## **Post-Session Impact Outlook**

For the Fiscal Years Ending June 30, 2010 through June 30, 2015

July 29, 2011

#### Exhibit I

#### Financial Outlook by Fiscal Year (1) (2)

## Highlights of Changes to Forecast - Post-Session Impact July 2011 Compared to Estimating Conference February 2011 (In Millions)

	F	FY 10-11			Y 11-12	FY 12-13		FY 13-14 <sup>(3</sup>	)	FY 14-15 <sup>(3)</sup>			
	Feb '11	<u>Jul '11</u>	Diff.	Feb '11	Jul '11 Diff.	Feb '11 Jul '11 [	oiff. Feb	<u>'11</u> <u>Jul '11</u>	Diff.	Feb '11	<u>Jul '11</u>	Diff.	
Beginning Balance	\$ 224.6	\$ 224.6	\$ 0.0	\$ 230.2	\$ 230.2 \$ 0.0	\$ 154.6 \$ 152.2 \$	(2.4) \$	0.0 \$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0	
Revenues:													
Insurance Premiums	\$ 1,829.9	\$ 1,829.9	\$ 0.0	\$ 1,831.7	\$ 1,829.3 \$ (2.4)	\$ 1,889.1 \$ 1,886.7 \$	(2.4) \$ 1,8	98.1 \$ 1,895.7	\$ (2.4)	\$ 1,908.0	\$ 1,905.6	\$ (2.4)	
Other Revenues	12.6	12.6	0.0	70.9	70.9 0.0	70.1 70.1	0.0	71.1 71.1	0.0	72.4	72.4	0.0	
Total Revenues	\$ 1,904.5	\$ 1,904.5	\$ 0.0	\$ 1,963.1	\$ 1,960.7 \$ (2.4)	\$ 2,022.1 \$ 2,019.7 \$	(2.4) \$ 2,1	37.1 \$ 2,134.7	\$ (2.4)	\$ 2,256.7	\$ 2,254.3	\$ (2.4)	
Total Available	\$ 2,129.1	\$ 2,129.1	\$ 0.0	\$ 2,193.3	\$ 2,190.9 \$ (2.4)	<u>\$ 2,176.7</u> <u>\$ 2,171.9</u> <u>\$</u>	(4.8) \$ 2,1	37.1 \$ 2,134.7	\$ (2.4)	\$ 2,256.7	\$ 2,254.3	<u>\$ (2.4)</u>	
Total Expenses	\$ 1,898.9	\$ 1,898.9	\$ 0.0	\$ 2,038.7	\$ 2,038.7 \$ 0.0	\$ 2,293.1 \$ 2,293.1 \$	0.0 \$ 2,6	90.7 \$ 2,690.7	\$ 0.0	\$ 3,126.9	\$ 3,126.9	\$ 0.0	
Excess of Revenues													
over Expenses	\$ 5.6	\$ 5.6	\$ 0.0	\$ (75.6)	(78.0) \$ (2.4)	<u>\$ (271.0)</u> <u>\$ (273.4)</u> <u>\$</u>	(2.4) \$ (5	53.6) \$ (556.0)	\$ (2.4)	\$ (870.2)	\$ (872.6)	\$ (2.4)	
<b>Ending Cash Balance</b>	\$ 230.2	\$ 230.2	\$ 0.0	\$ 154.6	\$ 152.2 <u>\$ (2.4)</u>	<u>\$ (116.4)</u> <u>\$ (121.2)</u> <u>\$</u>	(4.8) \$ (5	53.6) \$ (556.0)	\$ (2.4)	\$ (870.2)	\$ (872.6)	\$ (2.4)	

 $<sup>^{(1)}</sup>$  Revenue and Expense categories have been collapsed to present the highlights of changes to forecast.

#### **Highlights of Changes to Forecast**

- Overall, net results of outlook changes are nominal as well as the impact to forecast.
- Impact of 2011 legislative actions.
  - \* Effective July 1, 2011, for the coverage period beginning August 1, 2011, the monthly state share of the State Group Health Insurance Premiums for each employee participating in the Spouse Program decreased from \$621.66 to \$606.68, resulting in a minor adjustment to insurance premium projections.

 $<sup>^{\</sup>left(2\right)}$  Exhibits II to VII present detail forecast information, per fiscal year.

<sup>(3)</sup> Assumes no carry forward of negative balance from prior year.

## Exhibit II Financial Outlook

By Fiscal Year (In Millions)

	_	FY 10-11	_	FY 11-12	_	FY 12-13	_	FY 13-14	_	FY 14-15
	_	Estimate (1)	_	Estimate (1)	<u> </u>	Estimate (1)	_	Estimate (1)	E	Estimate (1)
BEGINNING CASH BALANCE	\$	224.6	\$	230.2	\$	91.7	\$	0.0 (2)	\$	0.0 (2)
REVENUES:										
Insurance Premiums:										
Employer	\$	1,453.8 <sup>(3)</sup>	\$	1,449.1 <sup>(3)</sup>	\$	1,497.9	\$	1,502.5	\$	1,507.3
Employee		169.7 <sup>(3)</sup>		166.7 <sup>(3)</sup>		172.9		174.0		175.0
HSA Contributions (4)		1.5		1.5		1.5		1.5		1.5
COBRA		6.3		6.0		6.0		6.0		6.0
Early Retiree		62.0		61.4		58.9		56.8		54.9
Medicare		136.6		144.6		149.5		154.9		160.9
Investment Interest		4.5		3.2		0.0		0.0		0.0
TPA Refunds		8.1		7.2		7.2		7.2		7.2
PBM Rebates		25.6		22.1		22.9		23.3		23.9
Pretax Trust Fund Transfer		15.9		18.0		18.0		18.0		18.0
Medicare Part D Subsidy		20.5		20.4		22.0		22.6		23.3
PPACA (5)		0.0		0.0		0.0		104.0		211.1
TOTAL REVENUES	\$	1,904.5	\$	1,900.2	\$	1,956.8	\$	2,070.8	\$	2,189.1
TOTAL CASH AVAILABLE	\$	2,129.1	\$	2,130.4	\$	2,048.5	\$	2,070.8	\$	2,189.1
EXPENSES:	_		_				_		_	
State PPO Plan: (6)										
Medical Claims	\$	618.0	\$	661.0	\$	705.4	\$	753.0	\$	804.0
ASO Fee		19.8		19.7		19.2		18.7		18.2
Prescription Drug Claims		257.6		279.4		302.5		333.3 <sup>(7)</sup>		367.3 <sup>(7)</sup>
PBM Claims Administration		0.3		0.3		0.3		0.3		0.3
HMO Premium Payments		988.4		1,092.7		1,241.6		1,406.5		1,590.7
HSA Deposits (4)		1.5		1.5		1.5		1.5		1.5
Operating Costs & Admin Assessment		2.6		2.6		2.6		2.6		2.6
Premium Refunds		3.5		3.5		3.5		3.5		3.5
Other Expenses		0.1		0.1		0.1		0.1		0.1
PPACA (5)		7.1		(22.1)		16.4		171.2		338.7
TOTAL EXPENSES	\$	1,898.9	\$	2,038.7	\$	2,293.1	\$	2,690.7	\$	3,126.9
EXCESS OF REVENUES OVER EXPENSE	s s	5.6	\$	(138.5)	\$	(336.3)	\$	(619.9)	\$	(937.8)
ENDING CASH BALANCE	.o	230.2	\$	91.7	\$ _	(244.6)	\$	(619.9)	\$ _	(937.8)
ENDING CASH BALANCE	Ψ_	230.2	Ψ_	91.7	Ψ_	(244.0)	Ψ_	(019.9)	ъ –	(937.6)
PPO Standard		91,851		89,573		87,266		85.060 <sup>(8)</sup>		82,912 <sup>(8)</sup>
Average PPO HIHP		973		1,006		1,006		1,006 (8)		1,006 (8)
Enrollment		83,971		86,969		89,732		92,324 (8)		94,836 (8)
by Plan  HMO Standard  HMO HIHP		466		460		460		460 (8)		460 (8)
Total	-	177,261	-	178,008	_	178,464	-	178,850	_	179,214
Active Standard	-	139,336	_	139,807	_	139,878	-	139,854 (8)	_	139,780 (8)
Average Active HIHP		1,360		1,385		1,385		1,385 (8)		1,385 (8)
71701ugo								678 <sup>(8)</sup>		678 <sup>(8)</sup>
Enrollment by COBRA		756		678		6/8				
A		756 7.639		678 7.486		678 7.257		7.053 (8)		6.877 (8)
•		756 7,639 28,170		7,486 28,652		7,257 29,266		7,053 <sup>(8)</sup> 29,880 <sup>(8)</sup>		6,877 <sup>(8)</sup> 30,494 <sup>(8)</sup>

<sup>(1)</sup> Actual results may differ from projected values with increasing likelihood of variance in future periods.

<sup>(2)</sup> Assumes no carry forward of negative ending cash balance from prior year.

<sup>(3)</sup> Includes estimated timing impact of the receipt of 1 st fiscal year biweekly payroll.

<sup>(4)</sup> Contributions approximate a split between employer and employee of 41% and 59%, respectively.

<sup>(5)</sup> Includes estimated fiscal impact of the Federal Patient Protection and Affordable Care Act (PPACA).

