

Self-Insurance Estimating Conference
State Employees' Group Health Self-Insurance Trust Fund
Executive Summary

January 8, 2016

The outlook for the State Employees' Health Insurance Trust Fund has been revised to reflect enrollment activity through November 2015, final Open Enrollment results for Plan Year 2016, revenue and expense activity through October 2015, reduced fully-insured Medicare II premiums, delays of the Affordable Care Act's excise tax provision, and the inclusion of projections for FY 2020-21. The fund is expected to remain solvent through FY 2017-18, with increases in ending cash balances for all years of the forecast period when compared to the August outlook.

For FY 2015-16, the ending cash balance increased from \$513.4 million to \$535.5 million; for FY 2016-17, the ending cash balance increased from \$328.9 million to \$379.0 million; and for FY 2017-18, the ending cash balance increased from -\$76.1 million to \$3.0 million. The outlook for subsequent years shows that expenses are expected to exceed revenues by an amount that generates a negative cash flow of -\$636.0 million in FY 2018-19, -\$955.5 million in FY 2019-20, and -\$1,322.6 million in FY 2020-21.

Enrollment projections were updated to reflect actual monthly enrollment activity through November 2015 as well as Open Enrollment for the 2016 Plan Year. During 2016 Open Enrollment, 133,727 (85.8%) of eligible Active Non-OPS employees elected coverage, of which 41.3% selected a PPO plan and 58.7% selected an HMO plan. During Open Enrollment, 4,451 (32.4%) of eligible OPS employees elected coverage, of which 46.3% selected a PPO plan and 53.7% selected an HMO plan. Subscriber migration patterns indicate continuing change in the enrollment distribution between the PPO plans and the HMO plans. Results from the past five Open Enrollments show that active subscriber membership in the PPO plans decreased an average of 57 subscribers per year, while HMO membership increased an average of 2,448 subscribers per year. Overall enrollment projections across all years of the forecast reflect an average decrease of 0.7% in PPO plans and an average increase of 2.6% in HMO plans. Enrollment projections for FY 2015-16 through FY 2020-21 reflect increasing enrollment trends in the 'Active' coverage category, with average annual growth of 1.2%. The Early Retiree coverage categories are projected to decrease an average of 0.3% annually, while Medicare enrollment is projected to increase an average of 0.1% annually. As of November 2015, approximately 2,727 members, or 1.6% of total enrollment, are currently enrolled in a High Deductible Health Plan. Active employees account for 96.7% of these subscribers, of which 51.3% are participating in the integrated state-sponsored Health Savings Account offering.

The outlook reflects a combined increase of \$5.2 million in total revenue. Insurance premiums remain relatively flat because while total enrollment is projected to increase, coverage for some enrollees is projected to shift from family to single coverage. Combined PPO and HMO plan TPA Refunds decreased \$8.98 million across all years due to lower projected overpaid claims activity. Pharmacy Rebates increased a combined total of \$21.6 million due to higher projected claims and rebates. Medicare Subsidy estimates also reflect a decrease of \$10.7 million across all years due to lower projected per member subsidies.

For FY 2015-16 through FY 2020-21, the outlook reflects a combined decrease of \$98.1 million in PPO medical claims and a decrease of \$27.2 million in self-insured HMO claims. The net decrease in

medical claims across all years of the forecast, compared to the August outlook, is \$125.3 million due to resetting the base and to enrollment shifts from the PPO to HMO plans. A decrease of \$4.9 million in fully-insured premium payments across all years of the forecast is due to revised Medicare rates of one fully-insured vendor and to shifts in enrollment categories. Changes to the pharmacy claims costs are projected to produce an increase of \$13.6 million across all years due to higher projected claims experience. Other Expenses reflects a decrease of \$6.7 million across all years to account for the Congressional legislation delaying implementation of the Affordable Care Act's federal excise tax provision on employer-sponsored health plans.

Special Notes

Reports on the Financial Outlook prepared from December 2010 through June 2012 included estimates of the impact of the Patient Protection and Affordable Care Act (PPACA) on the Trust Fund. Beginning with the August 2012 report, the impact of PPACA was addressed separately to mirror the treatment used by the Social Services Estimating Conference for Medicaid and KidCare, and were described in a separate report titled *Impact on the State Health Insurance Program of the Patient Protection and Affordable Care Act*. Beginning with the December 2013 forecast, the impacts of the provisions of PPACA have been incorporated into this single report rather than a separate report. For this reason, the reader is urged to note that direct comparisons of conference reports over the time frame referenced in this paragraph will need to be approached with this in mind.

State Employees' Group Health Self-Insurance Trust Fund

Report on the Financial Outlook

For the Fiscal Years Ending June 30, 2016 through June 30, 2021

**Adopted January 8, 2016, by the
Self-Insurance Estimating Conference**

Prepared by: Florida Department of Management Services
Division of State Group Insurance

STATE EMPLOYEES' GROUP HEALTH SELF-INSURANCE TRUST FUND

EXECUTIVE SUMMARY

The Florida Division of State Group Insurance (the Division) prepared a financial Outlook for the State Employees' Group Health Self-Insurance Trust Fund (Trust Fund) for the fiscal years (FY) ending June 30, 2016, through June 30, 2021. The outlook is prepared to assist in the State's planning and budgeting in accordance with Section 216.136(9), *Florida Statutes*. The outlook is prepared using cash basis methods and modeling based on the healthcare benefit and funding design currently in place.

The outlook builds on the financial and enrollment data presented in the August 2015 Report on the Financial Outlook with adjustments for the following:

1. Actual enrollment through November 2015.
2. Final Open Enrollment Results for Plan Year 2016.
3. Actual revenues and expenses through October 2015.
4. Reduced fully-insured Medicare II premiums.
5. Inclusion of projections for FY 2020-2021.
6. Delay of the Affordable Care Act's excise tax provision.

The current outlook reflects decreases in revenues projected for FY 2015-16 and FY 2016-17, and revenue increases are reflected in FY 2017-18 through FY 2019-20, compared to the August outlook. Expenses have been reduced in all years of the forecast, compared to the prior report. Ending cash balances also reflect increases in all years. In the prior outlook, the Trust Fund was expected to remain solvent through FY 2016-17, however this report reflects that solvency is now expected through FY 2017-18 due to the reduced expense forecasts.

The forecasted ending cash balance for FY 2015-16 is adjusted from \$513.4 million to \$535.5 million, and the previously reported operating deficit of \$9.2 million increased to an operating gain of \$12.9 million. For FY 2016-17 the forecasted ending cash balance is adjusted from \$328.9 million to \$379.0 million, and the estimated operating loss is decreased from \$184.5 million to \$156.5 million. For FY 2017-18 the forecasted ending cash balance is adjusted from a deficit of \$76.1 million to a surplus of \$3.0 million, and the operating loss is reduced from \$405.0 million to \$376.0 million. Ending cash balance deficits and operating losses are projected for FY 2018-19, FY 2019-20, and FY 2020-21.

Below is a summary of the outlook for the Trust Fund through FY 2020-21.

	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
	Estimate	Estimate	Estimate	Estimate	Estimate	Estimate
Beginning Cash Balance	\$ 522.6	\$ 535.5	\$ 379.0	\$ 3.0 ⁽²⁾	\$ 0.0 ⁽²⁾	\$ 0.0
Total Revenues	\$ 2,218.3	\$ 2,253.6	\$ 2,277.5	\$ 2,303.8	\$ 2,333.2	\$ 2,369.1
Total Expenses	\$ 2,205.4	\$ 2,410.1	\$ 2,653.5	\$ 2,942.8	\$ 3,288.7	\$ 3,691.6
Operating Gain/(Loss)	\$ 12.9	\$ (156.5)	\$ (376.0)	\$ (639.0)	\$ (955.5)	\$ (1,322.5)
Ending Cash Balance	\$ 535.5	\$ 379.0	\$ 3.0	\$ (636.0)	\$ (955.5)	\$ (1,322.5)

Note: Assumes no carry forward of negative cash balance from FY 2017-18 to FY 2018-19.

