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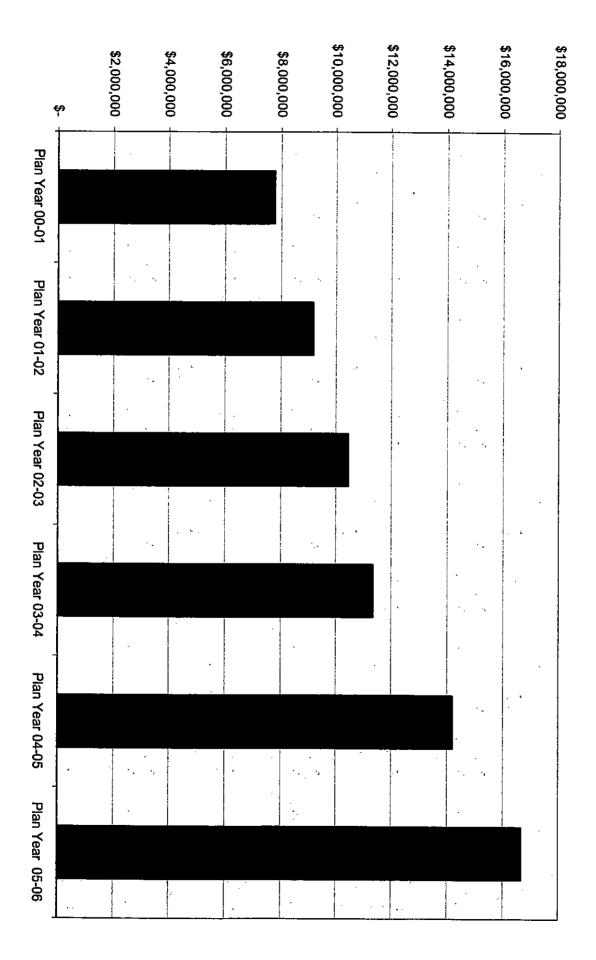
# LANE COUNTY EMPLOYEE HEALTH INSURANCE COSTS

Where Are We Now?

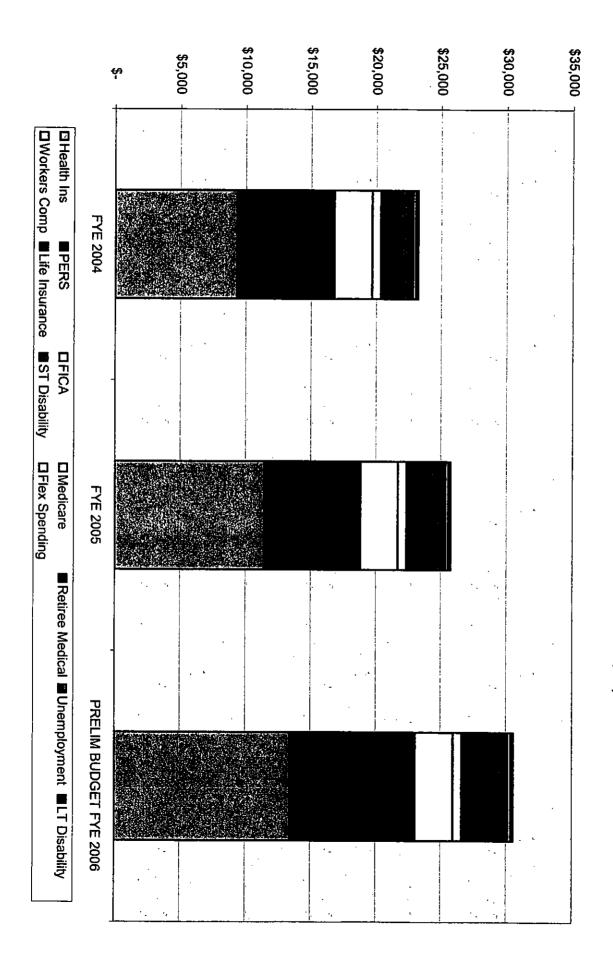
How Did We Get There?

