

**GESC/Health Insurance  
Board of Trustees**  
*Presentation  
Before the*

**Committee of the Whole**  
*September 19, 2024*



**Dr. Gilbert Comissiong,**  
*Co-Chairperson*  
**GESC/Health Insurance Board of Trustees**

Good day members of the 35<sup>th</sup> Legislature of the Virgin Islands, members of the Committee of the Whole and listening audience. I am Dr. Gilbert Comissiong, Co-Chairperson of the GESC Health Insurance Board of Trustees and the elected representative on behalf of active employees in St. Thomas & St. John. Today, on behalf of the Board, I would like to present our recommendations for the contracting of the Medical & Prescription Drug, Dental, Vision, and Life insurance plans for Fiscal Year 2025.

I would like to thank the members of the Legislature for the opportunity to appear before you, the Honorable Governor Albert Bryan Jr., and my fellow Board members, Chairperson Beverly Joseph, Elected Active Representative St. Croix; John Abramson Jr., Secretary & Appointed Member St. Croix; Lorraine Gumbs-Morton, Appointed Member St. Thomas & St. John; Lori Anderson, Elected Retiree Representative St. Thomas & St. John; Debra Christopher, Elected Retiree Representative St. Croix; Kisha Christian, Appointed Member St. Croix; and Andre T. Dorsey, Appointed Member St. Thomas and St. John.

I would also like to thank our Advisory Members, the Division of Personnel including the Director, the Chief and Staff of Group Health

Insurance, the Counsel to the Board, our Consultant, the Gehring Group, and all the Insurance Carriers for their assistance in developing these recommendations.

When you combine the employee, retiree, and government costs for all insurance coverages (including dental, vision, and life) for the upcoming fiscal year, we are looking at an increase of \$19,948,273 which is a 9.7% increase of overall cost.

I would like to begin with some background information about how we arrived at our recommendations.

Please note that the “total cost” and “enrollment” figures that will be mentioned in this presentation generally exclude the active employees of non-General Fund entities that participate in the Government Employees’ Plan – such as the University of the Virgin Islands (UVI), the Virgin Islands Port Authority (VIPA), Frederiksted Health Care Center (FHC) and Virgin Islands Housing Authority (VIHA) and non-profit participating groups.

At least once every five years, the Board is required to solicit competitive bids for the insurance program. Previously, bids were solicited for all benefits in 2011, in 2013 at the Boards’ request, in 2018 for the 2019 fiscal year and we solicited bids in 2023 for the 2024 fiscal year. This will be

our first renewal after the RFP process that was completed last year.

I will now summarize the Cigna medical and dental renewals for **active employees and pre-65 retirees**). Both the Vision Insurance and Life and Accidental Death & Dismemberment plans are in a pricing guarantee for the upcoming fiscal year.

Based upon the most recent medical claims experience report through August 2024, the medical claims expenditures are 102% of the medical plans' premiums, and the dental claims expenditures are 94% of the dental plans' premiums exclusive of other plan expenditures such as administrative costs. With losses such as our plan is experiencing, it would be anticipated to have an increase of more than 25%. However, as stewards of the Government employees' health plan, the Board negotiated a premium cap of 8% for medical coverage and 3% for dental coverage for this upcoming fiscal year in order that no matter how the claims are performing it would not negatively impact the Government, and its employees and retirees.

According to the Cigna underwriting formula that they have historically used, the initial renewal would have been an 18% increase; however, as mentioned we negotiated rate caps last year and Cigna is honoring the rate caps with an overall 8% increase for medical coverage and a 3% increase for the dental coverage. Due to

both plans not performing well, they are indicating that they cannot provide any further rate relief without changing our plans and/or reducing the services they provide. Based upon the proposed premiums, the overall medical increase to the Central Government will be approximately \$13.6 million for a total of \$187.6 million.

Since there was a substantial increase in premiums, it was vital to the Board that there were not any plan design changes (such as increasing copayments, deductibles, & out-of-pocket maximums). CIGNA agreed to not change any of the benefits, nor did they decrease the level of services that are offered with the current plan.

