



State of New Jersey

State Health Benefits Program

Plan Year 2020 Rate Setting Recommendation Report

State Employee Group

August 20, 2019

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Executive Summary

The purpose of this report is to recommend premium rates for the State Employee and Retiree Group of the State Health Benefits Program (SHBP) for January 1, 2020 through December 31, 2020.

Recommended premium rate changes are based on a review of the experience of the Medical and Prescription Drug benefits offered to Active Employees and Retirees by the SHBP. The projections for Plan Year 2020 are based on medical and prescription drug claims paid from May 1, 2018 through April 30, 2019. The following summarizes the major highlights in the following Renewal Report:

- The total recommended Plan Year 2020 premium rate change for the combined State Actives, Early Retirees, and Medicare Retirees is 0.6%. This reflects the following:
 - The recommended rate change for State Actives is a 3.5% increase for medical and a 4.8% decrease for the prescription drug premium rates, for a total increase of 2.0%
 - The recommended rate change for State Early Retirees is a 3.8% decrease for medical and a 0.2% increase for the prescription drug premium rates, for a total decrease of 3.1%
 - The Medicare Retirees medical increase for Plan Year 2020 is 37.0%, which includes both self-insured medical premiums and fully insured Medicare Advantage premiums. The change is driven by an increase in the fully insured Plan Year 2020 Medicare Advantage premium rates, which reflects the additional cost of the Health Insurer Fee that was not applicable in Plan Year 2019. The recommended prescription drug rate change for Plan Year 2020 is a 13.7% decrease.
- Effective January 1, 2020, all self-insured medical plans will be administered solely by Horizon. The Self-Insured Medical Bid Solicitation was released on May 10, 2019 and the Notice of Intent to award to Horizon was sent on August 5, 2019. The Self-Insured Medical Bid solicitation is expected to reduce Plan Year 2020 State medical costs by 2.2%.
- Effective January 1, 2020, prescription drug benefits for Actives and Retirees will continue to be administered by Optum as a result of a 2019 Reverse Auction Bid Solicitation administered by TruVeris, Inc. Based on data from TruVeris, the PBM solicitation is expected to reduce State prescription drug costs by 1.8%.
- The State conducted a Dependent Eligibility Verification Audit beginning October 1, 2018 through June 30, 2019 which verified eligible dependents and removed ineligible dependents from the SHBP. Expected Plan Year 2020 savings are included in the projected medical and prescription drug costs.
- Beginning July 1, 2019, CWA Active employees, New Hires and Early Retirees will be offered a CWA Unity Plan Option. Other State Active Employees and Early Retirees will be offered an NJDIRECT PPO Plan Option as contracts are ratified. The 18-Month premium rates for these plan options were approved by the SHBC on June 11, 2019. More information on these plan designs and premium rates is included in the Appendix of this report.
- Effective June 26, 2019, the State Health Benefits Plan Design Committee approved PDC Resolution 2019-6 that required Early Retirees to be offered the same plan options as Actives. For State Early Retirees this includes the HD1500, Tiered Network, and 2035 PPO plan options. The retiree premiums shown in this Plan Year 2020 Renewal Report for these plan options are developed based on an October 1, 2019 effective date and represent a 15-Month premium.

Recommended Premium Renewal Changes

The recommended Plan Year 2020 premium rate changes are as follows: a 2.0% increase for Active Employees, a 3.1% decrease for Early Retirees, and a 0.4% increase for Medicare Retirees. For all groups combined, the recommendation is an increase of 0.6%.

The recommended renewal changes for Plan Year 2020 by benefit plan are listed below.

	Medical	Rx	Total
Actives			
PPO/HDHP	3.7%	(4.5%)	2.1%
HMO	3.7%	(4.5%)	2.3%
Tiered Network	2.6%	(5.6%)	1.0%
CWA Unity / NJ DIRECT PPO	See Appendix		
Total	3.5%	(4.8%)	2.0%
Early Retirees			
PPO	(3.8%)	0.2%	(3.2%)
HMO	(3.8%)	0.2%	(3.1%)
CWA Unity / NJ DIRECT PPO	See Appendix		
Total	(3.8%)	0.2%	(3.1%)
Medicare Retirees			
Total	37.0%	(13.7%)	0.4%
Grand Total	6.2%	(9.2%)	0.6%

The Retiree Medicare Medical Plan includes both fully insured Medicare Advantage plans administered by Aetna and self-insured Medicare plan options administered by Horizon. The Medicare Retirees medical increases for Plan Year 2020 includes both self-insured medical premiums and fully insured Medicare Advantage premiums. The CWA Unity/NJDIRECT rates are effective July 1, 2019 and were approved by the State Health Benefits Commission on June 11, 2019. More information on the CWA Unity/NJDIRECT premium rates is included in the Appendix of this report.

Plan Year 2020 Overview

Self-Insured Medical Bid Solicitation: Effective January 1, 2020, all self-insured medical plans will be administered solely by Horizon. The Self-Insured Medical Bid Solicitation was released on May 10, 2019 and Notice of Intent to award to Horizon was sent on August 5, 2019. Effective January 1, 2020, Horizon will implement Horizon Health Guides, an enhanced Navigation and Advocacy Model. The model has enhanced customer service programs tied to Clinical Management, Medical Management, Disease Management and improvement of population health. The Medical Bid Solicitation is estimated to reduce Plan Year 2020 Active and Early Retiree medical claims by 2.8% and 1.8%, respectively.

PBM Bid Solicitation: Effective January 1, 2020, prescription drug benefits for Actives and Retirees will continue to be administered by Optum as a result of a 2019 Reverse Auction Bid Solicitation administered by Truveris, Inc. The PBM Bid Solicitation was released through a reverse auction platform powered by Truveris on April 22, 2019. The Notice of Award to Optum was released on July 22, 2019. Based on data provided by Truveris, the PBM Bid Solicitation is expected to reduce Plan Year 2020 prescription drug claims by 0.8% for State Actives and Early Retirees, and 2.1% for State Medicare Retirees.

Dependent Eligibility Verification Audit (DEVA): The State conducted a Dependent Eligibility Verification Audit beginning October 1, 2018 through June 30, 2019 which verified eligible dependents and removed ineligible dependents from the SHBP. Based on data provided by the Division, over 5,400 State dependent members were identified as being removed from the program and not re-instated. The estimated savings were determined using actual Plan Year 2018 dependent claims experience provided by Horizon, Aetna, and Optum as well as expected Plan Year 2020 plan costs. Expected Plan Year 2020 savings are included in the projected medical and prescription drug costs.

CWA Unity PPO Plan: Beginning July 1, 2019, the CWA Unity PPO Plan is available to all current CWA Employees, and this plan option replaces the PPO plan options currently available to CWA Active Employees (PPO15, PPO1525, PPO2030 and PPO2035). CWA Employees who are hired after July 1, 2019 are eligible to enroll in the CWA Unity PPO New Hire Plan which includes an in-network deductible. All CWA Early Retirees who attain 25 years of service credit on or after July 1, 2019 and retire on or after July 1, 2019 are assumed to be enrolled in the CWA Unity PPO plan option with no in-network deductible. Additional information is provided in the Appendix.

NJDIRECT PPO Plan: As contracts are ratified, other State Active Employees are eligible to enroll in the NJDIRECT PPO Plan. This plan option replaces the PPO plan options currently available to State Active Employees (PPO15, PPO1525, PPO2030 and PPO2035). Other State Active Employees who are hired after contracts have been ratified are eligible to enroll in the NJDIRECT PPO New Hire Plan which includes an in-network deductible. Other eligible State Early Retirees who attain 25 years of service credit and retire on or after the date which contracts are ratified are assumed to be enrolled in the NJDIRECT PPO Early Retiree plan option with no in-network deductible. Additional information is provided in the Appendix.

New State Early Retiree Plan Options: Effective June 26, 2019, the State Health Benefits Plan Design Committee approved PDC Resolution 2019-6 which required SHBP Early Retirees to be offered the same plan options as Actives (Tiered Network, CWA Unity/NJDIRECT PPO, HD1500 (excluding employer HSA funding)). This resolution was intended to take effect as soon as practicable but no later than October 1, 2019. Retiree premiums shown in this report for these new plan options are developed based on an October 1, 2019 effective date and represent a 15-Month premium.

First Responders Primary Care Medical Home Pilot: Effective January 1, 2020, a First Responders Primary Care Medical Home Pilot Program is to be established. This pilot program shall provide comprehensive primary care services, including pharmacy, preventive care, and other services. Eligible members will have no deductibles, copays or coinsurance for any medical care received by the First Responders Pilot Program. This is not expected to impact the Plan Year 2020 estimated plan costs.

Out-of-Network Laboratory Changes: Effective January 1, 2019, both Labcorp and Quest are included as in-network providers of laboratory services for Aetna and Horizon. Additionally, Horizon has been able to lower reimbursements for out-of-network laboratory services. Lastly, effective July 1, 2019, use of an out-of-network lab for routine services will result in a denied claim and members will be required to utilize an in-network facility. Actual savings resulting from lower claim experience in Plan Year 2019 is reflected in Plan Year 2020 projected costs. These changes are estimated to reduce Plan Year 2020 Active and Early Retiree medical claims by 1.3% and 1.0%, respectively.

Other Changes: The SHBP Plan Design Committee approved several plan changes for Plan Year 2017 that were reaffirmed for Plan Year 2018 and 2019 and were reaffirmed for Plan Year 2020. These changes include an out-of-network reimbursement change for physical therapy, chiropractic, and acupuncture services in the PPO plans, mandatory generic for prescription drugs, and a prescription drug copay change.

The SHBP Plan Design Committee approved the continuation of the alternative prescription drug formulary for Plan Year 2019 that was in place for Plan Year 2018. The alternative prescription drug formulary will continue in Plan Year 2020.

Employee/Retiree Contribution Changes

Actives: Active Employees who are enrolled in the CWA Unity / NJDIRECT PPO Plans are assumed to contribute a percentage of salary for coverage. No other contribution changes are assumed for Active Employees enrolled in another plan option. It is assumed that 1% of HMO participants in Plan Year 2019, and 10% of HMO participants in Plan Year 2020, will migrate to the CWA Unity / NJDIRECT PPO plans as a result of this contribution change. More information regarding this change in participant contributions is provided in the Appendix.

Retirees: Early Retirees who are eligible to enroll in the CWA Unity / NJDIRECT PPO Plans are assumed to contribute a percentage of retirement allowance for coverage. More information regarding this change is provided in the Appendix. Chapter 78 does not apply to existing Retirees as of 7/1/2011 or to Employees who had 20 or more years of service on 7/1/2011. For this reason, no changes to Retiree contributions are assumed for Plan Year 2020, which means that the majority of Retirees will continue to have no contributions towards the cost of their Retiree health benefits.

CWA Unity & NJDIRECT PPO Enrollment

For Plan Year 2019, it is assumed that all CWA Active Employees currently enrolled in a PPO plan will migrate to the CWA Unity PPO plan on July 1, 2019. Other State Active Employees are assumed to enroll in the NJDIRECT PPO plan as contracts are ratified. It is assumed that 1% of Active Legacy HMO enrollment will migrate to the CWA Unity / NJDIRECT PPO Plan effective July 1, 2019. No enrollment is assumed in the CWA Unity PPO New Hire / Early Retiree and NJDIRECT New Hire / Early Retiree Plans from July 1, 2019 through December 31, 2019. For Plan Year 2020 and after, it is assumed that 4% of the total State Active population are New Hires who enroll in either the CWA Unity PPO New Hire or the NJDIRECT PPO New Hire plans. Additionally, 10% of Active Legacy HMO enrollment is assumed to migrate to the CWA Unity / NJDIRECT PPO Plan. Further, it is assumed that 1% of the total State Active population retires each year and are assumed to be new Early Retirees who are enrolled in either the CWA Unity PPO or the NJDIRECT PPO Early Retiree plans.

New Retiree Plan Enrollment

For Plan Year 2019, it is assumed that no eligible Early Retirees will migrate to the New Early Retiree Tiered Network, 2035 PPO, or HD1500 plan options. For Plan Year 2020, it is assumed that 0.25% of the Early Retiree population will migrate from the NJDIRECT15 PPO plan option into each of the lower cost retiree plan options.

Tiered Network Plans

Tiered Network Enrollment: The SHBP Plan Design Committee approved a Tiered Network plan option for SHBP Active Employees, effective January 1, 2016. The Tiered Network Plan is offered by Horizon. Plan Year 2019 enrollment projection assumptions for the Tiered Network Plan are consistent with May 2019 enrollment results. With the addition of the new CWA Unity and NJDIRECT PPO plan options, no future migration is expected into the Tiered Network option.

Effective January 1, 2020, Early Retirees will offer a Tiered Network plan option. It is assumed that 0.25% of Horizon NJDIRECT15 plan enrollment will migrate into the Tiered Network plan option.

Active and Early Retiree Tiered Network enrollment is assumed to be distributed among the tiers (Single, Family, etc.) consistent with the projected distribution of enrollment in the existing plans.

Tiered Network Active Premium Development: There is relatively low enrollment and immature plan experience in the Tiered Network Plans. With three years of full claim experience, the Tiered Network plan premium change will reflect 5% actual experience in these plans. Therefore, the Plan Year 2020 State Active premium rate change will continue to be based primarily on the NJDIRECT15 plan experience but will reflect a blend of actual experience and the theoretical pricing relative values that were used in the initial rate development for the Tiered Network plans for State Actives. State Early Retiree premium rates are based on theoretical pricing relative values from the NJDIRECT15 PPO plan.

Tiered Network Incentive: The State provided an incentive in the form of a gift card per Active Employee who enrolls in the Tiered Network plan for Plan Year 2018 and Plan Year 2019 with a two-year commitment. The incentive varied by tier and was offered to State Employees only. This renewal assumes that the incentive will not be continued for Plan Year 2020. This renewal does not reflect the cost of the incentives or the administrative cost associated with providing gift cards.

Federal Health Care Reform

ACA 9010: Section 9010 of the ACA imposes a Health Insurer Fee (HIF) on each covered entity engaged in the business of providing health insurance for United States health risks. The HIF will help fund the federal subsidies given to lower-income families that may not have coverage. On January 22, 2018, Congress passed a spending bill which places a moratorium on this tax in Plan Year 2019. Aon's projections assume that there is no moratorium on the HIF for Plan Year 2020.

In-Network Out-of-Pocket Maximum: Effective 1/1/2020, Federal Health Care Reform requires that in-network medical and prescription drug benefits have a combined out-of-pocket maximum no greater than \$8,150 single / \$16,300 family. This benefit change will not have a significant impact on projected costs. The chart below summarizes a history of these out-of-pocket maximums:

Plan Year	Out-of-Pocket Maximum (Single/Family)
2018	\$7,350 / \$14,700
2019	\$7,900 / \$15,800
2020	\$8,150 / \$16,300

Public Health Insurance Exchanges: The public health insurance exchanges that are mandated by Federal Healthcare Reform, which began in 2014, are assumed to have minimal impact on enrollment or cost levels within the SHBP.

Full-Time Employee Definition: The Patient Protection and Affordable Care Act (Affordable Care Act) defines full-time employees as employees who work 30 or more hours per week. The employer mandate, which is applicable to full-time employees, was essentially first effective 1/1/2015. This requirement is not projected to have a cost impact on the SHBP because in general, the State offers coverage to all full-time employees.

Minimum Value: Effective 1/1/2015, the Affordable Care Act required employers to offer plans that have a minimum value of at least 60% (i.e., the plan's share of total allowed costs of benefits provided under the plan is at least 60% of such costs). All of the SHBP plan options were tested and have a minimum value in excess of 60%. More details are included in the Minimum Value section of this report.

New Jersey State Mandates

3-D Mammography/Breast Cancer Screening Mandate: Effective January 1, 2019, this mandate will remove member cost-sharing for 3-D mammography screenings when used to screen for breast cancer in women 40 years of age or over. However, when a 3-D mammography is conducted to obtain a diagnosis in women of any age, the same cost sharing that applies to similar services will apply. This mandate is estimated to increase non-Medicare medical claims by approximately 0.1% annually.

