



Medical Rate Summary

St. Clair County RESA

All Employees 2G Proposal

Assumed Effective Date: 7/1/2011

Current Plan(s) and Segment:		1P	2P	FF	Admin/ Deductible Funding	Composite	Total Cost
All Employees 2G Proposal	Census	60	50	75			
BCBSM Flexible Blue 3 (Current HRA) with Self-Funded Rx	Rate	\$438.06	\$1,051.34	\$1,346.98	\$412,610	\$1,158	\$2,571,099
TOTALS:		60	50	75	185	\$1,158	\$2,571,099

**Equivalent Rates
(Including Deductible Funding and Fees as Applicable)**

Product Name	1P	2P	FF	Composite	Total Cost	Estimated Annual Savings	Worst Case Exposure
BCBSM HRA Simply Blue Plans to First Dollar; SF Rx							
BCBSM/EHIM SB HRA 1500 to First Dollar; \$10/\$20 SF Rx	\$610	\$1,463	\$1,873	\$1,353	\$3,002,626	-\$431,527	\$3,560,626
BCBSM/EHIM SB HRA 1500 to First Dollar; \$10/\$40 SF Rx	\$605	\$1,453	\$1,858	\$1,342	\$2,979,212	-\$408,113	\$3,537,212
BCBSM/EHIM SB HRA 1500 to First Dollar; \$5/\$25/\$50 SF Rx	\$609	\$1,461	\$1,870	\$1,350	\$2,997,476	-\$426,377	\$3,555,476
BCBSM/EHIM SB HRA 2500 to First Dollar; \$10/\$20 SF Rx	\$571	\$1,369	\$1,759	\$1,268	\$2,815,292	-\$244,193	\$3,590,292
BCBSM/EHIM SB HRA 2500 to First Dollar; \$10/\$40 SF Rx	\$566	\$1,359	\$1,743	\$1,258	\$2,791,878	-\$220,779	\$3,566,878
BCBSM/EHIM SB HRA 2500 to First Dollar; \$5/\$25/\$50 SF Rx	\$570	\$1,367	\$1,755	\$1,266	\$2,810,142	-\$239,043	\$3,585,142
Priority Health PPO HSA Plans							
Priority Health PPO HSA Mid Plan \$0/\$0 Rx	\$493	\$1,184	\$1,480	\$1,080	\$2,397,800	\$173,299	\$2,397,800
HealthPlus HSA Plans							
HealthPlus HDHP 2G No Rx HSA	\$432	\$1,037	\$1,296	\$946	\$2,099,693	\$471,406	\$2,099,693
HealthPlus HDHP 2G 100% Rx HSA	\$475	\$1,139	\$1,424	\$1,039	\$2,306,753	\$264,346	\$2,306,753
HealthPlus HDHP 4G 100% Rx HSA	\$495	\$1,187	\$1,484	\$1,083	\$2,403,727	\$167,373	\$2,403,727
HealthPlus HRA Plans w/ EHIM SF Rx							
HealthPlus HDHP 2G HRA \$10/\$20 SF EHIM Rx	\$496	\$1,191	\$1,527	\$1,102	\$2,445,939	\$125,160	\$2,562,189
HealthPlus HDHP 2G HRA; \$200/\$400 Ded; \$10/\$20 SF EHIM Rx	\$488	\$1,170	\$1,499	\$1,082	\$2,402,539	\$168,560	\$2,500,189
HealthPlus HDHP 2G HRA; \$400/\$800 Ded; \$10/\$20 SF EHIM Rx	\$479	\$1,149	\$1,472	\$1,063	\$2,359,139	\$211,960	\$2,438,189
HealthPlus HDHP 2G HRA \$10/\$40 SF EHIM Rx	\$492	\$1,181	\$1,511	\$1,091	\$2,422,525	\$148,574	\$2,538,775
HealthPlus HDHP 2G HRA; \$200/\$400 Ded; \$10/\$40 SF EHIM Rx	\$483	\$1,159	\$1,484	\$1,072	\$2,379,125	\$191,974	\$2,476,775
HealthPlus HDHP 2G HRA; \$400/\$800 Ded; \$10/\$40 SF EHIM Rx	\$474	\$1,138	\$1,457	\$1,052	\$2,335,725	\$235,374	\$2,414,775
HealthPlus HDHP 2G HRA \$5/\$25/\$50 SF EHIM Rx	\$495	\$1,189	\$1,523	\$1,099	\$2,440,789	\$130,310	\$2,557,039
