



# Burnham

well beyond benefits™

Ventura County Community  
College District

**Joint Meeting: Renewal Update,  
CalPERS Review, & Other Items**

February 7, 2019





## Insurance Committee Meeting

1. **Renewal Update** – Anthem, Kaiser, CSEBO, MES
2. **Why review CalPERS now?**
3. **CalPERS Plans & Rates**
4. **Sample Large Claim Cost**
5. **HRA Review**
6. **Duplicate Coverage**
7. **Opt-Out Incentive**
8. **Next Steps**

# July 1, 2019 Renewal Update



Carrier	Faculty	ASCC	No Market Renewal Offer
<b>Anthem MEDICAL</b>	<b>15.5%</b> +\$2,392,812	<b>16.2%</b> +\$2,253,475	<b>6.0%</b> Faculty: +\$923,889* ASCC: +\$836,748*
<b>Kaiser MEDICAL</b>	<b>TBD</b> Mid-February	<b>TBD</b> Mid-February	<b>N/A</b>
<b>CSEBO DENTAL</b>	Will be released between 3/27 and 4/30		<b>N/A</b>
<b>MES VISION</b>	Rates remain unchanged until the next renewal		<b>N/A</b>
<b>Anthem BASIC LIFE</b>	<b>TBD</b> End of February		<b>N/A</b>
<b>Anthem VOLUNTARY LIFE</b>	<b>TBD</b> End of February		<b>N/A</b>

\* Rates were calculated by adding 6% to current rates. Official rates from Anthem will be delivered once the offer is accepted.

# Why review CalPERS now?



1. Burnham discussed VCCCD with CalPERS and they agreed to make an exception for those retirees without Part B, allowing them to come onto the active plan until they are enrolled in Part B. In addition CalPERS will assist those retirees with the Medicare enrollment process. CalPERS will allow them to stay on the Active plan for 1 year before they enforce the Part B requirement.
2. Burnham was not able to calculate the expected premium with CalPERS without having completed the data clean-up which required over 150 adjustments to reflect proper enrollment. Without having taken that step, the CalPERS premium calculation would not have been accurate.
3. There is substantial premium savings with CalPERS.

# CalPERS Plans & Rates



## B & M Plan Rates

7/30/2018

<b>CalPERS 2019 Monthly Premiums for Contracting Agencies</b> <b>Los Angeles Area Region</b> <b>Los Angeles, San Bernardino, Ventura</b> <b>Actives and Annuitants</b> <b>Effective Date: 1/1/2019 - 12/31/2019</b>									
<b>Basic Monthly Rate (B)</b>									
PLAN	Employee Only	Plan Code	Party Rate	Employee & 1 Dependent	Plan Code	Party Rate	Employee & 2+ Dependents	Plan Code	Party Rate
Anthem HMO Select	\$627.07	413 1	1	\$1,254.14	413 2	2	\$1,630.38	413 3	3
Anthem HMO Traditional	878.48	402 1	1	1,756.96	402 2	2	2,284.05	402 3	3
BSC Access+	669.75	144 1	1	1,339.50	144 2	2	1,741.35	144 3	3
Health Net Salud y Más	356.50	443 1	1	713.00	443 2	2	926.90	443 3	3
Health Net SmartCare	584.27	408 1	1	1,168.54	408 2	2	1,519.10	408 3	3
Kaiser Permanente	618.64	306 1	1	1,237.28	306 2	2	1,608.46	306 3	3
PERS Choice	654.50	321 1	1	1,309.00	321 2	2	1,701.70	321 3	3
PERS Select	420.77	080 1	1	841.54	080 2	2	1,094.00	080 3	3
PERSCare	843.78	326 1	1	1,687.56	326 2	2	2,193.83	326 3	3
PORAC	774.00	207 1	1	1,548.00	207 2	2	2,076.00	207 3	3
UnitedHealthcare	669.61	428 1	1	1,339.22	428 2	2	1,740.99	428 3	3
<b>Supplement/Managed Medicare Monthly Rate (M)</b>									
PLAN	Employee Only	Plan Code	Party Rate	Employee & 1 Dependent	Plan Code	Party Rate	Employee & 2+ Dependents	Plan Code	Party Rate
Anthem Medicare Preferred Health Only	\$357.44	271 1	4	\$714.88	271 2	5	\$1,072.32	271 3	6
Anthem Medicare Preferred <sup>1</sup> Health/Dental/Vision	357.44	166 1	4	714.88	166 2	5	1,072.32	166 3	6
Kaiser Senior Adv	323.74	316 1	4	647.48	316 2	5	971.22	316 3	6
Kaiser Senior Adv/Dental <sup>2</sup>	323.74	493 1	4	647.48	493 2	5	971.22	493 3	6
PERS Choice Med Supp	360.41	331 1	4	720.82	331 2	5	1,081.23	331 3	6
PERS Select Med Supp	360.41	081 1	4	720.82	081 2	5	1,081.23	081 3	6
PERSCare Med Supp	394.83	336 1	4	789.66	336 2	5	1,184.49	336 3	6
PORAC Med Supp	513.00	208 1	4	1,026.00	208 2	5	1,368.00	208 3	6
UnitedHealthcare Grp Med Adv/PPO Health Only	299.37	382 1	4	598.74	382 2	5	898.11	382 3	6
UnitedHealthcare <sup>3</sup> Grp Med Adv/PPO Health/Dental/Vision	299.37	383 1	4	598.74	383 2	5	898.11	383 3	6

