



City of Scottsdale  
Loss Trust Fund Board  
Regular Meeting

Notice and Agenda

5:00 p.m. Tuesday, May 10, 2022  
City Attorney Conference Room and via Teams  
3939 N. Drinkwater Blvd.  
Scottsdale, AZ 85251

**Call: 480-378-2354 Conference I.D.: 636 998 438#**

**Call to Order**

**Roll Call**

**Allan Smith– Chairman**  
**Brandon Perlow- Vice Chairman**  
**Richard O’Conner**

**Linda Wannie**  
**Jacob Seltzer**

*One or more members of the Loss Trust Fund Board may be attending the meeting by telephone, video, or internet conferencing, pursuant to A.R.S. §38-431(4)*

**1. Approval of minutes of public meeting conducted on December 17, 2021**

**Action:** Motion to approve minutes as submitted or with suggested changes.

Staff Contact: George Woods, Risk Management Director, [GWoods@scottsdaleaz.gov](mailto:GWoods@scottsdaleaz.gov)

**2. Election of Chair and Vice-Chair**

A Chair and Vice-Chair must be nominated and voted upon in the first meeting of the new calendar year to serve a one-year term. No person shall serve in the same capacity for more than two consecutive full one-year terms.

**Action:** Discuss, nominate and vote to elect a Chair and Vice-Chair.

Staff Contact: George Woods, Risk Management Director, [GWoods@scottsdaleaz.gov](mailto:GWoods@scottsdaleaz.gov)

**3. Presentation, discussion, and possible recommendations on the fiscal year 2022/23 medical plan premiums**

Staff Contact: Lauran Beebe, Human Resources Manager, LBeebe@scottsdaleaz.gov

#### 4. Presentation, discussion, and possible recommendations on the cost of risk

Staff Contact: George Woods, Risk Management Director, GWoods@scottsdaleaz.gov

#### 5. PUBLIC COMMENT

Citizens may address the members of the Loss Trust Fund Board during Public Comment. This “Public Comment” time is reserved for citizen comments regarding non-agendized items. Arizona State law prohibits the Loss Trust Fund Board from discussing or taking action on an item that is not on the prepared agenda. Citizens may complete one Request to Speak “Public Comment” card per meeting and submit it to City Staff. **Public testimony is limited to three (3) minutes per speaker.**

Written comment cards are being accepted for both agendized and non-agendized items and may be submitted to City Staff at any time. Cards submitted after public testimony has begun will be provided to the Loss Trust Fund Board at the conclusion of the testimony for that item.

#### Adjournment

**Action:** Motion to adjourn



Persons with a disability may request a reasonable accommodation by contacting the Risk Management office at 480-312-2490. Requests should be made 24 hours in advance, or as early as possible, to allow time to arrange the accommodation. For TTY users, the Arizona Relay Service (1-800-367-8939) may contact the Risk Management Office at 480-312-2490



Phoenix, AZ



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# City of Scottsdale

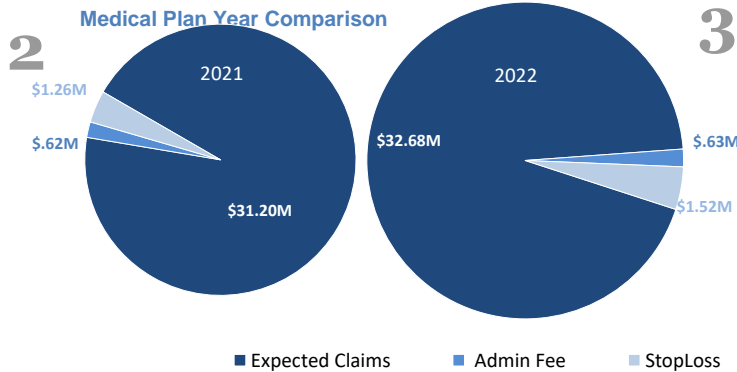
2022-2023 Plan Year - Preliminary Renewal Projection

