,344	\$445.33	\$0.00	\$8,300.00	\$2,956.01	\$246.33	\$1,000.00	\$3,956.01	\$329.67
BCN HMO \$1600-20% - Alt 1 - Increase OOPM to \$4,000.\$8,000													
Single	\$446.25	\$446.25	\$5,355	\$7,703	\$2,348	\$195.65	\$0.00	\$4,150.00	\$1,802.15	\$150.18	\$1,000.00	\$2,802.15	\$233.51
Two Person	\$1,071.00	\$1,071.00	\$12,852	\$16,109	\$3,257	\$271.42	\$0.00	\$8,300.00	\$5,042.94	\$420.25	\$1,000.00	\$6,042.94	\$503.58
Family	\$1,338.75	\$1,338.75	\$16,065	\$21,008	\$4,943	\$411.90	\$0.00	\$8,300.00	\$3,357.17	\$279.76	\$1,000.00	\$4,357.17	\$363.10

1. Monthly Premium based on BCBSM/BCN alternative 1 plans. ER HSA Load equals PA 152 Cap less Premium with Credit. EE Pays above Cap

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