Enrollment

During the 2016 Open Enrollment, approximately 155,835 Active (Non-OPS) employees were offered coverage during the 2016 Open Enrollment, compared to 154,480 who were offered covered coverage during 2015 Open Enrollment. This includes 13,725 employees paid from Other Personal Services (OPS) funds, compared to 14,201 offered covered coverage during 2015 Open Enrollment. Final Open Enrollment reflects that 133,727 (85.8%) of the eligible Active (Non-OPS) employees elected coverage; of which 53,319 (39.9%) enrolled in individual coverage; 74,655 (55.8%) enrolled in Family coverage; and 5,753 (4.3%) enrolled in Spouse coverage. Active (Non-OPS) enrollment in PPO plans was 41.3% and 58.7% enrolled in HMO plans.

Final Open Enrollment reflects that 4,451 (32.4%) of the eligible OPS employees elected coverage of which 2,955 (66.4%) enrolled in individual coverage; 1,468 (33.0%) enrolled in Family coverage; and 28 (0.6%) enrolled in Spouse coverage. OPS enrollment in PPO plans was 46.3% and 53.7% enrolled in HMO plans.

Results from the past five Open Enrollments, show that active subscriber membership in the PPO plans decreased an average of 57 subscribers annually and HMO membership increased an average of 2,448 subscribers; the annual net change was an average increase of 2,391 (1.8%) new active subscribers. Subscriber migration patterns indicate continuing change in the enrollment distribution between the PPO plans and the HMO plans.

Open Enrollment results for 2016, combined with updated enrollment activity through November 2015, reflect active member growth is projected to increase 1.2% annually, compared to 1.4% reported in August. Early retiree enrollment is projected to decrease 0.3% annually and Medicare enrollment reflected an annual average increase of 0.5% compared to 0.1% as reported in the prior report. PPO plans reflect an average annual decrease of 0.7% year over year, as compared to 0.6% reported in August; and, HMO plans reflect an average annual increase of 2.6%, compared to 2.5% reported in the prior report.

As of November 2015, approximately 2,727 members, or 1.6% of total enrollment, are currently enrolled in a High Deductible Health Plan (HDHP). Active employees account for 96.7% of these subscribers, of which 51.3% are participating in the integrated state-sponsored Health Savings Account (HSA) offering.

As of November 2015, 27,094, or 16.2% of eligible employees opted out of enrollment in the Program; 36.8% of those were employees in Other Personal Services positions.

REVENUE

Total Revenue changes in this outlook are minor, with a combined increase of \$5.2 million across all years of the outlook. Insurance premiums remain relatively flat due to shifts in enrollment from family to single coverage, despite increases in total enrollment. Combined PPO and HMO plan TPA Refunds decreased \$8.9 million across all years due to lower projected overpaid claims activity. Pharmacy Rebates increased a combined total of \$21.6 million due to higher projected claims and rebates. Combined Medicare Subsidy estimates also reflect decreases of \$10.7 million, due to lower projected per member subsidies.

SPEND

FY 2015-16 through 2019-20 of this forecast reflect a combined decrease of \$98.1 million in PPO medical claims and a decrease of \$27.2 million in self-insured HMO medical claims. The net decrease in medical claims across all years of the forecast, compared to the August report, is \$125.3 million due to resetting the base and enrollment shifts from the PPO to HMO plans. A decrease of \$4.9 million in fully-insured premium payments reflected across all years of the forecast, compared to the prior projections, is due to revised Medicare rates of one fully-insured vendor and shifts in enrollment categories. Pharmacy claims costs are projected at a combined increase of \$13.6 million across all years compared to the August forecast, due to higher projected claims experience. Other Expenses reflect a combined decrease of \$6.7 million across all years. This reduction is due to forecast changes of expenses related to The Affordable Care Act. Final guidance for Transitional Reinsurance fee payment due dates and amounts, and Congressional legislation to delay implementation of The Affordable Care Act's federal excise tax provision on employer-sponsored health plans, resulted in decreases in the Other Expense category compared to the previous report.

STATE EMPLOYEES' GROUP HEALTH SELF-INSURANCE TRUST FUND

Growth factors used to develop PPO medical claims costs in this outlook are reflected below:

PPO MEDICAL								
Industry Range for CYs 2015-16: 3.0% - 7.8%		FY 15-16		FY 16-17	FY 17-18	FY 18-19	FY 19-20	FY 20-21
	Applied	Actual YTD + Projected	Applied	Applied	Applied	Applied	Applied	Applied
August 2015 Conference	6.0%	n/a	6.5%	7.0%	7.5%	8.0%	n/a	
January 2016 Conference	6.0%	4.6%	6.0%	6.5%	7.0%	7.5%	8.0%	

Growth factors used to develop HMO medical claims costs in this outlook are reflected below:

HMO MEDICAL								
Industry Range for CYs 2015-16: 3.0% - 7.8%		FY 15-16		FY 16-17	FY 17-18	FY 18-19	FY 19-20	FY 20-21
	Applied	Actual YTD + Projected	Applied	Applied	Applied	Applied	Applied	Applied
August 2015 Conference	6.5%	n/a	7.0%	7.5%	8.0%	8.5%	n/a	
January 2016 Conference	6.5%	5.9%	6.5%	7.0%	7.5%	8.0%	8.5%	

Growth factors used to develop the PPO and HMO pharmacy claims costs in this outlook are reflected below:

PPO PHARMACY								
Industry Range for CYs 2015-16: 8.6% - 11.3%		FY 15-16		FY 16-17	FY 17-18	FY 18-19	FY 19-20	FY 20-21
	Applied	Actual YTD + Projected	Applied	Applied	Applied	Applied	Applied	Applied
August 2015 Conference	0.5%	n/a	13.3%	14.8%	14.8%	14.8%	n/a	
January 2016 Conference	-2.1%	-4.9%	13.1%	15.9%	16.2%	17.2%	17.2%	

HMO PHARMACY								
Industry Range for CYs 2015-16: 8.6% - 11.3%		FY 15-16		FY 16-17	FY 17-18	FY 18-19	FY 19-20	FY 20-21
	Applied	Actual YTD + Projected	Applied	Applied	Applied	Applied	Applied	Applied
August 2015 Conference	-3.8%	n/a	9.6%	14.3%	14.2%	13.4%	n/a	
January 2016 Conference	-1.9%	-5.2%	14.6%	16.2%	16.2%	17.2%	17.2%	

Growth factors used to develop HMO fully-insured premiums in this outlook are reflected below:

FULLY INSURED HMO PREMIUM PAYMENTS								
Industry Range for CYs 2015-16: 4.1% - 6.2%		CY 2015	CY 2016	CY 2017	CY 2018	CY 2019	CY 2020	CY 2021
August 2015 Conference	3.6%*	6.0%	6.5%	7.0%	7.5%	7.5%	7.5%	
January 2016 Conference	3.6%*	4.7%*	6.0%	6.5%	7.0%	7.5%	8.0%	

*Actual trend rates

STATE EMPLOYEES' GROUP HEALTH SELF-INSURANCE TRUST FUND

Exhibit I

Financial Outlook by Fiscal Year ⁽¹⁾

Changes to Conference Forecast - January 2016 Compared to August 2015

(In Millions)

