

Plan Renewal 2017 - As of March 1, 2017

Renewal Factors

	Historical Renewals (HUB/CBC)	Current Renewal (GALLAGHER)
Projection Period	February 1 - January 31	September 1 - August 31
Performance Period Included in Projection	Rolling 24 months based on most recent available data	2/1/15 - 1/31/17 (Will update if data becomes available prior to Final Renewal)
Trend Factors Utilized	Annual Trend (5%) Period Weighting (10%) Future Plan Changes (if any)	Annual Trend (5.6%) Dependent Ratio Adjustment (-1%) Period Weighting (10%) Future Plan Changes (if any)

Key Points to Consider:

- Current Gallagher Organization Trend = 8% Rate Adjustment each year
- PPO Renewal Projection does not include change in Pharmacy Benefit Managers from Optum to RxBenefits/Express Scripts
- Fixed Costs may change due to recent claims experience and renewal negotiations

Performance/Loss Ratio

	PPO Combined	PPO	HDPPO	HMO Combined	HMO IL	HMO BA
9/1/2015 - 8/31/2016	109.8%	101.9%	166.1%	101.3%	101.1%	103.3%
9/1/2016 - 1/31/2017 (Budget projection comparison for 5 months)	81.9%	81.8%	82.7%	105.8%	108.9%	84.7%

Important Notes:

- HDPPO Costs do not include HSA funds contributed by D225
- PPO Enrollment went down .1% in the past 2 calendar years. HMO enrollment went up 3.5% in the past 2 years.

Health Benefits Budget - Recommended Rate Adjustment/Funding

	PPO Projection				HMO Projection			
	Total Projected Plan Cost	Current Funding	Projected Change	Rate Adjustment	Total Projected Plan Cost	Current Funding	Projected Change	Rate Adjustment
9/1/2017 - 8/31/2018	\$9,041,837	\$8,304,792	\$737,045	8.9%	\$4,728,186	\$4,296,384	\$431,802	10.1%

Rate Adjustments Last Year = 19% PPO / -1.1% HMO

Important Notes:

- HMO Stop Loss Experience is higher than previous years. Plan Year-to-Date already reflects 2 Large Claims. PPO has 0.

Projected Employee Premium Impact (12 Months of Coverage)*

	PPO Projection				HMO Projection				
	Glenbrook PPO Single	Glenbrook PPO Family	High Ded. PPO Single	High Ded. PPO Family	HMO Illinois Single	HMO Illinois Family	Blue Adv. HMO Single	Blue Adv. HMO EE+1	Blue Adv. HMO Family
9/1/2016 - 8/31/2017	\$584.40	\$2,808.00	\$356.40	\$1,716.48	\$336.00	\$2,177.28	\$268.80	\$1,249.92	\$1,638.72
9/1/2017 - 8/31/2018	\$636.26	\$3,057.21	\$388.03	\$1,868.82	\$369.76	\$2,396.10	\$295.82	\$1,375.55	\$1803.41
Annual Amount Change	\$51.86	\$249.21	\$31.63	\$152.34	\$33.76	\$218.82	\$27.02	\$125.63	\$164.69
Monthly Amount Change	\$4.32	\$20.77	\$2.64	\$12.69	\$2.81	\$18.24	\$2.25	\$10.47	\$13.72

*Preliminary premium impact does not take into consideration fixed cost negotiations, cost containment outcomes, potential relativity study and other variables.