



PRINCETON
PUBLIC SCHOOLS



Medical RFP Results

Prepared for **Princeton Public Schools**

October 2026



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Overview



- Your Plan Designs
- Market Update
- RFP Responses
- Respondent Proposal: HealthPartners
- Respondent Proposal: BlueCross BlueShield
- Respondent Proposal: PEIP
- Respondent Proposal: Medica
- Rate Displays
- Selection Criteria

Effective 1/1/26 to 12/31/26

Effective 1/1/26 to 12/31/26

Current Plan Benefits:

\$1,700 Deductible



	In-network	Out-of-network
Deductible	\$1,700 individual \$3,400 family	\$1,700 individual \$3,400 family
Out-of-Pocket Maximum	\$1,700 individual \$3,400 family	\$2,075 individual \$3,650 family
Preventive Care	No charge	80% after deductible
Office Visits	100% after deductible	80% after deductible
Urgent Care	100% after deductible	80% after deductible
Hospital Visits	100% after deductible	80% after deductible
Emergency Room	100% after deductible	80% after deductible
Prescription Coverage	100% after deductible	No coverage
Prescription Out-Of-Pocket Maximum	Combined with medical	No coverage

Extra details about the plan

- Open Access Plan
- HSA Qualified
- Non-Embedded Deductible
- **Plan Deductible will index up \$1,750/\$3,500 effective 1/1/2027**

This comparison is intended to illustrate the carrier's proposed services and rates and should not be relied upon to fully determine benefits and rates. Refer to carrier's renewal/proposal for a complete representation of coverage terms.

Current Plan Benefits:

\$3,475 Deductible



	In-network	Out-of-network
Deductible	\$3,475 individual \$6,950 family	\$3,475 individual \$6,950 family
Out-of-Pocket Maximum	\$3,475 individual \$6,950 family	\$3,750 individual \$7,125 family
Preventive Care	No charge	80% after deductible
Office Visits	100% after deductible	80% after deductible
Urgent Care	100% after deductible	80% after deductible
Hospital Visits	100% after deductible	80% after deductible
Emergency Room	100% after deductible	80% after deductible
Prescription Coverage	100% after deductible	No coverage
Prescription Out-Of-Pocket Maximum	Combined with medical	No coverage

Extra details about the plan

- Open Access Plan
- HSA Qualified Plan
- Plan Deductible will index up \$3,500/\$7,000 effective 1/1/2027

This comparison is intended to illustrate the carrier's proposed services and rates and should not be relied upon to fully determine benefits and rates. Refer to carrier's renewal/proposal for a complete representation of coverage terms.

Current Plan Benefits:

\$1,000 Deductible



	In-network	Out-of-network
Deductible	\$1,000 individual \$2,000 family	\$1,000 individual \$2,000 family
Out-of-Pocket Maximum	\$2,500 individual \$5,000 family	\$2,500 individual \$5,000 family
Preventive Care	No charge	80% after deductible
Office Visits	80% after deductible	80% after deductible
Urgent Care	80% after deductible	80% after deductible
Hospital Visits	80% after deductible	80% after deductible
Emergency Room	80% after deductible	80% after deductible
Prescription Coverage	\$15 Formulary \$45 Non-formulary	No coverage
Prescription Out-Of-Pocket Maximum	\$500 individual \$750 family	No coverage

Extra details about the plan

- Open Access Plan
- Rx Copays

This comparison is intended to illustrate the carrier's proposed services and rates and should not be relied upon to fully determine benefits and rates. Refer to carrier's renewal/proposal for a complete representation of coverage terms.

Current Plan Benefits:

\$200 Deductible – CLOSED TO NEW ENROLLMENT



	In-network	Out-of-network
Deductible	\$200 Individual \$600 Family	\$200 Individual \$600 Family
Out-of-Pocket Maximum	\$600 Individual \$1,200 Family	\$600 Individual \$1,200 Family
Preventive Care	No charge	20% coinsurance
Office Visits	20% coinsurance	20 coinsurance Virtuwell: not covered
Urgent Care	20% coinsurance	20% coinsurance
Hospital Visits	20% coinsurance	20% coinsurance
Emergency Room	20% coinsurance	20% coinsurance
Prescription Coverage	\$8 - \$12 Copay at retail \$16 - \$24 Copay mail order	20% coinsurance at retail Mail order not covered
Prescription Out-Of-Pocket Maximum	\$2,000 Individual / \$4,000 Family	\$2,000 Individual / \$4,000 Family

Extra details about the plan

- \$200 Deductible Plan – CLOSED TO NEW ENROLLMENT

This comparison is intended to illustrate the carrier's proposed services and rates and should not be relied upon to fully determine benefits and rates. Refer to carrier's renewal/proposal for a complete representation of coverage terms.

