

MARTIN COUNTY SCHOOL DISTRICT



EMPLOYEE BENEFITS

MEDICAL & PRESCRIPTION DRUG COVERAGE

DENTAL COVERAGE

EMPLOYEE ASSISTANCE PROGRAM

VISION COVERAGE

EVALUATION OF RATES

EMPLOYEE & EMPLOYER COST

Analysis by:

GEHRING GROUP
PROFESSIONAL SERVICES

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Martin County School District
Employee Benefits Renewal
Effective Date: July 1, 2010



ALL DIVISIONS

Plan / Tier	CURRENT			RENEWAL		
	Employee	Employer	Total Monthly	Employee	Employer	Total Monthly
HMO						
CIGNA HealthCare OAP-IN						
Employee 1727	\$0.00	\$517.08	\$517.08	\$0.00	\$525.18	\$525.18
Employee + Family 566	\$511.80	\$517.08	\$1,028.88	\$519.81	\$525.18	\$1,044.99
PPO						
CIGNA HealthCare OAP						
Employee 58	\$257.22	\$517.08	\$774.30	\$270.09	\$525.18	\$795.27
Employee + Family 8	\$1,113.22	\$517.08	\$1,630.30	\$1,057.25	\$525.18	\$1,582.43
Retiree Over 65 261	\$0.00	\$387.08	\$387.06	\$0.00	\$387.79	\$387.79
Retiree -65 S+65 2	\$645.48	\$517.08	\$1,162.56	\$638.20	\$525.18	\$1,163.38
Retiree +65 S-65 19	\$726.72	\$517.08	\$1,242.80	\$630.29	\$525.18	\$1,155.47
Retiree +65 S+65 18	\$257.22	\$517.08	\$774.30	\$250.41	\$525.18	\$775.59
Total Premium						
CIGNA HealthCare						
Monthly Premium	\$333,213.14	\$1,340,985.72	\$1,674,193.64	\$336,094.97	\$1,360,594.83	\$1,696,689.80
Annual Premium	\$3,998,557.72	\$16,091,828.64	\$20,090,323.72	\$4,033,139.64	\$16,327,137.96	\$20,360,277.60
\$ Increase	N/A	N/A	N/A	\$34,581.92	\$235,309.32	\$269,953.88
% Increase	N/A	N/A	N/A	0.86%	1.46%	1.34%
Mental Health/EAP						
CIGNA Behavioral Health						
Rate per EE 2660	\$0.00	\$1.92	\$1.92	\$0.00	\$1.46	\$1.46
Monthly Premium	\$0.00	\$5,107.20	\$5,107.20	\$0.00	\$3,883.60	\$3,883.60
Annual Premium	\$0.00	\$61,286.40	\$61,286.40	\$0.00	\$46,603.20	\$46,603.20