	FY 2015-16			FY 2016-17			FY 2017-18			FY 2018-19			FY 2019-20			FY 2020-21
	Aug '15	Jan '16	Diff.	Aug '15	Jan '16	Diff.	Aug '15	Jan '16	Diff.	Aug '15	Jan '16	Diff.	Aug '15	Jan '16	Diff.	Jan '16
BEGINNING CASH BALANCE	\$ 522.6	\$ 522.6	\$ -	\$ 513.4	\$ 535.5	\$ 22.1	\$ 328.9	\$ 379.0	\$ 50.1	\$ 0.0 ⁽²⁾	\$ 3.0	\$ 3.0	\$ 0.0 ⁽²⁾	\$ 0.0 ⁽²⁾	\$ -	\$ 0.0 ⁽²⁾
REVENUES:																
Insurance Premiums ⁽³⁾	\$ 2,098.0	\$ 2,093.7	\$ (4.3)	\$ 2,128.1	\$ 2,124.5	\$ (3.6)	\$ 2,149.7	\$ 2,149.3	\$ (0.4)	\$ 2,172.2	\$ 2,174.5	\$ 2.3	\$ 2,193.9	\$ 2,200.3	\$ 6.4	\$ 2,226.7
Investment Earnings	6.4	6.6	0.2	5.2	5.7	0.5	-	2.4	2.4	-	-	-	-	-	-	-
TPA & Self-Insured HMO Refunds	15.6	10.7	(4.9)	15.6	14.6	(1.0)	15.6	14.6	(1.0)	15.6	14.6	(1.0)	15.6	14.6	(1.0)	14.6
PBM Rebates	71.6	68.1	(3.5)	69.4	69.4	-	69.7	73.5	3.8	69.8	76.9	7.1	69.4	80.5	11.1	89.9
Pretax Trust Fund Transfer	19.0	19.0	-	19.0	19.0	-	19.0	19.0	-	19.0	19.0	-	19.0	19.0	-	19.0
Medicare Part D Subsidy	20.5	18.1	(2.4)	22.1	20.4	(1.7)	21.0	18.7	(2.3)	21.0	18.8	(2.2)	20.9	18.8	(2.1)	18.9
Other Revenues	-	2.1	2.1	-	-	-	-	-	-	-	-	-	-	-	-	-
TOTAL REVENUES	\$ 2,231.1	\$ 2,218.3	\$ (12.8)	\$ 2,259.4	\$ 2,253.6	\$ (5.8)	\$ 2,275.0	\$ 2,277.5	\$ 2.5	\$ 2,297.6	\$ 2,303.8	\$ 6.2	\$ 2,318.8	\$ 2,333.2	\$ 14.4	\$ 2,369.1
TOTAL CASH AVAILABLE	\$ 2,753.7	\$ 2,740.9	\$ (12.8)	\$ 2,772.8	\$ 2,789.1	\$ 16.3	\$ 2,603.9	\$ 2,656.5	\$ 52.6	\$ 2,297.6	\$ 2,306.8	\$ 9.2	\$ 2,318.8	\$ 2,333.2	\$ 14.4	\$ 2,369.1
EXPENSES:																
PPO Plan	\$ 981.5	\$ 954.9	\$ (26.6)	\$ 1,060.5	\$ 1,025.9	\$ (34.6)	\$ 1,152.9	\$ 1,113.6	\$ (39.3)	\$ 1,258.3	\$ 1,215.4	\$ (42.9)	\$ 1,379.0	\$ 1,336.8	\$ (42.2)	\$ 1,477.4
Medical Claims	646.3	636.9	(9.4)	685.0	671.0	(14.0)	727.7	708.7	(19.0)	776.6	752.0	(24.6)	832.7	801.6	(31.1)	858.6
ASO Fee	17.7	17.7	-	17.7	17.6	(0.1)	17.5	17.5	-	17.4	17.3	(0.1)	17.3	17.2	(0.1)	17.1
Prescription Drug Claims	315.3	298.1	(17.2)	355.6	335.1	(20.5)	405.6	385.3	(20.3)	462.2	444.0	(18.2)	526.9	515.9	(11.0)	599.6
PBM Claims Administration	2.2	2.2	-	2.2	2.2	-	2.1	2.1	-	2.1	2.1	-	2.1	2.1	-	2.1
HMO Plan	\$ 1,235.5	\$ 1,226.3	\$ (9.2)	\$ 1,361.6	\$ 1,362.8	\$ 1.2	\$ 1,515.3	\$ 1,525.7	\$ 10.4	\$ 1,692.2	\$ 1,714.7	\$ 22.5	\$ 1,894.2	\$ 1,939.2	\$ 45.0	\$ 2,202.2
Premium Payments	297.7	295.9	(1.8)	320.1	317.8	(2.3)	344.9	343.5	(1.4)	373.0	372.7	(0.3)	405.3	406.2	0.9	444.8
Medical Claims	670.9	667.3	(3.6)	742.8	737.7	(5.1)	823.8	818.5	(5.3)	917.3	911.2	(6.1)	1,025.3	1,018.2	(7.1)	1,141.7
ASO Fee	26.9	26.9	-	27.3	27.4	0.1	28.2	28.4	0.2	29.0	29.4	0.4	29.9	30.4	0.5	31.5
Prescription Drug Claims	238.1	234.3	(3.8)	269.4	277.9	8.5	316.3	333.2	16.9	370.8	399.3	28.5	431.5	482.2	50.7	581.9
PBM Claims Administration	1.9	1.9	-	2.0	2.0	-	2.1	2.1	-	2.1	2.1	-	2.2	2.2	-	2.3
HSA Deposits ⁽³⁾	3.2	3.1	(0.1)	3.2	3.4	0.2	3.2	3.4	0.2	3.2	3.4	0.2	3.2	3.4	0.2	3.4
Operating Costs & Admin Assessment	3.9	3.5	(0.4)	3.9	3.5	(0.4)	3.9	3.5	(0.4)	3.9	3.5	(0.4)	3.9	3.5	(0.4)	3.5
Premium Refunds	4.0	5.1	1.1	4.0	5.1	1.1	4.0	5.1	1.1	4.0	5.1	1.1	4.0	5.1	1.1	5.1
Other Expenses ⁽⁴⁾	12.2	12.5	0.3	10.7	9.4	(1.3)	0.7	2.2	1.5	0.7	0.7	-	7.9	0.7	(7.2)	-
TOTAL EXPENSES	\$ 2,240.3	\$ 2,205.4	\$ (34.9)	\$ 2,443.9	\$ 2,410.1	\$ (33.8)	\$ 2,680.0	\$ 2,653.5	\$ (26.5)	\$ 2,962.3	\$ 2,942.8	\$ (19.5)	\$ 3,292.2	\$ 3,288.7	\$ (3.5)	\$ 3,691.6
EXCESS OF REV. OVER EXP.	\$ (9.2)	\$ 12.9	\$ 22.1	\$ (184.5)	\$ (156.5)	\$ 28.0	\$ (405.0)	\$ (376.0)	\$ 29.0	\$ (664.7)	\$ (639.0)	\$ 25.7	\$ (973.4)	\$ (955.5)	\$ 17.9	\$ (1,322.5)
ENDING CASH BALANCE ⁽⁵⁾	\$ 513.4	\$ 535.5	\$ 22.1	\$ 328.9	\$ 379.0	\$ 50.1	\$ (76.1)	\$ 3.0	\$ 79.1	\$ (664.7)	\$ (636.0)	\$ 28.7	\$ (973.4)	\$ (955.5)	\$ 17.9	\$ (1,322.5)
ADDITIONAL INFORMATION																
Unreported PPO Plan Claims Liability ⁽⁶⁾	\$ 58.9	\$ 58.0	\$ (0.9)	\$ 62.4	\$ 61.1	\$ (1.3)	\$ 66.2	\$ 64.5	\$ (1.7)	\$ 70.6	\$ 68.4	\$ (2.2)	\$ 75.6	\$ 72.8	\$ (2.8)	\$ 76.8
Unreported HMO Plan Claims Liability ⁽⁷⁾	77.7	70.6	(7.1)	85.9	85.3	(0.6)	95.2	94.6	(0.6)	106.0	105.3	(0.7)	118.4	117.6	(0.8)	138.1
Unreported PBM Claims Liability ⁽⁸⁾	5.5	5.3	(0.2)	6.3	6.1	(0.1)	7.2	7.2	-	8.3	8.4	0.1	9.6	10.0	0.4	11.8
Total Unreported Claims Liability	\$ 142.1	\$ 133.9	\$ (8.2)	\$ 154.6	\$ 152.5	\$ (2.0)	\$ 168.6	\$ 166.3	\$ (2.3)	\$ 184.9	\$ 182.1	\$ (2.8)	\$ 203.6	\$ 200.4	\$ (3.2)	\$ 226.7