NJ Coverage for Donated Breast Milk: Effective January 1, 2019, New Jersey is requiring coverage to cover the expenses incurred in the provision of donated human breast milk. The Department of Health is currently creating guidelines for this mandate. There are no milk banks at this time that qualify as the guidance is not final. This legislation is not expected to materially impact the SHBP.

NJ Out of Network Consumer Protection Act: Effective August 28, 2018, carriers are required to comply with certain disclosure, reimbursement, negotiation, and arbitration requirements with respect to out of network services received by its members. The act will enhance consumer protection related to emergent and surprise out of network health care charges. This mandate is estimated to reduce Plan Year 2019 medical claims by 0.7% for State Actives and 0.6% for State Early Retirees.

Vendor Changes

Medical Vendors: Effective, January 1, 2020, Horizon will solely administer all Active, Early Retiree, and Medicare Retiree self-insured medical plan options. Aon assumes that Aetna will continue to administer the fully-insured Medicare Advantage plan options for Plan Year 2020.

Pharmacy Benefit Manager: Optum will continue to administer the prescription benefits for Actives and Retirees in Plan Year 2020.

Eligibility Changes and Other Eligible Members

Chapter 375 Coverage of Adult Children

New Jersey currently mandates the coverage of adult children under age 31 at a premium level that is equivalent to the child rate included in the standard premium tables, loaded 2% for additional expenses. The Adult child rate will be approximately 88% of the Single Employee rate. Adult dependent enrollment is 137 as of May 2019.

Part-Time Coverage

Part-time Employees may enroll in any of the SHBP plans and as of May 2019, 201 State Part-time Employees participate. A rate load of 0% for Plan Year 2020 is recommended, which is a decrease from the rate load of 1% used in Plan Year 2019. The recommendation is based on the most recent three-year average loss ratio for Part-time Employees.

Enrollment Changes

Exhibit 1A shows historical enrollment patterns from 2017 through 2019 and includes a projection of enrollment from 2019 to 2020. This projection assumes that State Active enrollment will remain flat in Plan Year 2020. Early Retiree enrollment is projected to decrease 2.5% per year in Plan Year 2020; and Medicare Retiree enrollment is projected to increase 3.5% in Plan Year 2020. Exhibit 1B shows the projected distribution of enrollment among the available benefit options in Plan Year 2020. Exhibit 1C shows enrollment by benefit option and coverage tier as of May 2019.

Active Demographic Changes

The Active Employee average age decreased by 1.8 from Plan Year 2018 to Plan Year 2019. The average HMO Employee age is almost two years older than the average PPO Employee age. The average age of Employees enrolling in the new benefit options decreased by a year from Plan Year 2018 to 2019, and is approximately eight years younger than Employees in the Legacy Plans.

Average Employee Age

	May 2018	May 2019	Change
Legacy PPO	48.2	46.5	(1.7)
Legacy HMO	50.0	48.5	(1.5)
Legacy Total	48.4	46.7	(1.7)
New Plans	39.6	38.5	(1.1)
Total	47.0	45.2	(1.8)

Trend Analysis

The recommended claim trend assumptions for Plan Years 2019 and 2020 are:

	Plan Year 2019		Plan Year 2020	
	Medical	Prescription Drugs	Medical	Prescription Drugs
PPO Actives	4.50%	7.00%	5.00%	7.00%
PPO Early Retirees	5.00%	7.00%	5.00%	7.00%
Self-Insured Medicare Retirees	5.00%	7.00%	5.00%	7.00%
HMO Actives	6.00%	7.00%	5.50%	7.00%
HMO Early Retirees	6.00%	7.00%	5.50%	7.00%
Tiered Network	6.00%	7.00%	5.50%	7.00%

The Medicare Retiree medical trend assumptions do not reflect the fully insured Medicare Advantage plans. The Plan Year 2020 Medicare Advantage premium rates are provided by Aetna and are shown on the following page.

Exhibits 2A and 2B presents historical SHBP trend experience and the recommended trend assumptions for Plan Year 2020 for medical and prescription drug, respectively. These experience trends are based on estimated incurred claim trends from May 1, 2017 to April 30, 2019 and have been normalized for estimated benefit and vendor changes.

Aon recommended trends are developed using vendor recommended trends, national Aon trend guidance (which reflects vendor surveys, Pharmacy Benefit Manager national surveys and other external sources) as well as actual SHBP plan experience adjusted for expected future trends. The vendor recommended trends and National Aon trend guidance are shown in the table below:

Plan Year 2020	Vendor Recommendation			National AON Trend Guidance
	Horizon	Aetna	Optum	
PPO Actives	5.0%	7.3%	N/A	5.5%
PPO Early Retirees	6.0%	7.3%	N/A	5.5%
HMO	6.0%	7.6%	N/A	5.5%
Prescription Drugs	N/A	N/A	8.0%	6.5%

Medical Trends:

- PPO Actives: The PPO Active medical trend has been lowered to 4.5% in Plan Year 2019 from the 5.0% trend shown in the Plan Year 2019 Renewal Report. The recommended Active PPO medical trend is 5.0% for Plan Year 2020.
- PPO Early Retirees: The Plan Year 2019 Early Retiree PPO medical trend has been reduced to 5.0% from 5.5% in the Plan Year 2019 Renewal Report. The Plan Year 2020 medical trend is 5.0%.
- Self-Insured Medicare Retirees (PPOs and HMOs): The self-insured Medicare Retiree medical trend is 5.0% in Plan Years 2019 and 2020, as compared to the Plan Year 2019 Medicare Retiree medical trend of 4.0% in the Plan Year 2019 Renewal Report.
- HMO Actives: The medical trend assumption for HMO Actives is 6.0% in Plan Year 2019, a no change from the Plan Year 2019 Renewal Report. The HMO Active trend assumption in Plan Year 2020 is 5.5%.

- HMO Early Retirees: The medical trend assumption for HMO Early Retirees is 6.0% in Plan Year 2019, no change from the Plan Year 2019 trend assumption shown in the Plan Year 2019 Renewal Report. The HMO Early Retiree trend assumption in Plan Year 2020 is 5.5%.

Prescription Drug Trends: Prescription drug claim experience has been favorable due to SHBP plan design changes, recent favorable market industry trend reductions and the change in PBM.

The recommended prescription drug trend for Actives and Retirees has been lowered to 7.0% in Plan Year 2019 from 8.0% that was used in the Plan Year 2019 Renewal Report. The recommended prescription drug trend for Plan Year 2020 is 7.0%.

Medicare Advantage: The Medicare Advantage rates in Plan Years 2019 and 2020 were provided by Aetna. The Plan Year 2020 fully-insured premium rates reflect the Health Insurer Fee. Below is a table summarizing the fully insured Medicare Advantage per member per month rates for Plan Years 2019 and 2020.

Aetna Monthly Per Member Medicare Advantage Premium Rates

State	Aetna		
	2019	2020	% Change
PPO 10	\$ 91.64	\$ 125.66	37.1%
PPO 15	\$ 73.80	\$ 107.52	45.7%
HMO 10	\$ 143.50	\$ 183.18	27.7%
HMO 1525	\$ 109.00	\$ 147.75	35.6%

Financial Projections

Aggregate Financial Projections

Using the assumptions and methodology described in this report's Renewal Rate Development section, below are Aon's current estimated projected costs for Plan Years 2018, 2019, and 2020.

For Plan Year 2020, CWA Unity/NJDIRECT PPO 18-Month premium rates effective July 1, 2019 were previously approved by the State Health Benefits Commission and were developed based on the assumptions and experience as disclosed in the Plan Year 2018 Mid-Year Report. The projected gain for the CWA Unity/NJDIRECT PPO plans are a result of changes in assumptions and experience as disclosed in this report. For Actives, the Legacy HMO, HD1500, and Tiered Network plan premiums are determined with no gain or loss.

Projected Financial Results (in \$ millions)

	PPO 10	PPO 15	Legacy HMOs	New Plans*	Total
Plan Year 2018					
Premium Rates x Enrollment	\$111.6	\$1,924.5	\$364.2	\$148.0	\$2,548.3
Incurred Claims	\$86.9	\$1,738.6	\$324.4	\$92.1	\$2,242.0
Administrative Charges	\$1.9	\$36.5	\$11.1	\$5.4	\$54.9
Net Gain (Loss)	\$22.8	\$149.4	\$28.7	\$50.5	\$251.4
Plan Year 2019					
Premium Rates x Enrollment	\$70.6	\$1,114.4	\$334.2	\$820.1	\$2,339.3
Incurred Claims	\$55.9	\$1,039.7	\$320.4	\$751.6	\$2,167.6
Administrative Charges	\$1.8	\$22.8	\$8.5	\$21.6	\$54.7
Net Gain (Loss)	\$12.9	\$51.9	\$5.3	\$46.9	\$117.0
Plan Year 2020					
Premium Rates x Enrollment	\$73.1	\$359.8	\$297.0	\$1,518.9	\$2,248.8
Incurred Claims	\$65.3	\$345.2	\$301.6	\$1,447.0	\$2,159.1
Administrative Charges	\$1.9	\$7.8	\$8.4	\$43.2	\$61.3
Net Gain (Loss)	\$5.9	\$6.8	(\$13.0)	\$28.7	\$28.4

* The New Plans column includes the CWA Unity/NJDIRECT PPO plans effective July 1, 2019 and the new Early Retiree plan option effective January 1, 2020.

The current Plan Year 2018 financial results project a decrease in the gain of \$2 million as compared to the 2018 Mid-Year Report for Plan Year 2018. This slight reduction in the gain is primarily due to worse than expected medical and prescription drug claim experience.

The current Plan Year 2019 financial results project an increase in the gain of \$31 million as compared to the Plan Year 2018 Mid-Year Report for Plan Year 2019. This projected gain from the Plan Year 2018 Mid-Year Report analysis is largely due to better than expected medical and prescription drug claim experience.

The Plan Year 2020 renewal premiums are projected to produce a gain for State Actives and approximately no gain or loss for State Retirees. The Plan Year 2020 aggregate projected cost for the State Group is approximately \$2.2 billion: \$1.6 billion for Actives and \$0.6 billion for Retirees.

More detailed aggregate projections are attached in Exhibit 3. The losses and gains displayed in this table and in Exhibit 3 assume that all premiums are fully funded.

Financial Gain/(Loss)

Plan Year 2018

The total cost increased approximately 0.1% from the Plan Year 2018 Mid-Year Report. For actives, the medical and prescription drug costs increased 0.3% from the Plan Year 2018 Mid-Year Report, primarily a result of additional claims runout through April 2019 resulting in higher than expected Plan Year 2018 claims. The Retiree cost is projected to decrease 0.5% from the Plan Year 2018 Mid-Year Report due to lower than expected additional claims runout through April 2019, resulting in lower than expected Plan Year 2018 claims.

Plan Year 2019

For Plan Year 2019, there is a 5.1% decrease in total active plan costs from the results shown in Plan Year 2018 Mid-Year Report. This is primarily a result of the following:

- With the adoption of the CWA Unity/NJDIRECT PPO Plan, the Plan Year 2019 estimated plan cost is expected to decrease 3.5% compared to the Mid-Year Reports, which did not reflect the adoption of the CWA Unity/NJDIRECT PPO plan. The reduced costs are a result of the introduction of the bargained CWA Unity/NJDIRECT PPO plan design. Please note, this reduction in cost does not contribute to the overall gain or loss as the reductions in cost are reflected in the Plan Year 2019 CWA Unity/NJDIRECT PPO plan premiums.
- There is a 2.5% reduction in 2019 active cost due to updated medical and prescription claims through April 2019 as compared to projected claims. There is an additional 0.8% reduction in 2019 active cost due to the adopted out-of-network lab services legislation.
 - Optum reporting shows an increase in the generic fill rate for SHBP Actives, resulting in reduced prescription drug costs. Additionally, there is a reduction in utilization for State Actives due to reductions in the drug mix and drug quantity.
 - While Tiered Network trends have increased, projected Plan Year 2019 Tiered Network costs continue to be below expectations.
- Based on updated information from Optum, active prescription drug rebates decreased. As a result, total cost increased by 1.7%.

For Retirees, there is an increase in the gain due to a 6.0% decrease in total retiree plan costs from the results shown in Plan Year 2018 Mid-Year Report. This reduction in total retiree plan cost is primarily a result of the following:

- There is a 6.7% reduction in Plan Year 2019 retiree plan cost due to updated medical and prescription drug claims experience through April 2019.
 - 2018 Horizon NJDIRECT claims experience shows negative medical utilization for State Early Retirees.
 - Optum reporting shows an increase in the generic fill rate for SHBP Early and Medicare Retirees.
 - Additionally, there is a reduction in utilization for State Early Retirees due to drug mix changes and for State Medicare Retirees due to changes in the drug quantity.
- There is an additional 0.1% reduction in cost as a result of changes in Plan Year 2019 assumptions and overhead costs. Additionally, there is another 0.2% reduction in cost due to adopted out-of-network lab services legislation.
- Based on updated information from Optum, decreases in retiree prescription drug rebates increased retiree costs by approximately 1.1%, offset by an increase in EGWP credits that reduce total cost by 0.1%.

Self-Insured Vendor Administrative Fees and Claim Charges

The sections below show Plan Year 2020 administrative fees and other claim charges, as applicable, separately by each of the medical and prescription drug vendors. The fees are reported by the vendors in different categories and may appear aggregated within different rows in Exhibit 3, including incurred medical and prescription drug claims, capitation and administrative fees.

Horizon Medical PEPM Fees/Charges

	Plan Year 2020			
	PPO	HMO	HDHP	Tiered
Actives and Early Retirees				
Part 1 Services	\$22.40	\$33.00	\$22.13	\$37.50
Part 2 Services	\$9.00	\$9.00	\$9.00	\$9.00
Medical Management	\$1.10	\$1.10	\$1.10	\$1.10
Disease Management	\$0.40	\$0.40	\$0.40	\$0.40
HSA Banking Fee (Per Account Per Month)	N/A	N/A	\$2.37	N/A
NJWELL*	\$19.00	\$19.00	\$19.00	\$19.00
Medicare Retirees				
Part 1 Services	\$23.00	\$23.00	N/A	N/A
Part 2 Services	\$7.50	\$7.50	N/A	N/A

* Note that Plan Year 2019 NJWELL fees applied to the entire Active population. Plan Year 2020 fees are per attributed NJWELL employee.

Other fees/claim charges that may be included within the incurred medical and prescription drug claims, capitation and administrative fees within Exhibit 3 include but are not limited to:

- NJWELL and Retiree Wellness Program fees (physician attestation forms, gift cards, etc.)
- DPCMH and PCMH administrative fees and capitation amounts
- Claim recovery services

Prescription Drug Fees

Administrative fees charged by Optum for the prescription drug program for Plan Year 2020 are \$5.25 PEPM for Commercial and \$8.00 PMPM for EGWP.

Minimum Value

Under the Affordable Care Act, beginning in 2014, eligible individuals who purchase coverage under a qualified health plan through a state health insurance exchange may receive a premium tax credit or cost-sharing subsidy unless they are eligible for other healthcare coverage, including coverage under an employer-sponsored health plan that is affordable to the employee and provides minimum value. A plan fails to provide minimum value if the plan's share of the total allowed costs of benefits provided under the plan is less than 60% of such costs. The Plan Year 2020 SHBP plans were tested using the Minimum Value calculator provided by Health and Human Services (HHS) and the Internal Revenue Service (IRS). All the SHBP plans have a minimum value greater than the 60% minimum requirement with values ranging from 66% for the \$4,000 High Deductible plan up to 95% for the NJ DIRECT15 plan.

Renewal Rate Development

Rating Methodology

Exhibit 3 shows the aggregate projected costs for Plan Years 2018, 2019 and 2020, separately for each PPO, Tiered Network, HMO and High Deductible plan. Costs were projected separately for each benefit plan for Actives, Early Retirees and Medicare Retirees, and for medical claims, prescription drug claims, administrative costs and aggregate premiums.