\$ increase	N/A	N/A	N/A	\$0.00	-\$14,683.20	-\$14,683.20
% Increase	N/A	N/A	N/A	0.00%	-23.96%	-23.96%
Dental HMO						
CIGNA DMO F1-V6						
Employee 464	\$0.00	\$21.58	\$21.58	\$0.00	\$21.58	\$21.58
Employee + Family 324	\$31.06	\$21.58	\$52.64	\$31.05	\$21.58	\$52.63
Dental Low PPO						
CIGNA Low Option PPO						
Employee 208	\$0.00	\$21.08	\$21.08	\$0.00	\$22.78	\$22.78
Employee + Family 168	\$33.34	\$21.08	\$54.42	\$36.03	\$22.78	\$58.81
Dental High PPO						
CIGNA High Option PPO						
Employee 1050	\$0.00	\$32.30	\$32.30	\$0.00	\$34.90	\$34.90
Employee + Family 341	\$51.06	\$32.30	\$83.36	\$55.18	\$34.90	\$90.08
Total Premium						
CIGNA Dental						
Monthly Premium	\$33,075.76	\$69,859.16	\$102,934.91	\$34,930.88	\$74,114.96	\$109,045.84
Annual Premium	\$396,909.06	\$838,309.91	\$1,235,218.97	\$419,170.57	\$889,379.51	\$1,308,550.08
\$ Increase	N/A	N/A	N/A	\$22,261.51	\$51,069.60	\$73,331.11
% Increase	N/A	N/A	N/A	5.61%	6.09%	5.94%
Vision						
Davis Vision						
Employee 1929	\$0.00	\$4.96	\$4.96	\$0.00	\$4.96	\$4.96
Employee + Family 657	\$9.60	\$4.96	\$14.56	\$9.60	\$4.96	\$14.56
Monthly Premium	\$6,307.20	\$12,826.56	\$19,133.76	\$6,307.20	\$12,826.56	\$19,133.76
Annual Premium	\$75,686.40	\$153,918.72	\$229,605.12	\$75,686.40	\$153,918.72	\$229,605.12
\$ Increase	N/A	N/A	N/A	\$0.00	\$0.00	\$0.00
% Increase	N/A	N/A	N/A	0.00%	0.00%	0.00%
TOTAL PREMIUM						
CURRENT						
Monthly Premium	\$372,596.10	\$1,428,778.64	\$1,801,369.52	\$377,333.05	\$1,451,419.95	\$1,828,753.00
Annual Premium	\$4,471,153.18	\$17,145,343.67	\$21,616,434.21	\$4,527,996.61	\$17,417,039.39	\$21,945,036.00
\$ Increase	N/A	N/A	N/A	\$56,843.43	\$271,695.72	\$328,601.79
% Increase	N/A	N/A	N/A	1.27%	1.58%	1.52%