V1.0

December 14, 2021

## 1 The City of Scottsdale Medical Plan Projection is increasing by 5.3%

	Current				Renewal				% Change			
	EE	EE+SP	EE+CH	Fam	EE	EE+SP	EE+CH	Fam				
Estimated Medical/RX Cost	\$31,199,168				\$32,676,661				4.7%			
Estimated Admin	\$759,009				\$771,324				1.6%			
Estimated ISL	\$1,006,303				\$1,257,879				25.0%			
Estimated Total Cost	\$32,964,480				\$34,705,865				5.3%			
Estimated EE Contribution	\$7,436,112				\$7,829,860				5.3%			
<b>CIGNA OAP In-Network</b>												
Total Budget Rate	\$705	\$1,526	\$1,279	\$2,190	\$742	\$1,607	\$1,347	\$2,306	5.3%			
EE Contributions	\$141	\$381	\$320	\$547	\$148	\$401	\$337	\$576	5.2%	5.3%	5.3%	5.3%
Assumed Enrollment	451	218	210	471	451	218	210	471				
<b>CIGNA Local Plus</b>												
Total Budget Rate	\$638	\$1,381	\$1,157	\$1,983	\$672	\$1,454	\$1,218	\$2,088	5.3%			
EE Contributions	\$128	\$345	\$289	\$495	\$135	\$363	\$304	\$521	5.3%	5.3%	5.3%	5.3%
Assumed Enrollment	46	16	11	32	46	16	11	32				
<b>CIGNA OAP</b>												
Total Budget Rate	\$618	\$1,339	\$1,123	\$1,922	\$651	\$1,410	\$1,182	\$2,024	5.3%			
EE Contributions	\$99	\$281	\$236	\$403	\$104	\$296	\$248	\$424	5.3%	5.3%	5.3%	5.3%
Assumed Enrollment	136	34	37	81	136	34	37	81				
<b>Cigna OAP + HSA</b>												
Total Budget Rate	\$588	\$1,273	\$1,067	\$1,827	\$619	\$1,340	\$1,123	\$1,924	5.3%			
EE Contributions	\$59	\$229	\$182	\$365	\$62	\$241	\$192	\$384	5.3%	5.3%	5.3%	5.3%
Assumed Enrollment	207	38	60	59	207	38	60	59				



## 3 Plan Year 2022 Discussion

- > Review Plan Options
- > Stoploss Est Increase For 2022:
  - 25% was used as a place holder in this projection
  - 2021 increase was 14%, if the increase comes in at 14% like 2021, the renewal would be 4.9%

## 4 Prior Year Renewal Info

- > Prior year renewal increase was 0.0%
- > Plan performance thru PYTD is 100%
- > Plan Changes: NA

## 5 Compliance Considerations

- Oct 2020 - Sep 2021 - \$2.66 PMPY
- Oct 2021 - Sep 2022 - \$2.78 PMPY

### Affordability

If the lowest paid employee earns \$12.15 an hour, based on a 9.61% safe harbor for 2022, the lowest single tier contribution should not exceed \$151.78 per month.

### HDHP and ACA Update

- 2022 ACA and HSA Limits
- >ACA Max OOP \$8,700 EE / \$17,400 FAM
  - >HSA Min Ded \$1,400 EE / \$2,800 FAM
  - >HSA Max OOP \$7,050 EE / \$14,100 FAM
  - >HSA Max Contribution \$3,650EE / \$7,300 FAM

## 6 Trends

- > Medical Trend: 7.3%
- > Rx Trend: 10.3%

# City of Scottsdale

Expected Members

High-Case Normalization – \$100,000 to \$325,000

December 14, 2021

High Case Analysis Tool			
Network / Demographic Factor	0.93		
Pooling Threshold	\$100,000		
Specific Deductible	\$325,000		
Analysis Period	7/1/2019 to 6/30/2020	7/1/2020 to 6/30/2021	7/1/2021 to 11/30/2021
Membership	5,256	5,205	5,119
Actual Claims above \$100,000	\$3,505,565	\$3,650,613	\$1,485,417
Actual Claims above \$325,000	\$379,502	\$833,974	\$331,027
Expected Liability between \$100,000 and \$325,000	\$1,867,233	\$2,414,445	\$989,537
Net Underwriting Adjustment	(\$1,638,332)	(\$1,236,169)	(\$495,880)

Specific Deductible	Expected Members in Excess of Deductible	Actual Members in Excess of Deductible	Expected Members in Excess of Deductible	Actual Members in Excess of Deductible	Expected Members in Excess of Deductible	Actual Members in Excess of Deductible
\$100,000	24.4	39	33.0	31	13.5	13
\$125,000	17.4	30	23.0	23	9.4	10
\$150,000	12.6	17	16.9	18	6.9	8
\$175,000	9.6	12	12.9	14	5.3	5
\$200,000	7.4	11	10.1	9	4.1	5
\$225,000	5.7	11	6.7	9	2.8	5
\$250,000	4.7	8	5.5	8	2.3	2
\$275,000	4.1	8	4.5	7	1.9	2
\$300,000	3.4	7	3.1	6	1.3	2
\$350,000	2.3	3	2.4	6	1.0	2
\$400,000	1.8	2	1.8	4	0.7	2
\$450,000	1.4	1	1.2	4	0.5	2
\$500,000	1.1	1	1.4	2	0.6	1
\$600,000	0.9	0	0.8	1	0.3	0
\$750,000	0.5	0	0.5	0	0.2	0
\$1,000,000	0.4	0	0.2	0	0.1	0
\$1,500,000	0.1	0	0.1	0	0.0	0