Highlights of Changes to Forecast

- 1) Inclusion of actual enrollment through November 2015
- 2) Inclusion of actual revenues and expenses through October 2015
- 3) Inclusion of Final 2016 Open Enrollment results
- 4) Inclusion of updated Plan Year 2016 Fully-insured HMO premium rates

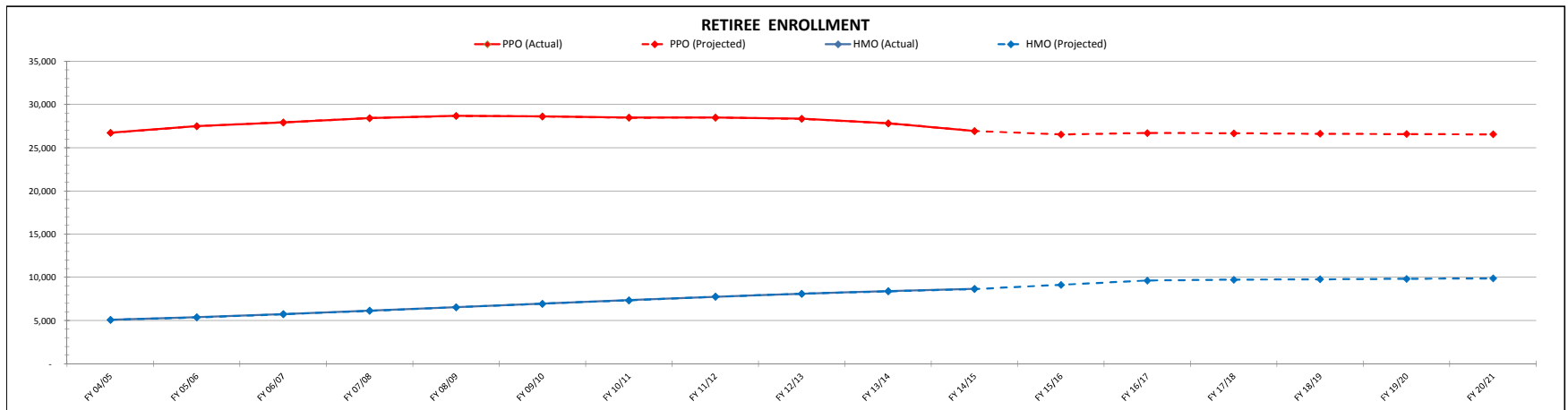
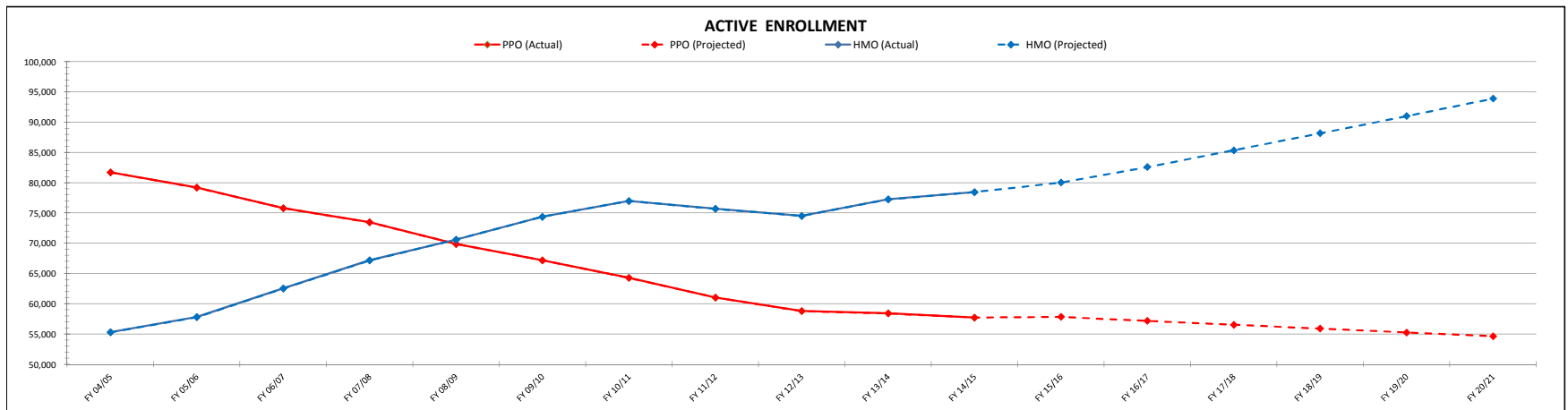
STATE EMPLOYEES' GROUP HEALTH SELF-INSURANCE TRUST FUND

Exhibit II

Enrollment Outlook by Fiscal Year

Changes to Conference Forecast - January 2016 Compared to August 2015

	FY 2015-16			FY 2016-17			FY 2017-18			FY 2018-19			FY 2019-20			FY 2020-21		
	Aug '15	Jan '16	Diff.	Aug '15	Jan '16	Diff.	Aug '15	Jan '16	Diff.	Aug '15	Jan '16	Diff.	Aug '15	Jan '16	Diff.	Aug '15	Jan '16	Diff.
Average Enrollment by Plan																		
PPO Standard	82,626	82,469	(157)	82,243	81,975	(268)	81,668	81,319	(349)	81,085	80,655	(430)	80,508	79,997	(511)	n/a	79,355	n/a
PPO HIHP	1,849	1,917	68	1,846	1,924	78	1,837	1,904	67	1,828	1,885	57	1,821	1,869	48	n/a	1,851	n/a
HMO Standard	88,477	88,398	(79)	91,257	91,434	177	93,699	94,285	586	96,129	97,120	991	98,579	99,965	1,386	n/a	102,829	n/a
HMO HIHP	751	778	27	756	804	48	767	838	71	783	880	97	802	923	121	n/a	968	n/a
Total	173,703	173,562	(141)	176,102	176,137	35	177,971	178,346	375	179,825	180,540	715	181,710	182,754	1,044	n/a	185,003	n/a
Average Enrollment by Coverage Type																		
Active (Non-OPS) Standard	131,122	130,966	(156)	132,657	132,532	(125)	134,277	134,368	91	135,942	136,242	300	137,626	138,131	505	n/a	140,046	n/a
Active (Non-OPS) HIHP	2,261	2,366	105	2,253	2,381	128	2,245	2,372	127	2,239	2,368	129	2,237	2,367	130	n/a	2,366	n/a
OPS Standard	3,959	3,892	(67)	4,274	4,194	(80)	4,582	4,498	(84)	4,886	4,799	(87)	5,194	5,100	(94)	n/a	5,401	n/a
OPS HIHP	245	236	(9)	256	248	(8)	267	264	(3)	279	284	5	291	305	14	n/a	326	n/a
COBRA	367	423	56	367	424	57	367	424	57	367	424	57	367	424	57	n/a	424	n/a
Early Retiree	6,173	5,923	(250)	6,647	6,366	(281)	6,586	6,306	(280)	6,482	6,203	(279)	6,394	6,116	(278)	n/a	6,033	n/a
Medicare	29,576	29,756	180	29,648	29,992	344	29,647	30,114	467	29,630	30,220	590	29,601	30,311	710	n/a	30,407	n/a
Total	173,703	173,562	(141)	176,102	176,137	35	177,971	178,346	375	179,825	180,540	715	181,710	182,754	1,044	n/a	185,003	n/a