The background image shows medical professionals in a clinical setting, overlaid with a teal color and a network of white geometric lines and hexagons. Various medical icons are scattered throughout, including a stethoscope, a hand with a pulse line, a medical truck, a pill bottle, and a hand holding a stethoscope. The text "Market Update" is centered in a bold, white, sans-serif font.

Market Update

Market Update



Cell and Gene Therapy Update

It was just a few years ago that Cell and Gene Therapy was the talk of the industry, with significant concerns about its potential impact. Being top of mind with every insurance carrier and stop loss provider we met with; we watched the pipeline in this space expand quickly. The cost of these treatments was typically in the millions, reaching approximately \$400,000 to \$4 million depending on the drug. Throughout the past several years, we have monitored the potential impact that they could have on medical and pharmacy trend lines.

What is the likelihood of having a claim?

In 2025, the probability of incurring one of these claims is very low. For example, one of AssuredPartners' claim data sets sits within a data-warehouse that includes 300,000 members, and that block hasn't had a single cell and gene therapy claim to date. Additionally, in the reporting we reviewed from one of the largest stop loss carriers in the market, their block only has between 5 and 10 of these claims across an industry-leading membership base. While the risk is low, when one of these claims is incurred on a plan, it can have a significant impact.

Current Market Solutions

- **Fully Insured:** The current response from the Fully Insured Markets is to cover the therapies, which took the decision-making process away from employers and makes it easy to move between carriers.
- **Stop Loss (self-funded):** The response from the Stop Loss market is far less clean. We need to:
 - Educate ourselves on whether or not to cover the treatments;
 - Use bundled carrier solutions or layer separate risk corridors over the top of traditional policies; and
 - Learn how each carrier would treat lasers at current and future renewals.

Source: AssuredPartners

High Cost Claimants

Facility/inpatient costs and medical specialty drugs are still the top contributors to spend in higher thresholds. **Cancers continue to dominate** the conditions driving the highest-cost claimants (those over \$250K).