\* Partial Year

Medical					Pharmacy					
		7/1/2019 to 6/30/2020	7/1/2020 to 6/30/2021	7/1/2021 to 11/30/2021	Rolling 12	7/1/2019 to 6/30/2020	7/1/2020 to 6/30/2021	7/1/2021 to 11/30/2021	Rolling 12	
Medical Claims	1	\$23,642,291	\$23,070,589	\$10,983,379	\$24,452,891	\$6,036,994	\$6,749,566	\$2,790,526	\$6,825,484	Rx Claims
Actual Claims above \$325,000	2				(\$1,260,645)					
Actual Claims above \$100,000	3	(\$3,505,565)	(\$3,650,613)	(\$1,485,417)	\$0					
Expected Liability between \$100,000 and \$325,000	4	\$1,867,233	\$2,414,445	\$989,537	\$0					
Medical Claims Less Excess	5	\$22,003,959	\$21,834,420	\$10,487,499	\$23,192,246					
Laser Adjustment <sup>(2)</sup>	6	1,000	1,000	1,000	1,000					
Benefit Adjustment <sup>(3)</sup>	7	0.993	1,000	1,000	1,000	1,000	1,000	1,000	1,000	Benefit Adjustment <sup>(3)</sup>
Network Discount Adjustment	8	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	Network Discount Adjustment
Migration	9	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	Migration
Benefit Adjusted Medical Claims	10	\$21,856,533	\$21,834,420	\$10,487,499	\$23,192,246	\$6,036,994	\$6,749,566	\$2,790,526	\$6,825,484	Benefit Adjusted Rx Claims
Member-Months	11	63,077	62,456	25,597	61,928	63,077	62,456	25,597	61,928	Member-Months
PMPM	12	\$346.51	\$349.60	\$409.72	\$374.50	\$95.71	\$108.07	\$109.02	\$110.22	PMPM
7.3% Annual Trend	13	1.2354	1.1513	1.0953	1.1180	1.3419	1.2166	1.1350	1.1679	10.3% Annual Trend
Capitation	14	\$0.00	\$0.00	\$0.00	\$0.00	-\$16.91	-\$16.91	-\$16.91	-\$16.91	RX Rebate Credit
<b>Projected Medical PMPM</b>	15	<b>\$428.06</b>	<b>\$402.50</b>	<b>\$448.75</b>	<b>\$418.70</b>	<b>\$111.52</b>	<b>\$114.57</b>	<b>\$106.82</b>	<b>\$111.81</b>	<b>Projected Rx PMPM</b>
Period Weight	17	20%	30%	50%		20%	30%	50%		Period Weight
Adjusted Membership	18	12,615	18,737	12,799		12,615	18,737	12,799		Adjusted Membership
Member-Adjusted Period Weight	19	28.6%	42.4%	29.0%		28.6%	42.4%	29.0%		Member-Adjusted Period Weight
<b>Medical PMPM Claims Projection</b>	20	<b>\$423.21</b>			<b>\$418.70</b>	<b>\$111.45</b>			<b>\$111.81</b>	<b>Rx PMPM Claims Projection</b>
% of Total PMPM Claims Projection	21	79%			79%	21%			21%	% of Total PMPM Claims Projector

Normalization - Method 1

Total PMPM Claims Projection	22	\$534.67
Total PEPM Claims Projection	23	\$1,292.38
% Change from Current	24	5.3%

Blending Three Time Periods: Method 2

Stop Loss Credits	25	(\$379,502)	(\$833,974)	(\$331,027)
Medical Claims Less Excess	26	\$23,262,790	\$22,236,615	\$10,652,353
<b>Projected Medical PMPM</b>	27	<b>\$452.55</b>	<b>\$409.92</b>	<b>\$455.81</b>
<b>Total PMPM Claims Projection</b>	28	<b>\$546.85</b>		
<b>Total PEPM Claims Projection</b>	29	<b>\$1,321.85</b>		
% Change from Current	30	7.5%		