How Can We Reduce The Double-Digit Increases In Health Care Cost and Usage?

## LANE COUNTY MEDICAL PREMIUM INCREASE HISTORY



## **BENEFIT COST HISTORY FOR AVERAGE SALARY OF \$46,500**



## LANE COUNTY BENEFITS COSTS FYE 2004 TO FYE 2006

			FYE 2004			FYE 2005			PROJ. FYE 2006**
FICA			6.20%			6.209	6		6.20%
Medicare			1.45%			1.459	-		1.45%
Unemployment			1.50%			1.509	-		1.50%
Workers Compensation			0.45%			0.459			0.50%
Long Term Disability			0.87%			0.879			1.00%
PERS			16.37%			15.899	-		20.72%
Retiree Medical			3.00%			4.009			5.50%
TOTAL STATUTORY BENEFITS		•	29.84%		•	30.369	_		36.87%
Medical and Rx Premium	\$	8.028	17.62%	\$	10.035	21.589	6 S	11,791	25.86%
Dental Premium	\$	1,055	2.31%	-	1,134	2.449		,	2.92%
Vision Premium	\$	168	0.37%	•	210	0.45%	•	.,	0.54%
EAP/IBH	\$	63	0.14%	\$	63	0.149			0.14%
Short Term Disability	\$	21	0.05%	-	21	0.059			0.05%
Flex Spending Program	\$	8	0.02%	-	9	0.029	•	- ·	0.02%
Life/ADD	\$	170	0.37%	-	170	0.379		=	0.41%
TOTAL NEG. BENEFITS	\$	9,513	20.88%	<u> </u>	11,641	25.039			29.95%
TOTAL BENEFITS (%of/Avg. Sa	lary)	1 (h 1)	50.72%	2542 64		7	_		29.93%

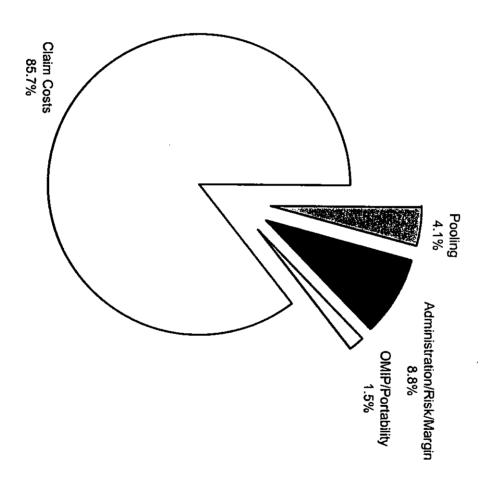
<sup>\*\* 2005/2006</sup> percentages based on salary increase of 2% for ment raises

If Benefit Increase is 14% instead of 17.5% Total Benefit Rate decreases by If PERS rates increases by 8.83%, instead of 4.83%. Total Benefit Rate increases by