<sup>(6)</sup> Bank Services are estimated at approximately \$35,000/per year for the projected period, which rounds to \$0.0M.

<sup>(7)</sup> Includes growth trend for prescription drug claims of 13.0%, consistent with previous outlook.

<sup>(8)</sup> Does not include estimated impact to enrollment of certain PPACA reforms.

# Exhibit III Financial Outlook

Fiscal Year 2010-11 (In Millions)

			(A) Feb '11		(B) Jul '11	1	(B) - (A) Difference
BEGINNING CASH BAI	_ANCE	\$	224.6	\$	224.6	\$	0.0
REVENUES:		Ψ		Ψ		1	0.0
Insurance Premiums: <sup>(1</sup>	)						
Employer		\$	1,453.8	\$	1,453.8	\$	0.0
Employee			169.7		169.7		0.0
HSA Contributions (2)			1.5		1.5		0.0
COBRA			6.3		6.3		0.0
Early Retiree			62.0		62.0		0.0
Medicare			136.6		136.6		0.0
Investment Interest			4.5		4.5		0.0
TPA Refunds			8.1		8.1		0.0
PBM Rebates	t		25.6		25.6		0.0
Pretax Trust Fund Tran			15.9		15.9		0.0
Medicare Part D Subsi PPACA (3)	ay		20.5 0.0		20.5 0.0		0.0 0.0
				_			
TOTAL REVENUES		\$	1,904.5	\$	1,904.5	\$	0.0
TOTAL CASH AVAILAE	BLE	\$	2,129.1	\$	2,129.1	\$	0.0
EXPENSES:							
State PPO Plan: (4)							
Medical Claims		\$	618.0	\$	618.0	\$	0.0
ASO Fee			19.8		19.8		0.0
Prescription Drug Cla			257.6		257.6		0.0
PBM Claims Adminis			0.3		0.3		0.0
HMO Premium Payme	nts		988.4		988.4		0.0
HSA Deposits <sup>(2)</sup> Operating Costs & Adr	nin Assassment		1.5 2.6		1.5 2.6		0.0 0.0
Premium Refunds	IIIII Assessineiii		3.5		3.5		0.0
Other Expenses			0.1		0.1		0.0
PPACA (3)			7.1		7.1		0.0
TOTAL EXPENSES		\$	1,898.9	\$	1,898.9	\$	0.0
EXCESS OF REVENUE	S OVER EXPENSES	\$	5.6	\$	5.6	\$	0.0
ENDING CASH BALAN		\$	230.2	\$	230.2	\$	0.0
· · · · · · · · · · · · · · · · · ·		•		•		*	
Average	PPO Standard		91,851		91,851		0
Enrollment	PPO HIHP		973		973		0
by Plan	HMO Standard		83,971		83,971		0
	HMO HIHP		466		466		0
	Total		177,261		177,261		0
A	Active Standard		139,336		139,336		0
Average Enrollment by	Active HIHP		1,360		1,360		0
Coverage Type	COBRA		756		756		0
Outchage Type	Early Retiree		7,639		7,639		0
	Medicare Total		28,170		28,170		0
	ιυιαι		177,261		177,261	Ι.	<u> </u>

<sup>&</sup>lt;sup>(1)</sup> Includes estimated timing impact of the receipt of 1<sup>st</sup> fiscal year biweekly payroll.

<sup>(2)</sup> Contributions approximate a split between employer and employee of 41% and 59%, respectively.

<sup>(3)</sup> Includes estimated fiscal impact of the Federal Patient Protection and Affordable Care Act (PPACA).

<sup>(4)</sup> Bank Services are estimated at approximately \$35,000/per year, which rounds to \$0.0M.

# Exhibit IV Financial Outlook

Fiscal Year 2011-12 (In Millions)

			(A) Feb '11	;	(B) Jul '11	(B) - (A) Difference
BEGINNING CASH BA	LANCE	\$	230.2	\$	230.2	\$ 0.0
REVENUES:						
Insurance Premiums:	1)					
Employer		\$	1,451.5	\$	1,449.1	\$ (2.4)
Employee			166.7		166.7	0.0
HSA Contributions (2)	)		1.5		1.5	0.0
COBRA			6.0		6.0	0.0
Early Retiree			61.4		61.4	0.0
Medicare			144.6 3.2		144.6 3.2	0.0
Investment Interest TPA Refunds			3.2 7.2		3.2 7.2	0.0 0.0
PBM Rebates			22.1		22.1	0.0
Pretax Trust Fund Tra	nsfer		18.0		18.0	0.0
Medicare Part D Subs			20.4		20.4	0.0
PPACA (3)	•		0.0		0.0	0.0
TOTAL REVENUES		\$	1,902.6	\$	1,900.2	\$ (2.4)
TOTAL CASH AVAILA	BLE	\$	2,132.8	\$	2,130.4	\$ (2.4)
EXPENSES:						
State PPO Plan: (4)						
Medical Claims		\$	661.0	\$	661.0	\$ 0.0
ASO Fee			19.7		19.7	0.0
Prescription Drug Cl			279.4		279.4	0.0
PBM Claims Adminis			0.3		0.3	0.0
HMO Premium Payme	ents		1,092.7		1,092.7	0.0
HSA Deposits <sup>(2)</sup> Operating Costs & Ad	min Assassment		1.5 2.6		1.5 2.6	0.0 0.0
Premium Refunds	IIIIII Assessineili		3.5		3.5	0.0
Other Expenses			0.1		0.1	0.0
PPACA (3)			(22.1)		(22.1)	0.0
TOTAL EXPENSES		\$	2,038.7	\$	2,038.7	\$ 0.0
EXCESS OF REVENUE	ES OVER EXPENSES	\$	(136.1)	\$	(138.5)	\$ (2.4)
ENDING CASH BALAN	ICE	\$	94.1	\$	91.7	\$ (2.4)
Average	PPO Standard		89,573		89,573	0
Enrollment	PPO HIHP		1,006		1,006	0
by Plan	HMO Standard		86,969		86,969	0
•	HMO HIHP		460	,	460	0
	Total	. ,	178,008		178,008	0
Average	Active Standard		139,807		139,807	0
Enrollment by	Active HIHP COBRA		1,385 678		1,385 678	0
Coverage Type	Early Retiree		7,486		7,486	0
<b>5</b> 7.	Medicare		28,652		28,652	0
	Total		178,008	•	178,008	0

<sup>(1)</sup> Includes estimated timing impact of the receipt of 1<sup>st</sup> fiscal year biweekly payroll.

<sup>&</sup>lt;sup>(2)</sup> Contributions approximate a split between employer and employee of 41% and 59%, respectively.

<sup>(3)</sup> Includes estimated fiscal impact of the Federal Patient Protection and Affordable Care Act (PPACA).

<sup>(4)</sup> Bank Services are estimated at approximately \$35,000/per year, which rounds to \$0.0M.

# Exhibit V Financial Outlook

Fiscal Year 2012-13 (In Millions)

			(A) Feb '11	(B) Jul '11		(B) - (A) Difference
BEGINNING CASH BA	LANCE	\$	94.1	\$ 91.7	\$	(2.4)
REVENUES:						
Insurance Premiums:						
Employer		\$	1,500.3	\$ 1,497.9	\$	(2.4)
Employee			172.9	172.9		0.0
HSA Contributions (1)	)		1.5	1.5		0.0
COBRA			6.0	6.0		0.0
Early Retiree			58.9	58.9		0.0
Medicare Investment Interest			149.5	149.5		0.0
TPA Refunds			0.0 7.2	0.0 7.2		0.0 0.0
PBM Rebates			22.9	22.9		0.0
Pretax Trust Fund Tra	nsfer		18.0	18.0		0.0
Medicare Part D Subs			22.0	22.0		0.0
PPACA (2)	•		0.0	0.0		0.0
TOTAL REVENUES		\$	1,959.2	\$ 1,956.8	\$	(2.4)
TOTAL CASH AVAILA	BLE	\$	2,053.3	\$ 2,048.5	\$	(4.8)
EXPENSES:						
State PPO Plan: (3)						
Medical Claims		\$	705.4	\$ 705.4	\$	0.0
ASO Fee			19.2	19.2		0.0
Prescription Drug Cl			302.5	302.5		0.0
PBM Claims Adminis			0.3	0.3		0.0
HMO Premium Payme	ents		1,241.6	1,241.6		0.0
HSA Deposits (1)	min Accomment		1.5 2.6	1.5 2.6		0.0 0.0
Operating Costs & Ad Premium Refunds	min Assessment		3.5	3.5		0.0
Other Expenses			0.1	0.1		0.0
PPACA (2)			16.4	16.4		0.0
TOTAL EXPENSES		\$	2,293.1	\$ 2,293.1	\$	0.0
EXCESS OF REVENUE	ES OVER EXPENSES	\$	(333.9)	\$ (336.3)	\$	(2.4)
ENDING CASH BALAN	ICE	\$	(239.8)	\$ (244.6)	\$	(4.8)
Average	PPO Standard		87,266	87,266		0
Enrollment	PPO HIHP		1,006	1,006		0
by Plan	HMO Standard		89,732	89,732		0
•	HMO HIHP		460	460		0
	Total		178,464	178,464		0
Average	Active Standard		139,878	139,878		0
Enrollment by	Active HIHP		1,385	1,385		0
Coverage Type	COBRA Early Retiree		678 7,257	678 7,257	1	0
	Medicare		29,266	29,266		0
	Total		178,464	178,464	1	0
	. •	•	5, 10 1	5, 15 1	1	

<sup>(1)</sup> Contributions approximate a split between employer and employee of 41% and 59%, respectively.

