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AISD Health Insurance Overview & Recommendations

Heath Haigood Senior Account Executive, Public Sector

April 3, 2025

Overview



- AISD released a Medical / COBRA Administration RFP on January 14, 2025
- Proposals were due on February 25, 2025

MEDICAL CARRIER	RESPONDED / DECLINED
BCBSTX	Incumbent - Recommended
Baylor Scott & White	Responded
Curative	Responded - Disqualified
Cigna	Declined – Uncompetitive
Aetna	Declined – Uncompetitive
TX Health Benefits Pool	Declined – Uncompetitive
United Healthcare	Declined – Uncompetitive

- HUB received Best and Final Offers on March 25, 2025
- HUB scored the Best and Final Offers on March 25, 2025

Financial Overview



	Annual Plan Cost		% Difference from Current	
Current Plan Cost - BCBSTX Health Plans 2024-25	\$13,858,438	-	-	-
Renewal Plan Cost - BCBSTX Health Plans 2025-26	\$17,862,436	\$4,003,998	28.9%	Includes \$500k One-Time Premium Credit Current Plan Designs
Proposed Plan Cost - BCBSTX Health Plans 2025-2026	\$14,820,738	\$962,300	0.00/	Includes \$500k One-Time Premium Credit Condensed to 4 Plan Options
	* 22,422,422	* 0 544 070		Includes HSA Plan with No Cost to Employee Only
Proposed BSWHP Health Plans 2025-26	\$23,403,408	\$9,544,970	68.9%	Uncompetitive

BCBSTX Proposal - BAFO



Plan	HSA 6000 - PPO (NEW)		HSA 3300 - PPO		HMO 2000		НМО	HMO 6000	
Annual Deductible Individual / Family	\$6,000 / \$10,000	\$6,000 / \$12,000	\$3,300 / \$6,600	\$6,000 / \$12,000	\$2,000 / \$4,000	N/A	\$6,000 / \$12,000	N/A	
Out-of-Pocket Maximum Individual / Family	\$10,000 / \$20,000	Unlimited	\$6,900 / \$13,800	Unlimited	\$6,000 / \$12,000	N/A	\$7,000 / \$14,000	N/A	
Coinsurance	20%	50%	20%	50%	20%	N/A	20%	N/A	
Office Visits PCP / Specialist Telemedicine	20% 20%	50% 50%	20% 20%	50% 50%	\$45 / \$55 \$0	N/A	\$45 / \$55 \$0	N/A	
Urgent Care	20%	50%	20%	50%	\$100	N/A	\$100	N/A	
Emergency Room Retail Pharmacy	\$750 Copay + 20% AD		\$750 Copay + 20% AD		\$750 Copay + 20% AD	N/A	\$750 Copay + 20% AD	N/A	
Deductible	Integrated w	ith Medical	Integrated with Medical		N/A		N/A		
Generic / Tier 1 30-Day Supply	\$20, \$0 for certain generics		\$20, \$0 for certain generics		\$20, \$0 for certain generics		\$20, \$0 for certain generics		
Brand / Tier 2 & 3 Preferred / Non-Preferred	\$50 / \$80		\$50	/ \$80	\$50 / \$80		\$50 / \$80		
Specialty / Tier 4 & 5	\$150 /	\$150	\$150	/ \$150	\$150 /	/ \$150	\$150 / \$150		

ESTIMATED ENROLLMENT							
Employee Only	89	779	70	338			
Employee + Spouse	5	39	1	8			
Employee + Child(ren)	16	229	16	89			
Employee + Family	6	43	2	15			
Total Employees by Plan	116	1090	89	450			
Total Employees	1,745						

RATES	HSA 6000 - PPO (NEW)	HSA 3300 - PPO	HMO 2000	HMO 6000			
Proposed	2025-2026	2025-2026	2025-2026	2025-2026			
Emp Only	\$409.69	\$619.65	\$736.11	\$505.36			
Emp + Spouse	\$827.04	\$1,250.87	\$1,485.98	\$1,202.15			
Emp + Child(ren)	\$717.64	\$1,085.40	\$1,289.41	\$885.21			
Emp + Family	\$1,199.84	\$1,814.72	\$2,155.80	\$1,480.00			
Monthly Total	\$59,279	\$858,081	\$77,956	\$281,413			
Annual Total	\$711,347	\$10,296,970	\$935,470	\$3,376,951			
Combined Annual Total	\$14,820,738						
\$ Differential from Current	\$962,300						
% Differential from Current		6.9%					

Health Insurance Proposal #009, 24-25

Proposal Tabulation

Proposal Tabulation





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HUB

Contracting FirmBlue Cross BlueBaylor Scott & WhiteShield of TexasHealth Plan

Initial Proposal Price	\$17,862,436	\$23,403,408
Best and Final Proposal Price	\$14,820,739	\$23,403,408