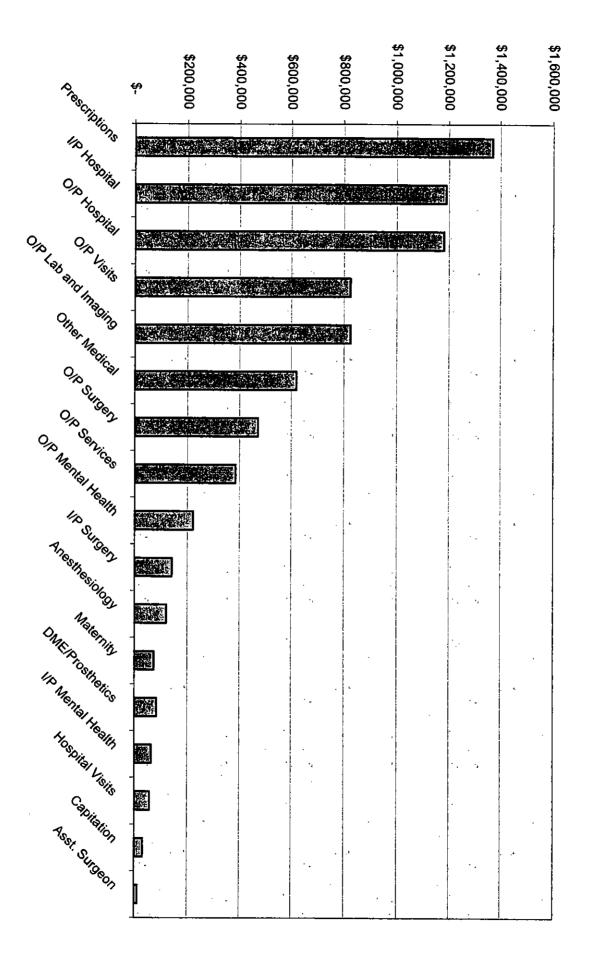
-0.74% -4%

Based;upon the 2004/2005 annual premium:  1% occease in Health Care premiums equals an average sala	illy/increase of 0.22%
5% increase in Health Care premiums equals an average sala 10% increase in Helath Care premiums equals an average sa	it increase of 1 08%
15% increase in Health Care premiums equals an average sa	lary increase of 2.16% lary increase of 3.24%

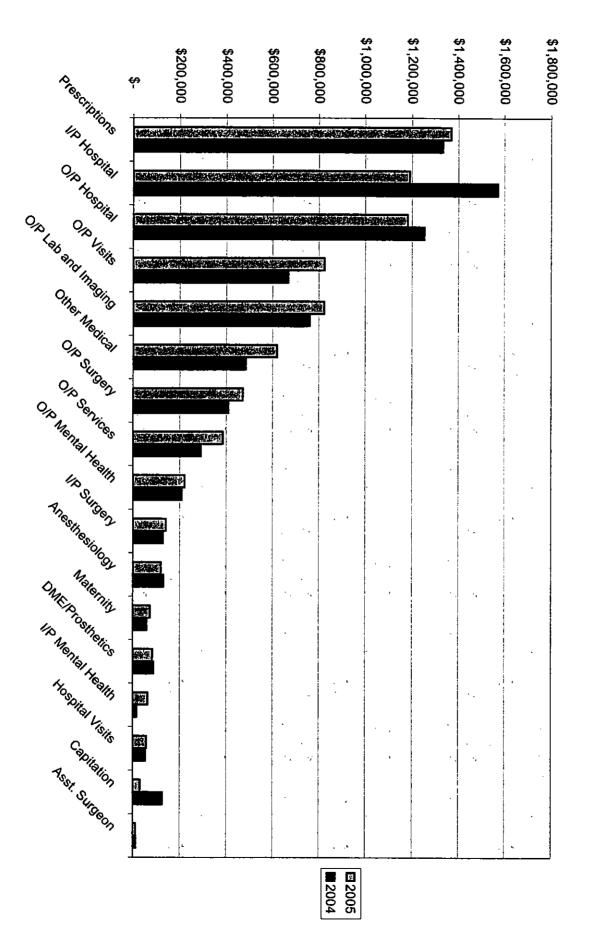
# WHERE DO LANE COUNTY'S MEDICAL INSURANCE DOLLARS GO?