<sup>1</sup>Dental and Vision coverage is an additional \$38.00 per member per month premium. You will be billed directly for this amount.

<sup>2</sup>Dental benefit is an additional \$15.05 per member per month premium. You will be billed directly for this amount.

<sup>3</sup>Dental and Vision coverage is an additional \$27.65 per member per month premium. You will be billed directly for this amount.

# CalPERS Plans & Rates



## Combination Rates

7/30/2018

<b>CalPERS 2019 Monthly Premiums for Contracting Agencies</b> <b>Los Angeles Area Region</b> <b>Los Angeles, San Bernardino, Ventura</b> <b>Actives and Annuitants</b> <b>Effective Date: 1/1/2019 - 12/31/2019</b>									
<b>Combination Monthly Rate</b>									
PLAN	Employee in M 1 Dependent in B	Plan Code	Party Rate	Employee in M 2+ Dependents in B	Plan Code	Party Rate	Employee in M & 1 Dependent in M 1+ Dependents in B	Plan Code	Party Rate
Anthem Traditional/ Med Pref Health Only	\$1,235.92	389 4	7	\$1,763.01	389 5	8	\$1,241.97	389 6	9
Anthem Traditional <sup>1</sup> / Med Pref Health/Dental/Vision	1,235.92	198 4	7	1,763.01	198 5	8	1,241.97	198 6	9
Kaiser/Senior Adv	942.38	342 4	7	1,313.56	342 5	8	1,018.66	342 6	9
Kaiser/Senior Adv/Dental <sup>2</sup>	942.38	503 4	7	1,313.56	503 5	8	1,018.66	503 6	9
PERS Choice/Med Supp	1,014.91	347 4	7	1,407.61	347 5	8	1,113.52	347 6	9
PERS Select/Med Supp	781.18	353 4	7	1,033.64	353 5	8	973.28	353 6	9
PERSCare/Med Supp	1,238.61	358 4	7	1,744.88	358 5	8	1,295.93	358 6	9
PORAC/Med Supp	1,362.00	158 4	7	1,815.00	158 5	8	1,475.00	158 6	9
UnitedHealthcare/ Grp Med Adv/PPO Health Only	968.98	369 4	7	1,370.75	369 5	8	1,000.51	369 6	9
UnitedHealthcare <sup>3</sup> / Grp Med Adv/PPO Health/Dental/Vision	968.98	370 4	7	1,370.75	370 5	8	1,000.51	370 6	9
<b>Combination Monthly Rate</b>									
PLAN	Employee in B 1 Dependent in M	Plan Code	Party Rate	Employee in B 2+ Dependents in M	Plan Code	Party Rate	Employee in B & 1 Dependent in M 1+ Dependents in B	Plan Code	Party Rate
Anthem Traditional/ Med Pref Health Only	\$1,235.92	389 7	10	\$1,593.36	389 8	11	\$1,763.01	389 9	12
Anthem Traditional <sup>1</sup> / Med Pref Health/Dental/Vision	1,235.92	198 7	10	1,593.36	198 8	11	1,763.01	198 9	12
Kaiser/Senior Adv	942.38	342 7	10	1,266.12	342 8	11	1,313.56	342 9	12
Kaiser/Senior Adv/Dental <sup>2</sup>	942.38	503 7	10	1,266.12	503 8	11	1,313.56	503 9	12
PERS Choice/Med Supp	1,014.91	347 7	10	1,375.32	347 8	11	1,407.61	347 9	12
PERS Select/Med Supp	781.18	353 7	10	1,141.59	353 8	11	1,033.64	353 9	12
PERSCare/Med Supp	1,238.61	358 7	10	1,633.44	358 8	11	1,744.88	358 9	12
PORAC/Med Supp	1,283.00	158 7	10	1,896.00	158 8	11	1,736.00	158 9	12
UnitedHealthcare/ Grp Med Adv/PPO Health Only	968.98	369 7	10	1,268.35	369 8	11	1,370.75	369 9	12
UnitedHealthcare <sup>3</sup> / Grp Med Adv/PPO Health/Dental/Vision	968.98	370 7	10	1,268.35	370 8	11	1,370.75	370 9	12

