Self-Insured HealthCare Rates

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August 28, 2024 – Management Committee

METROPOLITAN



Self-Insured Health Care Benefits



- **Projected Costs (Premium Funded)***
- Current Premium w/ Expected Enrollment
- **Calculated Funding Increase**

Actuarial cost calculation includes; cost trend, RX trend, individual plan experience (past 24 months), administrative costs, and inflation.

\$94.3

\$88.6

6.4%

Our HealthCare Plans



PLANS	OPEN ACCESS	DISTINCTIONS
Eligible	ATU Members & early retirees	All Employees & early retirees
Total Premium	Highest	Middle
Deductible	None	\$275 Single \$550 Family
Copays	Lowest	3 Tiers \$23 / \$33 / \$43
Providers	In-network/ Out-of- network	Tiered Network
Out-of-Pocket Maximum	\$1,000 Single \$2,000 Family	\$1,100 Single \$2,200 Family
Employee Involvement	Lowest	Medium

EMPOWER HRA

All Employees & early retirees

Lowest

\$1,375 Single* \$2,750 Family*

20% Coinsurance

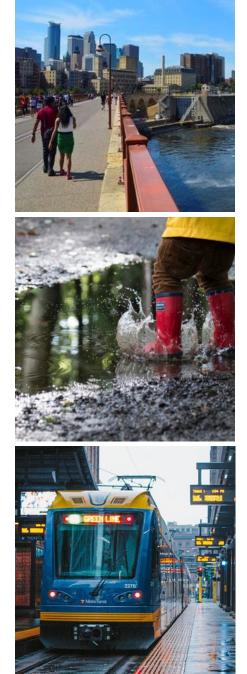
In-network/ Out-of- network

\$2,875 Single \$5,750 Family

Rate Setting Principles - #1

Total premiums must ensure that risk is shared by those enrollees with the same plan choices

- Open Access premiums should cover all anticipated Open Access claims
- Combined premiums for Distinctions and HRA should cover all anticipated combined claims for those programs



Rate Setting Principles

	FUNDING GAP		
Total Gap 6.4%	Open Access	Distinctions	Н
(\$5.67)	(\$1.42)	(\$4	.25)

Rate Principle	Open Access	Distinctions	HRA
1	5.5%	6.8	3%

Dollars in Millions

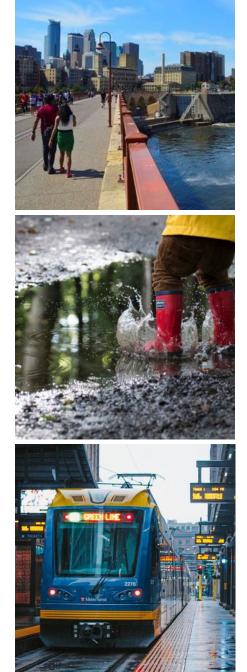




Rate Setting Principles - #2

Premiums for each individual plan should be evaluated annually and calibrated to the projected claims expense of that plan.

 Calibration of premiums can and should be managed over time to avoid significant year to year premium fluctuations (once the first principle is set)



Rate Setting Principles

FUNDING GAP

Total Gap 6.4%	Open Access	Distinctions	H
(\$5.67)	(\$1.42)	(\$4,	.25)

Rate Principle	Open Access	Distinctions	HRA
1	5.5%	6.8	3%
2	5.5%	6.8%	6.

Dollars in Millions





Health Plans and Rates (Monthly)

2024			
Plan	Single	Family	
Open Access	\$ 1,435	\$ 3,586	
Distinctions	\$ 1,164	\$ 2,903	
HRA*	\$ 762	\$1,905	

* Annual contribution to HRA \$1,375 single \$2,750 Family

Health Plans and Rates (Monthly)

2024			2025	
Plan	Single	Family	Plan	Single
Open Access	\$ 1,435	\$ 3,586	Open Access	\$ 1,513
Distinctions	\$ 1,164	\$ 2,903	Distinctions	\$ 1,243
HRA*	\$ 762	\$1,905	HRA*	\$ 814