# LANE COUNTY HEALTH CARE UTILIZATION AUGUST 2004 THRU FEBRUARY 2005



# LANE COUNTY HEALTH CARE USE FEBRUARY 2004 VS. FEBRUARY 2005



## **PRESCRIPTION DRUGS**

## 34 Drugs = 40% of total prescription drug cost

Anti-Depressant	Total Dollars	Number of Utilizers	Average Cost of Rx	Avg Patient Cost
Effexor	\$ 28,800.20	210		\$ 19.49
Lexapro	\$ 21,292.69	106		\$ 17.06
Zoloft	\$ 20,915.34	84		\$ 22.70
Bupropion	\$ 16,516.37	232		
Wellbutrin XL	\$ 15,429.87	43		
Wellbutrin SR	\$ 15,429.87 \$ 7,773.78	15	\$ 143.96	
Celexa	\$ 6,896.85	44	\$ 69.67	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Paroxetine HCL	\$ 6,879.88	116		\$ 22.54
Gabapentin	\$ 6,678.60	35		\$ 14.47
	\$ 6,678.60 \$ 131,183.58	885	\$ 84.45	\$ 14.87
Proton Pump	4 101,100,00			
Prevacid	\$ 33,053.14	55	\$ 148.22	\$ 23.14
Vexium	\$ 25,651.79	59	\$ 136.45	
O <i>meprazole</i>	\$ 20,278.67	64	\$ 99.41	
⁻rotonix	\$ 16,779.06	45		\$ 16.52
Aciphex	\$ 10,050.42	19		\$ 22.79
	\$ 10,050.42 \$ 105,813.08	242	\$ 128.85	\$ 23.06
Statins	100,010.00			
_ipitor	\$ 65,664.85	210	\$ 92,23	
Zocor	\$ 6,903.51	19		\$ 29.58
Crestor	\$ 6,903.51 \$ 6,798.84			\$ 22.43
Pravachol		40	\$ 53.12	\$ 26.93
144401101		17	\$ 136.92	\$ 36.08
Asthma and Allergies	\$ 86,076.49	286		
\dvair Diskus	¢ 25.222.04	70	•	_
Allegra	\$ 25,333.84	79	\$ 126.04	\$ 20.57
Singulair	\$ 19,212.30	110	\$ 61.58	\$ 16.02
Zyrtek	\$ 15,623.18	54	\$ 83.10	\$ 20.11
Flonase	\$ 9,542.11	64	\$ 46.32	\$ 16.00
lollase	\$ 9,102.19 \$ 78,813.62	84	\$ 51.42	\$ 17.50
'ain	\$ 78,813.62	391		
)uragesic	\$ 22,750.86	0	<b>C</b> 101.00	•
)xycodone HCL		8	\$ 484.06	\$ 23.46
Celebrex		13	\$ 406.65	\$ 18.88
Dxycontin	\$ 10,865.70	41	\$ 116.84	\$ 24.49
mitrex	\$ 8,776.02	9	\$ 265.94	\$ 30.27
lomig	\$ 9,864.93	25	\$ 176.16	\$ 22.01
Johns	\$ 7,438.32		\$ 130.50	\$ 11.73
\rthritis	\$ 71,488.57	107		
inbrel	f 40.000.00		_	
lumira	\$ 42,638.83		\$ 1,522.83	\$ 87.97
Turnira	\$ 6,954.25 \$ 49,593.08	<u>1</u>	\$ 1,159.04	\$ 84.61
labetic related Rx	\$ 49,593.08	8		
			_	
vandia	\$ 10,249.71	15		\$ 30.88
antus	\$ 6,903.75		\$ 106.21	\$ 9.29
ictos	\$ 6,623.54		\$ 154.04	\$ 22.94
	\$ 23,777.00	47		
ubTotal				
	\$ 546,745.42			
Ithers	\$ 822,961.58			
otal Py August 2004 to Enhance of	200E E 4 200 707 00			
otal Rx August 2004 to February 2	2005 \$ 1,369,707.00			

## HOW DOES LANE COUNTY PAY HEALTH CARE PREMIUMS?

Monthly premium determined by PacificSource based upon actuarial review of Lane County employees' actual utilization of benefits, as well as cost increase expectations for medical care and prescription drugs over the next year for all health care providers in the area ("trend").