Plan Year 2020 premium increases were calculated separately for Actives, Early Retirees and Medicare Retirees, and by medical and prescription drug. Aetna experience was used to develop the HMO premium increases; Horizon experience for the PPO and Tiered Network premium increases; and Optum experience for the prescription drug premium increases.

Projection Assumptions

1. Using incurred and paid claim data through April 2019 supplied by Horizon, Aetna, and Optum, incurred claims were completed for Plan Year 2019, separately for each benefit plan, for medical and prescription drugs and for Actives, Early Retirees and Medicare Retirees.
2. Capitation and other similar fixed claim charges were added to the incurred claims.
3. Estimated incurred claims in Plan Year 2019 were divided by projected average covered members to get average claims per member per year. Covered members were based on historical billing enrollment data by coverage tier and adjusted with assumptions for the number of members per coverage tier.
4. Claims per member were projected from the mid-point of the experience period to the mid-point of Plan Year 2020 using the annual trend rates listed in the Trend Analysis section of this document.
5. Aggregate claims for Plan Year 2020 are the product of projected enrollment and the projected claims per member.
6. Plan Year 2020 projected Medicare Advantage fully insured premiums are based on rates provided by Aetna.
7. Prescription drug rebates for Plan Year 2018 are based on actual rebate payment data received from the State. Projected rebates for Plan Years 2019 and 2020 are based on data provided by Optum.
8. Prescription drug rebates paid through the medical plan for Plan Year 2018 are based on actual rebate payment data provided by Aetna and Horizon. Prescription Drug Rebates are estimated to be paid through the medical plan for Plan Years 2019 and 2020 are incorporated in the medical claim projections and are based on the actual Plan Year 2018 data provided by Aetna and Horizon.

9. EGWP projections include monthly CMS capitation payments per Medicare-eligible Retiree for prescription drug coverage, prescription drug manufacturers' coverage gap reimbursement payments, an annual CMS payment for reinsurance on catastrophic claims and CMS Low Income Cost Sharing (LICS) payments. These amounts are equal to recommendations from Optum for Plan Years 2019 and 2020.
 - a. CMS per capita payments: Plan Years 2018, 2019, and 2020 actual and expected CMS per capita payments were provided by Optum. The Plan Year 2020 CMS per capita payment is assumed to be \$11.15 Per Member Per Month (PMPM).
 - b. Coverage Gap Discount: Plan Years 2018, 2019, and 2020 actual and expected coverage gap payments were provided by Optum. The Plan Year 2020 credits are assumed to be \$85.36 PMPM.
 - c. Catastrophic Reinsurance: This payment has a very long lag, and the Plan Year 2018 credit is not expected to be fully paid until the beginning of Plan Year 2020. Plan Years 2018, 2019, and 2020 actual and expected catastrophic reinsurance payments were provided by Optum. The Plan Year 2020 credits are assumed to be \$89.87 PMPM.
 - d. Low Income Cost Sharing (LICS): Plan Years 2018 and 2019 actual and expected LICS payments were provided by Optum. For Plan Year 2020, the subsidy payment is assumed to be \$2.14 PMPM.
10. Total SHBP projected Plan Year 2020 claim costs are the sum of projected medical and prescription drug claims, capitation charges, payments from CMS related to EGWP Plus Wrap and prescription drug rebates.
11. Tiered Network projected costs in Plan Year 2020 reflects 5% of actual Plan Year 2019 medical and prescription drug claim experience.
12. Base administrative fees per subscriber per month or per member per month are multiplied by the projected average enrollment for the applicable projection Plan Year. Plan Year 2020 administrative fees were provided by Horizon, Aetna and Optum.
13. Overhead charges, which are internal State of New Jersey administrative costs charged against the plans, are projected to be equal to \$3.3 million for Plan Year 2020.
14. All other fees and claim charges reported by the vendors have been reflected in the projections.

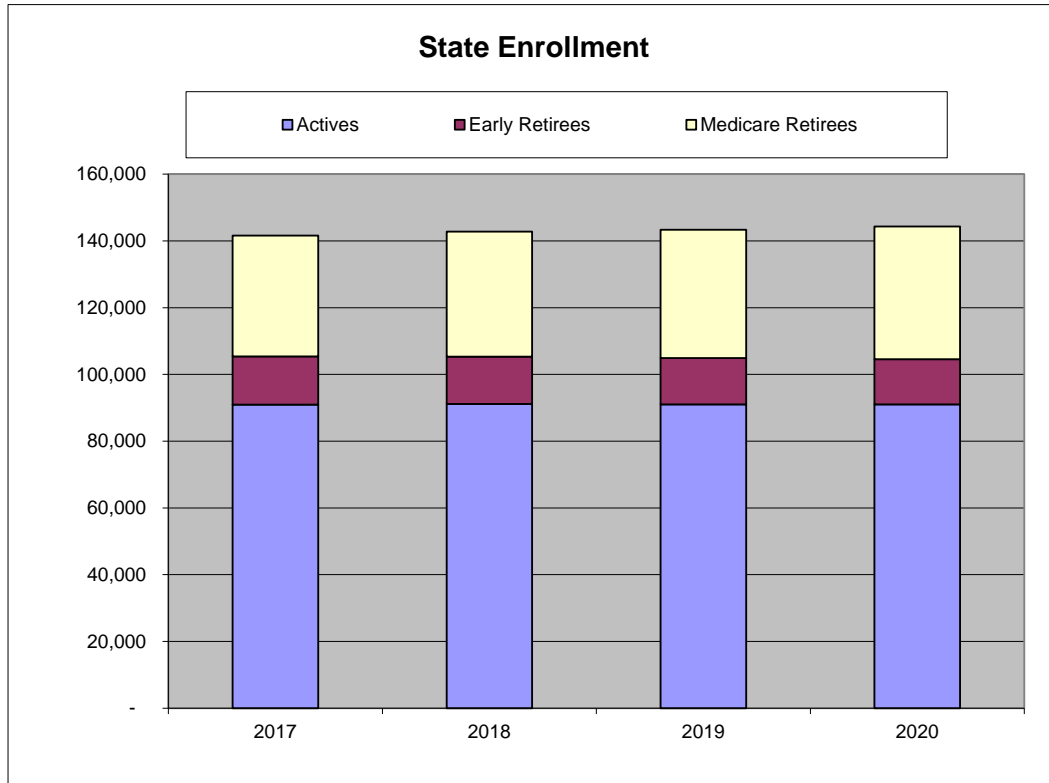
Projected Premiums

1. Plan Year 2020 self-insured premiums were developed by applying the projected premium increase percentages listed in the Executive Summary section of this document to Plan Year 2019 premium rates.
2. Aggregate Plan Year 2020 premiums are calculated by multiplying projected Plan Year 2020 enrollment and projected Plan Year 2020 premium rates.

Data Assumptions

1. Claims: For medical and prescription drug claims, claim files from each of the vendors, which have claims paid through April 30, 2019, were used.
2. Enrollment: Billing counts from the Division of Pensions and Benefits through May 2019 are used for the exposure units in the cost analysis.

Exhibit 1A – Enrollment Projections

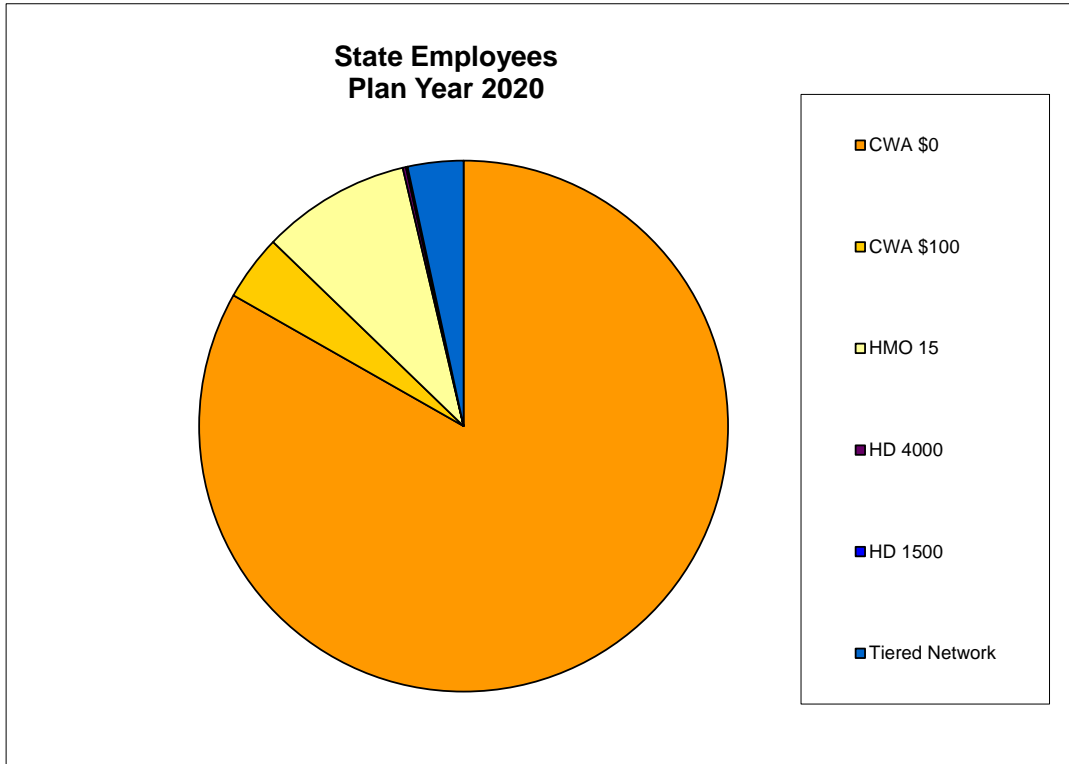


Annual Change in Enrollment

	<u>Actual 2017 to 2018</u>	<u>Actual 2018 to 2019</u>	<u>Projected* 2019 to 2020</u>
Actives	0.2%	(0.1%)	0.0%
Early Retirees	(2.1%)	(2.0%)	(2.5%)
Medicare Retirees	3.6%	2.5%	3.5%

*Projected 2019 enrollment for Active Employees and Retirees was assumed to be consistent with enrollment data through May provided by the State.

Exhibit 1B Actives – Projected Plan Year 2020 Plan Distribution



Assumes approximately 87% of Employees will enroll in the CWA plans, 9% in the HMO plans, 3% in the Tiered Network plans, and less than 1% in the High Deductible plans.

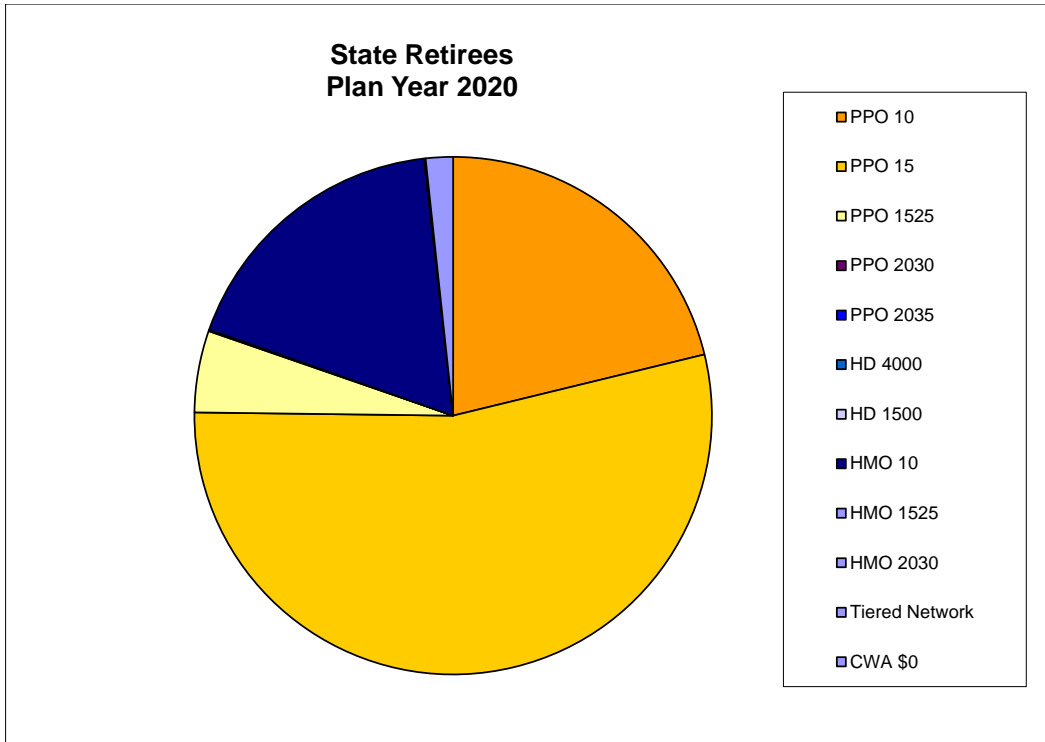
Assumes approximately 9% of Employees will enroll in the Legacy plan, with approximately 91% in the new benefit options.

Actives	Horizon	Aetna*	Total
CWA \$0	73.2%	10.0%	83.2%
CWA \$100	3.2%	0.8%	4.0%
HMO 15	1.0%	8.1%	9.1%
HD 4000	0.1%	0.1%	0.2%
HD 1500	0.0%	0.1%	0.1%
Tiered Network	2.2%	1.2%	3.4%
Total	79.7%	20.3%	100%

*Aetna enrollment in medical self-insured plans is assumed to migrate to Horizon plans due to the medical RFP.

**Some plans may show 0.0% enrollment. These plans may include low enrollment which rounds to 0.0%.

Exhibit 1B Early and Medicare Retirees – Projected Plan Year 2020 Plan Distribution



Assumes approximately 93% of Retirees will remain in the \$10 and \$15 copay plans.

Assumes approximately 82% of Retirees will enroll in the PPO plans, 18% in the HMO plans, and less than 1% in the High Deductible and Tiered Network plan.

Assumes approximately 93% of Retirees will enroll in the Legacy plans, with only approximately 7% in the new benefit options.

Retirees	Horizon	Aetna*	Total
PPO 10	0.4%	20.8%	21.2%
PPO 15	15.7%	38.3%	54.0%
PPO 1525	5.1%	0.0%	5.1%
PPO 2030	0.1%	0.0%	0.1%
PPO 2035	0.0%	0.0%	0.0%
HD 4000	0.0%	0.0%	0.0%
HD 1500	0.0%	0.0%	0.0%
HMO 10	0.2%	17.6%	17.8%
HMO 1525	0.0%	0.1%	0.1%
HMO 2030	0.0%	0.0%	0.0%
Tiered Network	0.0%	0.0%	0.0%
CWA \$0	1.4%	0.3%	1.7%
Total	22.9%	77.1%	100%

*Aetna early retiree enrollment in medical self-insured plans is assumed to migrate to Horizon plans due to the medical RFP.