In addition to the financial implications, Cigna will continue to include and enhance the following in their contract with the Board:

- Support the USVI community by providing six (6) two-year nursing scholarships to the University of the Virgin Islands in the amount of \$6,250.00 per student per year and providing \$375,000.00 in grants to non-profit agencies.
- Provide a Wellness Fund of \$1,000,000.
- Continuation of the two (2) full-time on-site Customer Service

Representatives.

- Inclusion of Motivate Me, a turnkey Wellness Incentive Program that gives employees and their spouses opportunities to earn rewards for taking charge of and improving their health while funding \$300,000.00 in incentives.
- Continuation of Omada's Pre-Diabetes Prevention Program.
- Continuation of the 2 Health Improvement Offices with two (2) Health Coaches and two (2) mobile vans.
- Placing \$1.7 in premiums at risk for performance guarantees; and
- The Cigna Foundation will continue to offer \$250,000.00 in grants over the next year to non-profits in the Territory helping those living with obesity, high blood pressure, diabetes, and other chronic conditions with the goal of improving their overall health.

**For our post-65 Retirees,** UnitedHealthcare was the only insurer who responded to the post-65 Retiree coverage and maintains a competitive advantage in the Territory being licensed to offer a group Medicare Advantage

plan.

UnitedHealthcare began its partnership with the Government in 2013 offering their AARP Medicare Supplemental plans alongside a custom Medicare Part D Prescription Drug Plan (PDP). The plans offered significant savings to the Government and Retirees. Over the years we have worked with UnitedHealthcare to ensure a long term and sustainable program for the Government and Retirees.

In 2017, the Board recommended to offer the stateside retiree's two Medicare Advantage Plans with Prescription Drug Coverage (MAPD) which further reduced costs to the Government and eased administrative burdens while maximizing benefits for stateside Retirees. This proved to be extremely successful with a smooth transition and a retiree satisfaction score of 95%.

For 2021, UnitedHealthcare received approval for the Territorial Retirees to participate in the group Medicare Advantage plan offered by UnitedHealthcare which covers everything covered by original Medicare with additional benefits including health and wellness, routine vision checks, hearing checks, podiatry, chiropractic, and prescription drugs.

All post-65 Retirees are covered by one plan regardless of if they are Territorial residents or Stateside residents. Coverage is nationwide and

Retirees are not required to select a Primary Care Physician (PCP), and referrals are not required to see a Specialist.

As you may recall last year United proposed a 20% increase above current premiums or an increase of \$3.8 million for the 2024 calendar year. This reflected changes and updates from the 2024 Final Call Notice on March 31, 2023. The Final Call Notice had significant changes to growth rates, Part C Risk Adjustment Model Changes, and Part C Risk Adjustment Coding which negatively impacted the funding insurance companies received from CMS for 2024.

The Board, through our Consultant, Gehring Group was able to negotiate an option that eliminated a fiscal impact to both the Government and retirees' paychecks. To achieve a no increase in premiums we added a \$500 deductible which is the same deductible amount as the pre-65 retiree plan. Protecting the retirees is a \$1,000 annual out-of-pocket maximum. Making those changes saved \$588 per post-65 retiree per year or approximately \$3.89 million.

It is important to note that the deductible does not apply to Primary Care Office Visits, Telemedicine Visits, Emergency Room Visits, Urgent Care Visits, Diabetic Monitoring Supplies, Hospice, Preventive Visits, Vision



and/or Hearing Visits, and subsequently adding Laboratory Services.

For the upcoming 2025 plan year the Board was anticipating significant increases. At our Board meeting in April 2024, United indicated that premiums could increase 56% to 60% based on changes from CMS and the prescription drug benefit changes, as mandated by the Inflation Reduction Act of 2022. The 2025 Final Call Notice was issued on July 29, 2024, and provided a Growth Rate reduction not keeping up with medical inflation. Medicare Advantage carriers have seen a loss in funding of 2.3%, spread out over the past three years.

CMS also made significant reductions in the Risk Adjustment Model, which unfortunately many of our retirees have conditions for which these risk adjustments impact. For example, CMS is reducing its reimbursements by 27% for individuals with blood diseases; 10% for individuals with diabetes; 17% for individuals with metabolic disease; and 27% for individuals with vascular disease, to name a few.