For 2004/2005 Plan Year		100%	# Members		100%		85%	-	85%
		Mo. Prem.**		Maxin	num Premium	Me	o. Prem.	Pa	id Premium
Local 626 & Non-Rep Plan	\$	781.20	375		3,515,400		664.02		2,988,090
Admin Pro & Prosecuting Attorneys Plan	\$	802.99	141	\$	1,358,659	\$	682.54	\$	1,154,860
AFSCME Plan	\$	829.63	632	\$	6,291,914	\$	705.19	\$	5,348,127
LCPOA Plan	* \$	837.84	277	\$	2,784,980	\$	712.16	\$	2,367,233
Annual Premium			1425	\$	13,950,953			\$	11,858,310
Difference				•	2,002,642				
<u> </u>				Φ	2,092,643				

Lane County pays 85%, but will owe up to the additional \$2.1M if claims and costs exceed the \$11.9M If claims and costs are less than the 85% premiums paid of \$11.9M, Lane County will get a refund.

<sup>\*</sup> LCPOA members pay \$50 toward the cost of their monthly premium through payroll deduction in 2004/2005.

<sup>\*\*</sup> Premiums are for medical and prescription drug insurance only. Does not include vision and dental insurance.

Deductible	_
Co-payment	RADITIONAL PLA
Out of Pocket	Z
Rx Benefit	

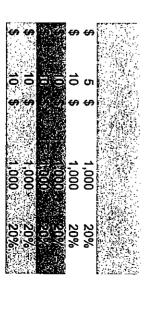
Mid 1980's State Law mandated that an HMO plan be offered if available in the are Eugene Clinic was first HMO provider for Lane County employees	1980	1970
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1990's Preferred Provider Plans developed 50 20%/80% Began with Primary Care Physicians and a few specialists	Mid 1980's \$ 20%/80% State Law mandated that an HMO plan be offered if available in the area Eugene Clinic was first HMO provider for Lane County employees
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LCPOA w/ COST SHARING  AFSCME Prosecuting Attorneys Administrative Professional Union Public Works Local 626 Non-Represented employees	2000 Most physician and hospitals are Preferred Providers LCPOA agrees to cost sharing calculation for health insu
\$ 50 100% or 20%/80% \$ 50 100% or 20%/80% \$ \$ 75 100% or 20%/80% \$	2000 Most physician and hospitals are Preferred Providers LCPOA agrees to cost sharing calculation for health insurance premium increases in excess of 10% per year
500 20% 500 20% 1,000 20% 1,000 20% 1,000 20%	es in excess of 10% per year

AFSCME Rio (Alling Allonia) Adminstration in the control of the co	2003 Drug Formulary Implemente LCPOA w/ COST SHARING
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75 100% or 20%/80° 100 100% or 20%/80° 100 100% or 20%/80° 100 100% or 20%/80° 100 100% or 20%/80°	ttomeys, Admin-Pro, Loc 50 100% or 20%/809
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500 20% (100) \$10\\$15\\$25 (100) \$10\\$15\\$25 500 \$15\\$30\\$35 500 \$15\\$30\\$35	sente

x Benefit	MANAGED CARE PLAN  Co-Pay Out of Pocket Rx Benefit
20%	in i
20%	\$ 5 \$ 1,000 20%
20%	\$ 5 \$ 1,000 20%
% per year	
20% 20% 20% 20%	\$ 10 \$ 1,000 20% \$ 5 \$ 1,000 20% \$ 10 \$ 1,000 20% \$ 10 \$ 1,000 20% \$ 10 \$ 1,000 20%



## COST SHARING WITH EMPLOYEES PRO Easy to explain and ir

Easy to explain and implement

Could encourage some employees to opt out coverage for selves and/or dependents

Does not provide incentive to change use of medical benefits and reduce costs

			1		<b>!</b>
			Annua	Estimated Annual Savings	Estimated % Savings
All Employees contribute same amount to cost of premiums	€9	25 Per month	₩.	427,500	3.05%
Employee contributes to cost of dependent premium only	<del>69</del>	50 Per month	€9	696,600	4.98%
All Employees contribute a percentage of premium - assume 5%	\$ 42.36	)6 Per month	↔	724,296	5.17%
All Employees contribute a percentage of salary to cost of premiums	_	1% Per month	€9	795,236	5.68%
Employees and County <b>split all increases and decreases over 10%</b> on a \$cumulative basis -no difference between individuals and employees with dependents	\$ 61.23	.3 Per month	€9	1,047,033	7.48%
(example shows increases from 2000/2001 thru 2004/2005)					