<sup>1</sup>Dental and Vision coverage is an additional \$38.00 per member per month premium. You will be billed directly for this amount.

<sup>2</sup>Dental benefit is an additional \$15.05 per member per month premium. You will be billed directly for this amount.

<sup>3</sup>Dental and Vision coverage is an additional \$27.65 per member per month premium. You will be billed directly for this amount.

# CalPERS Plans & Rates



## Ventura County Community College District

### CalPERS Employee Counts

#### ALL EMPLOYEES

		Anthem		Kaiser	
		AFT	ASCC	AFT	ASCC
<b>Basic Plans (B)</b>					
<b>Active Employees</b>					
Employee Only		63	89		
Employee + 1 Dependent		86	115		
Employee + 2 or More Dependents		185	129		
<b>Retirees 65+ wo/Part A, and Deps wo/Part A</b>					
Employee Only		22	2		
Employee + 1 Dependent		7	3		
Employee + 2 or More Dependents		0	0		
<b>Under Age 65 Retirees</b>					
Employee Only	<65	2	18		
Employee + 1 Dependent	<65, <65	15	31		
Employee + 2 or More Dependents	<65, <65, <65	4	6		
<b>Medicare Plans (M)</b>					
Employee Only	65+	72	115		
Employee + 1 Dependent	65+, 65+	131	145		
Employee + 2 or More Dependents	65+, 65+, 65+	0	2		
<b>Combination Plan (Employee in M)</b>					
Employee in M, 1 Dep in B	65+, <65	34	15		
Employee in M, +2 Dep in B	65+, <65, <65	4	2		
Employee in M, 1 Dep in M, 1+ Dep in B	65+, 65+, <65	2	2		
<b>Combination Plan (Employee in B)</b>					
Employee in B, 1 Dep in M	<65, 65+	22	5		
Employee in B, +2 Dep in M	<65, 65+, 65+	0	0		
Employee in B, 1 Dep in M, 1+ Dep in B	<65, 65+, <65	1	0		
<b>TOTAL</b>		<b>650</b>	<b>679</b>		
<b>OVERALL TOTAL</b>		<b>1329</b>			

# CalPERS Plans & Rates



## Ventura County Community College District Bottomline Cost Comparison - CalPERS January 1, 2019 ASCC, AFT, MGT

		Anthem Direct			CalPERS
		Current - 2018	Initial Renewal - 2019	Negotiated Renewal - 2019	2019
Total medical enrollment	1329				
<b>Combination of <u>Most</u> Expensive CalPERS Plans</b>					
Single	459				Combination of <u>Most</u> Expensive Plans
2-Party	539				
Family	<u>331</u>	\$29,162,869	\$33,809,156	\$30,923,506	
Annual Premium	1329				\$18,512,965
Relationship to Current \$			\$4,646,287	\$1,760,637	(\$10,649,904)
Relationship to Current %			15.9%	6.0%	-36.52%
Relationship to Renewal \$					(\$12,410,541)
Relationship to Renewal %					-40.13%
<b>Combination of <u>Least</u> Expensive CalPERS Plans</b>					
Single	459				Combination of <u>Least</u> Expensive Plans
2-Party	539				
Family	<u>331</u>	\$29,162,869	\$33,809,156	\$30,923,506	
Annual Premium	1329				\$8,104,322
Relationship to Current \$			\$4,646,287	\$1,760,637	(\$21,058,547)
Relationship to Current %			15.9%	6.0%	-72.21%
Relationship to Renewal \$					(\$22,819,184)
Relationship to Renewal %					-73.79%