* Annual contribution to HRA \$1,375 single \$2,750 Family

Far	nily
\$	3,782
\$	3,100
\$	2,035

Self-Insured HealthCare Plans



Risk Mitigation

Reserves

- Cash flow monthly variability between premiums and claims
- Mitigate uninsured losses for claims exceeding premium coverage and provide stability in rate setting

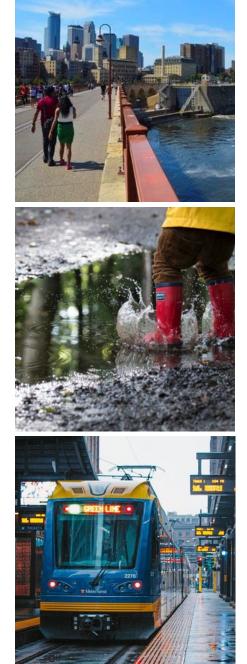
Insurance Coverage

- Specific stop-loss covers claims over \$750,000 for each individual member
- Aggregate stop-loss covers the plan when total claims exceed 125% of expected claims

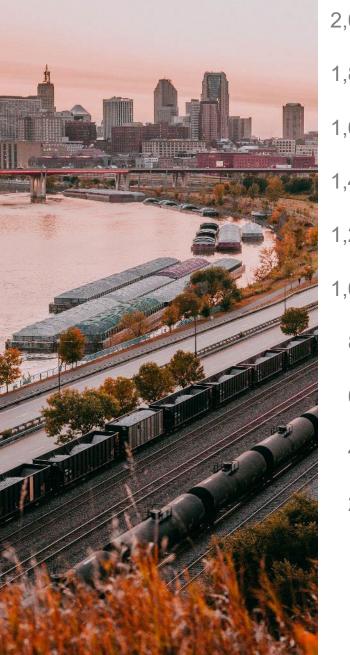
Rate Setting Principles - #3

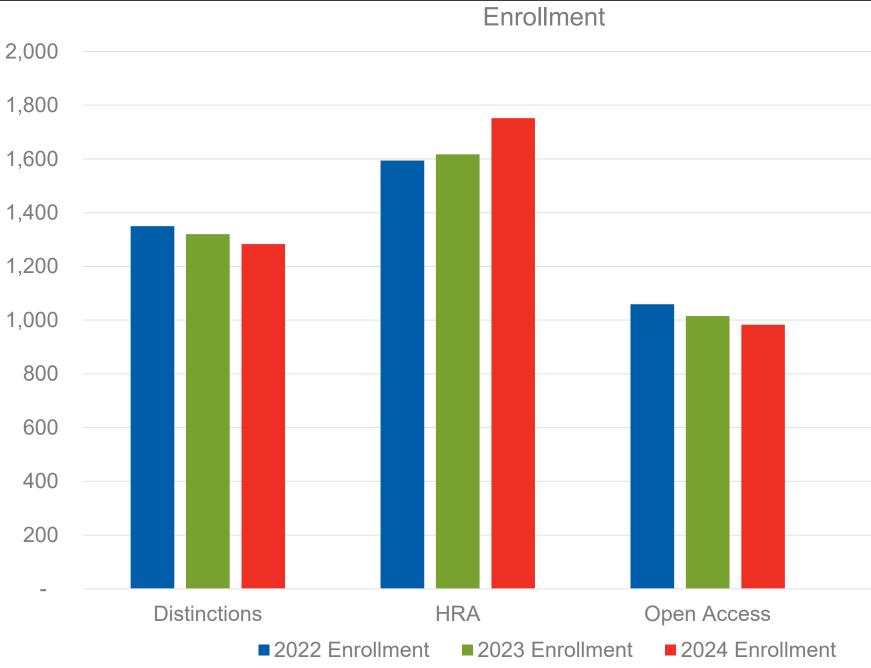
A Minimum Reserve Target should be maintained Reserve balances may be available to:

- Mitigate risk of unanticipated gaps between premium collections and claims expenses.
- Mitigate risk impact of participant migration among plans
- Avoid significant year to year premium fluctuations (once the first principle is met)
- One-time uses with priority to uses that mitigate future claims costs