**Some plans may show 0.0% enrollment. These plans may include low enrollment which rounds to 0.0%.

Exhibit 1C Actives – May 2019 Enrollment

	Number of Contracts as of May 2019				
	Single	Employee + Spouse	Family	Employee + Child(ren)	Total
STATE - ACTIVE & COBRA					
Medical Plans					
NJ DIRECT10	0	0	0	0	0
NJ DIRECT15	21,784	10,739	22,872	10,280	65,675
NJ DIRECT1525	802	212	464	187	1,665
NJ DIRECT2030	612	157	385	97	1,251
NJ DIRECT2035	411	70	90	38	609
NJ DIRECT HD4000	57	10	23	2	92
NJ DIRECT HD1500	45	8	9	4	66
Horizon Legacy HMO (15)	538	73	194	220	1,025
Horizon OMNIA	988	218	594	297	2,097
Horizon Total	25,237	11,487	24,631	11,125	72,480
Aetna Freedom 10	0	0	0	0	0
Aetna Freedom 15	2,754	823	1,796	687	6,060
Aetna Freedom 1525	591	123	280	121	1,115
Aetna Freedom 2030	248	111	262	54	675
Aetna Freedom 2035	407	51	85	32	575
Aetna Value HD4000	46	8	19	2	75
Aetna Value HD1500	39	1	8	4	52
Aetna Legacy HMO (15)	2,614	1,328	2,971	1,708	8,621
Aetna Liberty	606	100	325	134	1,165
Aetna Total	7,305	2,545	5,746	2,742	18,338
Total	32,542	14,032	30,377	13,867	90,818

Exhibit 1C Early and Medicare Retirees – May 2019 Enrollment

	Number of Contracts as of May 2019				
	Single	Employee + Spouse	Family	Employee + Child(ren)	Total
STATE RETIREES					
Medical Plans					
NJ DIRECT10	93	405	171	110	779
NJ DIRECT15	2,994	4,106	3,388	1,249	11,737
NJ DIRECT1525	1,542	998	105	52	2,697
NJ DIRECT2030	42	14	6	1	63
NJ DIRECT HD4000	12	2	1	0	15
NJ DIRECT HD1500	0	0	0	0	0
Horizon Legacy HMO (10)	71	34	13	7	125
Horizon HMO 1525	12	5	2	1	20
Horizon HMO 2030	2	0	0	0	2
Horizon Total	4,768	5,564	3,686	1,420	15,438
Aetna Freedom 10	6,620	3,461	18	5	10,104
Aetna Freedom 15	10,521	6,435	224	89	17,269
Aetna Freedom 1525	6	2	3	0	11
Aetna Freedom 2030	4	0	2	1	7
Aetna Value HD4000	4	2	0	1	7
Aetna Value HD1500	0	0	0	0	0
Aetna Legacy HMO (10)	4,341	3,149	1,389	579	9,458
Aetna HMO 1525	18	10	5	1	34
Aetna HMO 2030	6	1	3	1	11
Aetna Total	21,520	13,060	1,644	677	36,901
Total	26,288	18,624	5,330	2,097	52,339

Exhibit 2A – Medical Trend Assumption

	(A) Increase in Claims/Mem	(B) Benefit + RFP Changes	(C) = (A) - (B) Claim Trend
<u>PPO Active</u>			
05/01/2017 - 04/30/2018	4.9%	(0.7%)	5.6%
05/01/2018 - 04/30/2019	5.2%	(0.2%)	5.4%
Average			5.5%
Recommended Plan Year 2020 Trend Assumption			5.0%
<u>PPO Early Retiree</u>			
05/01/2017 - 04/30/2018	5.5%	(0.5%)	6.0%
05/01/2018 - 04/30/2019	4.1%	(0.2%)	4.3%
Average			5.1%
Recommended Plan Year 2020 Trend Assumption			5.0%
<u>HMO Active and Early Retiree</u>			
05/01/2017 - 04/30/2018	8.4%	0.5%	7.9%
05/01/2018 - 04/30/2019	6.4%	0.0%	6.4%
Average			7.2%
Recommended Plan Year 2020 Trend Assumption			5.5%

Normalizing Adjustments

- 1/1/2017: Increase Emergency Room copays and OON physical therapy reimbursement change.
- 1/1/2017: Expansion of Health Programs requirements to transgender individuals (ACA 1557).
- 5/16/2017: Treatments for Substance Use Disorder and Restrictions on Opioids Law.
- 8/29/2018: NJ Out of Network Consumer Protection Act
- 1/1/2019: 3-D Mammography/Breast Cancer Screening Mandate

Exhibit 2B – Prescription Drug Trend Assumption

	(A) Increase in Claims/Mem	(B) Benefit + RFP Changes	(C) = (A) - (B) Claim Trend
Active Rx			
05/01/2017 - 04/30/2018	(4.6%)	(10.8%)	6.2%
05/01/2018 - 04/30/2019	(5.0%)	(7.9%)	2.9%
Average			4.5%
Recommended Plan Year 2020 Trend Assumption			7.0%

Retiree Rx			
05/01/2017 - 04/30/2018	0.8%	(6.3%)	7.1%
05/01/2018 - 04/30/2019	(2.9%)	(7.9%)	5.0%
Average			6.1%
Recommended Plan Year 2020 Trend Assumption			7.0%

Normalizing Adjustments

1/1/2017: Step-Therapy, Mandatory Generic, Preferred Formulary changes.

1/1/2018: Include impact of change in prescription drug vendor.

Exhibit 3A – Plan Year 2018 Aggregate Costs

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	Legacy Plans								1525			
	Total	Aetna		Aetna		Aetna HMO	Horizon HMO	Aetna Freedom	NJ DIRECT	Aetna HMO	Horizon HMO	
		Freedom 10	Freedom 15	NJ DIRECT10	NJ DIRECT15							
Employees and Retirees												
Average Medical Members	307,979	458	14,662	16,307	213,346	41,053	2,085	1,939	5,450	56	16	
Incurred Medical Claims	\$1,783,594,000	\$1,844,000	\$92,454,000	\$50,919,000	\$1,323,801,000	\$232,289,000	\$7,124,000	\$9,023,000	\$21,889,000	\$143,000	\$48,000	
Capitation	\$31,508,000	\$0	\$0	\$115,000	\$14,984,000	\$15,433,000	\$156,000	\$0	\$280,000	\$21,000	\$1,000	
Incurred Prescription Drug Claims	\$725,681,000	\$1,554,000	\$27,714,000	\$77,407,000	\$475,459,000	\$113,665,000	\$2,300,000	\$1,800,000	\$14,813,000	\$224,000	\$56,000	
Prescription Drug Rebates	(\$208,713,000)	(\$360,000)	(\$8,384,000)	(\$17,621,000)	(\$141,532,000)	(\$32,310,000)	(\$707,000)	(\$594,000)	(\$3,626,000)	(\$58,000)	(\$13,000)	
EGWP Credits	(\$90,076,000)	(\$653,000)	(\$2,430,000)	(\$26,236,000)	(\$43,452,000)	(\$13,288,000)	(\$201,000)	\$0	(\$3,685,000)	(\$35,000)	(\$19,000)	
Administrative Fees	\$54,851,000	\$55,000	\$3,315,000	\$1,837,000	\$33,174,000	\$10,471,000	\$609,000	\$509,000	\$1,293,000	\$13,000	\$6,000	
Total Cost	\$2,296,845,000	\$2,440,000	\$112,669,000	\$86,421,000	\$1,662,434,000	\$326,260,000	\$9,281,000	\$10,738,000	\$30,964,000	\$308,000	\$79,000	
Total Premium	\$2,548,279,000	\$3,359,000	\$126,142,000	\$108,254,000	\$1,798,330,000	\$346,679,000	\$17,523,000	\$16,296,000	\$40,362,000	\$500,000	\$123,000	
Gain (Loss)	\$251,434,000	\$919,000	\$13,473,000	\$21,833,000	\$135,896,000	\$20,419,000	\$8,242,000	\$5,558,000	\$9,398,000	\$192,000	\$44,000	
Employees												
Average Medical Members	220,248	N/A	12,096	N/A	165,084	23,662	1,890	1,924	3,120	N/A	N/A	
Incurred Medical Claims	\$1,352,539,000	N/A	\$77,818,000	N/A	\$1,064,091,000	\$137,169,000	\$6,367,000	\$8,933,000	\$14,760,000	N/A	N/A	
Capitation	\$24,438,000	N/A	\$0	N/A	\$13,053,000	\$10,499,000	\$140,000	\$0	\$241,000	N/A	N/A	
Incurred Prescription Drug Claims	\$357,250,000	N/A	\$18,046,000	N/A	\$279,053,000	\$43,845,000	\$1,606,000	\$1,791,000	\$2,669,000	N/A	N/A	
Prescription Drug Rebates	(\$117,934,000)	N/A	(\$5,957,000)	N/A	(\$92,121,000)	(\$14,474,000)	(\$530,000)	(\$591,000)	(\$881,000)	N/A	N/A	
EGWP Credits	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
Administrative Fees	\$41,456,000	N/A	\$2,916,000	N/A	\$26,498,000	\$6,884,000	\$538,000	\$504,000	\$590,000	N/A	N/A	
Total Cost	\$1,657,749,000	N/A	\$92,823,000	N/A	\$1,290,574,000	\$183,923,000	\$8,121,000	\$10,637,000	\$17,379,000	N/A	N/A	
Total Premium	\$1,829,076,000	N/A	\$104,257,000	N/A	\$1,385,763,000	\$191,587,000	\$15,836,000	\$16,108,000	\$25,933,000	N/A	N/A	
Gain (Loss)	\$171,327,000	N/A	\$11,434,000	N/A	\$95,189,000	\$7,664,000	\$7,715,000	\$5,471,000	\$8,554,000	N/A	N/A	
Early Retirees												
Average Medical Members	36,656	87	1,188	1,431	23,624	9,857	81	15	241	36	5	
Incurred Medical Claims	\$303,889,000	\$760,000	\$10,637,000	\$12,539,000	\$200,284,000	\$76,700,000	\$528,000	\$90,000	\$1,675,000	\$102,000	\$23,000	
Capitation	\$7,070,000	\$0	\$0	\$115,000	\$1,931,000	\$4,934,000	\$16,000	\$0	\$39,000	\$21,000	\$1,000	
Incurred Prescription Drug Claims	\$84,196,000	\$117,000	\$2,667,000	\$2,915,000	\$55,254,000	\$22,394,000	\$224,000	\$9,000	\$265,000	\$73,000	\$6,000	
Prescription Drug Rebates	(\$27,127,000)	(\$38,000)	(\$859,000)	(\$939,000)	(\$17,802,000)	(\$7,215,000)	(\$72,000)	(\$3,000)	(\$85,000)	(\$24,000)	(\$2,000)	
EGWP Credits	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Administrative Fees	\$7,098,000	\$13,000	\$243,000	\$143,000	\$3,887,000	\$2,730,000	\$16,000	\$5,000	\$23,000	\$11,000	\$1,000	
Total Cost	\$375,126,000	\$852,000	\$12,688,000	\$14,773,000	\$243,554,000	\$99,543,000	\$712,000	\$101,000	\$1,917,000	\$183,000	\$29,000	
Total Premium	\$402,941,000	\$929,000	\$12,880,000	\$15,818,000	\$263,610,000	\$105,132,000	\$836,000	\$188,000	\$2,245,000	\$386,000	\$50,000	
Gain (Loss)	\$27,815,000	\$77,000	\$192,000	\$1,045,000	\$20,056,000	\$5,589,000	\$124,000	\$87,000	\$328,000	\$203,000	\$21,000	
Medicare Retirees												
Average Medical Members	51,075	371	1,378	14,876	24,638	7,534	114	N/A	2,089	20	11	
Incurred Medical Claims	\$127,166,000	\$1,084,000	\$3,999,000	\$38,380,000	\$59,426,000	\$18,420,000	\$229,000	N/A	\$5,454,000	\$41,000	\$25,000	
Capitation	\$0	\$0	\$0	\$0	\$0	\$0	\$0	N/A	\$0	\$0	\$0	
Incurred Prescription Drug Claims	\$284,235,000	\$1,437,000	\$7,001,000	\$74,492,000	\$141,152,000	\$47,426,000	\$470,000	N/A	\$11,879,000	\$151,000	\$50,000	
Prescription Drug Rebates	(\$63,652,000)	(\$322,000)	(\$1,568,000)	(\$16,682,000)	(\$31,609,000)	(\$10,621,000)	(\$105,000)	N/A	(\$2,660,000)	(\$34,000)	(\$11,000)	
EGWP Credits	(\$90,076,000)	(\$653,000)	(\$2,430,000)	(\$26,236,000)	(\$43,452,000)	(\$13,288,000)	(\$201,000)	N/A	(\$3,685,000)	(\$35,000)	(\$19,000)	
Administrative Fees	\$6,297,000	\$42,000	\$156,000	\$1,694,000	\$2,789,000	\$857,000	\$55,000	N/A	\$680,000	\$2,000	\$5,000	
Total Cost	\$263,970,000	\$1,588,000	\$7,158,000	\$71,648,000	\$128,306,000	\$42,794,000	\$448,000	N/A	\$11,668,000	\$125,000	\$50,000	
Total Premium	\$316,262,000	\$2,430,000	\$9,005,000	\$92,436,000	\$148,957,000	\$49,980,000	\$851,000	N/A	\$12,184,000	\$114,000	\$73,000	
Gain (Loss)	\$52,292,000	\$842,000	\$1,847,000	\$20,788,000	\$20,651,000	\$7,166,000	\$403,000	N/A	\$516,000	(\$11,000)	\$23,000	

*Some plans may show \$0 in certain cost categories. These plans may have costs which are less than \$500 and round to \$0. The Incurred Medical Claims cost category reflects the Medicare Advantage plan premiums for the Fully Insured Medicare Retiree medical plan options.