The largest driver of our increase for 2025 is the Inflation Reduction Act of 2022 (IRA) which provides relief for Medicare beneficiaries by reducing their prescription costs, however it shifts more costs to health plans and drug manufacturers. Retirees will pay no copay for Part D adult vaccines,

\$35.00 per month max for insulins, and expands Low Income Subsidy “Extra Help” to full benefits for individuals with incomes between 135-150% of poverty, as well adding a \$2,000.00 annual out-of-pocket maximum which is currently \$8,000.00.

At our Board meeting in July, United indicated they needed until August 1, 2024, to provide us with their best and final renewal offer without making any plan design changes. This proved effective by reducing the renewal from a 38% increase to a 32% increase, saving approximately \$1.3 million. The 32% increase is an overall increase of approximately \$6.35 million. The Board agreed it was in the best interest of the retirees to not seek any additional changes that would further increase the costs to the retirees in the form of higher deductibles, copayments, and out-of-pocket maximums.

There have been additional program enhancements included for 2025 at no additional cost to continuously care for our post-65 retirees, including:

- Compression Stockings
  - Medicare now covers compression stockings for lymphedema. This benefit is covered for standard and custom-fitted lymphedema compression treatment items for each affected body part.
- Telephonic Nurse Support

- With the increased adoption of virtual visits post pandemic, United will provide Teladoc to retirees with 24/7 access to a medical provider. Retirees can choose to have either a virtual or telephonic experience with a \$0 cost share.

In addition, Medicare Retirees will continue to receive a quarterly Grocery Store Benefit. Retirees will receive a \$40.00 credit each quarter to spend locally on healthy food and over-the-counter products. They can choose from a variety of approved items like fruits, vegetables, dairy, meat, pain relievers, cold remedies, vitamins and more. Credits are added to a debit card on the first day of each quarter (in January, April, July, and October) and expire at the end of the year.

House Calls will also continue for 2025, which allows our retirees to have a yearly visit with a healthcare practitioner right in the privacy of their own home. It's a great opportunity for members to discuss their health care needs, create a plan for prevention and get the personal attention they deserve. During the visit, the practitioner will confirm medical history, complete a physical exam, review medications, and answer any questions the retiree may have as well as provide any additional health screenings the practitioner deems necessary.

Also, we were able to negotiate with United that, Specialist doctor visits will no longer be subject to the deductible.

Finally, UnitedHealthcare will continue to offer \$200,000 to their Wellness Incentive Fund which will allow the GESC and the Government to provide wellness incentives and initiatives for our Medicare Retirees.

For **all insurance coverage** combined (including dental, vision and life), plan outlays will increase from \$206.2 million in Fiscal Year 2024 to \$226.1 million in Fiscal Year 225. This is an increase of approximately \$19.9 million, which is a 9.7% increase.

As you may recall the Senate absorbed the increases to employees and retirees in the current FY2024. Employees and retirees are paying the same as they did in FY19. Due to this, employees are not paying 35% of the cost share. They are paying approximately 27% of the cost share and the Government is paying 73% of the cost share. If the Government reverts to the 65% / 35% split this would drastically increase an employee's or retiree's payroll contribution, and the entire increase will be on the backs of the employees and retirees. Therefore, we implore the Senate to continue the existing cost share, as we come to you today and if the Senate cannot absorb

the increase in its entirety, we ask the Senate to not levy more than a 4% increase to the payroll deductions for our employees and retirees.

The Board is not recommending any plan design changes for FY2025. However, we are working on several initiatives to control and reduce health care costs. You may recall that for FY2016, we implemented more stringent pre-certification requirements for some outpatient services under the Cigna plan through a program called “PHS+”. This program continues to produce additional savings. Also, for FY2016, we increased the out-of-pocket maximums under the Cigna plan by a significant amount. We also enhanced the previous medical conversion provision, which is no longer available with COBRA coverage.