STATE EMPLOYEES' GROUP HEALTH SELF-INSURANCE TRUST FUND

Exhibit III
Financial Outlook by Fiscal Year ⁽¹⁾
(In Millions)

	<u>FY 2015-16</u>	<u>FY 2016-17</u>	<u>FY 2017-18</u>	<u>FY 2018-19</u>	<u>FY 2019-20</u>	<u>FY 2020-21</u>
	<u>Estimate</u>	<u>Estimate</u>	<u>Estimate</u>	<u>Estimate</u>	<u>Estimate</u>	<u>Estimate</u>
BEGINNING CASH BALANCE	\$ 522.6	\$ 535.5	\$ 379.0	\$ 3.0 ⁽²⁾	\$ 0.0 ⁽²⁾	\$ 0.0 ⁽²⁾
REVENUES:						
Insurance Premiums:						
Employer	\$ 1,695.5	\$ 1,713.4	\$ 1,734.3	\$ 1,755.5	\$ 1,776.9	\$ 1,798.7
Employee	166.7	168.8	171.3	173.7	176.1	178.6
HSA Contributions ⁽³⁾	3.1	3.4	3.4	3.4	3.4	3.4
COBRA	4.7	4.7	4.7	4.7	4.7	4.7
Early Retiree	56.4	64.4	63.5	62.7	62.1	61.4
Medicare	167.3	169.8	172.1	174.5	177.1	179.9
Investment Earnings	6.6	5.7	2.4	0.0	0.0	0.0
PPO - TPA Refunds	6.0	9.6	9.6	9.6	9.6	9.6
PPO - PBM Rebates	40.2	40.2	41.6	42.8	44.0	48.2
HMO - Self-Insured Refunds	4.7	5.0	5.0	5.0	5.0	5.0
HMO - PBM Rebates	27.9	29.2	31.9	34.1	36.5	41.7
Pretax Trust Fund Transfer	19.0	19.0	19.0	19.0	19.0	19.0
PPO - Medicare Part D Subsidy	16.9	19.2	17.6	17.7	17.6	17.7
HMO - Medicare Part D Subsidy	1.2	1.2	1.1	1.1	1.2	1.2
Other Revenues	2.1	0.0	0.0	0.0	0.0	0.0
TOTAL REVENUES	\$ 2,218.3	\$ 2,253.6	\$ 2,277.5	\$ 2,303.8	\$ 2,333.2	\$ 2,369.1
TOTAL CASH AVAILABLE	\$ 2,740.9	\$ 2,789.1	\$ 2,656.5	\$ 2,306.8	\$ 2,333.2	\$ 2,369.1
EXPENSES:						
State PPO Plan:						
Medical Claims	\$ 636.9	\$ 671.0	\$ 708.7	\$ 752.0	\$ 801.6	\$ 858.6
ASO Fee	17.7	17.6	17.5	17.3	17.2	17.1
Prescription Drug Claims	298.1	335.1	385.3	444.0	515.9	599.6
PBM Claims Administration	2.2	2.2	2.1	2.1	2.1	2.1
HMO Plan:						
Premium Payments	295.9	317.8	343.5	372.7	406.2	444.8
Medical Claims	667.3	737.7	818.5	911.2	1,018.2	1,141.7
ASO Fee	26.9	27.4	28.4	29.4	30.4	31.5
Prescription Drug Claims	234.3	277.9	333.2	399.3	482.2	581.9
PBM Claims Administration	1.9	2.0	2.1	2.1	2.2	2.3
HSA Deposits ⁽³⁾	3.1	3.4	3.4	3.4	3.4	3.4
Operating Costs & Admin Assessment	3.5	3.5	3.5	3.5	3.5	3.5
Premium Refunds	5.1	5.1	5.1	5.1	5.1	5.1
Other Expenses ⁽⁴⁾	12.5	9.4	2.2	0.7	0.7	0.0
TOTAL EXPENSES	\$ 2,205.4	\$ 2,410.1	\$ 2,653.5	\$ 2,942.8	\$ 3,288.7	\$ 3,691.6
EXCESS OF REVENUES OVER EXPENSES	\$ 12.9	\$ (156.5)	\$ (376.0)	\$ (639.0)	\$ (955.5)	\$ (1,322.5)
ENDING CASH BALANCE ⁽⁵⁾	\$ 535.5	\$ 379.0	\$ 3.0	\$ (636.0)	\$ (955.5)	\$ (1,322.5)

ADDITIONAL INFORMATION

Total Unreported Claims Liability ⁽⁹⁾	\$ 133.9	\$ 152.5	\$ 166.3	\$ 182.1	\$ 200.4	\$ 221.6
Average Enrollment by Plan						
PPO Standard	82,469	81,975	81,319	80,655	79,997	79,355
PPO HIHP	1,917	1,924	1,904	1,885	1,869	1,851
HMO Standard	88,398	91,434	94,285	97,120	99,965	102,829
HMO HIHP	778	804	838	880	923	968
Total	173,562	176,137	178,346	180,540	182,754	185,003
Average Enrollment by Coverage Type						
Active (Non-OPS) Standard	130,966	132,532	134,368	136,242	138,131	140,046
Active (Non-OPS) HIHP	2,366	2,381	2,372	2,368	2,367	2,366
OPS Standard	3,892	4,194	4,498	4,799	5,100	5,401
OPS HIHP	236	248	264	284	305	326
COBRA	423	424	424	424	424	424
Early Retiree	5,923	6,366	6,306	6,203	6,116	6,033
Medicare	29,756	29,992	30,114	30,220	30,311	30,407
Total	173,562	176,137	178,346	180,540	182,754	185,003

Exhibit IV
Notes to the Financial Outlook

- 1) Actual results may differ from projected values with increasing likelihood of variance in future periods.
- 2) Assumes no carry forward of a negative ending cash balance from prior year.
- 3) Includes HSA contributions which approximate a split between employer and employee of 50% and 50%, respectively.
- 4) Other Expenses include the estimated impact of Patient-Centered Outcomes Research Institute (PCORI) fees and Transitional Reinsurance Fees. The Transitional Reinsurance Fees phase out after calendar year 2016.
- 5) Includes funds held in accounts outside of the Trust Fund at the Department of Financial Services, Division of Treasury, for the purpose of paying medical claims.
- 6) Includes estimated PPO Incurred but not Reported (IBNR) medical claims and outstanding drafts.
- 7) Includes estimated HMO IBNR medical claims and outstanding drafts.
- 8) Includes estimated PPO and HMO IBNR Rx claims.
- 9) Includes estimated PPO Plan and Self-Insured HMO Plans Incurred but not Reported (IBNR) claims and outstanding drafts.

