

Current School Benefit Trust Plan

Monthly Benefit Costs per Employee

Medical	\$	983.58
Dental	\$	45.99
Vision	\$	6.19
Life Insurance	\$	9.15
Cobra -Blue Cross	\$	0.50
Cobra - Prime Pay	\$	0.68
Total Monthly Cost	\$	1,046.09

Current Employee

Benefit Eligible
Non Benefit Eligible
Total Employees
Medical PPO
Medical HSA
Total Enrolled
Waived Coverage

Current State Plans

Pay for All Model

Medical & Vision	\$	1,068.82
Dental	\$	14.50
-	\$	-
Life Insurance	\$	9.15
-	\$	-
Cobra - Prime Pay	\$	0.68
Total Monthly Cost	\$	1,093.15

Pay for ONLY Enrolled

Medical & Vision
Dental
-
Life Insurance
-
Cobra - Prime Pay
Total Monthly Cost

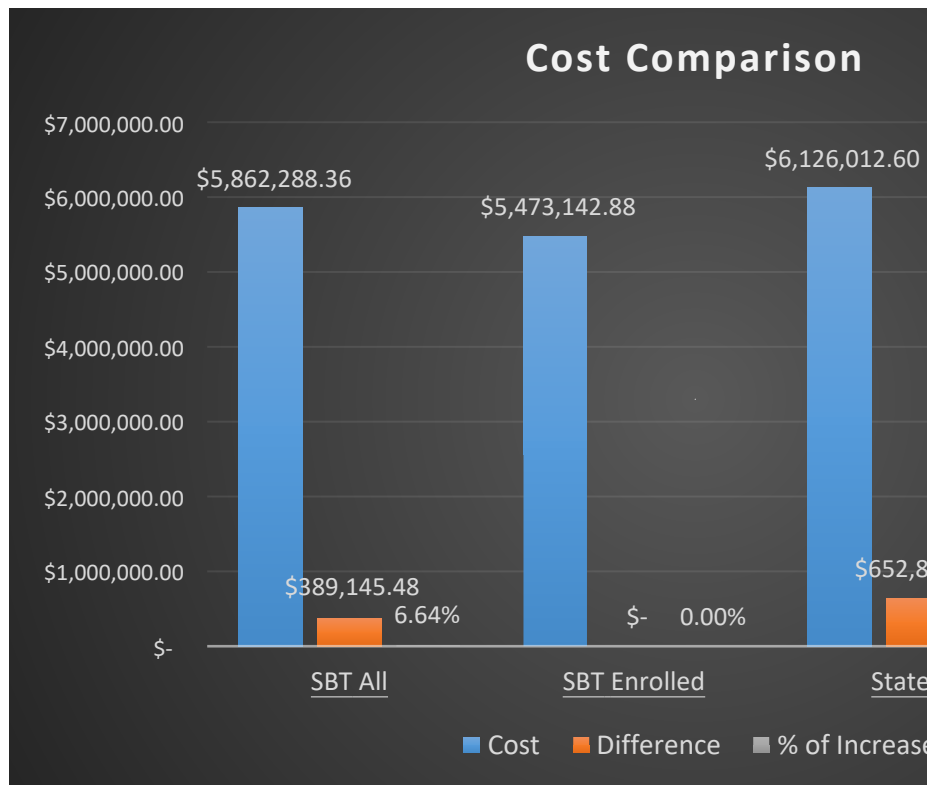
Counts

467
117
584
270
166
436
31

\$ 1,177.46
\$ 14.50
\$ -
\$ 9.15
\$ -
\$ 0.68
\$ 1,201.79

Current Cost Comparison

	SBT	State - All
Monthly Cost/Employee	\$ 1,046.09	\$ 1,093.15
Annual Cost/Employee	\$ 12,553.08	\$ 13,117.80
Total Cost for All Eligible	\$ 5,862,288.36	\$ 6,126,012.60
Total Cost for Enrolled	\$ 5,473,142.88	-



Comparison

State - Enrolled	
\$	1,201.79
\$	14,421.48
-	
\$	6,287,765.28