Source: Springbuk

Market Update

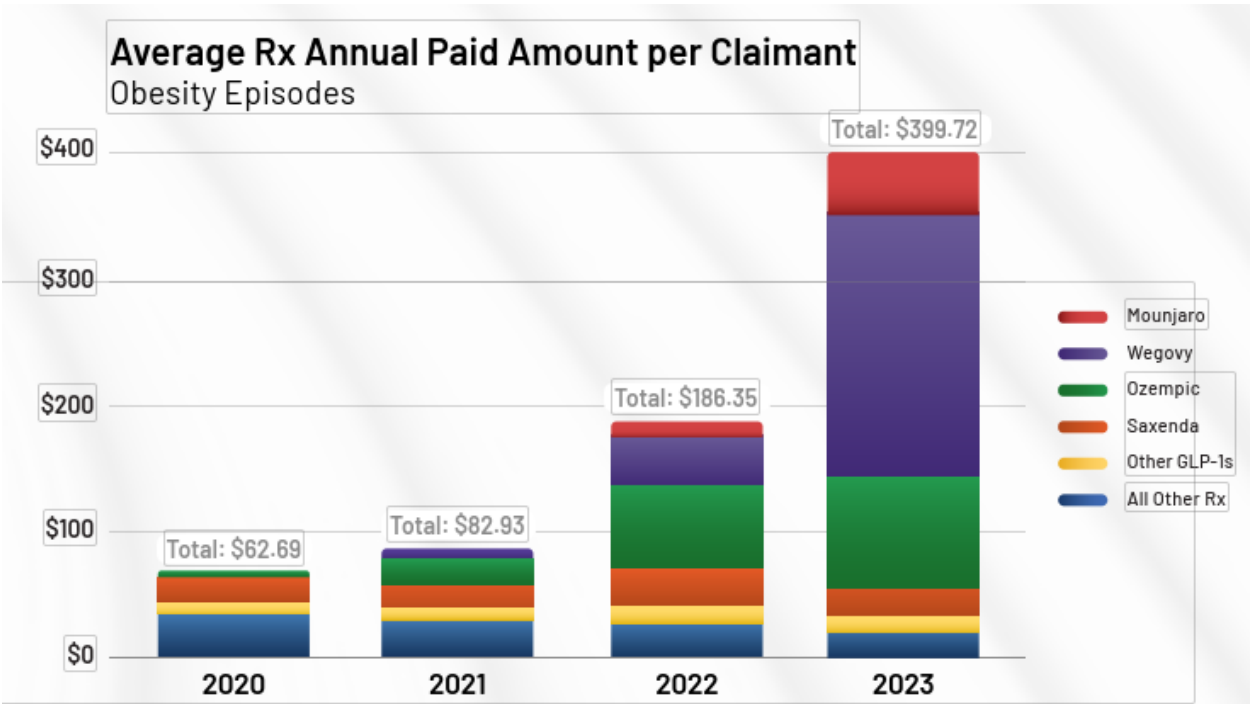


Rx Trend

From 2020-2023, **Rx costs surged 42%**, reaching \$131 per member per month (PMPM). **The primary contributors to this increase are specialty drugs and brand-name maintenance drugs**, which are crucial for treating chronic conditions.

Notably, in the past year, the PMPM for brand-name maintenance drugs has grown at a faster rate than that for specialty drugs, **with increases of 15.5% and 9.8%, respectively.**

The Employee Health Trends 2024 report unveiled a striking revelation: **Five conditions accounted for 75% of the increased prescription drug spending from the previous year**, with diabetes and obesity among them.



Consider a comprehensive strategy to address rising obesity treatment costs. **This could involve partnering with clinical programs that take a holistic approach, combining:**

- Step therapy protocols to ensure cost-effective medication use
- Lifestyle interventions
- Disease management strategies

Source: Springbuk

RFP Responses

RFP Responses



The district received responses from:

- HealthPartners
- BlueCross BlueShield
- Medica
- PEIP

The district received best and final responses from:

- HealthPartners
- BlueCross BlueShield
- Medica

The background image shows medical professionals in a clinical setting, overlaid with a teal color and a network of white geometric lines and hexagons. Various medical icons are scattered throughout, including a stethoscope, a hand with a pulse line, a pill bottle, a medical truck, and a hand holding a stethoscope. The text is centered in a bold, white, sans-serif font.

Respondent Proposal: HealthPartners

HealthPartners

Financial Summary



Financial Summary

- Renewal for January of 2027, would be a **32%** increase
- Revenue from current premium for 2026 is **\$4,750,762**
- 2027 Proposed revenue, using current enrollment, would be **\$6,266,250**
- Annual increase in revenue of **\$1,515,489**
- Response did **not** include any renewal caps for 2028



The background image shows medical professionals in a clinical setting, overlaid with a teal color and a network of white geometric lines and hexagons. Various medical icons are scattered throughout, including a stethoscope, a hand with a pulse line, a pill bottle, a medical truck, and a hand holding a stethoscope. The text is centered in a bold, white, sans-serif font.

Respondent Proposal: BlueCross BlueShield

BlueCross BlueShield

Financial Summary



Financial Summary

- Renewal for January of 2027, would be an **11%** increase
- Revenue from current premium for 2026 is **\$4,750,762**
- 2027 Proposed revenue, using current enrollment, would be **\$5,251,581**
- Annual increase in revenue of **\$500,819**
- Response did not include any renewal caps for 2028
- This rate is base upon implementation of the Kavira Program

Kavira



Your Employees Are Remarkable. Your Health Benefits Should Be Too.

kavira.

Did you know you can give your employees unlimited, comprehensive primary and urgent care? In the comfort of their home? Did you know you can give your employees free prescriptions with free delivery? And free in-home x-rays? Did you know that you can give this amazing benefit to employees' family members as well? Well...yes you can!

Kavira Health is a direct-to-employer healthcare provider offering comprehensive primary and urgent care through home visits, virtual care, and free and discounted labs, x-rays and prescriptions delivered to your employees' homes.

No paperwork, no surprise costs, no long commutes or missing work....employees get a whole lot of peace of mind.

