	AGENDA ITEM BOARD OF TRUSTEES
	AGENDA
	Workshop X Regular Special
A)	Report Only Recognition
	Presenter(s):
	Briefly describe the subject of the report or recognition presentation.
B)	X Action Item
	Presenter(s): ISMAEL MIJARES, DEPUTY SUPERINTENDENT FOR BUSINESS AND FINANCE LUIS VELEZ, PURCHASING DIRECTOR
	Briefly describe the action required.
	CONSIDER AND TAKE APPROPRIATE ACTION ON THE REQUEST TO AWARD PROPOSAL NO. 162707 FOR STOP-LOSS REINSURANCE ONLY FOR HEALTH BENEFIT PROGRAM AND THE BOARD DELEGATES THE SUPERINTENDENT OR DESIGNEE THE AUTHORITY TO MAKE RELATED BUDGETED PURCHASES OF GOODS OR SERVICES AS PER BOARD POLICY CH.
C)	Funding source: Identify the source of funds if any are required.
	BUDGETED FUNDS
D)	Clarification: Explain any question or issues that might be raised regarding this item.
	SEE ATTACHED MEMORANDUM

Eagle Pass Independent School District

To: Mr. Ismael Mijares, Deputy Superintendent for Business and Finance

From: Luis A. Vélez, Purchasing Director

Date: Monday, June 29, 2015

Masted for Excellence



Digitally signed by Luis A. Vélez Date: 2015.07.08 17:02:23 -05'00'

Subject: Recommendation on Request for Proposal Number 162707 for Stop-loss Reinsurance Only for Health Benefit Program

Based on the submitted proposals, and the recommendation from Mr. Tom Sawyer, financial consultant for the district, the Department of Purchasing recommends that Request for Proposal Number 162707 for Stop-loss Reinsurance Only for health benefit program be awarded in accordance with the specifications and

requirements of the proposal to Voya "Renewal Option 2".

As reference, the following is a list of carrier history for the district:

2002-2003: Symetra 2003-2004: Symetra 2004-2005: Symetra 2005-2006: Symetra 2006-2007: Symetra 2007-2008: Symetra 2008-2009: Voya/ING 2009-2010: Voya/ING 2010-2011: Voya/ING 2011-2012: Voya/ING 2012-2013: Sun Life 2013-2014: Sun Life 2014-2015: Voya/ING

If you have any questions or need more information regarding this matter, please contact me at the purchasing department.

1420 Eidson Road

Eagle Pass, Texas 78852

Tel (830) 773-5181

WWW.eaglepassisd.net

AN EQUAL OPPORTUNITY EMPLOYER

F-280

2015 – 2016 Medical Plan Renewal

Ismael and Luis,

Enclosed is the Spreadsheet we've created for you, showing six (6) Renewal Options. We're on our 4th Revision, and have undergone numerous Negotiations, but have called a halt to the process in order to get these Final results to you.

Here's my assessment in Order of **Best to Least** Attractive (but you determine what Best Suites You and the Board at EPISD):

#01. Elect Option #2: You would <u>Raise your Specific Deductible from \$225,000 to \$250,000</u>. Your "Hard Dollar" costs (from Specific and Aggregate Premiums), would remain exactly the same as in Current Year (14-15). Your "Soft Dollar" Liability would only increase by 5.16% (\$21,032,630 to \$22,117,702). NO Lasers!

#02. Elect Option #3: You would keep the same Specific Deductible of \$225,000, and the "Hard Dollar" costs for Specific and Aggregate Reinsurance would only Increase by \$3,256. The "Catch" is: There would be a <u>Laser</u> place on a <u>Child Hemophiliac</u> Claimant for \$400,000 (which would be \$175,000 Higher than on any other covered Individual under the plan). I have that "yellowed" at the Bottom of the Spreadsheet.

#03. Elect IHC Risk Quote: You would keep the same Specific Deductible of \$225,000, and the "Hard Dollar" costs for Specific and Aggregate Reinsurance would only Increase by \$31,763 (compared to Option #3 with Voya), and would be an Increase of \$35,019 (compared to Option #2 with Voya). No Lasers!

#4. Elect Option #1: Renew with Voya and undergo a "Hard Dollar" Increase of \$167,229. Your "Soft Dollar" Liability would Increase by \$651,580. NO Lasers!

I've enclosed a "Large Claims" Listing for the Current Year 14-15. You've experienced 3 Shock Losses in Excess of \$225,000 (your Current Specific Stop-Loss Level). So you've spent \$123,029 in Excess of Dollars above your Current Specific Stop-Loss level of \$225,000.

You will have paid specific stop-loss premium of \$1,006,279 in 14-15. If you were to selects Option #1, your "Hard Dollar" cost goes up \$167,229. Therefore: Since you've only spent \$123,029 above your current \$225,000 Specific Stop-Loss level, and it would cost \$167,229 more in Premium to keep the same Specific Stop-Loss Level of \$225,000 (proposed in Option #1), you come out Better by Raising your Specific Stop-Loss Level to \$250,000. And at this rate, you would need to have 6.5 Specific Claims Violations to Justify paying the renewed Fixed Cost of \$167,229 offered with Option #1.