*Enrollment figures consist of all ACTIVE & RETIREE members. Totals do not reflect subsidies, reduced premium plans or COBRA participants.

Martin County School District
Employee Benefits Renewal
Effective Date: July 1, 2010



ADMINISTRATION

Plan / Tier	CURRENT			RENEWAL		
	Employee	Employer	Total Monthly	Employee	Employer	Total Monthly
HMO	CIGNA HealthCare OAP-IN			AETNA Open Access HMO		
Employee 115	\$0.00	\$517.08	\$517.08	\$0.00	\$525.18	\$525.18
Employee + Family 67	\$511.80	\$517.08	\$1,028.88	\$519.81	\$525.18	\$1,044.99
PPO	CIGNA HealthCare OAP			AETNA Open Access POS & PPO		
Employee 6	\$257.22	\$517.08	\$774.30	\$270.09	\$525.18	\$795.27
Employee + Family 1	\$1,113.22	\$517.08	\$1,630.30	\$1,057.25	\$525.18	\$1,582.43
Total Premium	CIGNA HealthCare			AETNA		
Monthly Premium	\$36,947.16	\$97,728.12	\$134,675.28	\$37,505.06	\$99,259.02	\$136,764.08
Annual Premium	\$443,365.95	\$1,172,737.44	\$1,616,103.39	\$450,060.72	\$1,191,108.24	\$1,641,168.96
\$ Increase	N/A	N/A	N/A	\$6,694.77	\$18,370.80	\$25,065.57
% Increase	N/A	N/A	N/A	1.51%	1.57%	1.55%
Mental Health/EAP	CIGNA Behavioral Health			Horizon Health		
Rate per EE 189	\$0.00	\$1.92	\$1.92	\$0.00	\$1.46	\$1.46
Monthly Premium	\$0.00	\$362.88	\$362.88	\$0.00	\$275.94	\$275.94
Annual Premium	\$0.00	\$4,354.56	\$4,354.56	\$0.00	\$3,311.28	\$3,311.28
\$ Increase	N/A	N/A	N/A	\$0.00	-\$1,043.28	-\$1,043.28
% Increase	N/A	N/A	N/A	0.00%	-23.96%	-23.96%
Dental HMO	CIGNA DMO F1-V6			AETNA DHMO Plan 65		
Employee 14	\$0.00	\$21.58	\$21.58	\$0.00	\$21.58	\$21.58
Employee + Family 30	\$31.06	\$21.58	\$52.64	\$31.05	\$21.58	\$52.63
Dental Low PPO	CIGNA Low Option PPO			AETNA Low Option PPO		
Employee 11	\$0.00	\$21.08	\$21.08	\$0.00	\$22.78	\$22.78
Employee + Family 11	\$33.34	\$21.08	\$54.42	\$36.03	\$22.78	\$58.81
Dental High PPO	CIGNA High Option PPO			AETNA High Option PPO		
Employee 88	\$0.00	\$32.30	\$32.30	\$0.00	\$34.90	\$34.90
Employee + Family 37	\$51.06	\$32.30	\$83.36	\$55.18	\$34.90	\$90.08
Total Premium	CIGNA Dental			AETNA Dental		
Monthly Premium	\$3,187.75	\$5,450.71	\$8,638.46	\$3,369.56	\$5,813.11	\$9,182.67
Annual Premium	\$38,253.00	\$65,408.52	\$103,661.51	\$40,434.72	\$69,757.32	\$110,192.04
\$ Increase	N/A	N/A	N/A	\$2,181.73	\$4,348.80	\$6,530.53
% Increase	N/A	N/A	N/A	5.70%	6.65%	6.30%
Vision	Davis Vision			Davis Vision		
Employee 132	\$0.00	\$4.96	\$4.96	\$0.00	\$4.96	\$4.96
Employee + Family 67	\$9.60	\$4.96	\$14.56	\$9.60	\$4.96	\$14.56
Monthly Premium	\$643.20	\$987.04	\$1,630.24	\$643.20	\$987.04	\$1,630.24
Annual Premium	\$7,718.40	\$11,844.48	\$19,562.88	\$7,718.40	\$11,844.48	\$19,562.88
\$ Increase	N/A	N/A	N/A	\$0.00	\$0.00	\$0.00
% Increase	N/A	N/A	N/A	0.00%	0.00%	0.00%
TOTAL PREMIUM	CURRENT			RENEWAL		
	<i>Employee</i>	<i>Employer</i>	<i>Total Monthly</i>	<i>Employee</i>	<i>Employer</i>	<i>Total Monthly</i>
Monthly Premium	\$40,778.11	\$104,528.75	\$145,306.86	\$41,517.82	\$106,335.11	\$147,852.93
Annual Premium	\$489,337.35	\$1,254,345.00	\$1,743,682.34	\$498,213.84	\$1,276,021.32	\$1,774,235.16
\$ Increase	N/A	N/A	N/A	\$8,876.50	\$21,676.32	\$30,552.82
% Increase	N/A	N/A	N/A	1.81%	1.73%	1.75%

*Enrollment figures consist of all ADMINISTRATION members. Totals do not reflect subsidies, reduced premium plans or COBRA participants.

Martin County School District
Employee Benefits Renewal
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NON-INSTRUCTIONAL