Exhibit 3A – Plan Year 2018 Aggregate Costs

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	2030				2035		HD 4000		HD 1500		Tiered Network	
	Aetna Freedom	NJ DIRECT	Aetna HMO	Horizon HMO	Aetna Freedom	NJ DIRECT	Aetna Value	NJ DIRECT	Aetna Value	NJ DIRECT	Aetna Liberty	Horizon OMNIA
Employees and Retirees												
Average Medical Members	1,706	2,535	17	3	822	982	136	164	72	82	2,126	3,962
Incurred Medical Claims	\$8,244,000	\$9,656,000	\$34,000	\$148,000	\$1,867,000	\$2,242,000	\$324,000	\$294,000	\$200,000	\$171,000	\$6,874,000	\$14,006,000
Capitation	\$0	\$193,000	\$8,000	\$0	\$0	\$81,000	\$0	\$10,000	\$0	\$6,000	\$0	\$220,000
Incurred Prescription Drug Claims	\$1,299,000	\$2,425,000	\$62,000	\$77,000	\$413,000	\$697,000	\$133,000	\$93,000	\$121,000	\$51,000	\$2,141,000	\$3,177,000
Prescription Drug Rebates	(\$428,000)	(\$782,000)	(\$20,000)	(\$25,000)	(\$136,000)	(\$230,000)	(\$44,000)	(\$30,000)	(\$40,000)	(\$17,000)	(\$707,000)	(\$1,049,000)
EGWP Credits	\$0	(\$75,000)	\$0	(\$2,000)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Administrative Fees	\$454,000	\$577,000	\$6,000	\$2,000	\$273,000	\$230,000	\$39,000	\$36,000	\$22,000	\$21,000	\$693,000	\$1,216,000
Total Cost	\$9,569,000	\$11,994,000	\$90,000	\$200,000	\$2,417,000	\$3,020,000	\$452,000	\$403,000	\$303,000	\$232,000	\$9,001,000	\$17,570,000
Total Premium	\$13,815,000	\$20,138,000	\$167,000	\$32,000	\$6,131,000	\$7,177,000	\$656,000	\$803,000	\$504,000	\$619,000	\$14,292,000	\$26,377,000
Gain (Loss)	\$4,246,000	\$8,144,000	\$77,000	(\$168,000)	\$3,714,000	\$4,157,000	\$204,000	\$400,000	\$201,000	\$387,000	\$5,291,000	\$8,807,000
Employees												
Average Medical Members	1,693	2,455	N/A	N/A	822	982	130	148	72	82	2,126	3,962
Incurred Medical Claims	\$8,166,000	\$9,462,000	N/A	N/A	\$1,867,000	\$2,242,000	\$266,000	\$147,000	\$200,000	\$171,000	\$6,874,000	\$14,006,000
Capitation	\$0	\$189,000	N/A	N/A	\$0	\$81,000	\$0	\$9,000	\$0	\$6,000	\$0	\$220,000
Incurred Prescription Drug Claims	\$1,283,000	\$2,189,000	N/A	N/A	\$413,000	\$697,000	\$82,000	\$86,000	\$121,000	\$51,000	\$2,141,000	\$3,177,000
Prescription Drug Rebates	(\$423,000)	(\$723,000)	N/A	N/A	(\$136,000)	(\$230,000)	(\$27,000)	(\$28,000)	(\$40,000)	(\$17,000)	(\$707,000)	(\$1,049,000)
EGWP Credits	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Administrative Fees	\$450,000	\$554,000	N/A	N/A	\$273,000	\$230,000	\$36,000	\$31,000	\$22,000	\$21,000	\$693,000	\$1,216,000
Total Cost	\$9,476,000	\$11,671,000	N/A	N/A	\$2,417,000	\$3,020,000	\$357,000	\$245,000	\$303,000	\$232,000	\$9,001,000	\$17,570,000
Total Premium	\$13,684,000	\$19,506,000	N/A	N/A	\$6,131,000	\$7,177,000	\$608,000	\$694,000	\$504,000	\$619,000	\$14,292,000	\$26,377,000
Gain (Loss)	\$4,208,000	\$7,835,000	N/A	N/A	\$3,714,000	\$4,157,000	\$251,000	\$449,000	\$201,000	\$387,000	\$5,291,000	\$8,807,000
Early Retirees												
Average Medical Members	13	37	17	2	N/A	N/A	6	16	N/A	N/A	N/A	N/A
Incurred Medical Claims	\$78,000	\$127,000	\$34,000	\$107,000	N/A	N/A	\$58,000	\$147,000	N/A	N/A	N/A	N/A
Capitation	\$0	\$4,000	\$8,000	\$0	N/A	N/A	\$0	\$1,000	N/A	N/A	N/A	N/A
Incurred Prescription Drug Claims	\$16,000	\$62,000	\$62,000	\$74,000	N/A	N/A	\$51,000	\$7,000	N/A	N/A	N/A	N/A
Prescription Drug Rebates	(\$5,000)	(\$20,000)	(\$20,000)	(\$24,000)	N/A	N/A	(\$17,000)	(\$2,000)	N/A	N/A	N/A	N/A
EGWP Credits	\$0	\$0	\$0	\$0	N/A	N/A	\$0	\$0	N/A	N/A	N/A	N/A
Administrative Fees	\$4,000	\$7,000	\$6,000	\$1,000	N/A	N/A	\$3,000	\$5,000	N/A	N/A	N/A	N/A
Total Cost	\$93,000	\$180,000	\$90,000	\$158,000	N/A	N/A	\$95,000	\$158,000	N/A	N/A	N/A	N/A
Total Premium	\$131,000	\$389,000	\$167,000	\$23,000	N/A	N/A	\$48,000	\$109,000	N/A	N/A	N/A	N/A
Gain (Loss)	\$38,000	\$209,000	\$77,000	(\$135,000)	N/A	N/A	(\$47,000)	(\$49,000)	N/A	N/A	N/A	N/A
Medicare Retirees												
Average Medical Members	N/A	43	N/A	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Incurred Medical Claims	N/A	\$67,000	N/A	\$41,000	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Capitation	N/A	\$0	N/A	\$0	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Incurred Prescription Drug Claims	N/A	\$174,000	N/A	\$3,000	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Prescription Drug Rebates	N/A	(\$39,000)	N/A	(\$1,000)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
EGWP Credits	N/A	(\$75,000)	N/A	(\$2,000)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Administrative Fees	N/A	\$16,000	N/A	\$1,000	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Total Cost	N/A	\$143,000	N/A	\$42,000	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Total Premium	N/A	\$243,000	N/A	\$9,000	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Gain (Loss)	N/A	\$100,000	N/A	(\$33,000)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

*Some plans may show \$0 in certain cost categories. These plans may have costs which are less than \$500 and round to \$0. The Incurred Medical Claims cost category reflects the Medicare Advantage plan premiums for the Fully Insured Medicare Retiree medical plan options.

Exhibit 3B – Plan Year 2019 Aggregate Costs

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	Total	Legacy Plans						1525			
		Aetna Freedom 10	Aetna Freedom 15	NJ DIRECT10	NJ DIRECT15	Aetna HMO	Horizon HMO	Aetna Freedom	NJ DIRECT	Aetna HMO	Horizon HMO
Employees and Retirees											
Average Medical Members	306,588	14,298	41,377	1,173	184,723	38,928	2,226	2,278	7,487	58	32
Incurred Medical Claims	\$1,720,772,000	\$16,316,000	\$78,638,000	\$9,834,000	\$749,139,000	\$229,047,000	\$7,631,000	\$5,464,000	\$22,939,000	\$237,000	\$105,000
Capitation	\$21,571,000	\$0	\$0	\$55,000	\$4,063,000	\$13,773,000	\$83,000	\$0	\$146,000	\$22,000	\$1,000
Incurred Prescription Drug Claims	\$767,360,000	\$76,188,000	\$171,021,000	\$2,278,000	\$206,034,000	\$120,147,000	\$2,724,000	\$1,150,000	\$22,676,000	\$255,000	\$93,000
Prescription Drug Rebates	(\$228,248,000)	(\$17,167,000)	(\$40,149,000)	(\$762,000)	(\$70,981,000)	(\$34,978,000)	(\$874,000)	(\$400,000)	(\$5,449,000)	(\$65,000)	(\$21,000)
EGWP Credits	(\$113,762,000)	(\$30,848,000)	(\$58,081,000)	\$0	\$0	(\$16,898,000)	(\$259,000)	\$0	(\$7,468,000)	(\$48,000)	(\$46,000)
Administrative Fees	\$54,681,000	\$1,612,000	\$4,734,000	\$180,000	\$18,045,000	\$7,825,000	\$641,000	\$277,000	\$1,591,000	\$13,000	\$12,000
Total Cost	\$2,222,374,000	\$46,101,000	\$156,163,000	\$11,585,000	\$906,300,000	\$318,916,000	\$9,946,000	\$6,491,000	\$34,435,000	\$414,000	\$144,000
Total Premium	\$2,339,348,000	\$63,883,000	\$196,601,000	\$6,704,000	\$917,768,000	\$315,899,000	\$18,282,000	\$9,683,000	\$37,223,000	\$482,000	\$237,000
Gain (Loss)	\$116,974,000	\$17,782,000	\$40,438,000	(\$4,881,000)	\$11,468,000	(\$3,017,000)	\$8,336,000	\$3,192,000	\$2,788,000	\$68,000	\$93,000
Employees											
Average Medical Members	218,373	N/A	13,278	N/A	161,684	21,736	2,023	2,258	3,546	N/A	N/A
Incurred Medical Claims	\$1,345,647,000	N/A	\$43,562,000	N/A	\$544,870,000	\$135,984,000	\$6,309,000	\$4,938,000	\$9,141,000	N/A	N/A
Capitation	\$15,534,000	N/A	\$0	N/A	\$3,125,000	\$8,851,000	\$72,000	\$0	\$75,000	N/A	N/A
Incurred Prescription Drug Claims	\$371,225,000	N/A	\$10,696,000	N/A	\$147,539,000	\$43,986,000	\$1,917,000	\$1,143,000	\$1,497,000	N/A	N/A
Prescription Drug Rebates	(\$129,354,000)	N/A	(\$3,727,000)	N/A	(\$51,410,000)	(\$15,327,000)	(\$668,000)	(\$398,000)	(\$522,000)	N/A	N/A
EGWP Credits	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Administrative Fees	\$41,090,000	N/A	\$1,478,000	N/A	\$13,936,000	\$4,782,000	\$568,000	\$272,000	\$351,000	N/A	N/A
Total Cost	\$1,644,142,000	N/A	\$52,009,000	N/A	\$658,060,000	\$178,276,000	\$8,198,000	\$5,955,000	\$10,542,000	N/A	N/A
Total Premium	\$1,720,849,000	N/A	\$56,904,000	N/A	\$677,383,000	\$174,605,000	\$16,619,000	\$9,427,000	\$14,670,000	N/A	N/A
Gain (Loss)	\$76,707,000	N/A	\$4,895,000	N/A	\$19,323,000	(\$3,671,000)	\$8,421,000	\$3,472,000	\$4,128,000	N/A	N/A
Early Retirees											
Average Medical Members	35,813	89	1,345	1,173	23,039	9,408	84	20	501	36	11
Incurred Medical Claims	\$312,393,000	\$690,000	\$11,383,000	\$9,834,000	\$204,269,000	\$79,659,000	\$1,001,000	\$526,000	\$4,256,000	\$208,000	\$75,000
Capitation	\$6,037,000	\$0	\$0	\$55,000	\$938,000	\$4,922,000	\$11,000	\$0	\$71,000	\$22,000	\$1,000
Incurred Prescription Drug Claims	\$88,931,000	\$183,000	\$3,089,000	\$2,278,000	\$58,495,000	\$22,916,000	\$226,000	\$7,000	\$1,464,000	\$71,000	\$3,000
Prescription Drug Rebates	(\$29,754,000)	(\$61,000)	(\$1,034,000)	(\$762,000)	(\$19,571,000)	(\$7,667,000)	(\$75,000)	(\$2,000)	(\$490,000)	(\$24,000)	(\$1,000)
EGWP Credits	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Administrative Fees	\$6,839,000	\$14,000	\$263,000	\$180,000	\$4,109,000	\$2,169,000	\$16,000	\$5,000	\$43,000	\$10,000	\$2,000
Total Cost	\$384,446,000	\$826,000	\$13,701,000	\$11,585,000	\$248,240,000	\$101,999,000	\$1,179,000	\$536,000	\$5,344,000	\$287,000	\$80,000
Total Premium	\$398,848,000	\$6,415,000	\$37,382,000	\$6,704,000	\$240,385,000	\$101,478,000	\$816,000	\$256,000	\$3,865,000	\$385,000	\$98,000
Gain (Loss)	\$14,402,000	\$5,589,000	\$23,681,000	(\$4,881,000)	(\$7,855,000)	(\$521,000)	(\$363,000)	(\$280,000)	(\$1,479,000)	\$98,000	\$18,000
Medicare Retirees											
Average Medical Members	52,402	14,209	26,754	N/A	N/A	7,784	119	N/A	3,440	22	21
Incurred Medical Claims	\$62,732,000	\$15,626,000	\$23,693,000	N/A	N/A	\$13,404,000	\$321,000	N/A	\$9,542,000	\$29,000	\$30,000
Capitation	\$0	\$0	\$0	N/A	N/A	\$0	\$0	N/A	\$0	\$0	\$0
Incurred Prescription Drug Claims	\$307,204,000	\$76,005,000	\$157,236,000	N/A	N/A	\$53,245,000	\$581,000	N/A	\$19,715,000	\$184,000	\$90,000
Prescription Drug Rebates	(\$69,140,000)	(\$17,106,000)	(\$35,388,000)	N/A	N/A	(\$11,984,000)	(\$131,000)	N/A	(\$4,437,000)	(\$41,000)	(\$20,000)
EGWP Credits	(\$113,762,000)	(\$30,848,000)	(\$58,081,000)	N/A	N/A	(\$16,898,000)	(\$259,000)	N/A	(\$7,468,000)	(\$48,000)	(\$46,000)
Administrative Fees	\$6,752,000	\$1,598,000	\$2,993,000	N/A	N/A	\$874,000	\$57,000	N/A	\$1,197,000	\$3,000	\$10,000
Total Cost	\$193,786,000	\$45,275,000	\$90,453,000	N/A	N/A	\$38,641,000	\$569,000	N/A	\$18,549,000	\$127,000	\$64,000
Total Premium	\$219,651,000	\$57,468,000	\$102,315,000	N/A	N/A	\$39,816,000	\$847,000	N/A	\$18,688,000	\$97,000	\$139,000
Gain (Loss)	\$25,865,000	\$12,193,000	\$11,862,000	N/A	N/A	\$1,175,000	\$278,000	N/A	\$139,000	(\$30,000)	\$75,000

*Some plans may show \$0 in certain cost categories. These plans may have costs which are less than \$500 and round to \$0. The Incurred Medical Claims cost category reflects the Medicare Advantage plan premiums for the Fully Insured Medicare Retiree medical plan options.

Exhibit 3B – Plan Year 2019 Aggregate Costs

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	2030				2035		HD 4000		HD 1500		Tiered Network		CWA Unity*			
	Aetna Freedom	NJ DIRECT	Aetna HMO	Horizon HMO	Aetna Freedom	NJ DIRECT	Aetna Value	NJ DIRECT	Aetna Value	NJ DIRECT	Aetna Liberty	Horizon OMNIA	Aetna CWA 0	Horizon CWA 0	Aetna CWA 100	Horizon CWA 100
Employees and Retirees																
Average Medical Members	1,759	2,799	22	2	926	997	149	191	81	106	2,435	4,541	18,424	168,952	0	0
Incurred Medical Claims	\$2,926,000	\$5,855,000	\$47,000	\$0	\$1,303,000	\$1,240,000	\$354,000	\$79,000	\$100,000	\$151,000	\$8,761,000	\$18,608,000	\$55,302,000	\$506,696,000	\$0	\$0
Capitation	\$0	\$59,000	\$12,000	\$0	\$25,000	\$3,000	\$2,000	\$6,000	\$2,000	\$4,000	\$7,000	\$87,000	\$317,000	\$2,906,000	\$0	\$0
Incurred Prescription Drug Claims	\$702,000	\$1,453,000	\$69,000	\$5,000	\$195,000	\$315,000	\$93,000	\$105,000	\$177,000	\$34,000	\$2,477,000	\$4,087,000	\$15,249,000	\$139,833,000	\$0	\$0
Prescription Drug Rebates	(\$245,000)	(\$487,000)	(\$23,000)	(\$2,000)	(\$68,000)	(\$110,000)	(\$32,000)	(\$36,000)	(\$62,000)	(\$12,000)	(\$863,000)	(\$1,424,000)	(\$5,313,000)	(\$48,725,000)	\$0	\$0
EGWP Credits	\$0	(\$113,000)	\$0	(\$1,000)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Administrative Fees	\$192,000	\$293,000	\$6,000	\$1,000	\$140,000	\$129,000	\$40,000	\$48,000	\$25,000	\$30,000	\$666,000	\$1,388,000	\$2,100,000	\$14,693,000	\$0	\$0
Total Cost	\$3,575,000	\$7,060,000	\$111,000	\$3,000	\$1,570,000	\$1,599,000	\$458,000	\$202,000	\$242,000	\$207,000	\$11,048,000	\$22,746,000	\$67,655,000	\$615,403,000	\$0	\$0
Total Premium	\$6,982,000	\$11,414,000	\$215,000	\$20,000	\$3,387,000	\$3,647,000	\$730,000	\$957,000	\$572,000	\$767,000	\$16,012,000	\$29,664,000	\$70,282,000	\$627,937,000	\$0	\$0
Gain (Loss)	\$3,407,000	\$4,354,000	\$104,000	\$17,000	\$1,817,000	\$2,048,000	\$272,000	\$755,000	\$330,000	\$560,000	\$4,964,000	\$6,918,000	\$2,627,000	\$12,534,000	\$0	\$0
Employees																
Average Medical Members	1,745	2,705	N/A	N/A	926	997	140	172	81	106	2,435	4,541	18,424	168,952	0	0
Incurred Medical Claims	\$2,669,000	\$5,601,000	N/A	N/A	\$1,303,000	\$1,240,000	\$353,000	\$59,000	\$100,000	\$151,000	\$8,761,000	\$18,608,000	\$55,302,000	\$506,696,000	\$0	\$0
Capitation	\$0	\$56,000	N/A	N/A	\$25,000	\$3,000	\$2,000	\$5,000	\$2,000	\$4,000	\$7,000	\$87,000	\$317,000	\$2,906,000	\$0	\$0
Incurred Prescription Drug Claims	\$685,000	\$1,248,000	N/A	N/A	\$195,000	\$315,000	\$49,000	\$98,000	\$177,000	\$34,000	\$2,477,000	\$4,087,000	\$15,249,000	\$139,833,000	\$0	\$0
Prescription Drug Rebates	(\$239,000)	(\$435,000)	N/A	N/A	(\$68,000)	(\$110,000)	(\$17,000)	(\$34,000)	(\$62,000)	(\$12,000)	(\$863,000)	(\$1,424,000)	(\$5,313,000)	(\$48,725,000)	\$0	\$0
EGWP Credits	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Administrative Fees	\$189,000	\$265,000	N/A	N/A	\$140,000	\$129,000	\$37,000	\$41,000	\$25,000	\$30,000	\$666,000	\$1,388,000	\$2,100,000	\$14,693,000	\$0	\$0
Total Cost	\$3,304,000	\$6,735,000	N/A	N/A	\$1,570,000	\$1,599,000	\$424,000	\$169,000	\$242,000	\$207,000	\$11,048,000	\$22,746,000	\$67,655,000	\$615,403,000	\$0	\$0
Total Premium	\$6,840,000	\$10,669,000	N/A	N/A	\$3,387,000	\$3,647,000	\$657,000	\$807,000	\$572,000	\$767,000	\$16,012,000	\$29,664,000	\$70,282,000	\$627,937,000	\$0	\$0
Gain (Loss)	\$3,536,000	\$3,934,000	N/A	N/A	\$1,817,000	\$2,048,000	\$233,000	\$638,000	\$330,000	\$560,000	\$4,964,000	\$6,918,000	\$2,627,000	\$12,534,000	\$0	\$0
Early Retirees																
Average Medical Members	14	42	22	1	N/A	N/A	9	19	N/A	N/A	N/A	N/A	0	0	0	0
Incurred Medical Claims	\$257,000	\$167,000	\$47,000	\$0	N/A	N/A	\$1,000	\$20,000	N/A	N/A	N/A	N/A	\$0	\$0	\$0	\$0
Capitation	\$0	\$3,000	\$12,000	\$0	N/A	N/A	\$1,000	\$1,000	N/A	N/A	N/A	N/A	\$0	\$0	\$0	\$0
Incurred Prescription Drug Claims	\$17,000	\$57,000	\$69,000	\$5,000	N/A	N/A	\$44,000	\$7,000	N/A	N/A	N/A	N/A	\$0	\$0	\$0	\$0
Prescription Drug Rebates	(\$6,000)	(\$19,000)	(\$23,000)	(\$2,000)	N/A	N/A	(\$15,000)	(\$2,000)	N/A	N/A	N/A	N/A	\$0	\$0	\$0	\$0
EGWP Credits	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Administrative Fees	\$3,000	\$8,000	\$6,000	\$1,000	N/A	N/A	\$3,000	\$7,000	N/A	N/A	N/A	N/A	\$0	\$0	\$0	\$0
Total Cost	\$271,000	\$216,000	\$111,000	\$4,000	N/A	N/A	\$34,000	\$33,000	N/A	N/A	N/A	N/A	\$0	\$0	\$0	\$0
Total Premium	\$142,000	\$468,000	\$215,000	\$16,000	N/A	N/A	\$73,000	\$150,000	N/A	N/A	N/A	N/A	\$0	\$0	\$0	\$0
Gain (Loss)	(\$129,000)	\$252,000	\$104,000	\$12,000	N/A	N/A	\$39,000	\$117,000	N/A	N/A	N/A	N/A	\$0	\$0	\$0	\$0
Medicare Retirees																
Average Medical Members	N/A	52	N/A	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Incurred Medical Claims	N/A	\$87,000	N/A	\$0	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Capitation	N/A	\$0	N/A	\$0	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Incurred Prescription Drug Claims	N/A	\$148,000	N/A	\$0	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Prescription Drug Rebates	N/A	(\$33,000)	N/A	\$0	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
EGWP Credits	N/A	(\$113,000)	N/A	(\$1,000)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Administrative Fees	N/A	\$20,000	N/A	\$0	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Total Cost	N/A	\$109,000	N/A	(\$1,000)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Total Premium	N/A	\$277,000	N/A	\$4,000	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Gain (Loss)	N/A	\$168,000	N/A	\$5,000	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