So ALL signs point to Selecting Option #2 with renewing with Voya on a Higher Specific Stop-Loss of \$250,000!

If you were to agree with this assessment, Ismael, you'll check the "Boxes" at the bottom of each Column on both the GPA Spreadsheet and Voya offer pages, and sign on the "yellowed" Signature spaces.

Please call with any Questions that you may have.

It's Again, been a pleasure working with these Reinsurance Carriers in negotiating the Best Renewal possible for EPISDI

Many Thanks to the Both of you by entrusting this process with me. It's Always enjoyable working in behalf of EPISD!

Have a GREAT Month of July, in preparations for an Outstanding 15-16 School Year!

Tom Sawyer

FINAL Advingment #4

Group & Pension Administrators, Inc. Self-Funded Welfare Plan Stop-Loss Proposal Comparison Eagle Pass Independent School District

RATES ARE NOT FIRM AND UNDERWRITING IS NOT COMPLETE UNLESS OTHERWISE INDICATED

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Expected: \$18,469,156.56 \$19,157,649.31 \$19,337,213.90 \$18,993,675.67 \$18,433,142.54 \$19,136,255.74 \$18,293,1 Maximum: \$22,675,682.64 \$23,494,491.36 \$23,706.754.32 \$22,330,517.72 \$22,521,904.76 \$22,494,49 Total Fixed 0% 10% 0% 0% 10% -3% Expected: 0% 4% 5% 3% 0% 4% ACCEPTANCE 0% 0% 0% 0% 0% 0%					\$1,646,307.48	\$1,811,289.84	\$1,593,659.64	\$1,678,070.04
Maximum 522.675,682.64 523.494.491.36 523.760.754.32 523.330,517.72 522.588,605.72 523.521.904.76 522.446.9 Drotal Fixed 0% 10% 0% 0% 10% -3% Expected: 0% 4% 5% 3% 0% 4% Maximum: 0% 4% 5% 3% 0% 4% ACCEPTANCE						\$18,433.142.54		\$18,293,193,14
Total Fixed 0% 10% 0% 0% 10% -3% Expected: 0% 4% 5% 3% 0% 4% Maximum: 0% 4% 5% 3% 0% 4% ACCEPTANCE Image: Constraint of the second secon						\$22.588,605.72		\$22,446,973.92
Maximum: 0% 4% 5% 3% 0% 4% ACCEPTANCE 0 0 0								2%
ACCEPTANCE 0% 4% 5% 3% 0% 4%								-19
		0%			3%	0%		-19
	ACCEPTANCE							
Policyholder/Broker Signature: Date:	Policyholder/Broker Signature:				10000	_		

ALL CLAIMS OVER THE AGGREGATE PLAN YEAR MAXIMUM BENEFIT ARE EXCLUDED FROM AGGREGATE REIMBURSEMENT.

PLEASE REFER TO CARRIER QUOTE FOR CARRIER CONTINGENCIES. ALL CARRIER QUOTES ARE ILLUSTRATIVE UNLESS OTHERWISE STATED BY CARRIER. IF QUOTES HAVE NOT BEEN PROVIDED WITH THIS SPREADSHEEL, PLEASE CONTACT GPA IMMEDIATELY FOR COPY.

GPA HOLD HARMLESS IS REQUIRED for any quote that GPA did not request

If you are considering any vendor changes during the renewal process, please check the termination clause for those contracts as some contingencies may apply. <u>Symetra</u> requires diagnosis information on claimants 1-3 on the C-spec report

LASERS/AGGREGATING SPECIFIC ARE NOT INCLUDED IN THE EXPECTED OR MAXIMUM COST.

Voya Renewal Option 3 includes a \$400,000 Specific on Hemo Claimant

6/29/2015

Stop Loss Insurance Renewal Offer

Eagle Pass Independent School District 680630

Estimated Annual Cost Stop Loss Insurance Coverages

		Current	Renewal Option 1	Renewal Option 2	Renewal Option 3		
Plan Effective Date		09/01/2014	09/01/2015	09/01/2015	09/01/2015		
Coverages		Medical, RX	Medical, RX	Medical, RX	Medical,RX		
Individual Deductible		\$225,000	\$225,000	\$250,000	\$225,000		
Policy Year Maximum	Unlimited	Unlimited	Unlimited	Unlimited			
Contract Period Benefit Percentage	Paid in 18 months and incurred September 1, 2014 or after.	and incurred and incurred and incurred hber 1, 2014 September 1, 2014 September 1, 2014 or after. or after. or after.		September 1, 2014 or after			
Quoted rates include commissions of		100%	100%	100%	100%		
Quoted fates include commissions of	15	13.00% 13.00% 13.00% Rates					
	Enroll Counts						
Single Coverage	1,864	\$26.80	\$33.17	\$26.80	\$28.28		
Dependent Coverage	715	\$47.02	\$49.88	\$47.02	\$43.57		
Estimated Annual Cost		\$1,002,894	\$1,169,917	\$1,002,894	\$1,006,392		
% Change From Current			17%	0%			
Individual Adjusted Deductible:		no laser	no laser	\$ 400,000			