Here's how it works:



Enroll employees



Virtual visit



In-home visit



Free X-rays, Rxs, Labs



Ongoing provider messaging

The Kavira Care Team is made up of W-2 clinicians who get to know your employees; no more one-off visits with new providers each time. Here are some of the many conditions we treat:

Primary/Urgent :

- Strep Throat
- Ear Infections
- Rashes
- Pink Eye
- Stomach Problems
- Sprains and Strains

Chronic Conditions:

- Acne
- Type 2 Diabetes
- High Cholesterol
- Obesity
- Anxiety

Wellness/Prevention:

- Behavioral Health Coaching
- Wellness Exams
- Tobacco Cessation
- Contraception

Kavira's monthly subscription is equivalent to a \$0.16 raise for a full-time employee

Simple contract | Set-up in under a month | No upfront fees | Turnkey solution

Employees love it, and best of all it saves money.

Learn more: kavirahealth.com / Contact: Charlie Sir, VP of Growth, charlie.sir@kavira.health

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Kavira



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Kavira Overview

Health care,
like it should be.

Better Healthcare

Everyday care for your employees,
on-demand and delivered,
all at no cost to them



Mobile App

Secure, HIPAA-compliant messaging and video chats with expert providers



Virtual Care First

- ✓ Diagnose
- ✓ Prescribe
- ✓ Treatment
- ✓ Peace of Mind



House Visits

- ✓ In-Home Labs
- ✓ In-Home Exams
- ✓ In-Home X-Rays
- ✓ In-Home Acute Care



Rx Refills & Delivery

Prescription management and delivery

Employers Save

Kavira redirects claims away from the plan, reducing healthcare costs, and keeping premiums low

Kavira



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Services List

Acute Conditions We Treat:

- Asthma
- Athlete's foot
- Bronchitis
- Bug bites
- Cold sores
- Cough, cold & flu
- Diarrhea
- Ear concerns (pain, drainage, wax)
- Gout
- Hand, foot, mouth
- Insomnia
- Muscle or joint pain
- Nail disorders
- Pink eye
- Rashes, skin conditions, burns
- Sprains and strains
- Sinus infection
- Sore throat
- Stitch removal
- UTI (female)
- Vaginitis (yeast or BV infection)
- Various viral illnesses
- Wart evaluation
- Many more

Chronic Conditions We Treat:

- Acne
- Anemia (mild) evaluation
- Anxiety / Mild-moderate depression
- Asthma
- BPH (mild/stable)
- Constipation
- Diabetes type 2
- Eczema
- Epi-pen refills
- Hair Loss
- Heartburn (GERD)
- High cholesterol
- Hypertension
- Hypothyroidism
- Obesity
- Osteoarthritis
- Seasonal allergies

Imaging (non-emergency):

- X-rays
- EKGs

Additional Services:

- 30 free labs
- 300+ free Rx's

Preventive:

- Wellness exams
- Contraception
- Sports physicals
- Tobacco / nicotine cessation
- Nutrition counseling

Behavioral Health Counseling:

- Abuse
- Addiction
- Anxiety
- Depression
- Domestic violence
- Trauma
- Relationship counseling
- Stress
- Workplace challenges

Corporate Benefits:

- In-office biometric screens
- Facilitate vaccine clinics

Note: Behavioral Health Counseling services are an additional cost. This is not a comprehensive list of treatable conditions. Decisions to treat specific medical conditions will be based on patient medical history, complexity, and provider discretion.

Kavira



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Membership Benefits

Top Reasons Groups are Adding Kavira

Redirect Claims

- Redirect claims away from the medical plan, and prepare for future renewals

Remove Barriers to Access

- Provide employees with peace of mind around accessing care, improving employee health and well-being

W-2 Clinicians & Continuity of Care

- Our entire Care Team is comprised of W-2 clinicians, enabling us to provide continuity of care, higher quality care, a better patient experience, and the ability to manage chronic conditions

Attract & Retain Talent

- Kavira is a unique, low cost, high-value benefit that can help set your company's benefit plan apart from the competition

Kavira has 9/10 patient ratings across all patient encounters

Kavira



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Your All-Inclusive Membership

Kavira Pricing for all Employees Enrolled in the Medical Plan

	# of Employees	PEPM	Monthly Cost	Annual Cost
In-Person Care + Telehealth	274	\$27.00	\$7,398	\$88,776
Telehealth Only	3	\$0.00	\$0	\$0
No Services Available	1	\$0.00	\$0	\$0
Total	278		\$7,398	\$88,776

Note: Monthly billing will fluctuate as employees are added (hired) / removed (fired, or otherwise leave) the company.