# CalPERS Plans & Rates



## Ventura County Community College District Medical Rates - CalPERS January 1, 2019 Kaiser Permanente

Basic Plans (B)	Kaiser Permanente Current - 2018	CalPERS 2019	Cost Difference Illustration
<b>Kaiser (B) AFT</b>			
Employee Only	\$1,353.76	\$618.64	(\$735.12)
Employee & 1 Dependent	\$1,353.76	\$1,237.28	(\$116.48)
Employee & 2+ Dependents	\$1,353.76	\$1,608.46	\$254.70
<b>Kaiser (B) ASCC</b>			
Employee Only	\$1,277.32	\$618.64	(\$658.68)
Employee & 1 Dependent	\$1,277.32	\$1,237.28	(\$40.04)
Employee & 2+ Dependents	\$1,277.32	\$1,608.46	\$331.14
<b>Kaiser (B) Part-Time - Low</b>			
Employee Only	\$619.44	\$618.64	(\$0.80)
Employee & Spouse	\$1,362.78	\$1,237.28	(\$125.50)
Employee & Child	\$1,238.90	\$1,237.28	(\$1.62)
Employee & Children	\$1,238.90	\$1,608.46	\$369.56
Employee & Family	\$1,858.34	\$1,608.46	(\$249.88)
<b>Kaiser (B) Part-Time - High</b>			
Employee Only	\$710.44	\$618.64	(\$91.80)
Employee & Spouse	\$1,562.96	\$1,237.28	(\$325.68)
Employee & Child	\$1,420.88	\$1,237.28	(\$183.60)
Employee & Children	\$1,420.88	\$1,608.46	\$187.58
Employee & Family	\$2,131.32	\$1,608.46	(\$522.86)

# CalPERS Plans & Rates



## Ventura County Community College District CalPERS Medical Renewal - HMO Plans (B) January 1, 2019

	CalPERS	CalPERS	CalPERS	CalPERS	CalPERS	CalPERS	CalPERS
	Anthem Select HMO	Anthem Traditional HMO	Blue Shield Access+ HMO	Health Net Salud y Mas	Health Net SmartCare	Kaiser Permanente	UnitedHealthcare
<b>Deductible</b>							
Individual	none	none	none	none	none	none	none
Family	none	none	none	none	none	none	none
<b>Medical Out of pocket maximum</b>							
Individual	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500
Family	\$3,000	\$3,000	\$3,000	\$3,000	\$3,000	\$3,000	\$3,000
<b>Office visit copay (PCP / specialist)</b>	\$15 / \$15	\$15 / \$15	\$15 / \$30	\$15 / \$15	\$15 / \$15	\$15 / \$15	\$15 / \$15
<b>Inpatient</b>	100%	100%	100%	100%	100%	100%	100%
<b>Outpatient surgery</b>	100%	100%	100%	100%	100%	\$15	100%
<b>Lab and X-ray</b>	100% (100% complex)	100% (100% complex)	100% (100% complex)	100% (100% complex)	100% (100% complex)	100% (100% complex)	100% (100% complex)
<b>Emergency services copay</b>	\$50	\$50	\$50	\$50	\$50	\$50	\$50
<b>Urgent care copay</b>	\$15	\$15	\$15	\$15	\$15	\$15	\$15
<b>Durable medical equipment</b>	100%	100%	100%	100%	100%	100%	100%
<b>Prescription drugs</b>							
<b>Brand/Specialty Deductible</b>	none	none	none	none	none	none	none
<b>RX Copay</b>							
30 day supply	\$5 / \$20 / \$50	\$5 / \$20 / \$50	\$5 / \$20 / \$50	\$5 / \$20 / \$50	\$5 / \$20 / \$50	\$5 / \$20	\$5 / \$20 / \$50
Mail order - 90 day supply	\$10 / \$40 / \$100	\$10 / \$40 / \$100	\$10 / \$40 / \$100	\$10 / \$40 / \$100	\$10 / \$40 / \$100	\$10 / \$40 (31-100 day)	\$10 / \$40 / \$100
<b>RX Out of pocket maximum</b>							
Individual	\$6,400	\$6,400	\$6,400	\$6,400	\$6,400	\$6,400	\$6,400
Family	\$12,800	\$12,800	\$12,800	\$12,800	\$12,800	\$12,800	\$12,800
Home Delivery	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	n/a	n/a