<sup>(2)</sup> Includes estimated fiscal impact of the Federal Patient Protection and Affordable Care Act (PPACA).

<sup>(3)</sup> Bank Services are estimated at approximately \$35,000/per year, which rounds to \$0.0M.

# Exhibit VI Financial Outlook

Fiscal Year 2013-14 (In Millions)

			(A)	-	(B)		(B) - (A)
			Feb '11		Jul '11	.	Difference
BEGINNING CASH BA	LANCE	\$	0.0	) \$	0.0 (1)	\$	0.0
REVENUES:							
Insurance Premiums:							
Employer		\$	1,504.9	\$	1,502.5	\$	(2.4)
Employee			174.0		174.0		0.0
HSA Contributions (2)	)		1.5		1.5		0.0
COBRA			6.0		6.0		0.0
Early Retiree			56.8		56.8		0.0
Medicare			154.9		154.9		0.0
Investment Interest			0.0		0.0		0.0
TPA Refunds			7.2 23.3		7.2		0.0
PBM Rebates Pretax Trust Fund Tra	nofor		23.3 18.0		23.3 18.0		0.0
Medicare Part D Subs			22.6		22.6		0.0 0.0
PPACA (3)	iuy		104.0		104.0		0.0
		Φ.		Φ.		φ.	
TOTAL CASH AVAILA		\$	2,073.2	\$	2,070.8	\$	(2.4)
TOTAL CASH AVAILAI	BLE	\$	2,073.2	\$	2,070.8	\$	(2.4)
EXPENSES: State PPO Plan: (4)							
Medical Claims		Φ	752.0	¢.	752.0	r.	0.0
ASO Fee		\$	753.0 18.7	\$	753.0 18.7	\$	0.0 0.0
Prescription Drug Cla	oimo (5)		333.3		333.3		0.0
PBM Claims Adminis			0.3		0.3		0.0
HMO Premium Payme			1,406.5		1,406.5		0.0
HSA Deposits (2)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1.5		1.5		0.0
Operating Costs & Ad	min Assessment		2.6		2.6		0.0
Premium Refunds			3.5		3.5		0.0
Other Expenses			0.1		0.1		0.0
PPACA <sup>(3)</sup>			171.2		171.2		0.0
TOTAL EXPENSES		\$	2,690.7	\$	2,690.7	\$	0.0
EXCESS OF REVENUE	S OVER EXPENSES	\$	(617.5)	\$	(619.9)	\$	(2.4)
ENDING CASH BALAN	ICE	\$	(617.5)	\$	(619.9)	\$	(2.4)
		•	<u> </u>	•	<u> </u>		<u> </u>
Average	PPO Standard		85,060		85,060		0
Enrollment <sup>(6)</sup>	PPO HIHP		1,006		1,006		0
by Plan	HMO Standard		92,324		92,324		0
•	HMO HIHP		460		460	-	0
-	Total		178,850	-	178,850	-	0
Average	Active Standard		139,854		139,854		0
Enrollment by <sup>(6)</sup>	Active HIHP		1,385		1,385		0
Coverage Type	COBRA		678		678		0
Outclage Type	Early Retiree Medicare		7,053 29,880		7,053 29,880		0
	Total		178,850	-	178,850	-	0
	i Utai		170,000		170,000	١.	<u> </u>

<sup>(1)</sup> Assumes no carry forward of negative ending cash balance from prior year.

 $<sup>^{(2)}</sup>$  Contributions approximate a split between employer and employee of 41% and 59%, respectively.

<sup>(3)</sup> Includes estimated fiscal impact of the Federal Patient Protection and Affordable Care Act (PPACA).

 $<sup>^{\</sup>rm (4)}$  Bank Services are estimated at approximately \$35,000/per year, which rounds to \$0.0M.

<sup>(5)</sup> Includes growth trend for prescription drug claims of 13.0%, consistent with previous outlook.

<sup>(6)</sup> Does not include estimated impact to enrollment of certain PPACA reforms.

## Exhibit VII Financial Outlook

Fiscal Year 2014-15 (In Millions)

			(A)	_	(B)		(B) - (A)
			Feb '11		Jul '11		Difference
BEGINNING CASH BA	LANCE	\$	0.0 (1)	\$	0.0 (1)	\$	0.0
REVENUES:							
Insurance Premiums:							
Employer		\$	1,509.7	\$	1,507.3	\$	(2.4)
Employee	1		175.0		175.0		0.0
HSA Contributions (2)	)		1.5		1.5		0.0
COBRA			6.0		6.0		0.0
Early Retiree			54.9		54.9		0.0
Medicare			160.9		160.9		0.0
Investment Interest TPA Refunds			0.0 7.2		0.0 7.2		0.0 0.0
PBM Rebates			23.9		23.9		0.0
Pretax Trust Fund Tra	nefor		18.0		18.0		0.0
Medicare Part D Subs			23.3		23.3		0.0
PPACA (3)	iay		211.1		211.1		0.0
TOTAL REVENUES		\$	2,191.5	\$	2,189.1	\$	(2.4)
TOTAL CASH AVAILA	BLE	\$	2,191.5	\$	2,189.1	\$	(2.4)
EXPENSES:		Ψ	2,.00	Ψ.		* -	(=: :)
State PPO Plan: (4)							
Medical Claims		\$	804.0	\$	804.0	\$	0.0
ASO Fee			18.2		18.2		0.0
Prescription Drug Cl	aims <sup>(5)</sup>		367.3		367.3		0.0
PBM Claims Adminis	stration		0.3		0.3		0.0
HMO Premium Payme	ents		1,590.7		1,590.7		0.0
HSA Deposits (2)			1.5		1.5		0.0
Operating Costs & Ad	min Assessment		2.6		2.6		0.0
Premium Refunds			3.5		3.5		0.0
Other Expenses			0.1		0.1		0.0
PPACA (3)			338.7		338.7	١	0.0
TOTAL EXPENSES		\$	3,126.9	\$	3,126.9	\$	0.0
EXCESS OF REVENUE	ES OVER EXPENSES	\$	(935.4)	\$	(937.8)	\$	(2.4)
ENDING CASH BALAN	ICE	\$	(935.4)	\$	(937.8)	\$	(2.4)
<b>A</b>	PPO Standard		82,912		82,912		0
Average	PPO HIHP		1,006		1,006		0
Enrollment (6)	HMO Standard		94,836		94,836		0
by Plan	HMO HIHP	_	460		460		0
	Total	_	179,214	_	179,214		0
	Active Standard		139,780		139,780		0
Average	Active HIHP		1,385		1,385		0
Enrollment by <sup>(6)</sup>	COBRA		678		678		0
Coverage Type	Early Retiree		6,877		6,877		0
	Medicare	-	30,494	-	30,494	-	0
	Total	-	179,214	-	179,214	١.	0

<sup>(1)</sup> Assumes no carry forward of negative ending cash balance from prior year.

<sup>&</sup>lt;sup>(2)</sup> Contributions approximate a split between employer and employee of 41% and 59%, respectively.

<sup>(3)</sup> Includes estimated fiscal impact of the Federal Patient Protection and Affordable Care Act (PPACA).

<sup>&</sup>lt;sup>(4)</sup> Bank Services are estimated at approximately \$35,000/per year, which rounds to \$0.0M.

<sup>(5)</sup> Includes growth trend for prescription drug claims of 13.0%, consistent with previous outlook.

<sup>(6)</sup> Does not include estimated impact to enrollment of certain PPACA reforms.

#### **Exhibit VIII**

## **Comparison of Financial Outlooks**

Fiscal Year 2011-12

(In Millions)

- \$ 94.1 Previous Ending Cash Balance Forecast (1)
  - (2.4) Decrease in Revenue Forecast
    - (2.4) Decrease in Insurance Premiums due to 2011 legislative action decreasing employer contribution for each employee participating in the Spouse Program
- \$ 91.7 Ending Cash Balance

<sup>(1)</sup> February 2011

#### **Exhibit IX**

## **Comparison of Financial Outlooks**

#### Fiscal Year 2012-13

(In Millions)

#### \$ (239.8) Previous Ending Cash Balance Forecast (1)

- (2.4) Decrease in Beginning Cash Balance Forecast
- (2.4) Decrease in Revenue Forecast
  - (2.4) Decrease in Insurance Premiums due to 2011 legislative action decreasing employer contribution for each employee participating in the Spouse Program

#### \$ (244.6) Ending Cash Balance

<sup>(1)</sup> February 2011

#### **Exhibit X**

## **Comparison of Financial Outlooks**

#### Fiscal Year 2013-14

(In Millions)

#### \$ (617.5) Previous Ending Cash Balance Forecast (1)(2)

#### (2.4) Decrease in Revenue Forecast

(2.4) - Decrease in Insurance Premiums due to 2011 legislative action decreasing employer contribution for each employee participating in the Spouse Program

#### (619.9) Ending Cash Balance

<sup>&</sup>lt;sup>(1)</sup> February 2011

 $<sup>^{\</sup>left(2\right)}$  Assumes no carry forward of negative ending cash balance from prior year.