Note: Behavioral Health Services would be an additional cost of \$4 PEPM.

Note: Employees in Hibbing, Morris, and Ortonville (MN) would be eligible for telehealth only or in-person care at a workplace within home visit area.

Note: Employee in Florida would not be covered by Kavira services.



Respondent Proposal: PEIP

PEIP



Financial Summary

- Renewal for January of 2027, would be a **29%** increase
- Revenue from current premium for 2026 is **\$4,750,762**
- 2027 Proposed revenue, using current enrollment, would be **\$6,130,266**
- Annual increase in revenue of **\$1,379,505**
- Response did **not** include any renewal caps for 2028

Plan Highlights

- Enhanced coverage of infertility for BlueCross members (similar to HealthPartners coverage)
- \$0 or reduced office copays for mental health treatment.
- Out of area care for members has changed (see attachment).

The background is a blurred photograph of medical professionals in white coats, overlaid with a semi-transparent teal color. A network of white geometric lines, including hexagons and triangles, is superimposed on the teal background. Various white icons are scattered throughout, such as a stethoscope, a hand with a pulse line, a medical truck, a pill bottle, and a hand holding a stethoscope. A large white cross is positioned on the right side.

Respondent Proposal: Medica

Medica

Financial Summary



Financial Summary

- Renewal for January of 2027, would be a **42.6%** increase
- Revenue from current premium for 2026 is \$4,750,761
- 2027 Proposed revenue, using current enrollment, would be \$6,776,588
- Annual increase in revenue of **\$2,025,827**
- Response did not include any renewal caps for 2028



Rate Displays

BlueCross BlueShield

Rate Display



	2027	2027	2027	2027
EXAMPLE: Teacher SINGLE election	\$200 Deductible	\$1000 Deductible	\$1750 HSA	\$3500 HSA
Total Premium Per Month	\$ 2,012.11	\$ 1,084.25	\$ 989.11	\$ 960.25
Employer Premium Per Month	\$ 962.00	\$ 962.00	\$ 962.00	\$ 962.00
Employee Premium Per Month	\$ 1,050.11	\$ 122.25	\$ 27.11	\$ -
Annual Premium	\$ 12,601.32	\$ 1,467.00	\$ 325.32	\$ -
Out of Pocket Max (In Network)	\$ 600.00	\$ 2,500.00	\$ 1,750.00	\$ 3,500.00
(HSA contribution will reduce Maximum Cost)	\$ -	\$ -	\$ -	
Minimum Cost/Year (premiums)	\$ 12,601.32	\$ 1,467.00	\$ 325.32	\$ -
Maximum Cost/Year (prems.+ out of pocket)	\$ 13,201.32	\$ 3,967.00	\$ 2,075.32	\$ 3,500.00
EXAMPLE: Teacher SINGLE + Child(ren) election	\$200 Deductible	\$1000 Deductible	\$1750 HSA	\$3500 HSA
Total Premium Per Month	\$ 3,282.52	\$ 1,756.47	\$ 1,604.79	\$ 1,557.46
Employer Premium Per Month	\$ 1,283.00	\$ 1,283.00	\$ 1,283.00	\$ 1,283.00
Employee Premium Per Month	\$ 1,999.52	\$ 473.47	\$ 321.79	\$ 274.46
Annual Premium	\$ 23,994.24	\$ 5,681.64	\$ 3,861.48	\$ 3,293.52
Out of Pocket Max (In Network)	\$ 1,200.00	\$ 5,000.00	\$ 3,500.00	\$ 7,000.00
(HSA contribution will reduce Maximum Cost)	\$ -	\$ -	\$ -	\$ -
Minimum Cost/Year (premiums)	\$ 23,994.24	\$ 5,681.64	\$ 3,861.48	\$ 3,293.52
Maximum Cost/Year (prems.+ out of pocket)	\$ 25,194.24	\$ 10,681.64	\$ 7,361.48	\$ 10,293.52
EXAMPLE: Teacher with FAMILY	\$200 Deductible	\$1000 Deductible	\$1750 HSA	\$3500 HSA
Total Premium Per Month	\$ 5,009.48	\$ 2,680.51	\$ 2,441.74	\$ 2,369.30
Employer Premium Per Month	\$ 1,924.00	\$ 1,924.00	\$ 1,924.00	\$ 1,924.00
Employee Premium Per Month	\$ 3,085.48	\$ 756.51	\$ 517.74	\$ 445.30
Annual Premium	\$ 37,025.76	\$ 9,078.12	\$ 6,212.88	\$ 5,343.60
Out of Pocket Max (In Network)	\$ 1,200.00	\$ 5,000.00	\$ 3,500.00	\$ 7,000.00
(HSA contribution will reduce Maximum Cost)	\$ -	\$ -	\$ -	\$ -
Minimum Cost/Year (premiums)	\$ 37,025.76	\$ 9,078.12	\$ 6,212.88	\$ 5,343.60
Maximum Cost/Year (prems.+ out of pocket)	\$ 38,225.76	\$ 14,078.12	\$ 9,712.88	\$ 12,343.60