Exhibit V
Comparison of Financial Outlooks
Fiscal Year 2015-16
(In Millions)

\$ 513.4	Previous Ending Cash Balance Forecast ⁽ⁱ⁾
	- Decrease in Beginning Cash Balance Forecast
(12.8)	Decrease in Revenue Forecast
	(4.3) - Net decrease in Insurance Premiums
	(2.6) - Decrease in employer and enrollee Insurance Premiums due to lower projected enrollment from 173,703 to 173,562
	(0.1) - Decrease in projected employer and enrollee HSA contributions
	(0.9) - Decrease in Insurance Premiums due to new Fully-Insured HMO Medicare contract rates effective January 2016
	(0.7) - Decrease in Insurance Premiums due to shifts in enrollment categories
	0.2 - Increase in Investment Earnings due to an increase in projected cash balance
	(4.8) - Decrease in PPO - TPA Refunds due to lower actual and projected activity
	(1.0) - Decrease in PPO - PBM Rebates due to lower actual and projected activity
	(0.1) - Decrease in HMO - Self-Insured Refunds due to lower actual and projected activity
	(2.5) - Decrease in HMO - PBM Rebates due to lower actual and projected activity
	(2.1) - Decrease in PPO - Medicare Part D Subsidy due to lower actual and projected subsidies
	(0.3) - Decrease in HMO - Medicare Part D Subsidy due to lower actual and projected subsidies
	2.1 - Increase in Other Revenues
	1.3 - Increase due to settlement from Florida Blue
	0.7 - Increase due to Pharmacy Benefits Manager contract performance guarantees
	0.1 - Increase due to HMO Plan contract performance guarantees
(34.9)	Decrease in Expense Forecast
(26.6)	Decrease in State PPO Plan
	(9.4) - Decrease in Medical Claims
	(0.7) - Decrease due to a decrease in projected enrollment from 84,475 to 84,386
	(8.7) - Decrease due to lower actual and projected claims experience
(17.2)	Decrease in Prescription Drug Claims
	(0.3) - Decrease due to a decrease in projected enrollment
	(16.9) - Decrease due to lower actual and projected claims experience
(9.2)	Decrease in HMO Plan
	(1.8) - Decrease in Premium Payments
	(0.4) - Decrease due to a decrease in projected enrollment from 31,838 to 31,795
	(0.9) - Decrease due to new contract rates effective January 2016
	(0.5) - Decrease due to shifts in enrollment categories
	(3.6) - Decrease in Medical Claims
	(0.1) - Decrease due to a decrease in projected enrollment from 57,386 to 57,378
	(3.5) - Decrease due to lower actual and projected claims experience
	(3.8) - Decrease in Prescription Drug Claims
	(0.4) - Decrease due to a decrease in projected enrollment from 84,503 to 84,362
	(3.4) - Decrease due to lower actual and projected claims experience
0.9	Increase in Other Expense Categories
	(0.1) - Decrease in projected employer and enrollee HSA Deposits
	(0.4) - Decrease in Operating Costs and Administrative Assessments due to reporting of budget appropriation
	1.1 - Increase in Premium Refunds due to higher base for FY 2014-15
	0.3 - Increase in Other Expenses due to nonrecurring expenditures
535.5	Ending Cash Balance⁽¹⁾

⁽ⁱ⁾ Self Insurance Estimating Conference held in August 2015.

Exhibit VI
Comparison of Financial Outlooks
Fiscal Year 2016-17
(In Millions)

\$ 328.9	Previous Ending Cash Balance Forecast ⁽ⁱ⁾
22.1	Increase in Beginning Cash Balance Forecast
(5.8)	Decrease in Revenue Forecast
	(3.6) - Net decrease in Insurance Premiums
	0.2 - Increase in projected employer and enrollee HSA contributions
	(1.5) - Decrease in Insurance Premiums due to new Fully-Insured HMO Medicare contract rates effective January 2016
	(2.3) - Decrease in Insurance Premiums due to shifts in enrollment categories
	0.5 - Increase in Investment Earnings due to an increase in projected cash balance
	(1.2) - Decrease in PPO - TPA Refunds due to lower projected activity
	0.4 - Increase in PPO - PBM Rebates
	(0.1) - Decrease due to a decrease in projected enrollment from 84,089 to 83,899
	0.5 - Increase due to higher projected rebates
	0.2 - Increase in HMO - Self-Insured Refunds due to higher projected activity
	(0.4) - Decrease in HMO - PBM Rebates due to lower projected rebates
	(1.5) - Decrease in PPO - Medicare Part D Subsidy
	0.1 - Increase due to an increase in projected Medicare enrollment from 23,267 to 23,421
	(1.6) - Decrease due to lower projected subsidies
	(0.2) - Decrease in HMO-Medicare Part D Subsidy due to lower projected subsidies
(33.8)	Decrease in Expense Forecast
	(34.6) Decrease in State PPO Plan
	(14.0) - Decrease in Medical Claims
	(1.5) - Decrease due to a decrease in projected enrollment from 84,089 to 83,899
	(3.2) - Decrease due to reduced growth factor from 6.5% to 6.0%
	(9.3) - Decrease due to lower projected claims experience
	(0.1) - Decrease in ASO Fee Expense due to a decrease in projected enrollment
	(20.5) - Decrease in Prescription Drug Claims
	(0.8) - Decrease due to a decrease in projected enrollment
	(0.7) - Decrease due to decreased growth factor from 13.3% to 13.1%
	(19.0) - Decrease due to lower projected claims experience
	1.2 Increase in HMO Plan
	(2.3) - Decrease in Premium Payments
	0.4 - Increase due to an increase in projected enrollment from 32,616 to 32,656
	(2.0) - Decrease due to new Medicare contract rates effective January 2016
	(0.7) - Decrease due to shifts in enrollment categories
	(5.1) - Decrease in Medical Claims
	2.3 - Increase due to an increase in projected enrollment from 59,393 to 59,578
	(3.5) - Decrease due to reduced growth factor from 7.0% to 6.5%
	(3.9) - Decrease due to lower projected claims experience
	0.1 - Increase in ASO Fees due to an increase in projected enrollment
	8.5 - Increase in Prescription Drug Claims
	0.3 - Increase due to an increase in projected enrollment from 87,204 to 87,302
	12.2 - Increase due to increased growth factor from 9.6% to 14.6%
	(4.0) - Decrease due to lower projected claims experience
	(0.4) Decrease in Other Expense Categories
	0.2 - Increase in projected employer and enrollee HSA Deposits
	(0.4) - Decrease in Operating Costs and Administrative Assessments due to reporting of budget appropriation
	1.1 - Increase in Premium Refunds due to higher base for FY 2014-15
	(1.3) - Decrease in Other Expenses due to issuance of final Transitional Reinsurance Fees payment calendar
379.0	Ending Cash Balance ⁽¹⁾

⁽ⁱ⁾ Self Insurance Estimating Conference held in August 2015.

Exhibit VII
Comparison of Financial Outlooks
Fiscal Year 2017-18
(In Millions)