Effective October 1, 2018, the Board recommended and had introduced by Cigna two additional programs into the medical plan. Health Matters Care Management (HMCM) will be an enhanced PHS+ (Personal Health Solutions). HMCM which includes: primary and specialty medical care management; more frequent post-hospital discharge outreach; inpatient precertification; inpatient case management (including continuous stay review); outpatient precertification; hospital preadmission outreach; a more robust care team including community support with social workers and

transition specialists to support a timely hospital discharge, and a smooth, safe return home; advanced predictive modeling; and continued 24-hour, 7-day a week support. OneGuide, the second program recommended provides members with proactive education and support to optimize their benefits and incentives; guidance on cost-savings opportunities and programs; holistic view of health information for personal guidance and engagement; and specialized support in highly complex medical situations.

Post-65 retirees will continue to have a clinical approach with the Medicare Advantage offering whereas the plan focuses on retirees to stay healthy by providing house calls, rewards, fitness benefits, and virtual visits. For those that have been hospitalized, United will provide return to health benefits including inpatient care management, post-acute transition, medication reconciliation and behavioral health. For those living with illnesses the new plan with United will provide disease specific care management for those with diabetes, heart failure, chronic obstructive pulmonary disease (COPD) and polychronic conditions. United will be engaging more with retirees, resulting in earlier identification of those with chronic conditions, providing personalized care, and a digital health coach.

The Board is also in ongoing discussions with Cigna, United, and V.I.

Equicare to renegotiate professional fees in the Territory to more manageable levels, with a focus on eliminating abuse by certain practitioners as well as introducing pay-for-performance reimbursement strategies and air ambulance solutions.

The Government's Wellness Program continues to gain traction, thanks in large part to funding from CIGNA in the amount of \$1,000,000 per year and from United in the amount of \$200,000 per year as well as the focus given to Wellness by the Division of Personnel and other Agency participants like UVI. The Board has also begun to implement a communications blitz about the health insurance plan in general and the wellness strategy initiatives, via the internet and public service announcements. Focus and initiatives will be directed towards our members knowing their plan, as a primary goal forthcoming.

**In summary**, the Board recommends accepting the contracts that we have negotiated.

Members of the 35th Legislature of the Virgin Islands, the GESC/Health Insurance Board of Trustees is appreciative of your continued interest, support, and involvement in the Group Health Insurance Program, and we look forward to your assistance to ensure this year's recommendations

are approved as presented.

The Consultant, our Carriers, the Division of Personnel, and I on behalf of the Board stand ready to answer any questions you may have regarding our insurance programs.

Once again, thank you.



**EXHIBIT A**

**Financial Charts**

**Government of The Virgin Islands of the United States**  
**Central Government & GERS Group Health Projected Budget**  
**Fiscal Year: October 1, 2024 - September 30, 2025**