HealthPlus HDHP 2G HRA; \$200/\$400 Ded; \$5/\$25/\$50 SF EHIM Rx	\$487	\$1,168	\$1,496	\$1,080	\$2,397,389	\$173,710	\$2,495,039
HealthPlus HDHP 2G HRA; \$400/\$800 Ded; \$5/\$25/\$50 SF EHIM Rx	\$478	\$1,147	\$1,469	\$1,060	\$2,353,989	\$217,110	\$2,433,039
HealthPlus HDHP 4G HRA \$10/\$20 SF EHIM Rx	\$493	\$1,184	\$1,519	\$1,096	\$2,432,697	\$138,403	\$2,674,497
HealthPlus HDHP 4G HRA; \$400/\$800 Ded; \$10/\$20 SF EHIM Rx	\$478	\$1,147	\$1,472	\$1,062	\$2,357,057	\$214,043	\$2,550,497
HealthPlus HDHP 4G HRA; \$500/\$1,000 Ded; \$10/\$20 SF EHIM Rx	\$474	\$1,138	\$1,460	\$1,053	\$2,338,147	\$232,953	\$2,519,497
HealthPlus HDHP 4G HRA \$10/\$40 SF EHIM Rx	\$489	\$1,173	\$1,504	\$1,085	\$2,409,283	\$161,816	\$2,651,083
HealthPlus HDHP 4G HRA; \$400/\$800 Ded; \$10/\$40 SF EHIM Rx	\$473	\$1,136	\$1,457	\$1,051	\$2,333,643	\$237,456	\$2,527,083
HealthPlus HDHP 4G HRA; \$500/\$1,000 Ded; \$10/\$40 SF EHIM Rx	\$470	\$1,127	\$1,445	\$1,043	\$2,314,733	\$256,366	\$2,496,083
HealthPlus HDHP 4G HRA \$5/\$25/\$50 SF EHIM Rx	\$492	\$1,181	\$1,516	\$1,093	\$2,427,547	\$143,552	\$2,669,347
HealthPlus HDHP 4G HRA; \$400/\$800 Ded; \$5/\$25/\$50 SF EHIM Rx	\$477	\$1,145	\$1,469	\$1,059	\$2,351,907	\$219,192	\$2,545,347
HealthPlus HDHP 4G HRA; \$500/\$1,000 Ded; \$5/\$25/\$50 SF EHIM Rx	\$473	\$1,135	\$1,457	\$1,051	\$2,332,997	\$238,102	\$2,514,347
HealthPlus/EHIM HRA Plans							
HealthPlus/EHIM HDHP 4F; 10%; \$10/\$25 Rx HRA	\$452	\$1,085	\$1,357	\$990	\$2,197,679	\$373,420	\$2,895,179
HealthPlus/EHIM HDHP 2G 100% Rx HRA	\$466	\$1,118	\$1,397	\$1,020	\$2,263,663	\$307,436	\$2,341,163
HealthPlus/EHIM HDHP \$2,000/\$4,000 No Rx HRA	\$430	\$1,033	\$1,291	\$942	\$2,091,410	\$479,689	\$2,246,410
BCN Plan 10							
BCN Plan 10; \$10 OV; \$10/\$20 Rx	\$396	\$951	\$1,189	\$867	\$1,925,465	\$645,634	\$1,925,465

Product Name	Equivalent Rates (Including Deductible Funding and Fees as Applicable)				Total Cost	Estimated Annual Savings	Worst Case Exposure
	1P	2P	FF	Composite			
BCBSM MASB CB Plans w/ SF Rx							
BCBSM MASB CB1 SF \$10/\$40 Rx	\$621	\$1,490	\$1,862	\$1,541	\$3,421,889	-\$850,790	\$3,421,889
BCBSM MASB CB2 SF \$10/\$40 Rx	\$575	\$1,379	\$1,724	\$1,440	\$3,197,752	-\$626,652	\$3,197,752
BCBSM MASB CB3 SF \$10/\$40 Rx	\$504	\$1,210	\$1,512	\$1,286	\$2,854,235	-\$283,136	\$2,854,235



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HealthPlus HDHP 4G HRA; \$200/\$400 Ded; \$10/\$40 SF EHIM Rx	\$469	\$1,125	\$1,442	\$1,041	\$2,310,083	\$261,016	\$2,589,083
HealthPlus HDHP 4G HRA; \$400/\$800 Ded; \$10/\$40 SF EHIM Rx	\$473	\$1,136	\$1,457	\$1,051	\$2,333,643	\$237,456	\$2,527,083
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