Rolling 12 - Method 3

Total PMPM Claims Projection	31	\$530.52
Total PEPM Claims Projection	32	\$1,282.35
% Change from Current	33	4.5%

Preferred Method:

Normalization - Method 1

34	5,093	Current Membership
35	2,107	Current Enrollment
36	<b>\$1,292.38</b>	Preferred Methods PEPM
37	\$24.83	Admin (Cigna, EAP, MotivateME, Stoploss Interface)
38	\$49.75	ISL @325,000 Est @ 25% increase
39	\$10.22	Wellness and Consulting Fee
40	(\$4.54)	Est. Disabled Retiree Subsidy
42	\$1,372.64	Total Fixed and Claims PEPM
43	\$2,892,155	Projected Monthly Fixed and Claims Cost
44	<b>\$34,705,865</b>	Projected Annual Fixed and Claims Cost
45	<b>\$32,964,480</b>	Current Annual Fixed and Claims Budget
46	5.3%	% Change from Current

<sup>(2)</sup> Laser adjustments accounts for expected liability for the projection year.

<sup>(3)</sup> Benefit adjustments accounts for plan design changes from each time period

<sup>(4)</sup> The normalization adjustment can be used to diminish the volatility associated with high-case activity.

Option 1

14-Dec-21

		Current Plan Year 2021-2022							
		CIGNA OAP In-Network		CIGNA Local Plus		CIGNA OAP		Cigna OAP + HSA	
		In	Out	In	Out	In	Out	In	Out
Plan Design	Deductible	NA	NA	NA	NA	\$750 / \$1,500	\$2,000 / \$4,000	\$1,400 / \$2,800	\$3,500 / \$7,000
	Maximum out-of-pocket	\$3,000 / \$6,000	NA	\$3,000 / \$6,000	NA	\$4,500 / \$9,000	\$4,500 / \$9,000	\$4,000 / \$8,000	\$6,000 / \$12,000
	Coinsurance	100%	NA	100%	NA	90%	70%	90%	70%
	PCP visit copay	\$10 or \$25	NA	\$10 or \$25	NA	\$10 or \$25	Ded Then 70%	Ded Then 90%	Ded Then 70%
	Specialist copay	\$40	NA	\$40	NA	\$40	Ded Then 70%	Ded Then 90%	Ded Then 70%
	Urgent care copay	\$50	NA	\$50	NA	\$50	Ded Then 70%	Ded Then 90%	Ded Then 70%
	ER copay		\$150		\$150		\$150 + Ded Then 90%		Ded Then 90%
	Inpatient Hospital	\$500	NA	\$500	NA	Ded Then 90%	Ded Then 70%	Ded Then 90%	Ded Then 70%
	Outpatient Hospital	\$250	NA	\$250	NA	Ded Then 90%	Ded Then 70%	Ded Then 90%	Ded Then 70%
Pharmacy	\$10/20%/40%	NA	\$10/20%/40%	NA	\$10/20%/40%	50%	Ded then \$10/20%/40%	50%	
Funding Rates	EE	451	\$705	46	\$638	136	\$618	207	\$588
	EE+SP	218	\$1,526	16	\$1,381	34	\$1,339	38	\$1,273
	EE+CH	210	\$1,279	11	\$1,157	37	\$1,123	60	\$1,067
	Fam	471	\$2,190	32	\$1,983	81	\$1,922	59	\$1,827
Expected Annual Cost	By Plan	\$23,408,436		\$1,531,524		\$3,921,684		\$4,102,836	
	All Plans	\$32,964,480							

