

**Plan Comparison**

Proposal Type	CURRENT				Renewal				PROPOSED			
Carrier	BCBSNE				BCBSNE				Medica		Medica	
Plan Name	BlueFreedom 15 Rx1	BlueFreedom 49 Rx 9	BlueFreedom 15 Rx1	BlueFreedom 49 Rx 9	\$750, 80% NTL	\$2,000, 0% NTL						
Option Type	PPO	HSA - Aggregate	PPO	HSA - Aggregate	PPO	HSA						
Network	In Network	In Network	In Network	In Network	In Network	In Network						
Deductible - EE	\$750	\$2,000	\$750	\$2,000	\$750	\$2,000						
Deductible - Family	\$1,500	\$4,000	\$1,500	\$4,000	\$1,500	\$4,000						
Coinsurance	80%	0%	80%	0%	80%	0%						
Out of Pocket Max	\$2,750	\$2,000	\$2,750	\$2,000	\$2,750	\$2,000						
Out of Pocket Max - Family	\$5,500	\$4,000	\$5,500	\$4,000	\$5,500	\$4,000						
Physician/Specialist Copay	\$25/\$40 Copay	Ded then 0%	\$25/\$40 Copay	Ded then 0%	\$25/\$40 Copay	Ded then 0%						
Standard Telehealth Copay	\$10 Copay	Ded then 0%	\$10 Copay	Ded then 0%	\$0	\$0						
Urgent Care Copay	\$60 Copay	Ded then 0%	\$60 Copay	Ded then 0%	\$25 Copay	Ded then 0%						
Emergency Room Copay	Ded then 20%	Ded then 0%	Ded then 20%	Ded then 0%	Ded then 20%	Ded then 0%						
X-Ray/Lab (Hospital Billed)	Ded then 20%	Ded then 0%	Ded then 20%	Ded then 0%	Ded then 20%	Ded then 0%						
Major Diagnostic (MRI,CT,etc.)	Ded then 20%	Ded then 0%	Ded then 20%	Ded then 0%	Ded then 20%	Ded then 0%						
Prescriptions(Rx)	\$10/\$30/\$50	Ded then 0%	\$10/\$30/\$50/\$100	Ded then 0%	\$10/\$30/\$50	Ded then 0%						
Specialty Rx	\$100	Ded then 0%	\$10/\$30/\$50/\$100	Ded then 0%	\$200	Ded then 0%						
	BCBS plans include diabetes medications treated as preventive and covered at 100% on all plans						Medica has an expanded preventive drug list with medications covered at 100% on all					
Provider Network	Network BLUE				Network BLUE				Medica National			
Employee	49	\$840.60	20	\$814.55	49	\$941.05	20	\$913.04	49	\$836.96	20	\$793.97
Employee + 1	14	\$1,723.23	2	\$1,669.83	14	\$1,929.15	2	\$1,871.72	14	\$1,715.76	2	\$1,627.64
Employee & Family	21	\$2,437.74	10	\$2,362.19	21	\$2,729.04	10	\$2,647.81	21	\$2,427.17	10	\$2,302.52
Monthly Total	\$116,507.16		\$43,252.56		\$130,429.39		\$48,482.34		\$116,002.25		\$42,159.88	
<b>Combined Monthly Total</b>	<b>\$159,759.72</b>				<b>\$178,911.73</b>				<b>158,162.13</b>			
%Variance					11.99%				-1.00%			

## Dodge County

Contribution Summary based on continuing to pay 100% of Single, 80% of Family

	BCBS Current NetworkBlue			BCBS Renewal Network Blue			Medica National Network		
	BlueFreedom 15 Rx1	BlueFreedom 49 Rx 9		\$750 Ded. \$25/\$40 Copay	\$2000 HSA 100%		\$750 Ded. \$25/\$40 Copay	\$2000 HSA 100%	
<b>Monthly Premium Rates</b>									
Employee Only	\$840.60	\$814.55		\$941.05	\$913.04		\$836.96	\$793.97	
Employee + 1	\$1,723.23	\$1,669.83		\$1,929.15	\$1,871.72		\$1,715.76	\$1,627.64	
Employee + 2 or more	\$2,437.74	\$2,362.19		\$2,729.04	\$2,647.81		\$2,427.17	\$2,302.52	
<b>Dodge County's Monthly Contribution:</b>			HSA Accounts			HSA Accounts			HSA Accounts
Employee Only	\$840.60	\$814.55	\$26.05	\$941.05	\$913.04	\$28.01	\$836.96	\$793.97	\$42.99
Employee + 1	\$1,378.58	\$1,335.86	\$42.72	\$1,543.32	\$1,497.38	\$45.94	\$1,372.61	\$1,302.11	\$70.50
Employee + 2 or more	\$1,950.19	\$1,889.75	\$60.44	\$2,183.23	\$2,118.25	\$64.98	\$1,941.74	\$1,842.02	\$99.72
<b>Employee Monthly Contribution</b>									
Employee Only	\$0.00	\$0.00		\$0.00	\$0.00		\$0.00	\$0.00	
Employee + 1	\$344.65	\$333.97		\$385.83	\$374.34		\$343.15	\$325.53	
Employee + 2 or more	\$487.55	\$472.44		\$545.81	\$529.56		\$485.43	\$460.50	
<b>Semi-Monthly Payroll Deductions</b>									
Employee Only	\$0.00	\$0.00		\$0.00	\$0.00		\$0.00	\$0.00	
Employee + 1	\$172.32	\$166.98		\$192.92	\$187.17		\$171.58	\$162.76	
Employee + 2 or more	\$243.77	\$236.22		\$272.90	\$264.78		\$242.72	\$230.25	
<b>Total Monthly Plan Premiums</b>	\$116,507.16	\$43,252.56		\$130,429.39	\$48,482.34		\$116,002.25	\$42,159.88	
<b>Combined Monthly Plan Premiums</b>	\$159,759.72			\$178,911.73			\$158,162.13		
Monthly Employer Premiums	\$101,443.61	\$37,860.25		\$113,565.80	\$42,438.03		\$101,004.01	\$36,903.78	
Monthly Employer HSA Contributions		\$1,210.84			\$1,301.93			\$1,997.99	
<b>Combined Monthly Dodge County Premiums + HSAs</b>	\$140,514.70			\$157,305.76		11.95%	\$139,905.78		-0.43%
Monthly Employee Premiums	\$15,063.55	\$5,392.31		\$16,863.59	\$3,022.15		\$14,998.24	\$2,628.05	
<b>Combined Monthly Employee Premiums</b>	\$20,455.86			\$19,885.74			\$17,626.29		
Dodge County's Percentage	87%			87%			87%		
Employees' Percentage	13%			11%			11%		

HSA contributions are based on Dodge County continuing to contribute the difference in premium between the PPO plan and HSA plan into the HSA account.