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Based upon the 2004/2005 annual premium:	
1% increase in Health Care premiums equals an average salary increase of	0.22%
5% increase in Health Care premiums equals an average salary increase of	1.08%
10% increase in Helath Care premiums equals an average salary increase of	2.16%
15% increase in Health Care premiums equals an average salary increase of	3.24%

## CHANGE PLAN DESIGN SO THAT THOSE WHO USE HEALTH CARE BENEFITS PAY TOWARD THE COST OF THAT CARE PRO

May encourage employees and dependents to be better consumers of health care

May reduce the rate of usage of health care benefits

CON Employees and dependents may delay care or prescriptions until the condition is more costly to treat

			00000			
DEDUCTIBLE CHANGES	# Employees		Estimated Premium Reduction	Es Annu	Estimated Annual Savings	Estimated % Savings
Increase deductibles for all County employees to \$100 per year % \$1,000 OOP Max	×					
AFSCME LCPOA	632 277	<del>\$</del> \$	10.88 10.99	<del>()</del>	82,514 36,531	0.59% 0.26%
Increase deductibles for all County employees to \$200 per year and \$1,000 OOP,	1425	₩	14.63	₩	250,173	1.79%
Increase deductible for all County employees to \$500 per year and \$1000 OOP,	1425	€	41.84	€	715,464	5.11%
DRUG FORMULARY Enroll all employee on \$15/\$30/\$35 Drug Formulary		_		•		
AFSCME LCPOA	632 277	<del>69 69</del>	38.90 40.40	<del>છ</del> છ	295,018 134,290	2.11% 0.96%
Prosecuting Attorneys Administrative Professional Union	26 115		24.47 24.47	୫ ୫	7,635 33,769	0.05% 0.24%
CO-INSURANCE Change co-insurance to 90%, with \$15 doctor visits				<b>⇔</b>	910,000	6.50%
Change co-insurance to 80% with \$15 doctor visits				Đ	1,960,000	14:00%

## CONSUMER DRIVEN HEALTH CARE

PRO Rewards employees and dependents for being better consumers of health care benefits

May reduce the rate of increased health care utilization

CON New concept - long term effects not yet known

Will require investment of staff time to educate and counsel employees about this new concept

HEALTH SAVINGS ACCOUNTS ('HSA) FLEXIBLE SPENDING ACCOUNTS (FSA)

HEALTH REIMBURSEMENT ACCOUNTS (HRA)

VOLUNTARY EMPLOYEE BENEFITS ASSOCIATIONS (VEBA)

DEDUCTIBLE	\$1500 for individual/\$3,000 per family	Estimated	Estimated
CO-PAYMENT - OFFICE VISITS	\$15	<b>Annual Savings</b>	% Savings
CO-PAYMENT	90%/10%		
MAXIMUM ANNUAL OUT OF POCKET \$1500 - limit two per family	\$1500 - limit two per family		

Includes Annual Physical Includes Alternate Care benefit - 50% co-payment \$500 annual maximum benefit LANE COUNTY CONTRIBUTION RX (applies to deductible and OOP)