**ASSUMES GOVERNMENT ABSORBS INCREASE**

Plan	Coverage Type	Enrollment	2023-2024 Estimated FY	2023-2024 Estimated FY	2023-2024 Estimated FY	2024-2025 Projected FY	2024-2025 Projected FY	2024-2025 Projected FY
			Total Premium	Employer Share	Employee Share	Total Premium	Employer Share	Employee Share
<b>Active Employees</b>								
Medical	Employee	4,029	\$ 46,556,231	\$ 33,986,049	\$ 12,570,182	\$ 50,280,807	\$ 37,710,625	\$ 12,570,182
	Family	4,442	\$ 89,762,143	\$ 65,526,364	\$ 24,235,779	\$ 96,943,263	\$ 72,707,485	\$ 24,235,779
Dental	Employee	4,068	\$ 967,612	\$ 657,976	\$ 309,636	\$ 996,416	\$ 686,780	\$ 309,636
	Family	4,378	\$ 2,656,321	\$ 1,806,298	\$ 850,023	\$ 2,735,654	\$ 1,885,631	\$ 850,023
Life	Basic	7,866	\$ 95,336	\$ 95,336	\$ -	\$ 95,336	\$ 95,336	\$ -
	Voluntary	5,910	\$ 2,331,140	\$ -	\$ 2,331,140	\$ 2,331,140	\$ -	\$ 2,331,140
	Spouse	1,178	\$ 111,458	\$ -	\$ 111,458	\$ 111,458	\$ -	\$ 111,458
	Child(ren)	2,621	\$ 21,073	\$ -	\$ 21,073	\$ 21,073	\$ -	\$ 21,073
Vision	Employee	4,785	\$ 227,383	\$ -	\$ 227,383	\$ 227,383	\$ -	\$ 227,383
	Family	3,920	\$ 491,098	\$ -	\$ 491,098	\$ 491,098	\$ -	\$ 491,098
<b>TOTAL - Active Employees</b>			<b>\$ 143,219,795</b>	<b>\$ 102,072,024</b>	<b>\$ 41,147,771</b>	<b>\$ 154,233,628</b>	<b>\$ 113,085,856</b>	<b>\$ 41,147,771</b>
\$ Amount Increase/(Decrease)						<b>\$ 11,013,833</b>	<b>\$ 11,013,833</b>	<b>\$ -</b>
% Amount Increase/(Decrease)						<b>7.7%</b>	<b>10.8%</b>	<b>0.0%</b>
<b>Retirees</b>								
Under 65 Medical	Retiree	878	\$ 13,154,407	\$ 9,602,717	\$ 3,551,690	\$ 14,206,742	\$ 10,655,053	\$ 3,551,690
	Retiree Dependents	392	\$ 5,873,038	\$ 4,287,318	\$ 1,585,720	\$ 6,342,874	\$ 4,757,153	\$ 1,585,720
	Family	458	\$ 12,264,214	\$ 8,952,876	\$ 3,311,338	\$ 13,245,360	\$ 9,934,022	\$ 3,311,338
Over 65 Medical	Medicare Advantage	6,615	\$ 19,864,051	\$ 13,110,274	\$ 6,753,777	\$ 26,214,451	\$ 19,460,674	\$ 6,753,777
Dental	Retiree	5,783	\$ 1,375,429	\$ 935,292	\$ 440,137	\$ 1,416,372	\$ 976,235	\$ 440,137
	Family	2,195	\$ 1,331,953	\$ 905,728	\$ 426,225	\$ 1,371,732	\$ 945,507	\$ 426,225
Life	Basic	8,282	\$ 332,936	\$ 332,936	\$ -	\$ 332,936	\$ 332,936	\$ -
	Voluntary	6,519	\$ 8,099,896	\$ -	\$ 8,099,896	\$ 8,099,896	\$ -	\$ 8,099,896
	Spouse	1,439	\$ 595,684	\$ -	\$ 595,684	\$ 595,684	\$ -	\$ 595,684
	Child(ren)	474	\$ 3,811	\$ -	\$ 3,811	\$ 3,811	\$ -	\$ 3,811
Vision	Retiree	996	\$ 47,330	\$ -	\$ 47,330	\$ 47,330	\$ -	\$ 47,330
	Family	308	\$ 38,586	\$ -	\$ 38,586	\$ 38,586	\$ -	\$ 38,586
<b>TOTAL - Retirees</b>			<b>\$ 62,981,335</b>	<b>\$ 38,127,140</b>	<b>\$ 24,854,194</b>	<b>\$ 71,915,775</b>	<b>\$ 47,061,581</b>	<b>\$ 24,854,194</b>
\$ Amount Increase/(Decrease)						<b>\$ 8,934,440</b>	<b>\$ 8,934,440</b>	<b>\$ -</b>
% Amount Increase/(Decrease)						<b>14.2%</b>	<b>23.4%</b>	<b>0.0%</b>
<b>TOTAL - Active Employees &amp; Retirees</b>			<b>\$ 206,201,130</b>	<b>\$ 140,199,164</b>	<b>\$ 66,001,966</b>	<b>\$ 226,149,403</b>	<b>\$ 160,147,437</b>	<b>\$ 66,001,966</b>
\$ Amount Increase/(Decrease)						<b>\$ 19,948,273</b>	<b>\$ 19,948,273</b>	<b>\$ -</b>
% Amount Increase/(Decrease)						<b>9.7%</b>	<b>14.2%</b>	<b>0.0%</b>

**Notes:**

A. Projected Budget assumes Maximum Premium Rates Negotiated in GESC RFP No. 2023-01.

B. Over 65 Medical is 9-months of the fiscal year (effective January 1, 2025).

1. Estimated FY Total Premium may vary based upon actual enrollment for the remainder of current Fiscal Year & proposed Fiscal Year.