#### **Exhibit XI**

## **Comparison of Financial Outlooks**

#### Fiscal Year 2014-15

(In Millions)

#### \$ (935.4) Previous Ending Cash Balance Forecast (1)(2)

#### (2.4) Decrease in Revenue Forecast

(2.4) - Decrease in Insurance Premiums due to 2011 legislative action decreasing employer contribution for each employee participating in the Spouse Program

#### (937.8) Ending Cash Balance

<sup>(1)</sup> February 2011

 $<sup>^{\</sup>left(2\right)}$  Assumes no carry forward of negative ending cash balance from prior year.

# Exhibit XII Premium Rate Table

#### Effective December 2010 for January 2011 Coverage

(COBRA premium rates remain unchanged from May 2010)

Su	bscriber Category /	Coverage	PPO/	HMO Stand	dard	PPO/HMO HIHP				
(	Contribution Cycle	Туре	Employer	Enrollee	Total	Employer (8)	Enrollee	Total		
	Marchine Toll There	Single	499.80	50.00	549.80	499.80	15.00	514.80		
	Monthly Full -Time Employees (1)	Family	1,063.34	180.00	1,243.34	1,063.34	64.30	1,127.64		
Career	Linployees	Spouse	1,243.32	30.00	1,273.32	1,097.64	30.00	1,127.64		
Service	Di Waalda Edl Time	Single	249.90	25.00	274.90	249.90	7.50	257.40		
	Bi-Weekly Full -Time Employees <sup>(1)</sup>	Family	531.67	90.00	621.67	531.67	32.15	563.82		
	Employees	Spouse	621.66	15.00	636.66	548.82	15.00	563.82		
	Monthly Full -Time	Single	541.46	8.34	549.80	506.46	8.34	514.80		
"Payalls"	Employees (1,2)	Family	1,213.34	30.00	1,243.34	1,097.64	30.00	1,127.64		
Fayalis	Bi-Weekly Full -Time	Single	270.73	4.17	274.90	253.23	4.17	257.40		
	Employees (1,2)	Family	606.67	15.00	621.67	548.82	15.00	563.82		
COBRA	Monthly (3)	Single	0.00	534.09	534.09	0.00	455.90	455.90		
COBRA	Monthly \	Family	0.00	1,207.82	1,207.82	0.00	1,004.81	1,004.81		
Early	Monthly	Single	0.00	549.80	549.80	0.00	473.12	473.12		
Retirees	Worthly	Family	0.00	1,243.34	1,243.34	0.00	1,044.32	1,044.32		
		(I) One Eligible (5)	0.00	305.82	305.82	0.00	230.52	230.52		
Medicare	Monthly (4)	(II) One Under/Over (6)	0.00	881.80	881.80	0.00	722.16	722.16		
		(III) Both Eligible (7)	0.00	611.64	611.64	0.00	461.04	461.04		
0	verage Dependents	Single	0.00	549.80	549.80	0.00	473.14	473.14		

- (1) Premium contribution for Part-Time Employees is to be calculated as follows:
  - Step 1. State Contribution x FTE% = Calculated State Contribution
  - Step 2. Total Contribution Calculated State Contribution = Employee Contribution
- (2) "Payalls" Includes executive, legislative and judicial branch agencies for employees with enhanced benefits, excluding Spouse Program participants.
- (3) Includes an additional 2% for administrative costs as permitted by federal regulations.
- (4) The actual premium rate for Medicare participants enrolled in an HMO plan may differ from what is presented.
- (5) Single coverage for participant eligible for Medicare Parts A and B.
- (6) Family coverage for two or more participants, if at least one participant is eligible for Medicare Parts A and B.
- (7) Family coverage for two participants and both are eligible for Medicare Parts A and B.
- (8) The employer monthly HSA contribution of \$41.66/single (\$500 annually) and \$83.33/family (\$1,000 annually) is included in the listed employer rates.

# Exhibit XIII Premium Rate Table

#### Effective May 2011 for June 2011 Coverage

(Premium rate change ONLY for COBRA Participants)

Sı	ubscriber Category /	Coverage	PPO/	HMO Stand	dard	PPO/HMO HIHP				
(	Contribution Cycle	Туре	Employer	Enrollee	Total	Employer <sup>(8)</sup>	Enrollee	Total		
	M (1) E !! T	Single	499.80	50.00	549.80	499.80	15.00	514.80		
	Monthly Full -Time Employees <sup>(1)</sup>	Family	1,063.34	180.00	1,243.34	1,063.34	64.30	1,127.64		
Career	Linployees	Spouse	1,243.32	30.00	1,273.32	1,097.64	30.00	1,127.64		
Service	D. W. J. E. W. T.	Single	249.90	25.00	274.90	249.90	7.50	257.40		
	Bi-Weekly Full -Time Employees <sup>(1)</sup>	Family	531.67	90.00	621.67	531.67	32.15	563.82		
	Lilipioyees	Spouse	621.66	15.00	636.66	548.82	15.00	563.82		
	Monthly Full -Time	Single	541.46	8.34	549.80	506.46	8.34	514.80		
"Dovollo"	Employees (1,2)	Family	1,213.34	30.00	1,243.34	1,097.64	30.00	1,127.64		
"Payalls"	Bi-Weekly Full -Time	Single	270.73	4.17	274.90	253.23	4.17	257.40		
	Employees (1,2)	Family	606.67	15.00	621.67	548.82	15.00	563.82		
COBRA	M (1) (3)	Single	0.00	560.80	560.80	0.00	482.60	482.60		
COBRA	Monthly (3)	Family	0.00	1,268.21	1,268.21	0.00	1,065.20	1,065.20		
Early	Monthly	Single	0.00	549.80	549.80	0.00	473.12	473.12		
Retirees	Monthly	Family	0.00	1,243.34	1,243.34	0.00	1,044.32	1,044.32		
		(I) One Eligible (5)	0.00	305.82	305.82	0.00	230.52	230.52		
Medicare	Monthly (4)	(II) One Under/Over (6)	0.00	881.80	881.80	0.00	722.16	722.16		
		(III) Both Eligible (7)	0.00	611.64	611.64	0.00	461.04	461.04		
C	Overage Dependents	Single	0.00	549.80	549.80	0.00	473.14	473.14		

- (1) Premium contribution for Part-Time Employees is to be calculated as follows:
  - Step 1. State Contribution x FTE% = Calculated State Contribution
  - Step 2. Total Contribution Calculated State Contribution = Employee Contribution
- (2) "Payalls" Includes executive, legislative and judicial branch agencies for employees with enhanced benefits, excluding Spouse Program participants.
- $\hbox{(3) Includes an additional $2\%$ for administrative costs as permitted by federal regulations.}$
- (4) The actual premium rate for Medicare participants enrolled in an HMO plan may differ from what is presented.
- (5) Single coverage for participant eligible for Medicare Parts A and B.
- (6) Family coverage for two or more participants, if at least one participant is eligible for Medicare Parts A and B.
- (7) Family coverage for two participants and both are eligible for Medicare Parts A and B.
- (8) The employer monthly HSA contribution of \$41.66/single (\$500 annually) and \$83.33/family (\$1,000 annually) is included in the listed employer rates.

# Exhibit XIV Premium Rate Table

#### Effective July 2011 for August 2011 Coverage

(Premium rate change ONLY for "Spouse Program" Participants)

Sı	ıbscriber Category /	Coverage	PPO/	HMO Stand	dard	PPO/HMO HIHP				
(	Contribution Cycle	Туре	Employer	Enrollee	Total	Employer (8)	Enrollee	Total		
	Marchia E. H. Than	Single	499.80	50.00	549.80	499.80	15.00	514.80		
	Monthly Full -Time Employees (1)	Family	1,063.34	180.00	1,243.34	1,063.34	64.30	1,127.64		
Career	Employees	Spouse	1,213.36	30.00	1,243.36	1,097.64	30.00	1,127.64		
Service	D: W . I . E . II . T'	Single	249.90	25.00	274.90	249.90	7.50	257.40		
	Bi-Weekly Full -Time Employees <sup>(1)</sup>	Family	531.67	90.00	621.67	531.67	32.15	563.82		
	Employees	Spouse	606.68	15.00	621.68	548.82	15.00	563.82		
	Monthly Full -Time	Single	541.46	8.34	549.80	506.46	8.34	514.80		
"Payalls"	Employees (1,2)	Family	1,213.34	30.00	1,243.34	1,097.64	30.00	1,127.64		
rayalis	Bi-Weekly Full -Time	Single	270.73	4.17	274.90	253.23	4.17	257.40		
	Employees (1,2)	Family	606.67	15.00	621.67	548.82	15.00	563.82		
COBRA	Manthh (3)	Single	0.00	560.80	560.80	0.00	482.60	482.60		
COBRA	Monthly (3)	Family	0.00	1,268.21	1,268.21	0.00	1,065.20	1,065.20		
Early	Monthly	Single	0.00	549.80	549.80	0.00	473.12	473.12		
Retirees	Monthly	Family	0.00	1,243.34	1,243.34	0.00	1,044.32	1,044.32		
		(I) One Eligible (5)	0.00	305.82	305.82	0.00	230.52	230.52		
Medicare	Monthly (4)	(II) One Under/Over (6)	0.00	881.80	881.80	0.00	722.16	722.16		
		(III) Both Eligible (7)	0.00	611.64	611.64	0.00	461.04	461.04		
C	verage Dependents	Single	0.00	549.80	549.80	0.00	473.14	473.14		