\$1200 for single employees/\$2400 for family

90%/10%

Office Visits are NOT subject to Deductible, but do add to the OOP max

EMPLOYEE OPT OUT PROVISION W/PROOF OF OTHER COVERAGE DEPENDENT OPT OUT PROVISION  957 employee The ones who a locentive - 60% Estimate.	CAFETERIA PLANS MENU PLANS to pay for healt MAXIMUM ANNUAL CONTRIBUTION TO HEALTH CARE PREMIUMS	USE RIVER STONE CLINIC FOR PRIMARY CARE - \$0 CO-PAYMENTS  Estimate  Estimate	CREATE AN ON-SITE CLINIC FOR EMPLOYEES & DEPENDENTS Based upon c cost of service About 20% of	REGIONAL PLAN WITH MORE EMPLOYEES & DEPENDENTS  PEBB and Cli	SELF-INSURED PLAN (See separate analysis)	OFFER ONE HEALTH PLAN - NO MANAGED CARE  Estimate	OTHER POSSIBILITIES
Unable to determine how many employees would take advantage of this provision. At present about 468 employees are single 957 employees could take advantage of an Opt Out provision The ones who opt out will more likely be the healthier employees.  Assume 25 Employees Opt Out  Assume 25 Employees Opt Out  S  (75,000)  Estimate	Savings would be determined by how much the County would be willing to pay for health benefits	Difficult to estimate savings because it is difficult to estimate utilization  Estimate  \$ 200,000 & 41	Based upon cost and usage at 4J Schools and SAIF in Salem, average cost of service is comparable with Preferred Provider rates. About 20% of their employees use clinics	PEBB and CIS have much larger insured group(s), less generous plan design, yet premiums are slightly more than those of Lane County	ite	ate 1.00%	
ss would ta as are sing an Opt Ou he healthic	ich the Cou	s difficult to	ois and SA rred Provic s	d group(s), se of Lane	↔	Annu	1
ike advantage le it provision er employees 248,889 (75,000)	unty would be	estimate util 90,000 200,000	lF in Salem, ≀ ler rates.	, less genero County	216,232	Estimated  Annual Savings  140,000	
e of this	willing	stimate utilization 90,000 0.64% 200,000 3441.43%	3verage	us plan design,	1.54%	% Savings 1.00%	<b>!</b>

TREAT CO-EMPLOYEE SPOUSES AS DEPENDENTS, NOT EMPLOYEES

CO-EMPLOYEE SPOUSES AS DEPENDENTS, NOT EMPLOYEES 37 married couples are employed by Lane County.

Difference in premium cost - \$51.50

Estimate: Estimate: 5.000 (1

## **CANADIAN PRESCRIPTION DRUGS**

It is reported that Canadian drug suppliers are raising their prices. Many drug companies have stopped supplying Internet pharmacies Canadian legislators are considering legislation to stop or reduce the amount of drug sales to the US

## **DISEASE MANAGEMENT**

Lane County is participating with OHSU School of Pharmacy, along with Cities of Eugene and Springfield in a management plan for Diabetes. This could be a blueprint for other chronic diseases

## WELLNESS PROGRAMS

Actuary estimates that \$40 per month of Active employee premiums are due to the higher utilization of benefits by Retired employees. Due

Weight
Smoking
Stretching
Walking

Due to HB2430, ANY employee who retires from a government entity in the State of Oregon is entitled to self-pay insurance at the same rate the entity pays for Active employees.

Alternative Care - 50% up to \$500 per person annually Annual Physicals up to \$250 per year

It is in the best financial interest of the County to keep employees and dependents as healthy as possible

Cholesterol check
Blood pressure check

Two health and wellness fairs per year to include

Wellness efforts can also effect savings in the area of Workers Compensation costs and in unscheduled time loss.

Blood Sugar check

Bone density

Body Mass

County to negotiate employee discounts with health clubs in Lane County

## RIVER STONE CLINIC Could Use of the Clinic for Primary Care Treatment Reduce Lane County Health Care Expense?

	Office Visits as % Of Total Claim Costs	 mated Cost office Visits	stimated ual Savings	Estimated % Savings
Out Patient Visits	11.70%	\$ 1,408,680		
Out Patient Services	5.50%	\$ 662,200		
	17.20%	\$ 2,070,880		
PacificSource's estimate of Primary Care	22%	 22%		
Primary Care portion of all Out Patient Costs	3.78%	\$ 455,594		
If River Stone's rate are 10% less than other Preferred Providers			\$ 45,559	0.38%
If River Stone's rates are 20% less than other Preferred Providers			\$ 91,119	0.76%
Assume that Primary Care costs are 50% of Out Patient Costs	1.89%	\$ 1,035,440		
If River Stone's rate are 10% less than other Preferred Providers			\$ 103,544	0.86%
If River Stone's rates are 20% less than other Preferred Providers			\$ 207,088	1.72%