# CalPERS Plans & Rates



## Ventura County Community College District CalPERS Medical Renewal - PPO Plans (B) January 1, 2019

	CalPERS PERS Select <sup>3,4</sup>	CalPERS PERS Choice	CalPERS PERS Care
<b>Deductible</b>	<b>In-Network</b>	<b>In-Network</b>	<b>In-Network</b>
Individual	*\$1,000 <sup>1</sup>	*\$500	*\$500
Family	*\$2,000 <sup>1</sup>	*\$1,000	*\$1,000
<b>Out of pocket maximum (coinsurance)</b>			
Individual	\$3,000	\$3,000	\$2,000
Family	\$6,000	\$6,000	\$4,000
<b>Out of pocket maximum (deductibles &amp; copays)*</b>			
Individual	\$2,900	\$2,900	\$3,900
Family	\$5,800	\$5,800	\$7,800
<b>Coinsurance (plan pays)</b>	80%	80%	90%
<b>Office visit copay (PCP / specialist)</b>	* \$35 <sup>2</sup> / \$35, ded waived	* \$20 / \$35, ded waived	* \$20 / \$35, ded waived
<b>Hospital coinsurance / copay</b>			
Inpatient	ded, 80%	ded, 80%	\$250*, ded, 90%
Outpatient surgery	ded, 80%	ded, 80%	ded, 90%
<b>Lab and X-ray</b>	ded, 80%	ded, 80%	ded, 90%
<b>Emergency services copay</b>	* \$50, ded, 80% (waived if admitted)	* \$50, ded, 80% (waived if admitted)	*\$50, ded, 90%
<b>Urgent care copay</b>	* \$35, ded waived	* \$35, ded waived	* \$35, ded waived
<b>Durable medical equipment</b>	ded, 80%	ded, 80%	ded, 90%
<b>Prescription drugs</b>			
<b>Brand/Specialty Deductible</b>	none	none	none
<b>RX Copay</b>			
30 day supply	\$5 / \$20 / \$50	\$5 / \$20 / \$50	\$5 / \$20 / \$50
30 day supply of Maintenance Medication after 2nd fill	\$10 / \$40 / \$100	\$10 / \$40 / \$100	\$10 / \$40 / \$100
Mail order - 90 day supply	\$10 / \$40 / \$100	\$10 / \$40 / \$100	\$10 / \$40 / \$100
<b>RX Out of pocket maximum</b>			
Individual	\$2,000	\$2,000	\$2,000
Family	\$4,000	\$4,000	\$4,000
Home Delivery	\$1,000	\$1,000	\$1,000

1 Five credits available to reduce deductible to \$500 Individual / \$1,000 Family (Flu Shot, Biometric Screening, Non-Smoking Certification, Virtual Second Opinion, ConditionCare Certification)