2. Costs account for Senate funded subsidies of member contributions for FY2019-2020; FY2020-2021; FY2021-2022; FY2022-2023; & FY2023-2024

**Government of The Virgin Islands of the United States**  
**Central Government & GERS Group Health Projected Budget**  
**Fiscal Year: October 1, 2024 - September 30, 2025**



**ASSUMES EMPLOYEE/RETIREE PAY +4% INCREASE**

Plan	Coverage Type	Enrollment	2023-2024 Estimated FY	2023-2024 Estimated FY	2023-2024 Estimated FY	2024-2025 Projected FY	2024-2025 Projected FY	2024-2025 Projected FY
			Total Premium	Employer Share	Employee Share	Total Premium	Employer Share	Employee Share
<b>Active Employees</b>								
Medical	Employee	4,029	\$ 46,556,231	\$ 33,986,049	\$ 12,570,182	\$ 50,280,807	\$ 37,207,817	\$ 13,072,990
	Family	4,442	\$ 89,762,143	\$ 65,526,364	\$ 24,235,779	\$ 96,943,263	\$ 71,738,054	\$ 25,205,210
Dental	Employee	4,068	\$ 967,612	\$ 657,976	\$ 309,636	\$ 996,416	\$ 674,395	\$ 322,021
	Family	4,378	\$ 2,656,321	\$ 1,806,298	\$ 850,023	\$ 2,735,654	\$ 1,851,630	\$ 884,024
Life	Basic	7,866	\$ 95,336	\$ 95,336	\$ -	\$ 95,336	\$ 95,336	\$ -
	Voluntary	5,910	\$ 2,331,140	\$ -	\$ 2,331,140	\$ 2,331,140	\$ -	\$ 2,331,140
	Spouse	1,178	\$ 111,458	\$ -	\$ 111,458	\$ 111,458	\$ -	\$ 111,458
	Child(ren)	2,621	\$ 21,073	\$ -	\$ 21,073	\$ 21,073	\$ -	\$ 21,073
Vision	Employee	4,785	\$ 227,383	\$ -	\$ 227,383	\$ 227,383	\$ -	\$ 227,383
	Family	3,920	\$ 491,098	\$ -	\$ 491,098	\$ 491,098	\$ -	\$ 491,098
<b>TOTAL - Active Employees</b>			<b>\$ 143,219,795</b>	<b>\$ 102,072,024</b>	<b>\$ 41,147,771</b>	<b>\$ 154,233,628</b>	<b>\$ 111,567,232</b>	<b>\$ 42,666,396</b>
\$ Amount Increase/(Decrease)						<b>\$ 11,013,833</b>	<b>\$ 9,495,208</b>	<b>\$ 1,518,625</b>
% Amount Increase/(Decrease)						<b>7.7%</b>	<b>9.3%</b>	<b>3.7%</b>
<b>Retirees</b>								
Under 65 Medical	Retiree	878	\$ 13,154,407	\$ 9,602,717	\$ 3,551,690	\$ 14,206,742	\$ 10,512,985	\$ 3,693,757
	Retiree Dependents	392	\$ 5,873,038	\$ 4,287,318	\$ 1,585,720	\$ 6,342,874	\$ 4,693,725	\$ 1,649,149
	Family	458	\$ 12,264,214	\$ 8,952,876	\$ 3,311,338	\$ 13,245,360	\$ 9,801,569	\$ 3,443,791
Over 65 Medical	Medicare Advantage	6,615	\$ 19,864,051	\$ 13,110,274	\$ 6,753,777	\$ 26,214,451	\$ 19,190,523	\$ 7,023,929
Dental	Retiree	5,783	\$ 1,375,429	\$ 935,292	\$ 440,137	\$ 1,416,372	\$ 958,630	\$ 457,743
	Family	2,195	\$ 1,331,953	\$ 905,728	\$ 426,225	\$ 1,371,732	\$ 928,458	\$ 443,274
Life	Basic	8,282	\$ 332,936	\$ 332,936	\$ -	\$ 332,936	\$ 332,936	\$ -
	Voluntary	6,519	\$ 8,099,896	\$ -	\$ 8,099,896	\$ 8,099,896	\$ -	\$ 8,099,896
	Spouse	1,439	\$ 595,684	\$ -	\$ 595,684	\$ 595,684	\$ -	\$ 595,684
	Child(ren)	474	\$ 3,811	\$ -	\$ 3,811	\$ 3,811	\$ -	\$ 3,811
Vision	Retiree	996	\$ 47,330	\$ -	\$ 47,330	\$ 47,330	\$ -	\$ 47,330
	Family	308	\$ 38,586	\$ -	\$ 38,586	\$ 38,586	\$ -	\$ 38,586
<b>TOTAL - Retirees</b>			<b>\$ 62,981,335</b>	<b>\$ 38,127,140</b>	<b>\$ 24,854,194</b>	<b>\$ 71,915,775</b>	<b>\$ 46,418,825</b>	<b>\$ 25,496,950</b>
\$ Amount Increase/(Decrease)						<b>\$ 8,934,440</b>	<b>\$ 8,291,685</b>	<b>\$ 642,755</b>
% Amount Increase/(Decrease)						<b>14.2%</b>	<b>21.7%</b>	<b>2.6%</b>
<b>TOTAL - Active Employees &amp; Retirees</b>			<b>\$ 206,201,130</b>	<b>\$ 140,199,164</b>	<b>\$ 66,001,966</b>	<b>\$ 226,149,403</b>	<b>\$ 157,986,057</b>	<b>\$ 68,163,346</b>
\$ Amount Increase/(Decrease)						<b>\$ 19,948,273</b>	<b>\$ 17,786,893</b>	<b>\$ 2,161,380</b>
% Amount Increase/(Decrease)						<b>9.7%</b>	<b>12.7%</b>	<b>3.3%</b>