Evaluation of Proposers

Evaluation of Proposers

Abilene Independent School District Health Insurance Proposal #009, 24-25

Evaluation Criteria Used for Ranking Proposers	Points	BCBSTX	BSWHP
Proposal Price			
Purchase Price	40	34	28
Reputation of the Vendor and Vendor's Goods or Services	5	5	5
Quality of the Vendor's Goods or Services	30	30	26
Extent to which the Goods or Services Meet the District's Needs	25	24	24
Vendor's Past Relationship with the District	0	0	0
Impact on the Ability of the District to Comply with Laws and Rules Relating to Historically Underutilized Businesses	0	0	0
Total Long-Term Cost to the District to Acquire the Vendor's Goods or Services	0	0	0
For a Contract for Goods and Services, Other than Goods and Services Related to Telecommunications and Information Services, Building Construction and Maintenance or Instructional Materials, whether the Vendor or Vendor's Ultimate Parent Company or Majority Owner 1) Has its Principal Place of Business in this State, or 2) Employees at least 500 Persons in this State	0	0	0
Any Other Relevant Factor(a) Specifically Listed in			
Any Other Relevant Factor(s) Specifically Listed in these Specifications	0	0	0
	U	0	0
Total	100	02	02
Total	100	93	83





Non-Responsive Vendors (Vendors that obtained plans but did not respond)	
Cigna	
Aetna	
TX Health Benefits Pool	
United Healthcare	

Thank you.

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BSWHP Proposal



Plan	BSW Access	PPO 1500-8k	BSW Access PP	O 2500-8.5k	BSW Access PPO HSA 3300-5.25K		BSW Plus HMO 1500-5k		BSW Plus HMO 5000-7K	
Annual Deductible				\$5,000 /						
Individual / Family	\$1,200 / \$2,400	\$2,400 / \$4,800	\$2,500 / \$5,000	\$10,000	\$3,200 / \$6,000	\$6,000 / \$12,000	\$1,500 / \$3,000	N/A	\$5,000 / \$10,000	N/A
Out-of-Pocket Maximum										
Individual / Family	\$7,000 / \$14,000	Unlimited	\$8,000 / \$16,000	Unlimited	\$6,900 / \$13,800	Unlimited	\$5,000 / \$10,000	N/A	\$7,000 / \$14,000	N/A
Coinsurance	20%	50%	20%	50%	20%	50%	20%	N/A	20%	N/A
Office Visits PCP / Specialist	\$30 / \$45	50%	\$30 / \$45	50%	20%	50%	\$30 / \$45		\$30 / \$45	
Telemedicine	\$0	50%	\$0	50%	20%	50%	\$0	N/A	\$0	N/A
Urgent Care	\$75	50%	\$75	50%	20%	50%	\$75	N/A	\$75	N/A
Emergency Room	\$500 Copa	y + 20% AD	\$500 Copay	+ 20% AD	\$500 Access	Fee + 20% AD	\$500 Copay + 20% AD	N/A	\$500 Copay + 20% AD	N/A
Retail Pharmacy										
Deductible	N	/A	N/A	1	Integrated v	with Medical	N	/Α	N	/Α
Generic / Tier 1 30-Day Supply	\$10, \$0 for ce	rtain generics	\$10, \$0 for cert	ain generics	\$10, \$0 for ce	ertain generics	\$10, \$0 for ce	rtain generics	\$10, \$0 for ce	rtain generics
Brand / Tier 2 & 3 Preferred / Non-Preferred	\$40	/ \$70	\$40 / s	\$40 / \$70		/ \$70	\$40 /	/ \$70	\$40	/ \$70
Specialty / Tier 4 & 5		/ \$150	\$100 / \$			/ \$150		/ \$150		/ \$150

ESTIMATED ENROLLMENT									
Employee Only	286	493	89	70	338				
Employee + Spouse	18	21	5	1	8				
Employee + Child(ren)	75	154	16	16	89				
Employee + Family	13	30	6	2	15				
Total Employees by Plan	392	698	116	89	450				
Total Employees		1,745							

RATES	BSW Access PPO 1500-8k	BSW Access PPO 2500-8.5k	BSW Access PPO HSA 3300-5.25K	BSW Plus HMO 1500-5k	BSW Plus HMO 5000-7K			
Proposed	2025-2026	2025-2026	2025-2026	2025-2026	2025-2026			
Emp Only	\$985.13	\$888.50	\$826.17	\$961.73	\$809.21			
Emp + Spouse	\$1,989.78	\$1,793.60	\$1,667.09	\$1,942.26	\$1,632.63			
Emp + Child(ren)	\$1,762.43	\$1,556.34	\$1,446.65	\$1,685.23	\$1,416.77			
Emp + Family	\$2,887.12	\$2,602.08	\$2,418.20	\$2,818.08	\$2,368.08			
Monthly Total	\$487,278	\$793,435	\$119,520	\$101,863	\$448,188			
Annual Total	\$5,847,336	\$9,521,218	\$1,434,242	\$1,222,358	\$5,378,253			
Combined Annual Total	\$23,403,408							
\$ Differential from Current			\$9,544,970					
% Differential from Current			68.9%					

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