- (1) Premium contribution for Part-Time Employees is to be calculated as follows:
  - Step 1. State Contribution x FTE% = Calculated State Contribution
  - Step 2. Total Contribution Calculated State Contribution = Employee Contribution
- (2) "Payalls" Includes executive, legislative and judicial branch agencies for employees with enhanced benefits, excluding Spouse Program participants.
- $\hbox{(3) Includes an additional $2\%$ for administrative costs as permitted by federal regulations.}$
- (4) The actual premium rate for Medicare participants enrolled in an HMO plan may differ from what is presented.
- (5) Single coverage for participant eligible for Medicare Parts A and B.
- (6) Family coverage for two or more participants, if at least one participant is eligible for Medicare Parts A and B.
- (7) Family coverage for two participants and both are eligible for Medicare Parts A and B.
- (8) The employer monthly HSA contribution of \$41.66/single (\$500 annually) and \$83.33/family (\$1,000 annually) is included in the listed employer rates.

#### **Exhibit XV**

#### **Abbreviations**

ASO ...... Administrative Services Only

COBRA ...... Consolidated Omnibus Budget Reconciliation Act

**DSGI** ..... Division of State Group Insurance

FTE ..... Full Time Equivalency

FY ..... Fiscal Year (July 1 through June 30)

**HIHP** ...... Health Investor Health Plan (i.e., High Deductible Health Plan)

**HMO** ..... Health Maintenance Organization

HSA ..... Health Savings Account

PBM ..... Pharmacy Benefits Manager

**PPACA** ...... Patient Protection and Affordable Care Act signed into law on March 23,

2010, known as the Federal Health Care Reform

**PPO** ..... Preferred Provider Organization

TPA ...... Third Party Administrator

#### State of Florida DSGI

## Summary of Fiscal Impact to Forecast of Federal Patient Protection Affordable Care Act (PPACA) (In Millions)

			Estimated Annual Fiscal Impact										
						F	FY 2010-11						
Reform	Effective Date	Revenue(R) Expense (E)		<u>July-D</u>	ecembe	_	<u>January-June</u>				FY 2010-11		
		Net	Medical	Drugs	НМО	Total	Medical	Drugs	НМО	Total	Total		
Early retiree medical reinsurance	Jun 2010	R	-	-	-	-	-	-	-	-	- '		
(Illustrative, assumes application is approved and receipts are available through 2013. See Mercer Analysis)		E	-	-	-	-							
	1 0044	Net	-	-	-	-	-	-	-	-	-		
No lifetime dollar maximum	Jan 2011	R	-	-	-	-	1.33	0.11	-	- 1.44	1.44		
		E	_		_								
Restricted annual dollar limits	Jan 2011	Net	-	-	-	-	(1.33)	(0.11)	-	(1.44)	(1.44)		
3. Restricted annual dollar limits	Jan 2011	R			-			-		-	-		
		E Net	-	-	-	-	-	-	-	-	-		
Eliminate preexisting condition limitations for dependent children under 19	Jan 2011	R	-	-	-	-	-	-	-		-		
4. Emilitate preexisting condition initiations for dependent children dider 13	Janzon	E	_	_	-	-	0.28	0.08	0.45	0.81	0.81		
		Net	_	_		_	(0.28)	(0.08)	(0.45)	(0.81)	(0.81)		
5. Patient-centered outcomes research institute fees (\$1 per participant in first	Jan 2012				-			(0.08)	(0.45)	, ,	(0.61)		
year, \$2 in 2nd year, assumes 3rd year is same as 2nd year)		_	-	-	-	-	-	-	-	-	-		
		E	-	-	-	-	-	-	-	-	-		
6. Other page through feed include (Illustration accuman sumulative increase to		Net	-	-	-	-	-	-	-	-	-		
Other pass-through fees include (Illustration assumes cumulative increase to 2014):		R -	-	-	-	-	-	-	-	-	-		
Pharmaceutical industry fees 2.3% excise tax on medical devices	Jan 2011	E Net	-	-	-	-	-	-	-	-	- '		
Health Insurance Industry fees	Jan 2013 Jan 2014	Net	-	-	-	-	-	-	-	-	-		
Extension of coverage for all adult children until age 26	Jan 2011	R	_	_	_				_		_		
7. Extension of coverage for all addit children drittle age 20	Jan 2011	E	_	_	_	-	1.72	0.45	2.69	4.86	4.86		
			_										
Eliminate all preexisting condition limitations	Jan 2014	Net R	-	-	-	-	(1.72)	(0.45)	(2.69)	(4.86)	(4.86)		
o. Eliminate all preexisting condition limitations	Jan 2014	E	_	_	-	-	_	-	-	-	_		
		Net	_	_	-	-	_	_	_	-	_		
9. Free choice vouchers	Jan 2014	R		_	-				_		<del>                                     </del>		
3. Thee choice vouchers	Jan 2014	E	_		_	_	[		_	_	_		
		Net	_	_	_	_	_	_	_	_	_		
10. Shared responsibility "free rider surcharge"	Jan 2014	R	_	_	-	_	_	_	-	-	_		
The state of the s		E	_	_	_	_	_	_	_	_	_		
		Net	_	_	_	_	_	_	_	_	_		
11. Medicaid Expansion and migration into Exchange	Jan 2014	R	-	-	-	_	-	-	-	-	-		
, ,		E	_	_	_	_	_	_	_	_	_		
		Net	_	_	_	-		_	_	_	_		
12. Individual Mandate with federal subsidies	Jan 2014	R		-	-			_	-	-	<del></del>		
	04112014	E	_	_	_	-	_	_	_	_	_		
		Net	_	_	_	_	_	_	_	_	_		
TOTAL		R		_	_			_	-	_	-		
· <del>- · · · -</del>		E	_	_	_	_	3.33	0.64	3.14	7.11	7.11		
		Net	_	_		_	(3.33)	(0.64)	(3.14)	(7.11)	(7.11)		

- (1) Exhibit assumes non-grandfathered status of plans.
- (2) Exhibit based on available information and legislative guidance available as of February 1, 2011.
- (3) Exhibit applies to the State Employees' Group Health Self-Insurance Trust Fund Estimating Conference Package updated December 2010.
- (4) "Net" is defined as Revenue less Expense.
- (5) FY 13-14 The negative expense of \$7.08M associated with Item #11, Medicaid Expansion, from January 2014 to June 2014 uses the assumption that there will be a \$5.62M loss of revenue due to employees exiting the plan (\$4.81M in employer contributions plus \$0.81M in employee contributions) for the illustrated level of decreased enrollment in the plan, resulting in savings of \$1.46M due to medical and pharmacy inflation.
  - FY 14-15 The negative expense of \$14.73M associated with Item #11 for Fiscal Year 2014-15 uses the assumption that there will be a \$11.41M loss of revenue due to employees exiting the plan (\$9.75M in employer contributions plus \$1.66M in employee contributions), resulting in savings of \$3.32M.
- (6) FY 13-14 The expense of \$138.08M associated with Item #12, the Individual Mandate, from January 2014 to June 2014 uses the assumption that increased trust fund revenues will be available to offset the current level of costs (\$104.30M in employer contributions plus \$5.31M in employee contributions) for the illustrated level of increased enrollment in the plan, with the deficit of \$28.47M due to medical and pharmacy inflation.
  - FY 14-15 The expense of \$287.21M associated with Item #12 for Fiscal Year 2014-15 uses the assumption that increased trust fund revenues will be available to offset the current level of costs (\$211.72M in employer contributions plus \$10.79M in employee contributions), resulting in a deficit of \$64.70M.
- (7) The total estimated impact of ERRP from July 2010 through December 2013 is from the DSGI December 2010 Fiscal Outlook. Although the application was approved, funds may be exhausted prior to the December 2013 estimated program end date.
- (8) Report prepared by Mercer Consultants on February 25, 2011, modified by the Division to reflect a change in the assumed collection timing of ERRP subsidies from FY 10-11 to FY 11-12.