*Some plans may show \$0 in certain cost categories. These plans may have costs which are less than \$500 and round to \$0. The Incurred Medical Claims cost category reflects the Medicare Advantage plan premiums for the Fully Insured Medicare Retiree medical plan options.

Exhibit 3C – Projected Plan Year 2020 Aggregate Costs

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	Legacy Plans							1525			
	Total	Aetna Freedom 10*	Aetna Freedom 15*	NJ DIRECT10	NJ DIRECT15	Aetna HMO*	Horizon HMO	Aetna Freedom*	NJ DIRECT	Aetna HMO*	Horizon HMO
Employees and Retirees											
Average Medical Members	307,836	14,779	28,860	1,214	21,150	35,186	1,935	21	4,060	63	31
Incurred Medical Claims	\$1,703,210,000	\$22,834,000	\$47,031,000	\$10,325,000	\$189,861,000	\$208,665,000	\$11,677,000	\$188,000	\$14,930,000	\$367,000	\$136,000
Capitation	\$22,150,000	\$0	\$0	\$60,000	\$904,000	\$13,330,000	\$81,000	\$0	\$81,000	\$25,000	\$1,000
Incurred Prescription Drug Claims	\$801,826,000	\$81,672,000	\$171,250,000	\$2,471,000	\$56,244,000	\$118,476,000	\$4,277,000	\$54,000	\$22,467,000	\$247,000	\$147,000
Prescription Drug Rebates	(\$245,658,000)	(\$17,892,000)	(\$37,885,000)	(\$865,000)	(\$19,688,000)	(\$34,787,000)	(\$1,468,000)	(\$19,000)	(\$5,102,000)	(\$66,000)	(\$35,000)
EGWP Credits	(\$122,461,000)	(\$33,258,000)	(\$62,420,000)	\$0	\$0	(\$18,319,000)	(\$282,000)	\$0	(\$7,949,000)	(\$54,000)	(\$50,000)
Administrative Fees	\$61,339,000	\$1,674,000	\$3,349,000	\$208,000	\$4,432,000	\$7,795,000	\$606,000	\$5,000	\$1,394,000	\$13,000	\$10,000
Total Cost	\$2,220,406,000	\$55,030,000	\$121,325,000	\$12,199,000	\$231,753,000	\$295,160,000	\$14,891,000	\$228,000	\$25,821,000	\$532,000	\$209,000
Total Premium	\$2,248,844,000	\$66,796,000	\$147,910,000	\$6,291,000	\$211,926,000	\$280,714,000	\$16,306,000	\$238,000	\$24,201,000	\$459,000	\$238,000
Gain (Loss)	\$28,438,000	\$11,766,000	\$26,585,000	(\$5,908,000)	(\$19,827,000)	(\$14,446,000)	\$1,415,000	\$10,000	(\$1,620,000)	(\$73,000)	\$29,000
Employees											
Average Medical Members	218,374	N/A	N/A	N/A	N/A	18,592	1,731	N/A	N/A	N/A	N/A
Incurred Medical Claims	\$1,305,637,000	N/A	N/A	N/A	N/A	\$117,345,000	\$10,674,000	N/A	N/A	N/A	N/A
Capitation	\$16,286,000	N/A	N/A	N/A	N/A	\$8,641,000	\$70,000	N/A	N/A	N/A	N/A
Incurred Prescription Drug Claims	\$380,726,000	N/A	N/A	N/A	N/A	\$39,406,000	\$3,308,000	N/A	N/A	N/A	N/A
Prescription Drug Rebates	(\$141,493,000)	N/A	N/A	N/A	N/A	(\$14,645,000)	(\$1,229,000)	N/A	N/A	N/A	N/A
EGWP Credits	\$0	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Administrative Fees	\$46,468,000	N/A	N/A	N/A	N/A	\$4,613,000	\$540,000	N/A	N/A	N/A	N/A
Total Cost	\$1,607,624,000	N/A	N/A	N/A	N/A	\$155,360,000	\$13,363,000	N/A	N/A	N/A	N/A
Total Premium	\$1,635,900,000	N/A	N/A	N/A	N/A	\$152,282,000	\$14,616,000	N/A	N/A	N/A	N/A
Gain (Loss)	\$28,276,000	N/A	N/A	N/A	N/A	(\$3,078,000)	\$1,253,000	N/A	N/A	N/A	N/A
Early Retirees											
Average Medical Members	35,330	78	1,269	1,214	21,150	8,496	79	21	546	39	9
Incurred Medical Claims	\$311,246,000	\$666,000	\$11,432,000	\$10,325,000	\$189,861,000	\$73,520,000	\$666,000	\$188,000	\$4,762,000	\$325,000	\$78,000
Capitation	\$5,864,000	\$0	\$0	\$60,000	\$904,000	\$4,689,000	\$11,000	\$0	\$81,000	\$25,000	\$1,000
Incurred Prescription Drug Claims	\$91,797,000	\$199,000	\$3,237,000	\$2,471,000	\$56,244,000	\$21,677,000	\$209,000	\$54,000	\$1,427,000	\$91,000	\$23,000
Prescription Drug Rebates	(\$32,133,000)	(\$70,000)	(\$1,133,000)	(\$865,000)	(\$19,688,000)	(\$7,588,000)	(\$73,000)	(\$19,000)	(\$500,000)	(\$32,000)	(\$8,000)
EGWP Credits	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Administrative Fees	\$7,769,000	\$14,000	\$250,000	\$208,000	\$4,432,000	\$2,270,000	\$16,000	\$5,000	\$46,000	\$10,000	\$2,000
Total Cost	\$384,543,000	\$809,000	\$13,786,000	\$12,199,000	\$231,753,000	\$94,568,000	\$829,000	\$228,000	\$5,816,000	\$419,000	\$96,000
Total Premium	\$384,781,000	\$7,201,000	\$42,065,000	\$6,291,000	\$211,926,000	\$86,881,000	\$760,000	\$238,000	\$4,529,000	\$355,000	\$83,000
Gain (Loss)	\$238,000	\$6,392,000	\$28,279,000	(\$5,908,000)	(\$19,827,000)	(\$7,687,000)	(\$69,000)	\$10,000	(\$1,287,000)	(\$64,000)	(\$13,000)
Medicare Retirees											
Average Medical Members	54,132	14,701	27,591	N/A	N/A	8,098	125	N/A	3,514	24	22
Incurred Medical Claims	\$86,327,000	\$22,168,000	\$35,599,000	N/A	N/A	\$17,800,000	\$337,000	N/A	\$10,168,000	\$42,000	\$58,000
Capitation	\$0	\$0	\$0	N/A	N/A	\$0	\$0	N/A	\$0	\$0	\$0
Incurred Prescription Drug Claims	\$329,303,000	\$81,473,000	\$168,013,000	N/A	N/A	\$57,393,000	\$760,000	N/A	\$21,040,000	\$156,000	\$124,000
Prescription Drug Rebates	(\$72,032,000)	(\$17,822,000)	(\$36,752,000)	N/A	N/A	(\$12,554,000)	(\$166,000)	N/A	(\$4,602,000)	(\$34,000)	(\$27,000)
EGWP Credits	(\$122,461,000)	(\$33,258,000)	(\$62,420,000)	N/A	N/A	(\$18,319,000)	(\$282,000)	N/A	(\$7,949,000)	(\$54,000)	(\$50,000)
Administrative Fees	\$7,102,000	\$1,660,000	\$3,099,000	N/A	N/A	\$912,000	\$50,000	N/A	\$1,348,000	\$3,000	\$8,000
Total Cost	\$228,239,000	\$54,221,000	\$107,539,000	N/A	N/A	\$45,232,000	\$699,000	N/A	\$20,005,000	\$113,000	\$113,000
Total Premium	\$228,163,000	\$59,595,000	\$105,845,000	N/A	N/A	\$41,551,000	\$930,000	N/A	\$19,672,000	\$104,000	\$155,000
Gain (Loss)	(\$76,000)	\$5,374,000	(\$1,694,000)	N/A	N/A	(\$3,681,000)	\$231,000	N/A	(\$333,000)	(\$9,000)	\$42,000

*Aetna enrollment in medical self-insured plans is assumed to migrate to Horizon plans due to the RFP.

**Some plans may show \$0 in certain cost categories. These plans may have costs which are less than \$500 and round to \$0. The Incurred Medical Claims cost category reflects the Medicare Advantage plan premiums for the Fully Insured Medicare Retiree medical plan options.