		Plan Year 2022 - 2023							
		CIGNA OAP In-Network		CIGNA Local Plus		CIGNA OAP		Cigna OAP + HSA	
		In	Out	In	Out	In	Out	In	Out
Plan Design	Deductible	NA	NA	NA	NA	\$750 / \$1,500	\$2,000 / \$4,000	\$1,400 / \$2,800	\$3,500 / \$7,000
	Maximum out-of-pocket	\$3,000 / \$6,000	NA	\$3,000 / \$6,000	NA	\$4,500 / \$9,000	\$4,500 / \$9,000	\$4,000 / \$8,000	\$6,000 / \$12,000
	Coinsurance	100%	NA	100%	NA	90%	70%	90%	70%
	PCP visit copay	\$10 or \$25	NA	\$10 or \$25	NA	\$10 or \$25	Ded Then 70%	Ded Then 90%	Ded Then 70%
	Specialist copay	\$40	NA	\$40	NA	\$40	Ded Then 70%	Ded Then 90%	Ded Then 70%
	Urgent care copay	\$50	NA	\$50	NA	\$50	Ded Then 70%	Ded Then 90%	Ded Then 70%
	ER copay		\$150		\$150		\$150 + Ded Then 90%		Ded Then 90%
	Inpatient Hospital	\$500	NA	\$500	NA	Ded Then 90%	Ded Then 70%	Ded Then 90%	Ded Then 70%
	Outpatient Hospital	\$250	NA	\$250	NA	Ded Then 90%	Ded Then 70%	Ded Then 90%	Ded Then 70%
Pharmacy	\$10/20%/40%	NA	\$10/20%/40%	NA	\$10/20%/40%	50%	Ded then \$10/20%/40%	50%	
Funding Rates	EE	451	\$742	46	\$672	136	\$651	207	\$619
	EE+SP	218	\$1,607	16	\$1,454	34	\$1,410	38	\$1,340
	EE+CH	210	\$1,347	11	\$1,218	37	\$1,182	60	\$1,123
	Fam	471	\$2,306	32	\$2,088	81	\$2,024	59	\$1,924
Expected Annual Cost	By Plan	\$24,645,012		\$1,612,428		\$4,128,851		\$4,319,573	
	% Change from Current	5.28%		5.28%		5.28%		5.28%	
All Plans		\$34,705,865							
% Change from Current		5.3%							

Plan Change Notes

CIGNA OAP In-Network MOOP +\$500 Individual +\$1,000 Family (Decrement -.001%)

CIGNA Local Plus MOOP +\$500 Individual +\$1,000 Family (Decrement -.001%)

Total Cost and Contributions

December 14, 2021

Option 1

Smoking Surcharge:	\$20	PCP Discount	\$10	Blood Pressure Discount:	\$20
Employees Charged:	64	Employees Charged:	1170	Enrolled:	760
Corresponding Percent Enrolled:	3.0%	Corresponding Percent Enrolled:	55.5%	Corresponding Percent Enrolled:	27.8%
<b>Estimated Savings</b>	<b>\$15,360</b>	<b>Estimated Cost</b>	<b>\$140,400</b>	<b>Estimated Cost</b>	<b>\$182,400</b>

Current Plan Year 2021-2022

Plan Year 2022 - 2023

EE CHANGE

Tier	Enrollment	Monthly Plan Cost	Monthly EE Contributions	Monthly ER Contributions	ER % of Monthly Contribution
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Tier	Estimated Enrolled	Monthly Plan Cost	Monthly EE Contributions	Monthly ER Contributions	ER % of Monthly Contribution
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Monthly EE Contributions Change Amount	% Change EE Contribution
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CIGNA OAP In-Network

EE Only	451	\$705	\$141	\$564	80%
EE + Spouse	218	\$1,526	\$381	\$1,145	75%
EE + Child(ren)	210	\$1,279	\$320	\$959	75%
Family	471	\$2,190	\$547	\$1,643	75%

EE Only	451	\$742	\$148	\$594	80%
EE + Spouse	218	\$1,607	\$401	\$1,206	75%
EE + Child(ren)	210	\$1,347	\$337	\$1,010	75%
Family	471	\$2,306	\$576	\$1,730	75%

\$7.40	5.2%
\$20.22	5.3%
\$17.01	5.3%
\$28.97	5.3%

CIGNA Local Plus In-Network

EE Only	46	\$638	\$128	\$510	80%
EE + Spouse	16	\$1,381	\$345	\$1,036	75%
EE + Child(ren)	11	\$1,157	\$289	\$868	75%
Family	32	\$1,983	\$495	\$1,488	75%

EE Only	46	\$672	\$135	\$537	80%
EE + Spouse	16	\$1,454	\$363	\$1,091	75%
EE + Child(ren)	11	\$1,218	\$304	\$914	75%
Family	32	\$2,088	\$521	\$1,567	75%

\$6.82	5.3%
\$18.24	5.3%
\$15.24	5.3%
\$26.21	5.3%

CIGNA OAP

EE Only	136	\$618	\$99	\$519	84%
EE + Spouse	34	\$1,339	\$281	\$1,058	79%
EE + Child(ren)	37	\$1,123	\$236	\$887	79%
Family	81	\$1,922	\$403	\$1,519	79%