#### State of Florida DSGI

## Summary of Fiscal Impact to Forecast of Federal Patient Protection Affordable Care Act (PPACA) (In Millions)

			Estimated Annual Fiscal Impact FY 2011-12								
		Revenue(R)	<u>July-December</u> <u>January-June</u>				FY				
Reform	Date	Expense (E) Net	Medical	Druge	нмо	Total	Medical	Druge	нмо	Total	2011-12 Total
Early retiree medical reinsurance	Jun 2010			- Drugs	-	- I Otal	- Ivieuicai	- Drugs		- IOIAI	-
(Illustrative, assumes application is approved and receipts are available											
through 2013. See Mercer Analysis)		E	(15.30)	(4.12)		(25.56)	(6.92)	(1.87)		(11.57)	
		Net	15.30	4.12	6.14	25.56	6.92	1.87	2.78	11.57	37.13
No lifetime dollar maximum	Jan 2011	R	- 1.38	- 0.12	-	- 1.50	- 1.43	0.13	-	1.56	3.06
		E		-							
Restricted annual dollar limits	Jan 2011	Net R	(1.38)	(0.12)	-	(1.50)	(1.43)	(0.13)	-	(1.56)	(3.06)
3. Restricted annual dollar limits	Jan 2011	E E	-	-	-	-	-	-	-	-	-
		Net	_	_	-	-	_	_	_	_	_
4. Eliminate preexisting condition limitations for dependent children under 19	Jan 2011	R		_				<u> </u>	<u> </u>	_	<del>-</del>
1	Gai. 2011	E	0.28	0.09	0.45	0.82	0.30	0.10	0.48	0.88	1.70
		Net	(0.28)	(0.09)	(0.45)	(0.82)	(0.30)	(0.10)	(0.48)	(0.88)	(1.70)
5. Patient-centered outcomes research institute fees (\$1 per participant in first	Jan 2012	Б	, ,	,	, ,	, ,	, ,	` ′	` ′	, ,	
year, \$2 in 2nd year, assumes 3rd year is same as 2nd year)		R	-	-	-	-	-	-	-	-	-
		E	-	-	-	-	0.03		0.04	0.07	0.07
		Net	-	-	-	-	(0.03)	-	(0.04)	(0.07)	(0.07)
6. Other pass-through fees include (Illustration assumes cumulative increase to		R			_						
2014): Pharmaceutical industry fees	Jan 2011	E	_	_	_	-	-	_	_	_	1 -
2.3% excise tax on medical devices	Jan 2013	_	_	_	_	_	_	_	_	_	-
Health Insurance Industry fees	Jan 2014										
7. Extension of coverage for all adult children until age 26	Jan 2011	R	-	-	-	-				-	-
· ·		E	1.80	0.46	2.69	4.95	1.87	0.48	2.91	5.26	10.21
		Net	(1.80)	(0.46)	(2.69)	(4.95)	(1.87)	(0.48)	(2.91)	(5.26)	(10.21)
8. Eliminate all preexisting condition limitations	Jan 2014	R	-	-	-	-	-	-	-	-	-
		E	-	-	-	-	-	-	-	-	-
		Net	-	-	-	-	-	-	-	-	-
9. Free choice vouchers	Jan 2014		-	-	-	-	-	-	-	-	-
		E	-	-	-	-	-	-	-	-	-
		Net	-	-	-	-	-	-	-	-	-
10. Shared responsibility "free rider surcharge"	Jan 2014	R	-	-	-	-	-	-	-	-	-
		E	-	-	-	-	-	-	-	-	-
AA Madia id Europaino and mismatica into Europaino	I 004.4	Net	-	-	-	-	-	-	-	-	-
11. Medicaid Expansion and migration into Exchange	Jan 2014	1	-	-	-	-	-	-	-	-	-
		E	-	-	-	-	-	-	-	-	-
12. Individual Mandata with fodoral pubaiding	lon 2011	Net	-	-	-	-	-	-	-	-	-
12. Individual Mandate with federal subsidies	Jan 2014	R	-	-	-	-	-	-	-	-	-
		E Net	-	-	-	-	-	_	-	-	<u> </u>
TOTAL		Net R		-	-		-	-	-	-	<del>                                     </del>
101712		E	(11.84)	(3.45)	(3.00)	(18.29)	(3.29)			(3.80)	
		Net	11.84	3.45	3.00	18.29	3.29	1.16	(0.65)	3.80	22.09

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- (6) FY 13-14 The expense of \$138.08M associated with Item #12, the Individual Mandate, from January 2014 to June 2014 uses the assumption that increased trust fund revenues will be available to offset the current level of costs (\$104.30M in employer contributions plus \$5.31M in employee contributions) for the illustrated level of increased enrollment in the plan, with the deficit of \$28.47M due to medical and pharmacy inflation.
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#### State of Florida DSGI

## Summary of Fiscal Impact to Forecast of Federal Patient Protection Affordable Care Act (PPACA) (In Millions)

			Estimated Annual Fiscal Impact								
			FY 2012-13								
	Effective	Revenue(R)		July-D	ecember	•		FY			
Reform	Date	Expense (E)			Ī						2012-13
A. Fash and the constitution and the last terminals	I 0040	Net	Medical	Drugs	НМО	Total	Medical	Drugs	нмо	Total	Total
Early retiree medical reinsurance     What this accounts and and receipts are qualitable.	Jun 2010	R	-	-	-	-	-	-	-	-	-
(Illustrative, assumes application is approved and receipts are available through 2013. See Mercer Analysis)		E	-	-	-	-	-	-	_	_	_
unsagn 20 for eee meree / unayere/		Net	-	_	-	-	-	-	-	-	-
2. No lifetime dollar maximum	Jan 2011	R	-	-	-	-	-	-	-	-	-
		E	1.49	0.13		1.62	1.54	0.15		1.69	3.31
		Net	(1.49)	(0.13)	-	(1.62)	(1.54)	(0.15)	-	(1.69)	(3.31)
Restricted annual dollar limits	Jan 2011	R	-	-	-	-	-	-	-	-	-
		E	-	-	-	-	-	-	-	-	-
		Net	-	-	-	-	-	-	-	-	-
Eliminate preexisting condition limitations for dependent children under 19	Jan 2011	R	0.30	- 0.11	- 0.48	0.89	0.32	0.10	0.53	0.95	1.84
		E						-		-	
Patient-centered outcomes research institute fees (\$1 per participant in first	Jan 2012	Net	(0.30)	(0.11)	(0.48)	(0.89)	(0.32)	(0.10)	(0.53)	(0.95)	(1.84)
year, \$2 in 2nd year, assumes 3rd year is same as 2nd year)	Janzonz	R	_	_	_	_	_	_	_	_	_
,,		E	0.03	-	0.04	0.07	0.06	-	0.08	0.14	0.21
		Net	(0.03)	_	(0.04)	(0.07)	(0.06)	-	(0.08)	(0.14)	(0.21)
6. Other pass-through fees include (Illustration assumes cumulative increase to		R									
2014):			-	-	-	-	-	-	-	-	-
Pharmaceutical industry fees	Jan 2011	E	-	-	-	-	-	-	-	-	-
2.3% excise tax on medical devices  Health Insurance Industry fees	Jan 2013 Jan 2014	Net	-	-	-	-	-	-	-	-	-
Extension of coverage for all adult children until age 26	Jan 2014 Jan 2011	R		_						_	<u> </u>
7. Extension of coverage for all addit children drill age 20	Janzon	E	1.94	0.50	2.90	5.34	2.01	0.52	3.15	5.68	11.02
		Net	(1.94)	(0.50)	(2.90)	(5.34)	(2.01)	(0.52)	(3.15)	(5.68)	(11.02)
Eliminate all preexisting condition limitations	Jan 2014	R	(1.54)	(0.50)	(2.90)	(3.34)	(2.01)	(0.52)	(3.13)	(3.00)	(11.02)
of Emiliate an producting container miniations	04.1.2011	E	_	_	_	_	_	_	_	_	_
		Net	-	-	-	-	-	-	-	-	_
9. Free choice vouchers	Jan 2014	R	-	-	-	-	-	-	-	-	-
		E	-	-	-	-	-	-	-	-	-
		Net	-	-	-	-	-	-	-	-	-
10. Shared responsibility "free rider surcharge"	Jan 2014	R	-	-	-	-	-	-	-	-	-
		E	-	-	-	-	-	-	-	-	-
		Net	-	-	-	-	-	-	-	-	-
11. Medicaid Expansion and migration into Exchange	Jan 2014	R	-	-	-	-	-	-	-	-	-
		E	-	-	-	-	-	-	-	-	-
		Net	-	-	-	-	-	-	-	-	-
12. Individual Mandate with federal subsidies	Jan 2014	R -	-	-	-	-	-	-	-	-	-
		E	-	-	-	-	-	-	-	-	-
TOTAL		Net R	-	-	-	<u> </u>	-	-	-	-	-
IOIAL		E	3.76	0.74	3.42	7.92	3.93	0.77	3.76	8.46	16.38
		Net	(3.76)		(3.42)	(7.92)	(3.93)	(0.77)		(8.46)	(16.38)

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## Summary of Fiscal Impact to Forecast of Federal Patient Protection Affordable Care Act (PPACA) (In Millions)