Plan / Tier	CURRENT			RENEWAL		
	Employee	Employer	Total Monthly	Employee	Employer	Total Monthly
HMO						
CIGNA HealthCare OAP-IN			AETNA Open Access HMO			
Employee 668	\$0.00	\$517.08	\$517.08	\$0.00	\$525.18	\$525.18
Employee + Family 128	\$511.80	\$517.08	\$1,028.88	\$519.81	\$525.18	\$1,044.99
PPO						
CIGNA HealthCare OAP			AETNA Open Access POS & PPO			
Employee 4	\$257.22	\$517.08	\$774.30	\$270.09	\$525.18	\$795.27
Employee + Family 0	\$1,113.22	\$517.08	\$1,630.30	\$1,067.25	\$525.18	\$1,582.43
Total Premium						
CIGNA HealthCare			AETNA			
Monthly Premium	\$66,539.30	\$413,664.00	\$480,203.30	\$67,618.04	\$420,144.00	\$487,760.04
Annual Premium	\$798,471.56	\$4,963,968.00	\$5,762,439.56	\$811,392.48	\$5,041,728.00	\$5,853,120.48
\$ Increase	N/A	N/A	N/A	\$12,920.92	\$77,760.00	\$90,680.92
% Increase	N/A	N/A	N/A	1.62%	1.57%	1.57%
Mental Health/EAP						
CIGNA Behavioral Health			Horizon Health			
Rate per EE 800	\$0.00	\$1.92	\$1.92	\$0.00	\$1.46	\$1.46
Monthly Premium	\$0.00	\$1,536.00	\$1,536.00	\$0.00	\$1,168.00	\$1,168.00
Annual Premium	\$0.00	\$18,432.00	\$18,432.00	\$0.00	\$14,016.00	\$14,016.00
\$ Increase	N/A	N/A	N/A	\$0.00	-\$4,416.00	-\$4,416.00
% Increase	N/A	N/A	N/A	0.00%	-23.96%	-23.96%
Dental HMO						
CIGNA DMO F1-V6			AETNA DHMO Plan 65			
Employee 246	\$0.00	\$21.58	\$21.58	\$0.00	\$21.58	\$21.58
Employee + Family 120	\$31.06	\$21.58	\$52.64	\$31.05	\$21.58	\$52.63
Dental Low PPO						
CIGNA Low Option PPO			AETNA Low Option PPO			
Employee 69	\$0.00	\$21.08	\$21.08	\$0.00	\$22.78	\$22.78
Employee + Family 34	\$33.34	\$21.08	\$54.42	\$36.03	\$22.78	\$58.81
Dental High PPO						
CIGNA High Option PPO			AETNA High Option PPO			
Employee 266	\$0.00	\$32.30	\$32.30	\$0.00	\$34.90	\$34.90
Employee + Family 98	\$51.06	\$32.30	\$83.36	\$55.18	\$34.90	\$90.08
Total Premium						
CIGNA Dental			AETNA Dental			
Monthly Premium	\$9,864.63	\$21,826.13	\$31,690.76	\$10,359.25	\$22,947.63	\$33,306.88
Annual Premium	\$118,375.56	\$261,913.61	\$380,289.17	\$124,310.95	\$275,371.61	\$399,682.56
\$ Increase	N/A	N/A	N/A	\$5,935.39	\$13,458.00	\$19,393.39
% Increase	N/A	N/A	N/A	5.01%	5.14%	5.10%
Vision						
Davis Vision			Davis Vision			
Employee 623	\$0.00	\$4.96	\$4.96	\$0.00	\$4.96	\$4.96
Employee + Family 212	\$9.60	\$4.96	\$14.56	\$9.60	\$4.96	\$14.56
Monthly Premium	\$2,035.20	\$4,141.60	\$6,176.80	\$2,035.20	\$4,141.60	\$6,176.80
Annual Premium	\$24,422.40	\$49,699.20	\$74,121.60	\$24,422.40	\$49,699.20	\$74,121.60
\$ Increase	N/A	N/A	N/A	\$0.00	\$0.00	\$0.00
% Increase	N/A	N/A	N/A	0.00%	0.00%	0.00%
TOTAL PREMIUM						
CURRENT			RENEWAL			
	Employee	Employer	Total Monthly	Employee	Employer	Total Monthly
Monthly Premium	\$78,439.13	\$441,167.73	\$519,606.86	\$80,010.49	\$448,401.23	\$528,411.72
Annual Premium	\$941,269.52	\$5,294,012.81	\$6,235,282.33	\$960,125.83	\$5,380,814.81	\$6,340,940.64
\$ Increase	N/A	N/A	N/A	\$18,856.31	\$86,802.00	\$105,658.31
% Increase	N/A	N/A	N/A	2.00%	1.64%	1.69%

*Enrollment figures consist of all NON-INSTRUCTIONAL members. Totals do not reflect subsidies, reduced premium plans or COBRA participants.