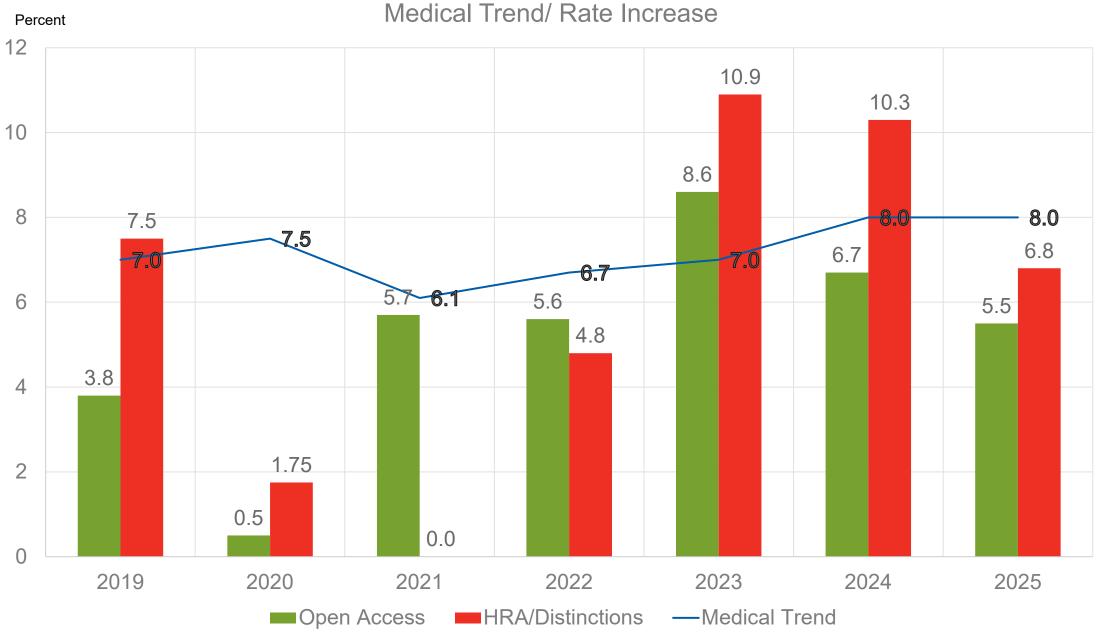
Enrollment – Employee (Average)