			Estimated Annual Fiscal Impact								
	1	1	FY 2013-14						ı		
Reform		Revenue(R) Expense (E)		July-De	ecember			<u>January-June</u>			
	Date	Net	Medical	Drugs	нмо	Total	Medical	Drugs	нмо	Total	2013-14 Total
Early retiree medical reinsurance	Jun 2010	R	-	-	-	-	-	-	-	-	-
(Illustrative, assumes application is approved and receipts are available		E	_	_	_	_	_	_	_	_	_
through 2013. See Mercer Analysis)		Net					_	_	_	_	_
2. No lifetime dollar maximum	Jan 2011	R	-	-	-	-	-	-	-	-	-
		E	1.61	0.14		1.75	1.68	0.14		1.82	3.57
		Net	(1.61)	(0.14)	-	(1.75)	(1.68)	(0.14)	-	(1.82)	(3.57)
Restricted annual dollar limits	Jan 2011	R	-	-	-	-	-	-	-	-	-
		E	-	-	-	-	-	-	-	-	-
Eliminate preexisting condition limitations for dependent children under 19	I 0044	Net	-	-	-	-	-	-	-	-	-
4. Eliminate preexisting condition limitations for dependent children under 19	Jan 2011	R E	- 0.33	- 0.11	- 0.52	- 0.96	0.34	- 0.11	- 0.57	1.02	- 1.98
		⊢ Net	(0.33)	(0.11)	(0.52)	(0.96)	(0.34)	(0.11)	(0.57)	(1.02)	(1.98)
Patient-centered outcomes research institute fees (\$1 per participant in first	Jan 2012		(0.33)	(0.11)	(0.32)	(0.30)	(0.54)	(0.11)	(0.51)	(1.02)	(1.30)
year, \$2 in 2nd year, assumes 3rd year is same as 2nd year)		R	-	-	-	-	-	-	-	-	-
		Е	0.06		0.08	0.14	0.06		0.08	0.14	0.28
		Net	(0.06)	-	(80.0)	(0.14)	(0.06)	-	(0.08)	(0.14)	(0.28)
6. Other pass-through fees include (Illustration assumes cumulative increase to											
2014): Pharmaceutical industry fees	Jan 2011	R	_	_	_	_	_	_	_	_	_
2.3% excise tax on medical devices	Jan 2013	E	-	_	-	_	7.25	1.87	11.29	20.41	20.41
Health Insurance Industry fees	Jan 2014	Net	_	_	_	_	(7.25)		(11.29)	(20.41)	(20.41)
7. Extension of coverage for all adult children until age 26	Jan 2011	R	-	-	-	-	( -/	( - /	, ,	-	-
, , , , , , , , , , , , , , , , , , ,		Е	2.09	0.54	3.14	5.77	2.09	0.64	3.40	6.13	11.90
		Net	(2.09)	(0.54)	(3.14)	(5.77)	(2.09)	(0.64)	(3.40)	(6.13)	(11.90)
Eliminate all preexisting condition limitations	Jan 2014	R	-	-	-	-	-	-	-	-	-
		E	-	-	-	-	0.69	0.21	1.13	2.03	2.03
		Net	-	-	-	-	(0.69)	(0.21)	(1.13)	(2.03)	(2.03)
9. Free choice vouchers	Jan 2014	R	-	-	-	-	-	-	-	-	-
		E	-	-	-	-	-	-	-	-	-
10. Shared responsibility "free rider surcharge"	Jan 2014	Net	-	-	-	-	-	-	-	-	-
10. Shared responsibility free rider surcharge	Jan 2014	R E	-	_	-	-	_	_	-	_	-
		⊢ Net	_	_		-	_	_	_	_	I -
11. Medicaid Expansion and migration into Exchange	Jan 2014	R	-	-	-		(1.98)	(0.60)	(3.04)	(5.62)	(5.62)
, , , , , , , , , , , , , , , , , , , ,		E	-	-	-	-	(2.50)	, ,	(3.83)	(7.08)	(7.08)
		Net	-	_	-	_	0.52	0.15	0.79	1.46	1.46
12. Individual Mandate with federal subsidies	Jan 2014	R	-	-	-	-	38.61	11.54	59.46	109.61	109.61
		Е	-	-	-	-	48.64	14.53	74.91	138.08	138.08
		Net	-	-	-	-	(10.03)	(2.99)	(15.45)	(28.47)	(28.47)
TOTAL		R	-	-	-	-	36.63	10.94	56.42	103.99	103.99
		E	4.09	0.79	3.74	8.62	58.25	16.75	87.55	162.55	171.17
		Net	(4.09)	(0.79)	(3.74)	(8.62)	(21.62)	(5.81)	(31.13)	(58.56)	(67.18)

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State of Florida DSGI

### Summary of Fiscal Impact to Forecast of Federal Patient Protection Affordable Care Act (PPACA) (In Millions)

			Estimated Annual Fiscal Impact									
		FY 2014-15										
Reform		Revenue(R) Expense (E)		July-D	ecember		<u>January-June</u>				FY 2014-15	FY 2010-11 through FY 2014-15
		Net	Medical	Drugs	НМО	Total	Medical	Drugs	НМО	Total	Total	Grand Total
Early retiree medical reinsurance      What retire a construction is a grant and an algorithm and a said to a construct and a said to a construct a construct a construct a construct a said to a construct a c	Jun 2010	R	-	-	-	-	-	-	-	-	-	-
(Illustrative, assumes application is approved and receipts are available through 2013. See Mercer Analysis)		Е	-	-	-	-	-	-	-	-	-	(37.13)
anough 2070. Oct morou / maryoto)		Net					-	-	-	-	-	37.13
No lifetime dollar maximum	Jan 2011	R	-	-	-	-	-	-	-	-	-	
		E	1.74	0.15		1.89	1.81	0.16		1.97	3.86	15.24
Restricted annual dollar limits	Jan 2011	Net R	(1.74)	(0.15)	-	(1.89)	(1.81)	(0.16)	-	(1.97)	(3.86)	(15.24)
3. Restricted arrival dollar limits	Jan 2011	F E	-	-	-	_	_	-	_	_	-	-
		Net	_	_	_	_	_	_	_	_	_	-
4. Eliminate preexisting condition limitations for dependent children under 19	Jan 2011	R	-	-	-	-	-	-	-	-	-	-
		Е	0.35	0.12	0.57	1.04	0.37	0.12	0.60	1.09	2.13	8.46
		Net	(0.35)	(0.12)	(0.57)	(1.04)	(0.37)	(0.12)	(0.60)	(1.09)	(2.13)	(8.46)
5. Patient-centered outcomes research institute fees (\$1 per participant in first	Jan 2012	R										
year, \$2 in 2nd year, assumes 3rd year is same as 2nd year)		Е	0.06	-	0.08	0.14	0.06	-	0.08	0.14	0.28	0.84
		Net	(0.06)		(0.08)	(0.14)	(0.06)		(0.08)	(0.14)	(0.28)	(0.84)
Other pass-through fees include (Illustration assumes cumulative increase		1401	(0.00)		(0.00)	(0.1.)	(0.00)		(0.00)	(0.11)	(0.20)	(6.6.)
to 2014):												
Pharmaceutical industry fees	Jan 2011	R	-	-	-	-	-	-	-	-	-	-
2.3% excise tax on medical devices	Jan 2013	E	7.38	1.90	11.49	20.77	7.83	2.02	12.20	22.05	42.82	63.23
Health Insurance Industry fees	Jan 2014	Net R	(7.38)	(1.90)	(11.49)	(20.77)	(7.83)	(2.02)	(12.20)	(22.05)	(42.82)	(63.23)
7. Extension of coverage for all adult children until age 26	Jan 2011	E E	2.22	0.59	3.42	6.23	2.36	0.63	3.64	6.63	- 12.86	- 50.85
		⊢ Net	(2.22)	(0.59)	(3.42)	(6.23)	(2.36)	(0.63)	(3.64)	(6.63)	(12.86)	(50.85)
Eliminate all preexisting condition limitations	Jan 2014	R	(2.22)	(0.53)	(3.42)	(0.23)	(2.30)	(0.03)	(3.04)	(0.03)	(12.00)	(50.65)
· · · · · · · · · · · · · · · · ·		E	0.71	0.22	1.16	2.09	0.75	0.23	1.23	2.21	4.30	6.33
		Net	(0.71)	(0.22)	(1.16)	(2.09)	(0.75)	(0.23)	(1.23)	(2.21)	(4.30)	(6.33)
9. Free choice vouchers	Jan 2014	R	-	-	-	-	-	-	-	-	-	-
		E	-	-	-	-	-	-	-	-	-	-
		Net	-	-	-	-	-	-	-	-	•	-
10. Shared responsibility "free rider surcharge"	Jan 2014	R	-	-	-	-	-	-	-	-	-	-
		E Net	-	-	-	-	-	-	-	-	-	-
11. Medicaid Expansion and migration into Exchange	Jan 2014	R	(1.98)	(0.60)	(3.04)	(5.62)	(2.04)	(0.62)	(3.13)	(5.79)	(11.41)	(17.03)
Modicald Expansion and migration into Exchange	0411 2014	E	(2.50)	(0.75)	(3.83)	(7.08)	(2.70)	(0.81)	(4.14)	(7.65)	(14.73)	(21.81)
		Net	0.52	0.15	0.79	1.46	0.66	0.19	1.01	1.86	3.32	4.78
12. Individual Mandate with federal subsidies	Jan 2014	R	38.61	11.54	59.46	109.61	39.77	11.89	61.24	112.90	222.51	332.12
		E	48.64	14.53	74.91	138.08	52.54	15.69	80.90	149.13	287.21	425.29
		Net	(10.03)	(2.99)	(15.45)	(28.47)	(12.77)	(3.80)	(19.66)	(36.23)	(64.70)	(93.17)
TOTAL		R	36.63	10.94	56.42	103.99	37.73	11.27	58.11	107.11	211.10	315.09
		Е	58.60	16.76	87.80	163.16	63.02	18.04	94.51	175.57	338.73	511.30
		Net	(21.97)	(5.82)	(31.38)	(59.17)	(25.29)	(6.77)	(36.40)	(68.46)	(127.63)	(196.21)

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# State Employees' Group Health Self-Insurance Trust Fund Patient Protection and Affordable Care Act (PPACA) Summary of Reforms and Estimated Fiscal Impact to the Trust Fund (Mercer Report Dated February 25, 2011 Used as Base for Fiscal Impact)

#### **OVERVIEW**

The recently enacted Patient Protection and Affordable Care Act (PPACA), as amended by the Health Care and Education Reconciliation Act (HCERA), creates a broad array of issues for employers' health benefit programs and the US health care system. New mandates and changes imposed by the law affect the design, cost, tax treatment, administration, reporting and disclosure of health benefit programs. Some new provisions go into effect this year; many will not take effect for several years.