\$ (76.1)	Previous Ending Cash Balance Forecast ⁽¹⁾
50.1	Increase in Beginning Cash Balance Forecast
2.5	Increase in Revenue Forecast
	(0.4) - Net decrease in Insurance Premiums
	2.2 - Increase in employer and enrollee Insurance Premiums due to higher projected enrollment from 177,971 to 178,346
	0.2 - Increase in projected employer and enrollee HSA contributions
	(1.7) - Decrease in Insurance Premiums due to new Fully-Insured HMO Medicare contract rates effective January 2016
	(1.1) - Decrease in Insurance Premiums due to shifts in enrollment categories
	2.4 - Increase in Investment Earnings due to an increase in projected cash balance
	(1.2) - Decrease in PPO - TPA Refunds due to lower projected activity
	1.9 - Increase in PPO - PBM Rebates
	(0.1) - Decrease due to a decrease in projected enrollment from 83,505 to 83,222
	2.0 - Increase due to higher projected rebates
	0.2 - Increase in HMO - Self-Insured Refunds due to higher projected activity
	1.9 - Increase in HMO - PBM Rebates
	0.2 - Increase due to an increase in projected enrollment from 89,607 to 90,123
	1.7 - Increase due to higher projected rebates
	(2.0) - Decrease in PPO - Medicare Part D Subsidy
	0.2 - Increase due to an increase in projected Medicare enrollment from 23,216 to 23,454
	(2.2) - Decrease due to lower projected per member subsidy
	(0.3) - Decrease in HMO - Medicare Part D Subsidy
	0.1 - Increase due to an increase in projected Medicare enrollment from 1576 to 1,663
	(0.4) - Decrease due to lower projected per member subsidy
(26.5)	Decrease in Expense Forecast
	(39.3) Decrease in State PPO Plan
	(19.0) - Decrease in Medical Claims
	(2.4) - Decrease due to a decrease in projected enrollment from 83,505 to 83,223
	(3.3) - Decrease due to reduced growth factor from 7.0% to 6.5%
	(13.3) - Decrease due to lower projected claims experience
	(20.3) - Decrease in Prescription Drug Claims
	(1.4) - Decrease due to a decrease in projected enrollment
	3.7 - Increase due to increased growth factor from 14.8% to 15.9%
	(22.6) - Decrease due to lower projected claims experience
10.4	Increase in HMO Plan
	(1.4) - Decrease in Premium Payments
	1.7 - Increase due to an increase in projected enrollment from 33,182 to 33,341
	(2.2) - Decrease due to new Medicare contract rates effective January 2016
	(0.9) - Decrease due to shifts in enrollment categories
	(5.3) - Decrease in Medical Claims
	6.7 - Increase due to an increase in projected enrollment from 61,279 to 61,779
	(3.8) - Decrease due to reduced growth factor from 7.5% to 7.0%
	(8.2) - Decrease due to lower projected claims experience
	0.2 - Increase in ASO Fee Expense due to an increase in projected enrollment
	16.9 - Increase in Prescription Drug Claims
	1.8 - Increase due to an increase in projected enrollment from 89,607 to 90,123
	5.2 - Increase due to increased growth factor from 14.3% to 16.2%
	9.9 - Increase due to higher projected claims experience
2.4	Increase in Other Expense Categories
	0.2 - Increase in projected employer and enrollee HSA Deposits
	(0.4) - Decrease in Operating Costs and Administrative Assessments due to reporting of budget appropriation
	1.1 - Increase in Premium Refunds due to higher base for FY 2014-15
	1.5 - Increase in Other Expenses due to issuance of final Transitional Reinsurance Fees payment calendar

3.0 Ending Cash Balance ⁽¹⁾

⁽¹⁾ Self Insurance Estimating Conference held in August 2015.

Exhibit VIII
Comparison of Financial Outlooks
Fiscal Year 2018-19
(In Millions)

\$ (664.7)	Previous Ending Cash Balance Forecast ⁽¹⁾
3.0	Increase in Beginning Cash Balance Forecast
6.2	Increase in Revenue Forecast
2.3	- Net increase in Insurance Premiums
5.7	- Increase in employer and enrollee Insurance Premiums due to higher projected enrollment from 179,825 to 180,540
0.2	- Increase in projected employer and enrollee HSA contributions
(1.9)	- Decrease in Insurance Premiums due to new Fully-Insured HMO Medicare contract rates effective January 2016
(1.7)	- Decrease in Insurance Premiums due to shifts in enrollment categories
(1.2)	- Decrease in PPO - TPA Refunds due to lower projected activity
3.5	- Increase in PPO - PBM Rebates
(0.2)	- Decrease due to a decrease in projected enrollment from 82,913 to 82,539
3.7	- Increase due to higher projected rebates
0.2	- Increase in HMO - Self-Insured Refunds
0.1	- Increase due to an increase in projected enrollment from 63,186 to 63,992
0.1	- Increase due to higher projected activity
3.6	- Increase in HMO - PBM Rebates
0.3	- Increase due to an increase in projected enrollment from 92,018 to 92,947
3.3	- Increase due to higher projected rebates
(1.9)	- Decrease in PPO - Medicare Part D Subsidy
0.2	- Increase due to an increase in projected Medicare enrollment from 23,162 to 23,483
(2.1)	- Decrease due to lower projected per member subsidy
(0.3)	- Decrease in HMO - Medicare Part D Subsidy
0.1	- Increase due to an increase in projected Medicare enrollment from 1,576 to 1,686
(0.4)	- Decrease due to lower projected per member subsidy
(19.5)	Decrease in Expense Forecast
(42.9)	Decrease in State PPO Plan
(24.6)	- Decrease in Medical Claims
(3.5)	- Decrease due to a decrease in projected enrollment from 82,913 to 82,539
(3.5)	- Decrease due to reduced growth factor from 7.5% to 7.0%
(17.6)	- Decrease due to lower projected claims experience
(0.1)	- Decrease in ASO Fee Expense due to a decrease in projected enrollment
(18.2)	- Decrease in Prescription Drug Claims
(2.1)	- Decrease due to a decrease in projected enrollment
5.7	- Increase due to increased growth factor from 14.8% to 16.2%
(21.8)	- Decrease due to lower projected claims experience
22.5	Increase in HMO Plan
(0.3)	- Decrease in Premium Payments
3.1	- Increase due to an increase in projected enrollment from 33,724 to 34,005
(2.4)	- Decrease due to new Medicare contract rates effective January 2016
(1.0)	- Decrease due to shifts in enrollment categories
(6.1)	- Decrease in Medical Claims
11.7	- Increase due to an increase in projected enrollment from 63,186 to 63,992
(4.2)	- Decrease due to reduced growth factor from 8.0% to 7.5%
(13.6)	- Decrease due to lower projected claims experience
0.4	- Increase in ASO Fee Expense due to an increase in projected enrollment
28.5	- Increase in Prescription Drug Claims
3.7	- Increase due to an increase in projected enrollment from 92,018 to 92,947
6.7	- Increase due to increased growth factor from 14.2% to 16.2%
18.1	- Increase due to higher projected claims experience
0.9	Increase in Other Expense Categories
0.2	- Increase in projected employer and enrollee HSA Deposits
(0.4)	- Decrease in Operating Costs and Administrative Assessments due to reporting of budget appropriation
1.1	- Increase in Premium Refunds due to higher base for FY 2014-15
(636.0)	Ending Cash Balance ⁽¹⁾

⁽¹⁾ Self Insurance Estimating Conference held in August 2015.

Exhibit IX
Comparison of Financial Outlooks
Fiscal Year 2019-20
(In Millions)

\$ (973.4)	Previous Ending Cash Balance Forecast ⁽¹⁾
0.0	Increase in Beginning Cash Balance Forecast
14.4	Increase in Revenue Forecast
6.4	- Net increase in Insurance Premiums
9.3	- Increase in employer and enrollee Insurance Premiums due to higher projected enrollment from 181,710 to 182,754
0.2	- Increase in projected employer and enrollee HSA contributions
(2.0)	- Decrease in Insurance Premiums due to new Fully-Insured HMO Medicare contract rates effective January 2016
(1.1)	- Decrease in Insurance Premiums due to shifts in enrollment categories
(1.2)	- Decrease in PPO - TPA Refunds due to lower projected activity
5.3	- Increase in PPO - PBM Rebates
(0.3)	- Decrease due to a decrease in projected enrollment from 82,329 to 81,865
5.6	- Increase due to higher projected rebates
0.2	- Increase in HMO - Self-Insured Refunds
0.1	- Increase due to an increase in projected enrollment from 65,109 to 66,218
0.1	- Increase due to higher projected activity
5.8	- Increase in HMO - PBM Rebates
0.5	- Increase due to an increase in projected enrollment from 94,457 to 95,793
5.3	- Increase due to higher projected rebates
(1.9)	- Decrease in PPO - Medicare Part D Subsidy
0.3	- Increase due to an increase in projected Medicare enrollment from 23,110 to 23,513
(2.2)	- Decrease due to lower projected per member subsidy
(0.2)	- Decrease in HMO - Medicare Part D Subsidy
0.1	- Increase due to an increase in projected Medicare enrollment from 1,571 to 1,704
(0.3)	- Decrease due to lower projected per member subsidy
(3.5)	Decrease in Expense Forecast
(42.2)	Decrease in State PPO Plan
(31.1)	- Decrease in Medical Claims
(4.7)	- Increase due to an increase in projected enrollment from 82,329 to 81,866
(3.7)	- Decrease due to reduced growth factor from 8.0% to 7.5%
(22.7)	- Decrease due to lower projected claims experience
(0.1)	- Decrease in ASO Fee Expense due to a decrease in projected enrollment
(11.0)	- Decrease in Prescription Drug Claims
(3.0)	- Decrease due to a decrease in projected enrollment
10.7	- Increase due to increased growth factor from 14.8% to 17.2%
(18.7)	- Increase due to higher projected claims experience
45.0	Increase in HMO Plan
0.9	- Increase in Premium Payments
4.8	- Increase due to an increase in projected enrollment from 34,267 to 34,669
(2.6)	- Decrease due to new Medicare contract rates effective January 2016
(1.3)	- Decrease due to shifts in enrollment categories
(7.1)	- Decrease in Medical Claims
17.4	- Increase due to an increase in projected enrollment from 65,109 to 66,218
(4.7)	- Decrease due to reduced growth factor from 8.5% to 8.0%
(19.8)	- Decrease due to lower projected claims experience
0.5	- Increase in ASO Fee Expense due to an increase in projected enrollment
50.7	- Increase in Prescription Drug Claims
6.1	- Increase due to an increase in projected enrollment from 94,457 to 95,793
14.7	- Increase due to increased growth factor from 13.4% to 17.2%
29.9	- Increase due to higher projected claims experience
(6.3)	Decrease in Other Expense Categories
0.2	- Increase in projected employer and enrollee HSA Deposits
(0.4)	- Decrease in Operating Costs and Administrative Assessments due to reporting of budget appropriation
1.1	- Increase in Premium Refunds due to higher base for FY 2014-15
(7.2)	- Decrease in Other Expenses due to delay in the implementation of Excise Taxes until 2020
(955.5)	Ending Cash Balance⁽¹⁾