2 PCP copay reduced to \$10 if enrolled with PPO Primary Care Physician

3 Children automatically at \$500 ded

4 Well-Mothers Program, register online, no \$3,000 maximum only deductible

# Sample Large Claim #1



## Current Plan Design (Faculty)

*1<sup>st</sup> Claim of the year*

**\$40,000 Hospital Claim**

### Employee Exposure

**Deductible: \$200**

**Total paid by Employee: \$200**

**Inpatient Plan Cost: 100% Covered**

**Remainder Paid by Anthem**

## CalPERS Plan Design (PERSCare)

**\$40,000 Hospital Claim**

### Employee Exposure

**Deductible: \$500**

**Inpatient Plan Cost: \$250 + 10% up to \$2,000 Maximum**

**Total Paid by Employee: \$2,520**

**Remainder Paid by CalPERS**

# Sample Large Claim #2



## Current Plan Design (Faculty)

**\$100,000 Hospital Claim**

### Employee Exposure

**Deductible:** Already Met

**Total paid by Employee:** \$0

**Inpatient Plan Cost:** 100% Covered

**Remainder Paid by Anthem**

*Additional Claim  
in the same year*

## CalPERS Plan Design (PERSCare)

**\$100,000 Hospital Claim**

### Employee Exposure

**Deductible:** Already Met

**Inpatient Cost:** \$250 Hospital Copay (coinsurance already met)

**Total Paid by Employee:** \$250

**Remainder Paid by CalPERS**

# CalPERS Plans & Rates



## Ventura County Community College District CalPERS Medical Renewal - PPO Plans (M) January 1, 2019

	CalPERS	CalPERS	CalPERS
	PERS Choice - Medicare Plan	PERS Select - Medicare Plan	PERSCare - Medicare Plan
	In-Network	In-Network	In-Network
<b>Deductible</b>			
Individual	none	none	none
Family	none	none	none
<b>Out of pocket maximum</b>			
Individual	none	none	\$3,000
Family	none	none	none
<b>Coinsurance (plan pays)</b>	none	none	none
<b>Office visit copay (PCP / specialist)</b>	no charge	no charge	no charge
<b>Hospital coinsurance / copay</b>			
Inpatient	no charge	no charge	no charge
Outpatient surgery	no charge	no charge	no charge
<b>Lab and X-ray</b>	no charge	no charge	no charge
<b>Emergency services copay</b>	no charge	no charge	no charge
<b>Urgent care copay</b>	no charge	no charge	no charge
<b>Durable medical equipment</b>	no charge	no charge	no charge
<b>Prescription drugs</b>			
<b>Brand/Specialty Deductible</b>	none	none	none
<b>RX Copay</b>			
30 day supply	\$5 / \$20 / \$50	\$5 / \$20 / \$50	\$5 / \$20 / \$50
30 day supply of Maintenance Medication after 2nd fill	\$10 / \$40 / \$100	\$10 / \$40 / \$100	\$10 / \$40 / \$100
Mail order - 90 day supply	\$10 / \$40 / \$100	\$10 / \$40 / \$100	\$10 / \$40 / \$100
<b>RX Out of pocket maximum</b>			
Home delivery - Max per person	\$1,000	\$1,000	\$1,000
Hearing Aids	20%, up to \$1,000 max / 24 months	20%, up to \$1,000 max / 24 months	20%, up to \$1,000 max / 24 months

# Health Reimbursement Account (HRA)



## Features of a HRA Account

- Functions similar to a Flexible Spending Account (FSA)
- Can pay for Medical, Dental and Vision Expenses
  - You can narrow down the category to medical only expenses
- Funded by the employer, not the employee
- No minimum or maximum fund limit
- Fund can be used via a debit card or standard reimbursement through the website
- Flexible Plan design
- Employer will be billed:
  - Monthly Admin Fees
  - Claims used in that month by the employees

# Health Reimbursement Account (HRA)



## ASCC & Faculty Totals

Estimated cost to fund a HRA at 100% Utilization

EE Only: \$1,000 Fund

EE+1 or more: \$2,000 Fund

	HRA Fund Total	HRA Annual Admin Fee*	Combined Total
Employee Only	\$152,000	\$5,745.60	\$157,745.60
Family	\$1,030,000	\$19,467.00	\$1,049,467.00
<b>Total:</b>	<b>\$1,182,000</b>	<b>\$25,212.60</b>	<b>\$1,207,212.60</b>

\* Currently using pricing from NBS, there is also about \$750 to \$1,000 in administration fees to set up the plan initially.



# Duplicate Coverage



## Duplicate Coverage ASCC, AFT, MGT

	ASCC & MGT	AFT
Employee/Retiree	25	23
Dependents	27	23
<i>TOTAL Current Premium Monthly</i>	\$42,503	\$45,785
<i>TOTAL Current Premium Yearly</i>	\$510,039	\$549,422
<i>Remove Duplicate Coverage</i>	-\$255,019	-\$274,711

# Opt-Out Incentive



## Opt Out Incentive

Equivalent to Annual Out of Pocket Maximum	<b>\$1,700 ASCC or \$1,500 AFT</b>
Single Tier 12-month Premium	<b>\$536 per month</b>
65% of Contribution Deposited in TSA	<b>\$6,500 per year</b>

# Next Steps



1. **Finalize Anthem Renewal & Retrieve all other renewals**
2. **Medicare Supplement Marketing?**
3. **Anthem – Illustrate all Employees on ASCC and all Employees on AFT plans *Requested***
4. **Anthem – Illustrate a HDHP or HSA for Part-Time Employees *Requested***
5. **CalPERS Rep – Meet with Committee (2/21?)**
6. **Other priorities?**