

Summary of the Options for Changes to the Health Insurance Plan

11-Month Premium

1. **Deficit:** \$3,040,128 The numbers below are based on an 11-month pay schedule (no premiums are paid in July.)
2. **Current Cost of Plan:** **\$17,207.76/year:** Per contract, any increase in the cost of the plan is split, with the district paying 60% of the increase and the employees paying 40% of any increase resulting in the cost breakdown in #3 below:
3. **Current Cost Breakdown:** **District** (83.3%) - \$1,303.70/pay period, (\$14,340.72/year); **Employee** (16.7%) - \$260.64/pay period (\$2,867.04/year)

List of Community Medical Facilities: <https://www.communitymedical.org/about-us/hospitals-facilities> (Madera Community Hospital & Valley Children's Hospital will remain in-network.) Networks by Design provider list: <https://www.netbyd.com/index.html>

Option No.	Proposed Changes to Plan	Generic Prescription Co-pay	Additional cost to make up deficit per pay period	Current cost of Plan/per pay period	New cost of plan/per pay period with increase	New Yearly cost of plan with increase	Annual out of pocket premium increase
1	No change – Keep contract with Anthem for physician network and keep Anthem contract with area hospitals	Remains at \$5	\$75.93/pay period	\$260.64	\$336.57	\$3702.27	\$835.23/year

Option No.	Proposed Changes to Plan	Generic Prescription Co-pay	Additional cost to make up deficit	Current cost of Plan/pay period	New cost of plan/pay period with increase	New Yearly cost of plan with increase	Annual out of pocket premium increase
2	a. Switch to <u>Networks by Design</u> plan b. Contract out hospital services to Community Medical Centers (No St. Agnes Hospital, Valley Children's Hospital is still in-network) c. Increase generic prescription co-pay	Increases from \$5 to \$7	\$39.27/pay period	\$260.64	\$299.91	\$3,299.01	\$431.97/year
3	Same as option #2 with additional increase to generic prescription co-pay	Increases from \$5 to \$8	\$38.55/pay period	\$260.64	\$299.19	\$3,291.09	\$424.05/year
4	Same as option #2 with additional increase to generic prescription co-pay	Increases from \$5 to \$10	\$37.11/pay period	\$260.64	\$297.75	\$3,275.25	\$408.21/year

Summary of the Options for Changes to the Health Insurance Plan

12-Month Premium

1. **Deficit:** \$3,040,128 The numbers below are based on an 12-month pay schedule.
2. **Current Cost of Plan:** **\$17,207.76/year:** Per contract, any increase in the cost of the plan is split, with the district paying 60% of the increase and the employees paying 40% of any increase resulting in the cost breakdown in #3 below:
3. **Current Cost Breakdown:** **District** (83.3%) - \$1,195.06/pay period, (\$14,340.72/year); **Employee** (16.7%) - \$238.92/pay period (\$2,867.04/year)

List of Community Medical Facilities: <https://www.communitymedical.org/about-us/hospitals-facilities> (Madera Community Hospital & Valley Children's Hospital will remain in-network.) Networks by Design provider list: <https://www.netbyd.com/index.html>

Option No.	Proposed Changes to Plan	Generic Prescription Co-pay	Additional cost to make up deficit per pay period	Current cost of Plan/per pay period	New cost of plan/per pay period with increase	New Yearly cost of plan with increase	Annual out of pocket premium increase
1	No change – Keep contract with Anthem for physician network and keep Anthem contract with area hospitals	Remains at \$5	\$69.60/pay period	\$238.92	308.52	\$3702.24	\$835.23/year

Option No.	Proposed Changes to Plan	Generic Prescription Co-pay	Additional cost to make up deficit	Current cost of Plan/pay period	New cost of plan/pay period with increase	New Yearly cost of plan with increase	Annual out of pocket premium increase
2	a. Switch to <u>Networks by Design</u> plan b. Contract out hospital services to Community Medical Centers (No St. Agnes Hospital, Valley Children's Hospital is still in-network) c. Increase generic prescription co-pay	Increases from \$5 to \$7	\$36.00/pay period	\$238.92	\$274.92	\$3,299.04	\$432.00/year
3	Same as option #2 with additional increase to generic prescription co-pay	Increases from \$5 to \$8	\$35.34/pay period	\$238.92	\$274.26	\$3,291.12	\$424.08/year
4	Same as option #2 with additional increase to generic prescription co-pay	Increases from \$5 to \$10	\$34.02/pay period	\$238.92	\$272.94	\$3,275.28	\$408.24/year