⁽¹⁾ Self Insurance Estimating Conference held in August 2015.

STATE EMPLOYEES' GROUP HEALTH SELF-INSURANCE TRUST FUND

Premium Rate Table

Effective December 2014 for January 2015 Coverage

(Premium rate change for CHP and FHCP Medicare participants ONLY)

Subscriber Category / Contribution Cycle		Coverage Type	PPO/HMO Standard			PPO/HMO HIHP		
			Employer	Enrollee	Total	Employer ⁽⁴⁾	Enrollee	Total
Career Service	Monthly Full -Time Employees ⁽¹⁾	Single	591.52	50.00	641.52	591.52	15.00	606.52
		Family	1,264.06	180.00	1,444.06	1,264.06	64.30	1,328.36
		Spouse	1,429.08	30.00	1,459.08	1,298.36	30.00	1,328.36
	Bi-Weekly Full -Time Employees ⁽¹⁾	Single	295.76	25.00	320.76	295.76	7.50	303.26
		Family	632.03	90.00	722.03	632.03	32.15	664.18
		Spouse	714.54	15.00	729.54	649.18	15.00	664.18
"Payalls"	Monthly Full -Time Employees ^(1,2)	Single	637.34	8.34	645.68	598.18	8.34	606.52
		Family	1,429.06	30.00	1,459.06	1,298.36	30.00	1,328.36
	Bi-Weekly Full -Time Employees ^(1,2)	Single	318.67	4.17	322.84	299.09	4.17	303.26
		Family	714.53	15.00	729.53	649.18	15.00	664.18
COBRA	Monthly ⁽³⁾	Single	0.00	654.35	654.35	0.00	576.16	576.16
		Family	0.00	1,472.94	1,472.94	0.00	1,269.93	1,269.93
Early Retirees	Monthly	Single	0.00	641.52	641.52	0.00	564.86	564.86
		Family	0.00	1,444.06	1,444.06	0.00	1,245.03	1,245.03
Overage Dependents		Single	0.00	641.52	641.52	0.00	564.86	564.86

Medicare Monthly Premium Rates				
Plan Name	Plan Type	Medicare I One Eligible ⁽⁵⁾	Medicare II One Under/Over ⁽⁶⁾	Medicare III Both Eligible ⁽⁷⁾
Self-Insured PPO / HMO	Standard	359.61	1,036.90	719.22
	HIHP	271.07	849.19	542.15
Capital Health Plan ⁽⁸⁾	Standard	276.00	866.13	552.00
	HIHP	241.11	770.92	482.22
Florida Health Care Plan ⁽⁸⁾	Standard	46.00	710.85	92.00
	HIHP	46.00	594.36	92.00

Notes:

- (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 employer monthly HSA contribution of \$41.66/single (\$500 annually) and \$83.33/family (\$1,000 annually) is included in the listed employer rates.
- (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) Medicare eligible members who enroll with either CHP or FHCP must also enroll in a Medicare Advantage Prescription Drug ("MAPD") plan with CHP or FHCP.

STATE EMPLOYEES' GROUP HEALTH SELF-INSURANCE TRUST FUND

Premium Rate Table

Effective December 2015 for January 2016 Coverage

(Premium rate change for CHP and FHCP Medicare participants ONLY)

Subscriber Category / Contribution Cycle		Coverage Type	PPO/HMO Standard			PPO/HMO HIHP		
			Employer	Enrollee	Total	Employer ⁽⁴⁾	Enrollee	Total
Career Service / OPS	Monthly Full -Time Employees ⁽¹⁾	Single	591.52	50.00	641.52	591.52	15.00	606.52
		Family	1,264.06	180.00	1,444.06	1,264.06	64.30	1,328.36
		Spouse	1,429.08	30.00	1,459.08	1,298.36	30.00	1,328.36
	Bi-Weekly Full -Time Employees ⁽¹⁾	Single	295.76	25.00	320.76	295.76	7.50	303.26
		Family	632.03	90.00	722.03	632.03	32.15	664.18
		Spouse	714.54	15.00	729.54	649.18	15.00	664.18
SES / SMS	Monthly Full -Time Employees ^(1,2)	Single	637.34	8.34	645.68	598.18	8.34	606.52
		Family	1,429.06	30.00	1,459.06	1,298.36	30.00	1,328.36
	Bi-Weekly Full -Time Employees ^(1,2)	Single	318.67	4.17	322.84	299.09	4.17	303.26
		Family	714.53	15.00	729.53	649.18	15.00	664.18
COBRA	Monthly ⁽³⁾	Single	0.00	654.35	654.35	0.00	576.16	576.16
		Family	0.00	1,472.94	1,472.94	0.00	1,269.93	1,269.93
Early Retirees	Monthly	Single	0.00	641.52	641.52	0.00	564.86	564.86
		Family	0.00	1,444.06	1,444.06	0.00	1,245.03	1,245.03
Overage Dependents		Single	0.00	641.52	641.52	0.00	564.86	564.86

Medicare Monthly Premium Rates				
Plan Name	Plan Type	Medicare I One Eligible ⁽⁵⁾	Medicare II One Under/Over ⁽⁶⁾	Medicare III Both Eligible ⁽⁷⁾
Self-Insured PPO / HMO	Standard	359.61	1,036.90	719.22
	HIHP	271.07	849.19	542.15
Capital Health Plan ⁽⁸⁾	Standard	276.00	893.92	552.00
	HIHP	251.20	814.71	502.40
Florida Health Care Plan ⁽⁸⁾	Standard	59.00	689.41	118.00
	HIHP	59.00	578.95	118.00

Notes:

- (1) Premium contribution for Part-Time Employees (FTE < 0.75) 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) SES/SMS - 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 employer monthly HSA contribution of \$41.66/single (\$500 annually) and \$83.33/family (\$1,000 annually) is included in the listed employer rates.
- (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) Medicare eligible members who enroll with either CHP or FHCP must also enroll in a Medicare Advantage Prescription Drug ("MAPD") plan with CHP or FHCP.