Exhibit 3C – Projected Plan Year 2020 Aggregate Costs

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	2030				2035		HD 4000		HD 1500		Tiered Network		CWA Unity*			
	Aetna Freedom*	NJ DIRECT	Aetna HMO*	Horizon HMO	Aetna Freedom*	NJ DIRECT	Aetna Value*	NJ DIRECT	Aetna Value*	NJ DIRECT	Aetna Liberty*	Horizon OMNIA	Aetna CWA 0*	Horizon CWA 0	Aetna CWA 100*	Horizon CWA 100
Employees and Retirees																
Average Medical Members	13	96	22	3	35	35	148	195	113	137	2,373	4,394	20,173	164,065	1,770	6,965
Incurred Medical Claims	\$110,000	\$483,000	\$171,000	\$20,000	\$247,000	\$246,000	\$665,000	\$759,000	\$685,000	\$812,000	\$11,900,000	\$22,025,000	\$121,758,000	\$965,684,000	\$10,259,000	\$41,472,000
Capitation	\$0	\$3,000	\$13,000	\$0	\$0	\$1,000	\$3,000	\$6,000	\$6,000	\$7,000	\$6,000	\$7,000	\$96,000	\$772,000	\$6,418,000	\$69,000
Incurred Prescription Drug Claims	\$34,000	\$445,000	\$51,000	\$11,000	\$74,000	\$77,000	\$143,000	\$218,000	\$179,000	\$233,000	\$3,604,000	\$7,469,000	\$31,284,000	\$285,915,000	\$2,709,000	\$12,075,000
Prescription Drug Rebates	(\$12,000)	(\$111,000)	(\$18,000)	(\$3,000)	(\$26,000)	(\$27,000)	(\$52,000)	(\$80,000)	(\$65,000)	(\$85,000)	(\$1,337,000)	(\$2,774,000)	(\$11,604,000)	(\$106,162,000)	(\$1,007,000)	(\$4,488,000)
EGWP Credits	\$0	(\$127,000)	\$0	(\$2,000)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Administrative Fees	\$3,000	\$31,000	\$6,000	\$1,000	\$8,000	\$8,000	\$40,000	\$52,000	\$33,000	\$40,000	\$761,000	\$1,359,000	\$4,568,000	\$33,149,000	\$365,000	\$1,429,000
Total Cost	\$135,000	\$724,000	\$223,000	\$27,000	\$303,000	\$305,000	\$699,000	\$955,000	\$834,000	\$1,006,000	\$14,935,000	\$28,175,000	\$146,778,000	\$1,205,004,000	\$12,395,000	\$50,760,000
Total Premium	\$142,000	\$732,000	\$208,000	\$29,000	\$290,000	\$290,000	\$717,000	\$968,000	\$846,000	\$1,037,000	\$15,802,000	\$29,034,000	\$154,462,000	\$1,224,453,000	\$13,122,000	\$51,643,000
Gain (Loss)	\$7,000	\$8,000	(\$15,000)	\$2,000	(\$13,000)	(\$15,000)	\$18,000	\$3,000	\$12,000	\$31,000	\$867,000	\$859,000	\$7,684,000	\$19,449,000	\$727,000	\$883,000
Employees																
Average Medical Members	N/A	N/A	N/A	N/A	N/A	N/A	135	165	78	102	2,338	4,359	19,753	162,386	1,770	6,965
Incurred Medical Claims	N/A	N/A	N/A	N/A	N/A	N/A	\$500,000	\$611,000	\$429,000	\$557,000	\$11,665,000	\$21,791,000	\$118,326,000	\$972,008,000	\$10,259,000	\$41,472,000
Capitation	N/A	N/A	N/A	N/A	N/A	N/A	\$2,000	\$5,000	\$2,000	\$5,000	\$7,000	\$95,000	\$772,000	\$6,346,000	\$69,000	\$272,000
Incurred Prescription Drug Claims	N/A	N/A	N/A	N/A	N/A	N/A	\$125,000	\$174,000	\$107,000	\$158,000	\$3,523,000	\$7,385,000	\$30,231,000	\$281,525,000	\$2,709,000	\$12,075,000
Prescription Drug Rebates	N/A	N/A	N/A	N/A	N/A	N/A	(\$46,000)	(\$65,000)	(\$40,000)	(\$59,000)	(\$1,309,000)	(\$2,745,000)	(\$11,235,000)	(\$104,625,000)	(\$1,007,000)	(\$4,488,000)
EGWP Credits	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Administrative Fees	N/A	N/A	N/A	N/A	N/A	N/A	\$37,000	\$45,000	\$25,000	\$32,000	\$751,000	\$1,349,000	\$4,481,000	\$32,801,000	\$365,000	\$1,429,000
Total Cost	N/A	N/A	N/A	N/A	N/A	N/A	\$618,000	\$770,000	\$523,000	\$693,000	\$14,637,000	\$27,875,000	\$142,575,000	\$1,188,055,000	\$12,395,000	\$50,760,000
Total Premium	N/A	N/A	N/A	N/A	N/A	N/A	\$644,000	\$791,000	\$561,000	\$752,000	\$15,519,000	\$28,751,000	\$150,123,000	\$1,207,096,000	\$13,122,000	\$51,643,000
Gain (Loss)	N/A	N/A	N/A	N/A	N/A	N/A	\$26,000	\$21,000	\$38,000	\$59,000	\$882,000	\$876,000	\$7,548,000	\$19,041,000	\$727,000	\$883,000
Early Retirees																
Average Medical Members	13	40	22	2	35	35	13	30	35	35	35	35	420	1,679	0	0
Incurred Medical Claims	\$110,000	\$330,000	\$171,000	\$18,000	\$247,000	\$246,000	\$65,000	\$148,000	\$256,000	\$255,000	\$235,000	\$234,000	\$3,432,000	\$13,676,000	\$0	\$0
Capitation	\$0	\$3,000	\$13,000	\$0	\$0	\$1,000	\$1,000	\$1,000	\$0	\$1,000	\$0	\$1,000	\$0	\$72,000	\$0	\$0
Incurred Prescription Drug Claims	\$34,000	\$106,000	\$51,000	\$6,000	\$74,000	\$77,000	\$18,000	\$44,000	\$72,000	\$75,000	\$81,000	\$84,000	\$1,053,000	\$4,390,000	\$0	\$0
Prescription Drug Rebates	(\$12,000)	(\$37,000)	(\$18,000)	(\$1,000)	(\$26,000)	(\$27,000)	(\$6,000)	(\$15,000)	(\$25,000)	(\$26,000)	(\$28,000)	(\$29,000)	(\$369,000)	(\$1,537,000)	\$0	\$0
EGWP Credits	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Administrative Fees	\$3,000	\$9,000	\$6,000	\$1,000	\$8,000	\$8,000	\$3,000	\$7,000	\$8,000	\$10,000	\$8,000	\$10,000	\$87,000	\$348,000	\$0	\$0
Total Cost	\$135,000	\$411,000	\$223,000	\$23,000	\$303,000	\$305,000	\$81,000	\$185,000	\$311,000	\$313,000	\$298,000	\$300,000	\$4,203,000	\$16,949,000	\$0	\$0
Total Premium	\$142,000	\$427,000	\$208,000	\$23,000	\$290,000	\$290,000	\$73,000	\$167,000	\$285,000	\$285,000	\$283,000	\$283,000	\$4,339,000	\$17,357,000	\$0	\$0
Gain (Loss)	\$7,000	\$16,000	(\$15,000)	\$0	(\$13,000)	(\$15,000)	(\$8,000)	(\$18,000)	(\$26,000)	(\$28,000)	(\$15,000)	(\$17,000)	\$136,000	\$408,000	\$0	\$0
Medicare Retirees																
Average Medical Members	N/A	56	N/A	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Incurred Medical Claims	N/A	\$153,000	N/A	\$2,000	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Capitation	N/A	\$0	N/A	\$0	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Incurred Prescription Drug Claims	N/A	\$339,000	N/A	\$5,000	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Prescription Drug Rebates	N/A	(\$74,000)	N/A	(\$1,000)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
EGWP Credits	N/A	(\$127,000)	N/A	(\$2,000)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Administrative Fees	N/A	\$22,000	N/A	\$0	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Total Cost	N/A	\$313,000	N/A	\$4,000	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Total Premium	N/A	\$305,000	N/A	\$6,000	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Gain (Loss)	N/A	(\$8,000)	N/A	\$2,000	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

*Aetna enrollment in medical self-insured plans is assumed to migrate to Horizon plans due to the RFP.

**Some plans may show \$0 in certain cost categories. These plans may have costs which are less than \$500 and round to \$0. The Incurred Medical Claims cost category reflects the Medicare Advantage plan premiums for the Fully Insured Medicare Retiree medical plan options.

Exhibit 4A – Plan Year 2020 Monthly Active Premiums

	Legacy Plans		1525	2030
	Horizon DIR15	Horizon HMO	Horizon PPO	Horizon PPO
Medical Coverage Only				
Single	\$767.28	\$735.14	\$745.80	\$701.29
Employee+Spouse	\$1,534.56	\$1,470.28	\$1,491.60	\$1,402.58
Family	\$2,194.42	\$2,102.50	\$2,132.99	\$2,005.69
Employee+Child(ren)	\$1,427.14	\$1,367.36	\$1,387.19	\$1,304.40
Adult Child Rate	\$673.06	\$644.86	\$654.22	\$615.17
	Legacy Plans		1525	2030
	Horizon DIR15	Horizon HMO	Horizon PPO	Horizon PPO
Rx Card				
Single	\$135.46	\$135.46	\$122.85	\$125.04
Employee+Spouse	\$270.92	\$270.92	\$245.70	\$250.08
Family	\$387.42	\$387.42	\$351.35	\$357.61
Employee+Child(ren)	\$251.96	\$251.96	\$228.50	\$232.57
Adult Child Rate	\$118.83	\$118.83	\$107.76	\$109.68

	2035	HD 4000	HD 1500	Tiered Network
	Horizon PPO	Horizon PPO	Horizon PPO	Horizon HMO
Medical Coverage Only				
Single	\$603.11	\$390.67	\$579.41	\$554.95
Employee+Spouse	\$1,206.22	\$781.34	\$1,158.82	\$1,109.90
Family	\$1,724.89	\$1,117.32	\$1,657.11	\$1,587.16
Employee+Child(ren)	\$1,121.78	\$726.65	\$1,077.70	\$1,032.21
Adult Child Rate	\$529.04	\$342.70	\$508.26	\$486.81
	2035	HD 4000	HD 1500	Tiered Network
	Horizon PPO	Horizon PPO	Horizon PPO	Horizon HMO
Rx Card				
Single	\$112.54	\$82.61	\$122.51	\$128.84
Employee+Spouse	\$225.08	\$165.22	\$245.02	\$257.70
Family	\$321.86	\$236.26	\$350.38	\$368.48
Employee+Child(ren)	\$209.32	\$153.65	\$227.87	\$239.64
Adult Child Rate	\$98.72	\$72.46	\$107.47	\$113.02

*CWA Unity/NJDIRECT PPO plan premiums are included in the appendix of this report

Exhibit 4B – Plan Year 2020 Annual Active Premiums

	Legacy Plans		1525	2030
	Horizon DIR15	Horizon HMO	Horizon PPO	Horizon PPO
<u>Medical Coverage Only</u>				
Single	\$9,207	\$8,822	\$8,950	\$8,415
Employee+Spouse	\$18,415	\$17,643	\$17,899	\$16,831
Family	\$26,333	\$25,230	\$25,596	\$24,068
Employee+Child(ren)	\$17,126	\$16,408	\$16,646	\$15,653
Adult Child Rate	\$8,077	\$7,738	\$7,851	\$7,382
	Legacy Plans		1525	2030
	Horizon DIR15	Horizon HMO	Horizon PPO	Horizon PPO
<u>Rx Card</u>				
Single	\$1,626	\$1,626	\$1,474	\$1,500
Employee+Spouse	\$3,251	\$3,251	\$2,948	\$3,001
Family	\$4,649	\$4,649	\$4,216	\$4,291
Employee+Child(ren)	\$3,024	\$3,024	\$2,742	\$2,791
Adult Child Rate	\$1,426	\$1,426	\$1,293	\$1,316

	2035	HD 4000	HD 1500	Tiered Network
	Horizon PPO	Horizon PPO	Horizon PPO	Horizon HMO
<u>Medical Coverage Only</u>				
Single	\$7,237	\$4,688	\$6,953	\$6,659
Single	\$14,475	\$9,376	\$13,906	\$13,319
Family	\$20,699	\$13,408	\$19,885	\$19,046
Family	\$13,461	\$8,720	\$12,932	\$12,387
Adult Child Rate	\$6,348	\$4,112	\$6,099	\$5,842
	2035	HD 4000	HD 1500	Tiered Network
	Horizon PPO	Horizon PPO	Horizon PPO	Horizon HMO
<u>Rx Card</u>				
Single	\$1,350	\$991	\$1,470	\$1,546
Single	\$2,701	\$1,983	\$2,940	\$3,092
Family	\$3,862	\$2,835	\$4,205	\$4,422
Family	\$2,512	\$1,844	\$2,734	\$2,876
Adult Child Rate	\$1,185	\$870	\$1,290	\$1,356

*CWA Unity/NJDIRECT PPO plan premiums are included in the appendix of this report

Exhibit 4C – Plan Year 2020 Monthly Retiree Premiums

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	Legacy Plans						Legacy HMO (Aetna Medicare Subscriber)			Legacy HMO
	PPO10			PPO15			Legacy HMO			Horizon HMO
	Horizon Early Retiree Subscriber	Aetna Medicare Advantage Subscriber	Total Plan Premium	Horizon Early Retiree Subscriber	Aetna Medicare Advantage Subscriber	Total Plan Premium	Horizon Early Retiree Subscriber	Aetna Medicare Advantage Subscriber	Total Plan Premium	
Total Premium										
Single - 0 Medicare	\$1,309.44	N/A	\$1,309.44	\$1,243.04	N/A	\$1,243.04	\$1,167.68	N/A	\$1,167.68	\$1,167.68
Single - 1 Medicare	N/A	\$341.05	\$341.05	N/A	\$322.91	\$322.91	N/A	\$431.32	\$431.32	\$624.71
EE+Spouse - 0 Medicare	\$2,854.60	N/A	\$2,854.60	\$2,709.83	N/A	\$2,709.83	\$2,544.19	N/A	\$2,544.19	\$2,544.19
EE+Spouse - 1 Medicare	\$1,227.30	\$341.05	\$1,568.35	\$1,227.13	\$322.91	\$1,550.04	\$891.42	\$431.32	\$1,322.74	\$1,516.13
EE+Spouse - 2 Medicare	N/A	\$682.10	\$682.10	N/A	\$645.82	\$645.82	N/A	\$862.64	\$862.63	\$1,249.41
Family - 0 Medicare	\$3,247.44	N/A	\$3,247.44	\$3,082.75	N/A	\$3,082.75	\$2,894.37	N/A	\$2,894.37	\$2,894.37
Family - 1 Medicare	\$1,549.53	\$341.05	\$1,890.58	\$1,549.64	\$322.91	\$1,872.55	\$1,174.72	\$431.32	\$1,606.04	\$1,799.43
Family - 2 Medicare	\$194.98	\$682.10	\$877.08	\$189.43	\$645.82	\$835.25	\$197.61	\$862.64	\$1,060.25	\$1,533.26
EE+Ch - 0 Medicare	\$1,833.21	N/A	\$1,833.21	\$1,740.24	N/A	\$1,740.24	\$1,633.73	N/A	\$1,633.73	\$1,633.73
EE+Ch - 1 Medicare	\$196.60	\$341.05	\$537.65	\$190.97	\$322.91	\$513.88	\$202.94	\$431.32	\$634.26	\$916.13
Medical Premium										
Single - 0 Medicare	\$1,106.19	N/A	\$1,106.19	\$1,039.79	N/A	\$1,039.79	\$952.53	N/A	\$952.53	\$952.53
Single - 1 Medicare	N/A	\$125.66	\$125.66	N/A	\$107.52	\$107.52	N/A	\$183.18	\$183.18	\$376.57
EE+Spouse - 0 Medicare	\$2,411.50	N/A	\$2,411.50	\$2,266.73	N/A	\$2,266.73	\$2,076.51	N/A	\$2,076.51	\$2,076.51
EE+Spouse - 1 Medicare	\$1,034.61	\$125.66	\$1,160.27	\$1,034.44	\$107.52	\$1,141.96	\$684.20	\$183.18	\$867.38	\$1,060.77
EE+Spouse - 2 Medicare	N/A	\$251.32	\$251.32	N/A	\$215.04	\$215.04	N/A	\$366.36	\$366.36	\$753.14
Family - 0 Medicare	\$2,743.36	N/A	\$2,743.36	\$2,578.67	N/A	\$2,578.67	\$2,362.27	N/A	\$2,362.27	\$2,362.27
Family - 1 Medicare	\$1,304.05	\$125.66	\$1,429.71	\$1,304.16	\$107.52	\$1,411.68	\$912.55	\$183.18	\$1,095.73	\$1,289.12
Family - 2 Medicare	\$70.35	\$251.32	\$321.67	\$64.80	\$215.04	\$279.84	\$85.07	\$366.36	\$451.43	\$924.44
EE+Ch - 0 Medicare	\$1,548.67	N/A	\$1,548.67	\$1,455.70	N/A	\$1,455.70	\$1,333.54	N/A	\$1,333.54	\$1,333.54
EE+Ch - 1 Medicare	\$70.95	\$125.66	\$196.61	\$65.32	\$107.52	\$172.84	\$87.26	\$183.18	\$270.44	\$552.31
Rx Premium										
Single - 0 Medicare	\$203.25	N/A	\$203.25	\$203.25	N/A	\$203.25	\$215.15	N/A	\$215.15	\$215.15
Single - 1 Medicare	N/A	\$215.39	\$215.39	N/A	\$215.39	\$215.39	N/A	\$248.14	\$248.14	\$248.14
EE+Spouse - 0 Medicare	\$443.10	N/A	\$443.10	\$443.10	N/A	\$443.10	\$467.68	N/A	\$467.68	\$467.68
EE+Spouse - 1 Medicare	\$192.69	\$215.39	\$408.08	\$192.69	\$215.39	\$408.08	\$207.22	\$248.14	\$455.36	\$455.36
EE+Spouse - 2 Medicare	N/A	\$430.78	\$430.78	N/A	\$430.78	\$430.78	N/A	\$496.28	\$496.27	\$496.27
Family - 0 Medicare	\$504.08	N/A	\$504.08	\$504.08	N/A	\$504.08	\$532.10	N/A	\$532.10	\$532.10
Family - 1 Medicare	\$245.48	\$215.39	\$460.87	\$245.48	\$215.39	\$460.87	\$262.17	\$248.14	\$510.31	\$510.31
Family - 2 Medicare	\$124.63	\$430.78	\$555.41	\$124.63	\$430.78	\$555.41	\$112.54	\$496.28	\$608.82	\$608.82
EE+Ch - 0 Medicare	\$284.54	N/A	\$284.54	\$284.54	N/A	\$284.54	\$300.19	N/A	\$300.19	\$300.19
EE+Ch - 1 Medicare	\$125.65	\$215.39	\$341.04	\$125.65	\$215.39	\$341.04	\$115.68	\$248.14	\$363.82	\$363.82

*CWA Unity/NJDIRECT PPO plan premiums are included in the appendix of this report