Martin County School District
Employee Benefits Renewal
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INSTRUCTIONAL

Plan / Tier	CURRENT			RENEWAL		
	Employee	Employer	Total Monthly	Employee	Employer	Total Monthly
HMO	CIGNA HealthCare OAP-IN			AETNA Open Access HMO		
Employee 814	\$0.00	\$517.08	\$517.08	\$0.00	\$525.18	\$525.18
Employee + Family 357	\$511.80	\$517.08	\$1,028.88	\$519.81	\$525.18	\$1,044.99
PPO	CIGNA HealthCare OAP			AETNA Open Access POS & PPO		
Employee 20	\$257.22	\$517.08	\$774.30	\$270.09	\$525.18	\$795.27
Employee + Family 5	\$1,113.22	\$517.08	\$1,630.30	\$1,057.25	\$525.18	\$1,582.43
Total Premium	CIGNA HealthCare			AETNA		
Monthly Premium	\$193,423.17	\$618,427.68	\$811,850.85	\$196,260.22	\$628,115.28	\$824,375.50
Annual Premium	\$2,321,078.05	\$7,421,132.16	\$9,742,210.21	\$2,365,122.64	\$7,537,383.36	\$9,892,506.00
\$ Increase	N/A	N/A	N/A	\$34,044.59	\$116,251.20	\$150,295.79
% Increase	N/A	N/A	N/A	1.47%	1.57%	1.54%
Mental Health/EAP	CIGNA Behavioral Health			Horizon Health		
Rate per EE 1196	\$0.00	\$1.92	\$1.92	\$0.00	\$1.46	\$1.46
Monthly Premium	\$0.00	\$2,296.32	\$2,296.32	\$0.00	\$1,746.16	\$1,746.16
Annual Premium	\$0.00	\$27,555.84	\$27,555.84	\$0.00	\$20,953.92	\$20,953.92
\$ Increase	N/A	N/A	N/A	\$0.00	-\$6,601.92	-\$6,601.92
% Increase	N/A	N/A	N/A	0.00%	-23.96%	-23.96%
Dental HMO	CIGNA DMO F1-V6			AETNA DHMO Plan 65		
Employee 163	\$0.00	\$21.58	\$21.58	\$0.00	\$21.58	\$21.58
Employee + Family 162	\$31.06	\$21.58	\$52.64	\$31.05	\$21.58	\$52.63
Dental Low PPO	CIGNA Low Option PPO			AETNA Low Option PPO		
Employee 100	\$0.00	\$21.08	\$21.08	\$0.00	\$22.78	\$22.78
Employee + Family 116	\$33.34	\$21.08	\$54.42	\$36.03	\$22.78	\$58.81
Dental High PPO	CIGNA High Option PPO			AETNA High Option PPO		
Employee 501	\$0.00	\$32.30	\$32.30	\$0.00	\$34.90	\$34.90
Employee + Family 185	\$51.06	\$32.30	\$83.36	\$55.18	\$34.90	\$90.08
Total Premium	CIGNA Dental			AETNA Dental		
Monthly Premium	\$18,345.03	\$33,724.06	\$52,069.09	\$19,418.40	\$35,874.86	\$55,293.26
Annual Premium	\$220,140.33	\$404,688.72	\$624,829.05	\$233,020.80	\$430,498.32	\$663,519.12
\$ Increase	N/A	N/A	N/A	\$12,880.47	\$25,809.60	\$38,690.07
% Increase	N/A	N/A	N/A	5.85%	6.38%	6.19%
Vision	Davis Vision			Davis Vision		
Employee 862	\$0.00	\$4.96	\$4.96	\$0.00	\$4.96	\$4.96
Employee + Family 357	\$9.60	\$4.96	\$14.56	\$9.60	\$4.96	\$14.56
Monthly Premium	\$3,427.20	\$6,046.24	\$9,473.44	\$3,427.20	\$6,046.24	\$9,473.44
Annual Premium	\$41,126.40	\$72,554.88	\$113,681.28	\$41,126.40	\$72,554.88	\$113,681.28
\$ Increase	N/A	N/A	N/A	\$0.00	\$0.00	\$0.00
% Increase	N/A	N/A	N/A	0.00%	0.00%	0.00%
TOTAL PREMIUM	CURRENT			RENEWAL		
	<i>Employee</i>	<i>Employer</i>	<i>Total Monthly</i>	<i>Employee</i>	<i>Employer</i>	<i>Total Monthly</i>
Monthly Premium	\$215,195.40	\$660,494.30	\$875,689.70	\$219,105.82	\$671,782.54	\$890,888.36
Annual Premium	\$2,582,344.79	\$7,925,931.60	\$10,508,276.39	\$2,629,269.84	\$8,061,390.48	\$10,690,660.32
\$ Increase	N/A	N/A	N/A	\$46,925.05	\$135,458.88	\$182,383.93
% Increase	N/A	N/A	N/A	1.82%	1.71%	1.74%