PPACA imposes new mandates or standards for individual and group health coverage. With a few exceptions, all insured and self-insured group health plans will face a first round of coverage and cost-sharing mandates for plan years beginning on or after six months after March 23, 2010.

# SUMMARY OF REFORMS WITH TOTAL FISCAL IMPACT FOR THE STATE EMPLOYEES' HEALTH INSURANCE PROGRAM (PROGRAM), FY 10-11 THROUGH FY 14-15

## 1. Early Retiree Reinsurance Program (ERRP) – Interim Final Regulations Effective on June 1, 2010

- Effective June 2010
- Total estimated fiscal impact for the Program Reduction of expenses in the amount of \$37.13 million. (Estimated fiscal impact modified by Division of State Group Insurance to reflect actual FY 10-11 experience through November 2010 and limited expected availability of funds through 2011.)

Provides reimbursement to participating employment-based plans for a portion of the cost of health benefits for early retirees and their spouses, surviving spouses and dependents.

- 80% Reimbursement for certain claims between \$15,000 and \$90,000 (with those amounts being indexed for plan years starting on or after October 1, 2011).
- Claims must be for participants ages 55-64 who are not Medicare eligible.
- Payments must be used to lower plan costs (i.e. offsetting future premium increases for all members).

#### 2. No lifetime dollar maximum

- Effective January 1, 2011
- Total estimated fiscal impact for the Program Increase in expenses in the amount of \$15.24 million.

Plans cannot impose any lifetime dollar limits on benefits.

 Plans may place lifetime limits per beneficiary on specific covered benefits other than "essential health benefits," if the limits are otherwise permitted by federal or state law.

- Essential health benefits include items and services in the below listed categories:
  - ambulatory patient services; emergency services; hospital, maternity and newborn care; mental health and substance use disorders, including behavioral health treatment; prescription drugs; rehabilitative services and devices; laboratory services; preventive and wellness services; chronic disease management; and pediatric services, including oral and vision care.

#### 3. Restricted annual dollar limits

- Effective January 1, 2011
- No estimated fiscal impact to Trust Fund

All insured and self-insured group health plans will face new rules on annual dollar limits. For plan years until 2014, "restricted" annual dollar limits may apply to "essential health benefits" (discussed above).

- The maximum annual dollar limit that may be imposed on essential health benefits until 2014 are:
  - \$750,000 for the plan year beginning on or after September 23, 2010 but before September 23, 2011.
  - \$1,250,000 for the plan year beginning on or after September 23, 2011 but before September 23, 2012.
  - \$2,000,000 for the plan year beginning on or after September 23, 2012 but before January 1, 2014. (No annual dollar limits permitted for plan years on or after January 1, 2014.)
- Plans may impose annual per-beneficiary limits on non-essential benefits.

# 4. Elimination of preexisting condition for subscribers or dependents under 19 – Interim Final Regulations Issued on June 28, 2010

- Effective January 1, 2011
- Total estimated fiscal impact for the Program Increase in expenses in the amount of \$8.46 million.

Before 2014, insured and self-insured plans cannot impose preexisting condition exclusions for subscribers and dependents under age 19.

- Until 2014, employers may continue to adopt or retain preexisting condition exclusions for participants ages 19 and older.
- A general ban is effective for all members for plan years starting in 2014. See #8 below.

#### 5. Patient-centered outcome research institute fees

- Effective October 1, 2012 (Federal Fiscal Year)
- Total estimated fiscal impact for the Program Increase in expenses in the amount of \$0.84 million.

#### **PPACA Summary of Reforms and Estimated Fiscal Impact**

- State of Florida Employees' Group Health Insurance Program Beginning December 2012, \$1 per participant in 1<sup>st</sup> year.
- \$2 in subsequent years, from 2013 thru 2019 (sunset after 2019).

#### 6. Other pass-through fees included

- Effective January 1, 2014
- Total estimated fiscal impact for the Program Increase in expenses in the amount of \$62.23 million.

Fees include pharmaceutical industry fees; 2.3% excise tax on medical devices and health insurance industry fees.

## 7. Extension of coverage for all adult children until age 26 – Interim Final Regulations Issued on July 12, 2010

- Effective January 1, 2011
- Total estimated fiscal impact for the Program Increase in expenses in the amount of \$50.85 million.

Applies to fully-insured and self-insured group health plans providing dependent coverage.

- Coverage available until the child's 26th birthday.
- The mandate applies regardless of the typical criteria for dependent status under the tax law, such as whether the adult child resides with the covered employee or is the employee's tax dependent, a full- or part-time student, or married or unmarried.
- Plans may extend coverage beyond the child's 26th birthday for example, until
  the end of the plan year in which the child turns 26. However, plans will not have
  to extend coverage to an adult child's dependents.
- No special-enrollment period required; eligible dependents need not be enrolled until the plan's next open enrollment.

# 8. Eliminate all preexisting condition limitations – Interim Final Regulations Issued on July 30, 2010

- Effective January 1, 2014
- Total estimated fiscal impact for the Program Increase in expenses in the amount of \$6.33 million.

Preexisting condition limitation exclusion applies to all plan participants regardless of age as of January 1, 2014. See #4 above.

#### 9. Free-choice vouchers (FCVs)

- Effective January 1, 2014
- No estimated fiscal impact to Trust Fund.

Employers must offer vouchers to employees with household incomes at or below 400% of the Federal Poverty Level (FPL) if their contribution for employer-sponsored coverage would be 8% to 9.8% of household income. (Note: The highest EE premium share is

#### **PPACA Summary of Reforms and Estimated Fiscal Impact**

standard family, \$180/month; SOF would not give an FCV unless the person's household income is below \$27,000).

- Voucher amount is equal to highest (percentage) employer contribution to any of its own plans (HIHP ER premium; coverage level depends on the level the member is enrolling in single/family).
- Vouchers provided for purchasing exchange-based coverage; employees can keep any excess amounts.
- Who receives vouchers? Employees who opt out of employer-sponsored coverage, have household income below 400% FPL, and would need to spend 8% or more of household income to participate in the employer plan.
- FCVs are designed to help employees buy coverage on the exchange and to shield employers from mandated penalties (\$3,000 per person if no FCV).

#### 10. Shared responsibility "free rider surcharge"

- Effective January 1, 2014
- No estimated fiscal impact to Trust Fund.

Individuals who fail to maintain coverage will face a penalty (lesser of these amounts):

- National average premium for the year, or the greater of
- 1% AGI or \$95 in 2014; 2% AGI or \$325 in 2015; 2.5% AGI or \$695 in 2016; indexed thereafter.

#### 11. Medicaid expansion and migration to Exchange

- Effective January 1, 2014
- Total estimated fiscal impact for the Program Net savings in the amount of \$4.78 million.

Medicaid expanded to up to 133% of Federal Poverty Level (FPL), effective 2014 when the State-exchanges come online.

#### 12. Individual mandate with federal subsidies

- Effective January 1, 2014
- Total estimated fiscal impact for the Program Net cost in the amount of \$93.17 million.
  - Subsidies available to anyone on an exchange plan with household income 133-400% FPL (person cannot be Medicaid eligible).
  - Income level must be verifiable for the two years prior to the current calendar year
    of coverage (example, eligibility for affordability assistance for 2016 is based on
    household income for 2014).
  - Assistance in the form of premium credits will be provided for exchangeparticipants on a sliding scale based on household income. Premium credits will be paid directly to the insurer; individuals will be required to pay insurers any remaining premium amount.
  - Employer penalties = \$3,000 per year for each employee enrolled in the exchange and receiving subsidy.

#### **PPACA Summary of Reforms and Estimated Fiscal Impact**

- Career Service employer premium contribution calculations:
  - o **Individual** Coverage Effective December 2010 for January 2011 coverage

Total annual \$499.80\* 12 = \$5,997.60Penalty = \$3,000.00Difference = \$2,997.60

o Family Coverage – Effective July 2010 for August 2010 coverage

Total annual \$1,004.14 \* 12 = \$12,049.68 Penalty = \$ 3,000.00 Difference = \$ 9,049.68

o Family Coverage – Effective December 2010 for January 2011 coverage

Total annual \$1,243.32 \* 12 = \$14,919.84 Penalty = \$ 3,000.00 Difference = \$11,919.84

#### **OTHER REFORM ITEM**

• Minimum medical loss ratios

Effective January 1, 2011 for insured plans.