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Health Plan Update



April 8, 2025

# Health & Wellness Impact: Plan Year 2024

### Health Plan Impact Engaged vs Non-Engaged: Adults

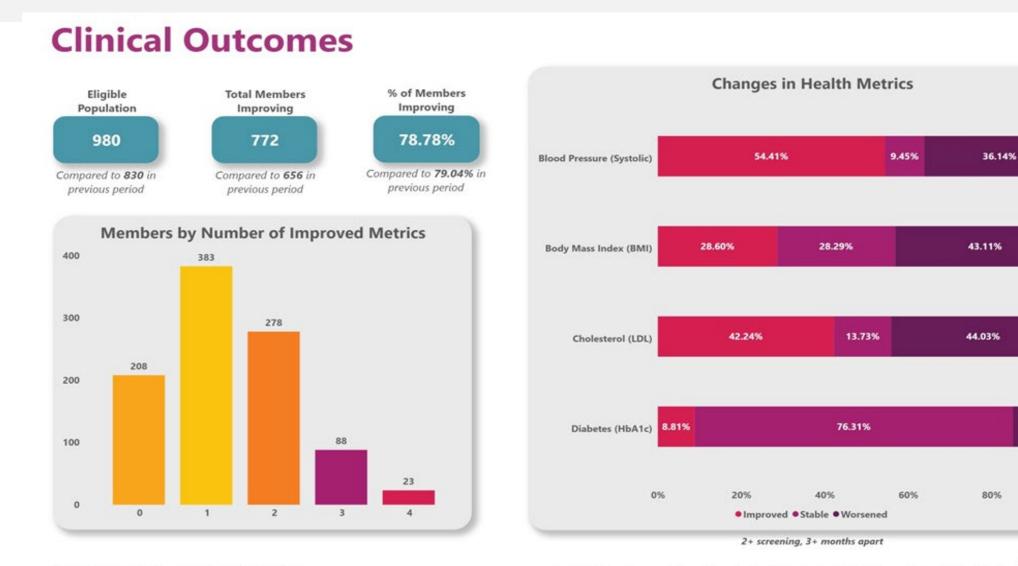
Clinic Engaged	Non-Engaged w/Care
1872	696
Clinic Engaged Average Spend	Non-Engaged w/Care Average Spend
\$3,837	\$4,310

 Engaged adults' average medical plan cost was 11% less than the Non-Engaged (with care) adults' medical plan cost.





## **Health & Wellness Impact: Clinical Outcomes**



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14.88%

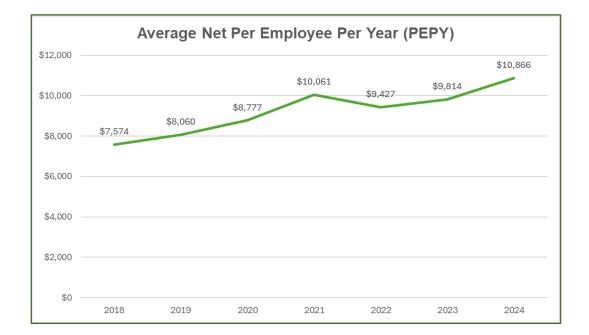
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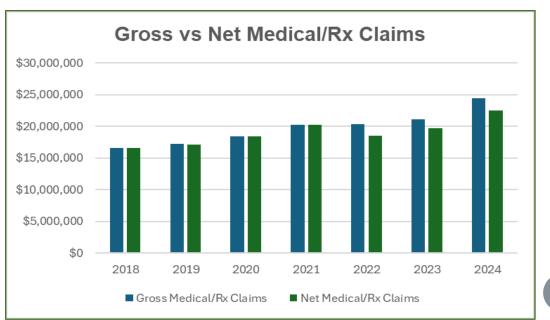
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### **Health Plan Performance At A Glance**

	CCG Health Plan (Medical & Rx) History								
	Gross Medical/Rx Claims	% Change	Net Medical/Rx Claims	% Change	<b>Rx Rebates</b>	Avg Net PEPY			
2018	\$16,573,472	-	\$16,573,472	-	-	\$7,574			
2019	\$17,219,875	4%	\$17,163,435	4%	-	\$8,060			
2020	\$18,440,976	7%	\$18,392,175	7%	\$48,801	\$8,777			
2021	\$20,252,982	10%	\$20,207,678	10%	\$45,304	\$10,061			
2022	\$20,366,903	1%	\$18,562,454	-8%	\$1,804,449	\$9,427			
2023	\$21,158,196	4%	\$19,735,338	6%	\$1,897,144	\$9,814			
2024	\$24,444,465	16%	\$22,482,466	14%	\$1,961,999	\$10,866			
	Average Trend	6.8%		5.4%					

Average I rend





# **FY Health Plan Budget History**

- 5-year average health plan budget increase 2.22%
- 5-year average CCG budget increase 3.08%
- Employee contributions vary year over year with drop in participation, movement to lower cost plans, tiers and wellness participation

a EE Contribution Change							
FY20	\$188,000						
FY21	\$177,000						
FY22	\$260,000						
FY23	\$147,000						
FY24	\$308,000						
FY25	\$118,509						