*Enrollment figures consist of all INSTRUCTIONAL members. Totals do not reflect subsidies, reduced premium plans or COBRA participants.

Martin County School District
Employee Benefits Renewal
Effective Date: July 1, 2010



RETIREES

Plan / Tier	CURRENT			RENEWAL		
	Employee	Employer	Total Monthly	Employee	Employer	Total Monthly
HMO						
CIGNA HealthCare OAP-IN						
Employee	120	\$0.00	\$517.08	\$517.08	\$0.00	\$525.18
Employee + Family	10	\$511.80	\$517.08	\$1,028.88	\$519.81	\$525.18
AETNA Open Access HMO						
Employee				\$0.00	\$525.18	\$525.18
Employee + Family				\$519.81	\$525.18	\$1,044.99
PPO						
CIGNA HealthCare OAP						
Employee	28	\$257.22	\$517.08	\$774.30	\$270.09	\$525.18
Employee + Family	2	\$1,113.22	\$517.08	\$1,630.30	\$1,057.25	\$525.18
Retiree Over 65	281	\$0.00	\$387.08	\$387.06	\$0.00	\$387.79
Retiree -65 S+65	2	\$645.48	\$517.08	\$1,162.56	\$638.20	\$525.18
Retiree +65 S-65	19	\$725.72	\$517.08	\$1,242.80	\$630.29	\$525.18
Retiree +65 S+65	18	\$257.22	\$517.08	\$774.30	\$250.41	\$525.18
AETNA Open Access POS & PPO						
Employee				\$270.09	\$525.18	\$795.27
Employee + Family				\$1,057.25	\$525.18	\$1,582.43
Retiree Over 65				\$0.00	\$387.79	\$387.79
Retiree -65 S+65				\$638.20	\$525.18	\$1,163.38
Retiree +65 S-65				\$630.29	\$525.18	\$1,155.47
Retiree +65 S+65				\$250.41	\$525.18	\$775.59
Total Premium						
CIGNA HealthCare						
Monthly Premium		\$34,256.31	\$203,926.80	\$238,177.89	\$32,634.41	\$205,724.01
Annual Premium		\$411,075.75	\$2,447,121.60	\$2,858,134.71	\$391,612.92	\$2,468,688.12
\$ Increase		N/A	N/A	N/A	-\$19,462.83	\$21,566.52
% Increase		N/A	N/A	N/A	-4.73%	0.88%
AETNA						
Monthly Premium				\$32,634.41	\$205,724.01	\$238,358.42
Annual Premium				\$391,612.92	\$2,468,688.12	\$2,860,301.04
\$ Increase				-\$19,462.83	\$21,566.52	\$2,166.33
% Increase				-4.73%	0.88%	0.08%
Mental Health/EAP						
CIGNA Behavioral Health						
Rate per EE	460	\$0.00	\$1.92	\$1.92	\$0.00	\$1.46
Monthly Premium		\$0.00	\$883.20	\$883.20	\$0.00	\$671.60
Annual Premium		\$0.00	\$10,598.40	\$10,598.40	\$0.00	\$8,059.20
\$ Increase		N/A	N/A	N/A	\$0.00	-\$2,539.20
% Increase		N/A	N/A	N/A	0.00%	-23.96%
Horizon Health						
Rate per EE					\$1.46	\$1.46
Monthly Premium					\$671.60	\$671.60