Aggregate Excess Risk Insurance

Coverages		Medical, RX & Dental	Medical, RX & Dental	Medical, RX & Dental	Medical,RX & Dental		
Individual Deductible		\$225,000	\$225,000	\$250,000	\$225,000		
Maximum Annual Reimbursement		\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000		
Contract Period		Paid in 18 months and incurred September 1, 2014 or after.	and incurred	and Incurred September 1, 2014	and incurred		
Quoted rates include commissions of		13.00%	13.00%	13.00%	13.00%		
	Enroll Counts	Rates					
Enrollment	1,864	\$1.50	\$1.50	\$1.50	\$1.50		
Estimated Annual Cost		\$33,552	\$33,552	\$33,552	\$33,552		
Monthly Aggregate Corridor		\$940.30	\$969.43	\$988.81	\$969.43		
Aggregate Adjustment Corridor		125.00%	125.00%	125.00%	125.00%		
If not preliminary, select acceptar		D					

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RETIREMENT I INVESTMENTS I INSURANCE

Assumptions:	
Renewal As-Of Date:	06/19/2015
Renewal Good Through:	07/09/2015
Situs State	тх

Claim Administrator

Group & Pension Administrators

Network	ELAP Cost Plus				
Retirees Covered		No	No	No	No
Are retirees age 65 and over covered?		No	No	No	No
Waived Actively-at-Work		Yes	Yes	Yes	Yes

50%

Additional Contract Specifications

Endorsements

Cost Containment Programs

Renewal Rate Cap
Cigna LifeSource
INTERLINK
LifeTrac
Optum Health
London Medical Management
Audit of +\$100,000 claims
Golden Triangle Renal and Dialysis

The individual stop loss renewal is based upon the current leveraged trend factors, market conditions, plan designs and current demographic factors. The aggregate renewal is based upon the experience of the group and current trend. Any plan changes may affect this renewal and need to be disclosed prior to the renewal acceptance.

Cost containment services are managed and administered by independent third-party entities not affiliated with Voya Employee Benefits. Voya Employee Benefits, a division of ReliaStar Life Insurance Company, does not warrant, guaranty, or make any representations or warranties whatsoever, express or implied, or assume any liability regarding the use or the results of the cost containment services, including without limitation any financial results, any information transmitted or received, any delay in claims processing or payment, or loss of use of such cost containment services.

Authorized Signature	Date	
Authorized Signature	Date	
Eagle Pass Independent School District		
68063-0		
09/01/2016		

Excess Risk Insurance is underwritten by ReliaStar Life Insurance Company. Policy form RL-SL-POL-2013 (may vary by state). Exclusions and limitations are described in the policy.

RETIREMENT I INVESTMENTS I INSURANCE



LARGE CLAIMS LISTING :

MEMBE	R ID FUND NUM	GROUP	CASE	CERT	CLMT	DOB	GEN	DER RELATION	PAID AMT	CONTRACT START	CONTRACT END LASER AMT
1	86032	EAGLE PASS ISD	S860032	1659	1	CITA - POIN	F	SELF	\$270,603.22	9/1/2014	8/30/2015
1	86032	EAGLE PASS ISD	S860032	1755	1	Sec. 124	F	SELF	\$129,650.77	9/1/2014	8/30/2015
1	86032	EAGLE PASS ISD	S860032	2472	1	1.2 martin	F	SELF	\$125,910.49	9/1/2014	8/30/2015
2	86032	EAGLE PASS ISD	S860032	2515	2		F	CH	\$146,126.99	9/1/2014	8/30/2015
1	86032	EAGLE PASS ISD	S860032	2770	1	Call and a	F	SELF	\$178,600.00	9/1/2014	8/30/2015
1	86032	EAGLE PASS ISD	S860032	3182	1	The sectors of	F	SELF	\$120,149.87	9/1/2014	8/30/2015
1	86032	EAGLE PASS ISD	S860032	3303	1		F	SELF	\$177,446.80	9/1/2014	8/30/2015
3	86032	EAGLE PASS ISD	S860032	3357	3	T MAT WOLLS	F	СН	\$277,781.17	9/1/2014	8/30/2015
4	86032	EAGLE PASS ISD	S860032	3357	4	1.71:2013	F	CH	\$249,644.61	9/1/2014	8/30/2015
Total									\$1,675,913.92		

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270.603 - 225.000 = 45.603 277.781 - 225.000 = 52.781 249.605 - 225.000 = 24.645(23.029)

(c CLotims = \$ 150,000 IN Exposure From Current \$ 225,000 Spec 15-Level 14-15

OPTION #1: \$225,000 15-16 1,173,508 19-15 - 1,006,279 + 167,229