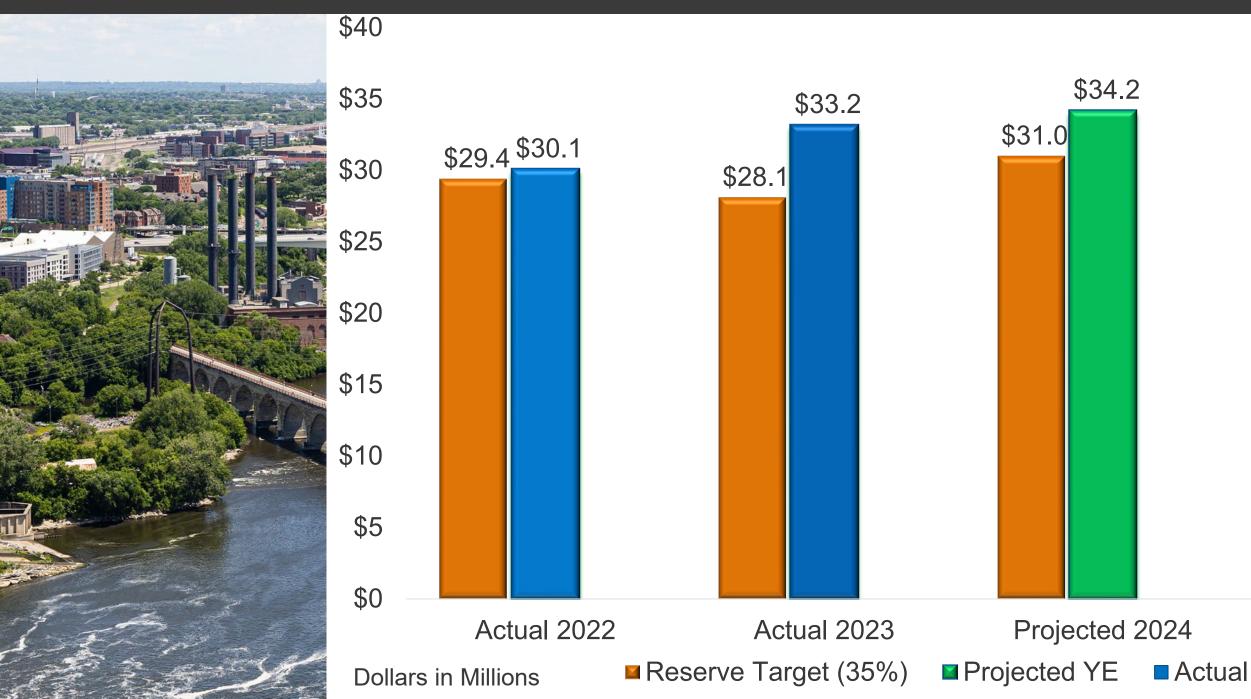


Medical Trend – Rate increases





Medical Operating Reserve

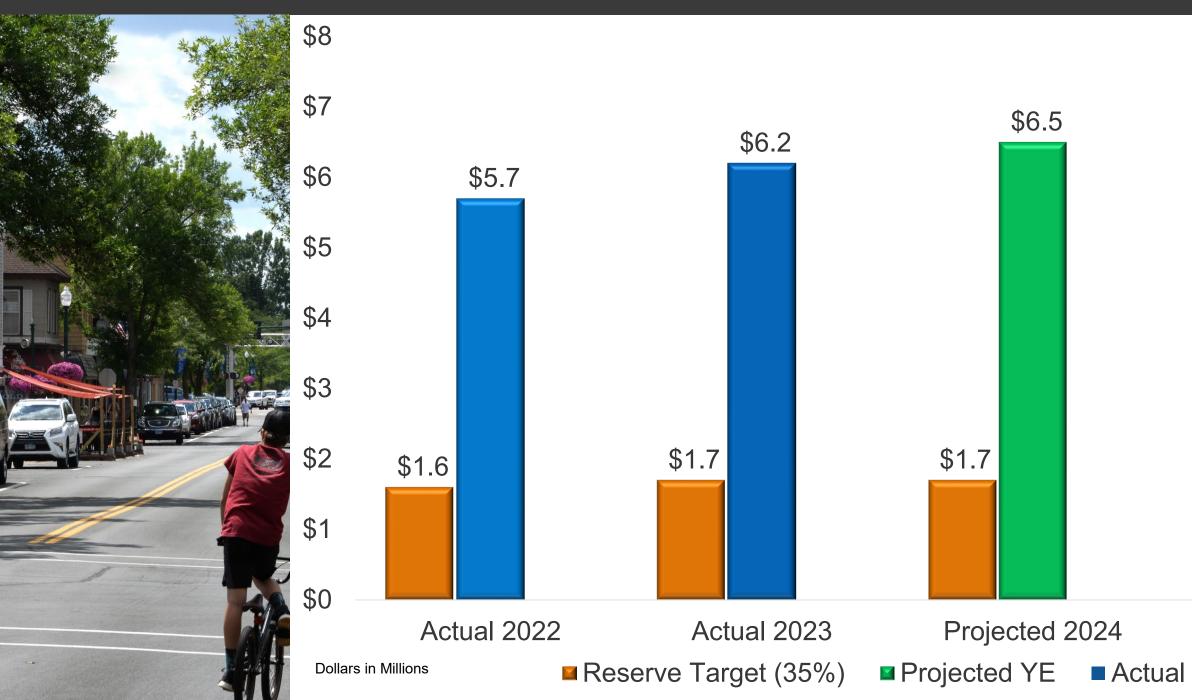


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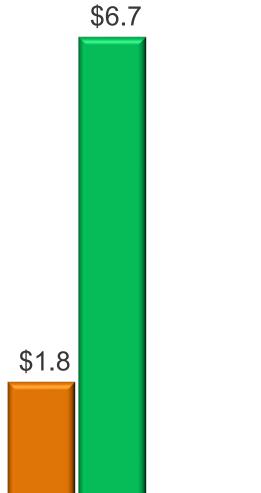
Projected 2025

\$33.0 \$33.0

Dental Operating Reserve







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Metropolitan



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