Last Updated: 10/14/2026

- Aggregate plan rates above include the monthly program cost for Kavira
- Grid above reflects the Teacher Cost Sheet effective 1/1/2027

HealthPartners

Rate Display



Princeton Public Schools ISD 4 - 41158

Effective Date: January 1, 2027

CG347 HSA OA \$1700-100% NE HSA			Open Access	
	<u>Enrollment</u>		<u>Current Rates</u>	
Single	63		\$ 928.09	
Single + Spouse	11		\$ 2,329.48	
Single + Child(ren)	14		\$ 1,518.25	
Family	38		\$ 2,329.48	
Revenue:			\$ 193,870	
CG348 HSA OA \$3475-100% E HSA			Open Access	
	<u>Enrollment</u>		<u>Current Rates</u>	
Single	53		\$ 837.93	
Single + Spouse	9		\$ 2,103.20	
Single + Child(ren)	18		\$ 1,370.77	
Family	21		\$ 2,103.20	
Revenue:			\$ 132,180	
CG415 DED OA \$1000-80%			Open Access	
	<u>Enrollment</u>		<u>Current Rates</u>	
Single	16		\$ 957.10	
Single + Spouse	1		\$ 2,402.29	
Single + Child(ren)	7		\$ 1,565.71	
Family	8		\$ 2,402.29	
Revenue:			\$ 47,894	
CG414 DED OA \$200-80%			Open Access	
	<u>Enrollment</u>		<u>Current Rates</u>	
Single	10		\$ 1,095.45	
Single + Spouse	1		\$ 2,749.56	
Single + Child(ren)	0		\$ 1,792.04	
Family	3		\$ 2,749.56	
Revenue:			\$ 21,953	
			Open Access	
			<u>Renewal Rates</u>	Creditable
			\$ 1,222.57	
			\$ 3,068.63	
			\$ 2,000.00	
			\$ 3,068.63	
			\$ 255,385	31.73%
			Open Access	
			<u>Renewal Rates</u>	Creditable
			\$ 1,109.24	
			\$ 2,784.16	
			\$ 1,814.59	
			\$ 2,784.16	
			\$ 174,977	32.38%
			Open Access	
			<u>Renewal Rates</u>	Creditable
			\$ 1,258.55	
			\$ 3,158.93	
			\$ 2,058.85	
			\$ 3,158.93	
			\$ 62,979	31.50%
			Open Access	
			<u>Renewal Rates</u>	Creditable
			\$ 1,439.45	
			\$ 3,612.99	
			\$ 2,354.78	
			\$ 3,612.99	
			\$ 28,846	31.40%
COMBINED REVENUE:			Current \$395,897	
			Renewal \$522,188 31.90%	



HealthPartners®

2026 RFP Results

PEIP

Rate Display



Section I: Proposed Financial Summary

Group Name: Princeton ISD #477
Effective Date: 01/01/2027 – 12/31/2027
Plan Structure & Network Type: Broad Tiered Network HMO

Health Plan Actuarial Value

Source: HHS Minimum Value Calculator

2026 Actuarial Value	
Plan % of Total Allowed Costs	
High	HSA
89.8%	74.0%

This minimum value calculator was released by the Department of Health and Human Services in conjunction with the final rule for determining minimum value, finalized as 45 CFR 156.145. This tool is being used to calculate actuarial value as required by Minnesota Statute 2023, section 471.6161, subdivision 8 as amended by Chapter 114, Article 1, Section 15. The HHS minimum value calculator utilizes 2009 data trended to 2014 to determine each plan's actuarial value and relies solely on the Single coverage plan design. No employer premium or HRA/HSA contributions are included in these actuarial value calculations.