## SELF FUNDED HEALTH INSURANCE PLAN How Much Could This Save?

### PER ADMINISTRATIVE SERVICES ONLY QUOTE FROM PACIFICSOURCE

		PF	ROPOSED	CURF	RENT FEES
Adminis	tration Fee per employee per month	\$	39.00	\$	72.69
Stop Los	ss Insurance per employee per month (\$100,000)	\$	56.91	\$	33.72
Aggrega	te Stop Loss (125% of expected claims)	\$	0.80		
OMIP/Po	ortability cost per member per month	\$	6.22	\$	12.44
Total Ad	ministrative Cost	\$	102.93	\$	118.85
Potentia	Savings per employee per month	\$	15.92		
Potentia	l Gross Annual Savings	\$	272,232.00		
Less:	Additional Legal and HIPAA costs Annual Actuary Fees .5 FTE in Risk and Benefits	\$ \$ \$	(10,000.00) (6,000.00) (40,000.00)		
Potentia	l Net Savings	\$	216,232.00		1.54%

County would need to set aside money for premium stabilization and unexpected claims

City of Eugene has \$1.9M in a Self Funded Reserve for their self-funded plan which insured about 50% of their employees.

### OPT OUT PROVISIONS AND DUAL EMPLOYEE COVERAGE

### **OPT OUT PROVISION**

PEBB-State of Oregon	Taxable cash payment for employee - 60% of single preson rate rebate.	\$	349.71
	Must show proof of other coverage	\$	4,196.52
	If no other coverage then no payment in lieu of benefits		
	No opt out incentive for dependents		
	Dental coverage is mandatory		
City of Eugene	Has an opt out provision for non-reps if person shows proof of other insurance No cash payment, but EE does not then have to contribute to their health insurance	ce	
	premiums through payroll deduction		\$31.80
			\$381.60
City of Springfield	If EE opts not to cover spouse and/or dependent under their HRA plan, the		
	City credits the EE's HRA account as if the EE had covered their dependents		
	The state of the s	\$	900

### **DUAL EMPLOYEE COVERAGE -**

Lane County employs 37 married couples who both work for the County, most of whom are in different health plans. I have been asked if the County could save money if one of the spouses was the dependent of the other, instead of insured separately. Remember the County's premium arrangement with PacificSource. At the end of the year all the claims are combined and our final premium payment/refund is calculated based upon those combined claims. If we have "overpaid" by paying premiums for a spouse who had no claims, then the County will get a refund. On the other hand, if the spouse has claims in excess of the premiums paid, whether as a dependent or as an employee, then the County will owe Pacificsource money at the end of the year.

Rate for single employee X two Rate for employee and spouse	425.88	\$ ¢	851.76 800.75
, •	_	Ψ	000.73
Difference in cost per couple per month	-	\$	51.01
Difference in cost for 37 couples for one year	=	\$22	,648.44

## **DEMOGRAPHICS**

### **ACTIVE EMPLOYEES AND RETIREES**

EE's covered by Benefits Retirees	1420 336
Total Active and Retirees eligible for health insurance	1756
Approx. number insured(X2.5)	3550
Plus Retirees (estimate)	460
Estimated # individual covered by health insurance	4010
ACTIVE EMPLOYEES	
Employee only coverage	264
Employee plus dependents	204
Finding 1 - A	468
Employee plus Spouse Family	335
ramily	622
	957 1425
RETIREES	1425
Retirees County Paid	280
Retirees Self Paid	56
Total	336
Retiree only	220
Retiree plus spouse	230 97
Retiree plus family	9
,	336
ACTIVE EMPLOYEE REPRESENTATION	
LCPOA Members	277
AFSCME Members	632
Prosecuting Attorneys	26
Administrative-Professional Union	115
Public Works Local 626	142
Non-Represented	233
Total Active Employees	1425