**Notes:**

A. Projected Budget assumes Maximum Premium Rates Negotiated in GESC RFP No. 2023-01.

B. Over 65 Medical is 9-months of the fiscal year (effective January 1, 2025).

1. Estimated FY Total Premium may vary based upon actual enrollment for the remainder of current Fiscal Year & proposed Fiscal Year.

2. Costs account for Senate funded subsidies of member contributions for FY2019-2020; FY2020-2021; FY2021-2022; FY2022-2023; & FY2023-2024

# GUSVI Employee/Employer Contribution

## Government Absorbs the Increase

Medical Only	Current \$ Semi-Monthly Payroll Deduction	Current % of Contribution towards Premium	\$ Semi-Monthly Payroll Deduction	Increase per Pay (per Year)
Active Single	\$131.69	27%	\$131.69	\$0
Active Family	\$232.83	27%	\$232.83	\$0
Retiree Under 65	\$169.78	27%	\$169.78	\$0
Retiree U65 Family	\$305.90	27%	\$305.90	\$0
Retiree Over 65	\$42.54	34%	\$42.54	\$0

Employees & Retirees Under 65 will see a **0% increase** and Government would bear the difference of approximately \$13.6 million or +10.7%.

Retirees Over 65 will see a **0% increase** and the Government would increase approximately \$6.35 million or +48% due to plan increase.

*OVERALL INCREASE TO CENTRAL GOVERNMENT = \$19.9 million or 14.2%*



# GUSVI Employee/Employer Contribution Employee & Retiree Pay a 4% Increase

Medical Only	Current \$ Semi-Monthly Payroll Deduction	Current % of Contribution towards Premium	\$ Semi-Monthly Payroll Deduction at 4% Increase	Increase per Pay (per Year)
Active Single	\$131.69	27%	\$136.95	\$5.27 (\$126)
Active Family	\$232.83	27%	\$242.14	\$9.32 (\$224)
Retiree Under 65	\$169.78	27%	\$176.57	\$6.79 (\$163)
Retiree U65 Family	\$305.90	27%	\$318.13	\$12.23 (\$294)
Retiree Over 65	\$42.54	34%	\$44.24	\$1.70 (\$41)

Employees & Retirees Under 65 will see a **4% increase** and Government would bear the difference of approximately \$11.7 million or +9.2%.

Retirees Over 65 will see a **4% increase** and the Government would increase approximately \$6 million or +46% due to plan increase.

*OVERALL INCREASE TO CENTRAL GOVERNMENT = \$17.8 million or 12.7%*