Source: Historical and Projected PEIP Membership and Claims Data

2026 Cost Sharing Projections	
Plan % of Total Allowed Costs	
High	HSA
93.6%	85.9%

Using recent, actual claims data, as well as projected benefit changes, this represents PEIP's estimated member cost sharing associated with the HIGH and HSA plans. This estimate is calculated using actual PEIP membership and claim experience for both Single and Family coverages, trended forward to 2026 and using 2026 plan designs.

No employer premium or HRA/HSA contributions are included in these actuarial value calculations.

Advantage High					Projected Contracts (2)
Benefit Adjustment	1.16	Rates	Commission	Rates+Commission	
Single		\$1,311.92	\$8.24	\$1,320.16	89
Employee+1		-	-	-	0
Employee+Children		\$2,146.17	\$8.24	\$2,154.41	21
Family		\$3,292.90	\$8.24	\$3,301.14	61

Advantage HSA					
Benefit Adjustment	0.8	Rates	Commission	Rates+Commission	
Single		\$918.35	\$8.24	\$926.59	53
Employee+1		-	-	-	0
Employee+Children		\$1,502.32	\$8.24	\$1,510.56	18
Family		\$2,305.03	\$8.24	\$2,313.27	30

Total Quoted		Needed Premium	
Members	610	PMPM (3)	\$832.07
Advantage Needed		Average Commission	
Premium (3)	\$6,090,753	PMPM	\$3.67

Medica Rate Display



Proposal Rates for Princeton ISD #477

Effective Date January 1, 2027

Medica Choice Passport

Medical Plan	1750-0% HSA	3500-0% HSA	1000-20%	200-20%
Rx	Ded/Coins with Prev Rx		\$15/30/45	\$8/10/25
Rates	Proposed	Proposed	Proposed	Proposed
Employee only	\$1,352.13	\$1,210.58	\$1,250.34	\$1,433.95
Employee + spouse	\$3,393.81	\$3,038.53	\$3,138.31	\$3,599.17
Employee + child(ren)	\$2,211.93	\$1,980.38	\$2,045.41	\$2,345.77
Family	\$3,393.81	\$3,038.53	\$3,138.31	\$3,599.17

Medica Elect

Medical Plan	1750-0% HSA	3500-0% HSA	1000-20%	200-20%
Rx	Ded/Coins with Prev Rx		\$15/30/45	\$8/10/25
Rates	Proposed	Proposed	Proposed	Proposed
Employee only	\$1,183.11	\$1,059.26	\$1,094.04	\$1,254.70
Employee + spouse	\$2,969.58	\$2,658.71	\$2,746.02	\$3,149.27
Employee + child(ren)	\$1,935.44	\$1,732.83	\$1,789.73	\$2,052.55
Family	\$2,969.58	\$2,658.71	\$2,746.02	\$3,149.27

Selection Criteria

Evaluation Criteria



Evaluation of proposals will take into account (but is not limited to) the following criteria:

- Compliance with specifications
- Contract provisions
- Provider network and Provider Contracts
- Premium rates and guarantee periods
- Proposer's ability to adequately service the District's employees and their dependentsEase, cost and effectiveness of transition from present carrier
- The District reserves the right to accept or reject any or all proposals, to waive informalities in the proposals and to negotiate with carriers on benefits, premiums and other contract terms (as allowed under Section 471.6161 of Minnesota Statutes).

Selection Criteria

Recommendations



NIS recommends transitioning to BlueCross BlueShield of Minnesota direct effective January 1, 2027 given the matching plan designs and the overall 11% increase in premium expense using current enrollment and with the inclusion of a not to exceed rate cap in year two of 19.5%. This recommendation includes deploying the Kavira primary care program to achieve the proposed pricing for a minimum of one year.