EE Only	136	\$651	\$104	\$547	84%
EE + Spouse	34	\$1,410	\$296	\$1,114	79%
EE + Child(ren)	37	\$1,182	\$248	\$934	79%
Family	81	\$2,024	\$424	\$1,600	79%

\$5.29	5.3%
\$14.90	5.3%
\$12.40	5.3%
\$21.39	5.3%

Cigna OAP + HSA

EE Only	207	\$588	\$59	\$529	90%
EE + Spouse	38	\$1,273	\$229	\$1,044	82%
EE + Child(ren)	60	\$1,067	\$182	\$885	83%
Family	59	\$1,827	\$365	\$1,462	80%
HSA EE Contribution	207	\$42	\$0	\$42	100%
HSA Fam Contribution	157	\$83	\$0	\$83	100%

EE Only	207	\$619	\$62	\$557	90%
EE + Spouse	38	\$1,340	\$241	\$1,099	82%
EE + Child(ren)	60	\$1,123	\$192	\$931	83%
Family	59	\$1,924	\$384	\$1,540	80%
HSA EE Contribution	207	\$42	\$0	\$42	100%
HSA Fam Contribution	157	\$83	\$0	\$83	100%

\$3.11	5.3%
\$12.05	5.3%
\$9.55	5.3%
\$19.38	5.3%

<b>Monthly Total</b>		\$2,768,748	\$619,676	\$2,149,072	
<b>Annual Total</b>	2,107	\$33,224,980	\$7,436,112	\$25,788,868	77.6%
<b>Smoking Surcharge</b>			\$15,360	-\$15,360	
<b>Blood Pressure Discount</b>			-\$182,400	\$182,400	
<b>HRA Discount</b>			-\$140,400	\$140,400	
<b>Premium Holiday</b>					
<b>Funding Total</b>		\$33,224,980	\$7,128,672	\$26,096,308	78.5%

		\$2,914,165	\$652,488	\$2,261,677	
	2,107	\$34,969,984	\$7,829,860	\$27,140,124	77.6%
			\$15,360	-\$15,360	
			-\$182,400	\$182,400	
			-\$140,400	\$140,400	
		\$34,969,984	\$7,522,420	\$27,447,564	78.5%

Difference (\$)	\$1,745,004	\$393,748	\$1,351,256
Difference (%)	5.3%	5.5%	5.2%
HSA Difference	\$0.00		



# City of Scottsdale

## Rolling 12 Dental Claims Projection

December 14, 2021

		Dental
Experience Period		12/1/2020 to 11/30/2021
Dental Claims		\$1,464,217
Network Discount Adjustment <sup>(1)</sup>		1.00
Immature Benefit Year Adjustment <sup>(2)</sup>		1.00
COBRA Adjustment <sup>(3)</sup>		1.00
Benefit Adjusted Dental Claims		\$1,464,217
Employee-Months		20,545
PMPM		\$71.27
4.5% Annual Trend:		1.07
<b>Projected Dental PEPM</b>		<b>\$76.41</b>
Current Enrollment		1,714
Monthly Claims		\$130,972
Annual Claims Projection		\$1,571,661
Current Enrollment		1,714
<b>Total PEPM Claims Projection</b>		<b>\$76.41</b>
PEPM Admin		\$2.85
Total Average PEPM Cost		\$79.26
<b>TOTAL ANNUAL ESTIMATED COST</b>		<b>\$1,630,280</b>

<sup>(1)</sup> Reflects the assumed cost differences between the experience-period and the renewal-period based on changes in networks and/or administrators.

<sup>(2)</sup> Adjusts partial-periods to reflect immature deductibles

<sup>(3)</sup> Adjusted where applicable to reflect the inherent utilization differences between Active and COBRA populations.

	<b>Dental</b>			
	<b>EE</b>	<b>EE + SP</b>	<b>EE + CH</b>	<b>Family</b>
Expected Annual Cost for All Plans Combined	<b>\$1,630,280</b>			
Enrollment	697	255	269	493
Rate Relationship to Dental	1.00	2.20	1.80	2.97
Richness Relative to Dental	100%			
<u>Renewal</u> Budgeted Rate	\$42.34	\$93.12	\$76.19	\$125.97
Confirm Relationship to Dental	1.00	2.20	1.80	2.97
Expected Monthly Cost for All Plans	<b>\$135,857</b>			
Expected Annual Cost for All Plans	<b>\$1,630,280</b>			
% Change from Current	1.8%			
<u>Current</u> Budgeted Rate	\$41.58	\$91.44	\$74.82	\$123.70
Current Year Annual Cost	\$1,600,910			