### \$ EE Contribution Change

	Per Budgeted Position	% Increase	\$ Increase	Cost Savings	% CCG Increase	\$ CCG Increase	% CCG Split Active Next CY
FY 21	\$5,952	0.97%	\$212,128	ECMP, DPP	2.18%	\$388,967	70%
FY 22	\$5,859	-1.85%	(\$410,076)	PBM Change \$1.6M	-1.56%	(\$149,146)	70%
FY 23	\$6,177	3.06%	\$666,148	OV Copay Change \$300K	5.43%	\$812,742	73%
FY 24	\$6,548	5.17%	\$992,951	N/A	5.24%	\$1,111,153	73%
FY 25	\$6,750	3.77%	\$527,624	Know the Cost \$400K	4.13%	\$683,508	73%



# **Cost Saving Measures and Enhanced Benefits**

- Increased the tobacco surcharge
- Increased premiums for Non-wellness participants
- Changed PBM to maximize savings
- Rx drug changes
- Adjusted co-pays for office visits
- Negotiated discounted rates with carriers
- Pharmacy discounts for high-cost drugs
- Virtual Primary Care and Urgent Care solution



# **History of Employee Health Premiums**

DESCRIPTION	2025	2024	2023	2022	2021	2020	2019	2018	2017
SILVER PLAN	PREMIUM								
EMPLOYEE ONLY	\$73.03	\$73.03	\$73.03	\$73.03	\$73.03	\$73.03	\$73.03	\$73.03	\$73.03
EMP/SPOUSE	\$137.29	\$137.29	\$137.29	\$137.29	\$137.29	\$137.29	\$137.29	\$137.29	\$137.29
EMP/CHILD(REN)	\$127.82	\$127.82	\$127.82	\$127.82	\$127.82	\$127.82	\$127.82	\$127.82	\$127.82
EMP/FAMILY	\$202.31	\$202.31	\$202.31	\$202.31	\$202.31	\$202.31	\$202.31	\$202.31	\$202.31
GOLD PLAN									
EMPLOYEE ONLY	\$104.65	\$104.65	\$104.65	\$104.65	\$104.65	\$104.65	\$104.65	\$104.65	\$104.65
EMP/SPOUSE	\$196.74	\$196.74	\$196.74	\$196.74	\$196.74	\$196.74	\$196.74	\$196.74	\$196.74
EMP/CHILD(REN)	\$183.16	\$183.16	\$183.16	\$183.16	\$183.16	\$183.16	\$183.16	\$183.16	\$183.16
EMP/FAMILY	\$289.90	\$289.90	\$289.90	\$289.90	\$289.90	\$289.90	\$289.90	\$289.90	\$289.90
							1	1	
SPOUSAL SURCHARGE	\$164.76	\$164.76	\$164.76	\$164.76	\$164.76	\$164.76	\$164.76	\$164.76	\$164.76
TOBACCO SURCHARGE	\$34.62	\$34.62	\$34.62	\$34.62	\$34.62	\$23.08	\$23.08	\$23.08	\$23.08



# **Employee and Retiree Benefits Committees**

### **Employee Benefits Committee**

- Established in 2012, Council Ordinance #12-46
- Seven-member committee
- Address issues concerning health benefits and other benefits
- Meet bi-monthly with HR, Finance, and Benefit Consultant

### **Retiree Health Benefits Committee**

- Established in 2011, Ordinance #11-10
- Five-member committee
- Address issues concerning the retiree healthcare plan and other benefits
- Meets quarterly with HR and Benefit Consultant



### **Market Insights** 2025 Health Care Cost Expectations

Employer-sponsored health care costs are expected to increase by 9% on average in 2025, bringing the expenditure per employee to more than \$16,000 per year, up from an average of 6.4% and \$14,823 per employee in 2024. Cost increases are being driven by three key factors:



### **Medical Services**

- Rise of employment levels and wages
- Overall inflation
- Contract renegotiation
- Vertical integration / reduced competition



### **High Cost Claims**

- Increased prevalence of chronic conditions
- Expensive gene and cell therapies
- Complex treatment plans
- Increased cost per service



### **Pharmacy Demand**

- Growth of expensive specialty drugs
- Utilization of GLP-1 medications for expanded diagnoses - weightloss, diabetes and obesity
- Rebates not keeping pace with increased cost of scripts

### Source:

Aon's Health Value Initiative database, which captures health care costs and benefit designs for more than 950 U.S. employers representing 6.7 million employees and \$100 billion in 2024 health care spend.





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## **Appendix: Clinical Outcomes Definitions**

# **Clinical Outcomes Key Metrics**

#### **Eligible Population**

The number of members who completed at least two biometric or lab screenings within a 12-month period, with at least a 3-month gap between visits. This includes PHA and clinic labs/encounters but excludes any activity during Acute and Occ Health/Workers' Compensation visits.

#### **Total Members Improving**

The total count of eligible members who showed improvement in at least one clinical health metric during the reporting period.

#### % of Members Improving

The percentage of eligible members who showed improvement in at least one clinical health metric during the reporting period.

#### **Changes in Health Metrics**

The proportion of members whose biometric measures improved, remained stable, or worsened across key health indicators such as BMI, blood pressure, diabetes (HbA1c), and cholesterol (LDL). Movement of one point (lab or biometric value) constitutes improvement or worsening.

#### Members by Number of Improved Metrics

A breakdown of members based on how many clinical health metrics they improved, highlighting varying levels of health progress.



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