Annual Premium					\$8,059.20	\$8,059.20
\$ Increase					-\$2,539.20	-\$2,539.20
% Increase					-23.96%	-23.96%
Dental HMO						
CIGNA DMO F1-V6						
Employee	40	\$0.00	\$21.58	\$21.58	\$0.00	\$21.58
Employee + Family	11	\$31.06	\$21.58	\$52.64	\$31.05	\$21.58
AETNA DHMO Plan 65						
Employee					\$21.58	\$21.58
Employee + Family					\$21.58	\$52.63
Dental Low PPO						
CIGNA Low Option PPO						
Employee	26	\$0.00	\$21.08	\$21.08	\$0.00	\$22.78
Employee + Family	7	\$33.34	\$21.08	\$54.42	\$36.03	\$22.78
AETNA Low Option PPO						
Employee					\$22.78	\$22.78
Employee + Family					\$22.78	\$58.81
Dental High PPO						
CIGNA High Option PPO						
Employee	185	\$0.00	\$32.30	\$32.30	\$0.00	\$34.90
Employee + Family	18	\$51.06	\$32.30	\$83.36	\$55.18	\$34.90
AETNA High Option PPO						
Employee					\$34.90	\$34.90
Employee + Family					\$34.90	\$90.08
Total Premium						
CIGNA Dental						
Monthly Premium		\$1,494.11	\$8,353.04	\$9,847.15	\$1,587.08	\$8,936.94
Annual Premium		\$17,929.28	\$100,236.46	\$118,165.74	\$19,044.98	\$107,243.26
\$ Increase		N/A	N/A	N/A	\$1,115.70	\$7,006.80
% Increase		N/A	N/A	N/A	6.22%	6.99%
AETNA Dental						
Monthly Premium					\$8,936.94	\$10,524.02
Annual Premium					\$107,243.26	\$126,288.24
\$ Increase					\$7,006.80	\$8,122.50
% Increase					6.99%	6.87%
Vision						
Davis Vision						
Employee	300	\$0.00	\$4.96	\$4.96	\$0.00	\$4.96
Employee + Family	18	\$9.60	\$4.96	\$14.56	\$9.60	\$4.96
Monthly Premium		\$172.80	\$1,577.28	\$1,750.08	\$172.80	\$1,577.28
Annual Premium		\$2,073.60	\$18,927.36	\$21,000.96	\$2,073.60	\$18,927.36
\$ Increase		N/A	N/A	N/A	\$0.00	\$0.00
% Increase		N/A	N/A	N/A	0.00%	0.00%
TOTAL PREMIUM						
CURRENT						
Monthly Premium		\$35,923.22	\$214,740.32	\$250,658.32	\$34,394.29	\$216,909.83
Annual Premium		\$431,078.63	\$2,576,883.82	\$3,007,899.81	\$412,731.50	\$2,602,917.94
\$ Increase		N/A	N/A	N/A	-\$18,347.13	\$26,034.12
% Increase		N/A	N/A	N/A	4.26%	1.01%
RENEWAL						
Monthly Premium					\$216,909.83	\$251,304.12
Annual Premium					\$2,602,917.94	\$3,015,649.44
\$ Increase					\$26,034.12	\$7,749.63
% Increase					1.01%	0.26%

*Enrollment figures consist of all RETIREE members. Totals do not reflect subsidies, reduced premium plans or COBRA participants.