Exhibit 4C – Plan Year 2020 Monthly Retiree Premiums

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	1525 PPO	1525 HMO (Aetna Medicare Subscriber)			1525 HMO	2030		HD 4000
	Horizon PPO	1525 HMO			Horizon HMO	Horizon PPO	Horizon HMO	Horizon PPO
		Horizon Early Retiree Subscriber	Aetna Medicare Advantage Subscriber	Total Plan Premium				
Total Premium								
Single - 0 Medicare	\$1,198.41	\$1,076.38	N/A	\$1,076.38	\$1,076.38	\$1,145.18	\$1,028.99	\$656.48
Single - 1 Medicare	\$469.70	N/A	\$369.18	\$369.18	\$587.09	\$455.39	\$570.68	N/A
EE+Spouse - 0 Medicare	\$2,612.54	\$2,346.50	N/A	\$2,346.50	\$2,346.50	\$2,496.51	\$2,243.25	\$1,431.09
EE+Spouse - 1 Medicare	\$1,407.79	\$816.23	\$369.18	\$1,185.41	\$1,403.32	\$1,354.38	\$1,353.13	N/A
EE+Spouse - 2 Medicare	\$939.42	N/A	\$738.36	\$738.36	\$1,174.15	\$910.80	\$1,141.42	N/A
Family - 0 Medicare	\$2,972.05	\$2,669.40	N/A	\$2,669.40	\$2,669.40	\$2,840.04	\$2,551.94	\$1,628.02
Family - 1 Medicare	\$1,700.46	\$1,078.56	\$369.18	\$1,447.74	\$1,665.65	\$1,634.28	\$1,604.16	N/A
Family - 2 Medicare	\$1,211.18	\$178.56	\$738.36	\$916.92	\$1,423.72	\$1,174.25	\$1,383.29	N/A
EE+Ch - 0 Medicare	\$1,677.75	\$1,506.90	N/A	\$1,506.90	\$1,506.90	\$1,603.25	\$1,440.60	\$919.04
EE+Ch - 1 Medicare	\$743.71	\$182.43	\$369.18	\$551.61	\$844.53	\$721.03	\$820.33	N/A
Medical Premium								
Single - 0 Medicare	\$998.54	\$868.62	N/A	\$868.62	\$868.62	\$943.44	\$819.30	\$524.19
Single - 1 Medicare	\$257.89	N/A	\$147.75	\$147.75	\$365.66	\$241.60	\$347.17	N/A
EE+Spouse - 0 Medicare	\$2,176.83	\$1,893.59	N/A	\$1,893.59	\$1,893.59	\$2,056.70	\$1,786.08	\$1,142.72
EE+Spouse - 1 Medicare	\$1,006.52	\$619.37	\$147.75	\$767.12	\$985.03	\$949.35	\$930.93	N/A
EE+Spouse - 2 Medicare	\$515.81	N/A	\$295.50	\$295.50	\$731.29	\$483.23	\$694.41	N/A
Family - 0 Medicare	\$2,476.39	\$2,154.17	N/A	\$2,154.17	\$2,154.17	\$2,339.74	\$2,031.88	\$1,299.96
Family - 1 Medicare	\$1,247.28	\$827.58	\$147.75	\$975.33	\$1,193.24	\$1,176.84	\$1,127.32	N/A
Family - 2 Medicare	\$665.02	\$50.43	\$295.50	\$345.93	\$852.73	\$622.98	\$806.97	N/A
EE+Ch - 0 Medicare	\$1,397.96	\$1,216.06	N/A	\$1,216.06	\$1,216.06	\$1,320.82	\$1,147.03	\$733.84
EE+Ch - 1 Medicare	\$408.37	\$53.27	\$147.75	\$201.02	\$493.94	\$382.54	\$466.46	N/A
Rx Premium								
Single - 0 Medicare	\$199.87	\$207.76	N/A	\$207.76	\$207.76	\$201.74	\$209.69	\$132.29
Single - 1 Medicare	\$211.81	N/A	\$221.43	\$221.43	\$221.43	\$213.79	\$223.51	N/A
EE+Spouse - 0 Medicare	\$435.71	\$452.91	N/A	\$452.91	\$452.91	\$439.81	\$457.17	\$288.37
EE+Spouse - 1 Medicare	\$401.27	\$196.86	\$221.43	\$418.29	\$418.29	\$405.03	\$422.20	N/A
EE+Spouse - 2 Medicare	\$423.61	N/A	\$442.86	\$442.86	\$442.86	\$427.57	\$447.01	N/A
Family - 0 Medicare	\$495.66	\$515.23	N/A	\$515.23	\$515.23	\$500.30	\$520.06	\$328.06
Family - 1 Medicare	\$453.18	\$250.98	\$221.43	\$472.41	\$472.41	\$457.44	\$476.84	N/A
Family - 2 Medicare	\$546.16	\$128.13	\$442.86	\$570.99	\$570.99	\$551.27	\$576.32	N/A
EE+Ch - 0 Medicare	\$279.79	\$290.84	N/A	\$290.84	\$290.84	\$282.43	\$293.57	\$185.20
EE+Ch - 1 Medicare	\$335.34	\$129.16	\$221.43	\$350.59	\$350.59	\$338.49	\$353.87	N/A

*CWA Unity/NJDIRECT PPO plan premiums are included in the appendix of this report

Exhibit 4D – Plan Year 2020 Annual Retiree Premiums

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	Legacy Plans						Legacy HMO (Aetna Medicare Subscriber)			Legacy HMO
	PPO10			PPO15			Legacy HMO			
	Horizon Early Retiree Subscriber	Aetna Medicare Advantage Subscriber	Total Plan Premium	Horizon Early Retiree Subscriber	Aetna Medicare Advantage Subscriber	Total Plan Premium	Horizon Early Retiree Subscriber	Aetna Medicare Advantage Subscriber	Total Plan Premium	
Total Premium										
Single - 0 Medicare	\$15,713	N/A	\$15,713	\$14,916	N/A	\$14,916	\$14,012	N/A	\$14,012	\$14,012
Single - 1 Medicare	N/A	\$4,093	\$4,093	N/A	\$3,875	\$3,875	N/A	\$5,176	\$5,176	\$7,497
EE+Spouse - 0 Medicare	\$34,255	N/A	\$34,255	\$32,518	N/A	\$32,518	\$30,530	N/A	\$30,530	\$30,530
EE+Spouse - 1 Medicare	\$14,728	\$4,093	\$18,820	\$14,726	\$3,875	\$18,600	\$10,697	\$5,176	\$15,873	\$18,194
EE+Spouse - 2 Medicare	N/A	\$8,185	\$8,185	N/A	\$7,750	\$7,750	N/A	\$10,352	\$10,352	\$14,993
Family - 0 Medicare	\$38,969	N/A	\$38,969	\$36,993	N/A	\$36,993	\$34,732	N/A	\$34,732	\$34,732
Family - 1 Medicare	\$18,594	\$4,093	\$22,687	\$18,596	\$3,875	\$22,471	\$14,097	\$5,176	\$19,272	\$21,593
Family - 2 Medicare	\$2,340	\$8,185	\$10,525	\$2,273	\$7,750	\$10,023	\$2,371	\$10,352	\$12,723	\$18,399
EE+Ch - 0 Medicare	\$21,999	N/A	\$21,999	\$20,883	N/A	\$20,883	\$19,605	N/A	\$19,605	\$19,605
EE+Ch - 1 Medicare	\$2,359	\$4,093	\$6,452	\$2,292	\$3,875	\$6,167	\$2,435	\$5,176	\$7,611	\$10,994
Medical Premium										
Single - 0 Medicare	\$13,274	N/A	\$13,274	\$12,477	N/A	\$12,477	\$11,430	N/A	\$11,430	\$11,430
Single - 1 Medicare	N/A	\$1,508	\$1,508	N/A	\$1,290	\$1,290	N/A	\$2,198	\$2,198	\$4,519
EE+Spouse - 0 Medicare	\$28,938	N/A	\$28,938	\$27,201	N/A	\$27,201	\$24,918	N/A	\$24,918	\$24,918
EE+Spouse - 1 Medicare	\$12,415	\$1,508	\$13,923	\$12,413	\$1,290	\$13,704	\$8,210	\$2,198	\$10,409	\$12,729
EE+Spouse - 2 Medicare	N/A	\$3,016	\$3,016	N/A	\$2,580	\$2,580	N/A	\$4,396	\$4,396	\$9,038
Family - 0 Medicare	\$32,920	N/A	\$32,920	\$30,944	N/A	\$30,944	\$28,347	N/A	\$28,347	\$28,347
Family - 1 Medicare	\$15,649	\$1,508	\$17,157	\$15,650	\$1,290	\$16,940	\$10,951	\$2,198	\$13,149	\$15,469
Family - 2 Medicare	\$844	\$3,016	\$3,860	\$778	\$2,580	\$3,358	\$1,021	\$4,396	\$5,417	\$11,093
EE+Ch - 0 Medicare	\$18,584	N/A	\$18,584	\$17,468	N/A	\$17,468	\$16,002	N/A	\$16,002	\$16,002
EE+Ch - 1 Medicare	\$851	\$1,508	\$2,359	\$784	\$1,290	\$2,074	\$1,047	\$2,198	\$3,245	\$6,628
Rx Premium										
Single - 0 Medicare	\$2,439	N/A	\$2,439	\$2,439	N/A	\$2,439	\$2,582	N/A	\$2,582	\$2,582
Single - 1 Medicare	N/A	\$2,585	\$2,585	N/A	\$2,585	\$2,585	N/A	\$2,978	\$2,978	\$2,978
EE+Spouse - 0 Medicare	\$5,317	N/A	\$5,317	\$5,317	N/A	\$5,317	\$5,612	N/A	\$5,612	\$5,612
EE+Spouse - 1 Medicare	\$2,312	\$2,585	\$4,897	\$2,312	\$2,585	\$4,897	\$2,487	\$2,978	\$5,464	\$5,464
EE+Spouse - 2 Medicare	N/A	\$5,169	\$5,169	N/A	\$5,169	\$5,169	N/A	\$5,955	\$5,955	\$5,955
Family - 0 Medicare	\$6,049	N/A	\$6,049	\$6,049	N/A	\$6,049	\$6,385	N/A	\$6,385	\$6,385
Family - 1 Medicare	\$2,946	\$2,585	\$5,530	\$2,946	\$2,585	\$5,530	\$3,146	\$2,978	\$6,124	\$6,124
Family - 2 Medicare	\$1,496	\$5,169	\$6,665	\$1,496	\$5,169	\$6,665	\$1,350	\$5,955	\$7,306	\$7,306
EE+Ch - 0 Medicare	\$3,414	N/A	\$3,414	\$3,414	N/A	\$3,414	\$3,602	N/A	\$3,602	\$3,602
EE+Ch - 1 Medicare	\$1,508	\$2,585	\$4,092	\$1,508	\$2,585	\$4,092	\$1,388	\$2,978	\$4,366	\$4,366

*CWA Unity/NJDIRECT PPO plan premiums are included in the appendix of this report

Exhibit 4D – Plan Year 2020 Annual Retiree Premiums

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	1525 PPO	1525 HMO (Aetna Medicare Subscriber)			1525 HMO	2030		HD 4000
	Horizon PPO	Horizon Early Retiree Subscriber	1525 HMO Aetna Medicare Advantage Subscriber	Total Plan Premium	Horizon HMO	Horizon PPO	Horizon HMO	Horizon PPO
Total Premium								
Single - 0 Medicare	\$14,381	\$12,917	N/A	\$12,917	\$12,917	\$13,742	\$12,348	\$7,878
Single - 1 Medicare	\$5,636	N/A	\$4,430	\$4,430	\$7,045	\$5,465	\$6,848	N/A
EE+Spouse - 0 Medicare	\$31,350	\$28,158	N/A	\$28,158	\$28,158	\$29,958	\$26,919	\$17,173
EE+Spouse - 1 Medicare	\$16,893	\$9,795	\$4,430	\$14,225	\$16,840	\$16,253	\$16,238	N/A
EE+Spouse - 2 Medicare	\$11,273	N/A	\$8,860	\$8,860	\$14,090	\$10,930	\$13,697	N/A
Family - 0 Medicare	\$35,665	\$32,033	N/A	\$32,033	\$32,033	\$34,080	\$30,623	\$19,536
Family - 1 Medicare	\$20,406	\$12,943	\$4,430	\$17,373	\$19,988	\$19,611	\$19,250	N/A
Family - 2 Medicare	\$14,534	\$2,143	\$8,860	\$11,003	\$17,085	\$14,091	\$16,599	N/A
EE+Ch - 0 Medicare	\$20,133	\$18,083	N/A	\$18,083	\$18,083	\$19,239	\$17,287	\$11,028
EE+Ch - 1 Medicare	\$8,925	\$2,189	\$4,430	\$6,619	\$10,134	\$8,652	\$9,844	N/A
Medical Premium								
Single - 0 Medicare	\$11,982	\$10,423	N/A	\$10,423	\$10,423	\$11,321	\$9,832	\$6,290
Single - 1 Medicare	\$3,095	N/A	\$1,773	\$1,773	\$4,388	\$2,899	\$4,166	N/A
EE+Spouse - 0 Medicare	\$26,122	\$22,723	N/A	\$22,723	\$22,723	\$24,680	\$21,433	\$13,713
EE+Spouse - 1 Medicare	\$12,078	\$7,432	\$1,773	\$9,205	\$11,820	\$11,392	\$11,171	N/A
EE+Spouse - 2 Medicare	\$6,190	N/A	\$3,546	\$3,546	\$8,775	\$5,799	\$8,333	N/A
Family - 0 Medicare	\$29,717	\$25,850	N/A	\$25,850	\$25,850	\$28,077	\$24,383	\$15,600
Family - 1 Medicare	\$14,967	\$9,931	\$1,773	\$11,704	\$14,319	\$14,122	\$13,528	N/A
Family - 2 Medicare	\$7,980	\$605	\$3,546	\$4,151	\$10,233	\$7,476	\$9,684	N/A
EE+Ch - 0 Medicare	\$16,776	\$14,593	N/A	\$14,593	\$14,593	\$15,850	\$13,764	\$8,806
EE+Ch - 1 Medicare	\$4,900	\$639	\$1,773	\$2,412	\$5,927	\$4,590	\$5,598	N/A
Rx Premium								
Single - 0 Medicare	\$2,398	\$2,493	N/A	\$2,493	\$2,493	\$2,421	\$2,516	\$1,587
Single - 1 Medicare	\$2,542	N/A	\$2,657	\$2,657	\$2,657	\$2,565	\$2,682	N/A
EE+Spouse - 0 Medicare	\$5,229	\$5,435	N/A	\$5,435	\$5,435	\$5,278	\$5,486	\$3,460
EE+Spouse - 1 Medicare	\$4,815	\$2,362	\$2,657	\$5,019	\$5,019	\$4,860	\$5,066	N/A
EE+Spouse - 2 Medicare	\$5,083	N/A	\$5,314	\$5,314	\$5,314	\$5,131	\$5,364	N/A
Family - 0 Medicare	\$5,948	\$6,183	N/A	\$6,183	\$6,183	\$6,004	\$6,241	\$3,937
Family - 1 Medicare	\$5,438	\$3,012	\$2,657	\$5,669	\$5,669	\$5,489	\$5,722	N/A
Family - 2 Medicare	\$6,554	\$1,538	\$5,314	\$6,852	\$6,852	\$6,615	\$6,916	N/A
EE+Ch - 0 Medicare	\$3,357	\$3,490	N/A	\$3,490	\$3,490	\$3,389	\$3,523	\$2,222
EE+Ch - 1 Medicare	\$4,024	\$1,550	\$2,657	\$4,207	\$4,207	\$4,062	\$4,246	N/A

*CWA Unity/NJDIRECT PPO plan premiums are included in the appendix of this report

Exhibit 4E – Plan Year 2020 Monthly Retiree Premiums: Effective 10/1/2019

Effective June 26, 2019, the State Health Benefits Plan Design Committee approved PDC Resolution 2019-6 that required Early Retirees to be offered the same plan options as Actives. For State Early Retirees this includes the HD1500, Tiered Network, and 2035 PPO plan options. The retiree premiums shown in the Plan Year 2020 Renewal Report for these new plan options are developed based on an October 1, 2019 effective date and represent a 15-Month premium.

	2035	HD 1500	Tiered Network
	Horizon PPO	Horizon PPO	Horizon HMO
<u>Total Premium</u>			
Single - 0 Medicare	\$979.79	\$962.70	\$957.43
EE+Spouse - 0 Medicare	\$2,135.94	\$2,098.68	\$2,087.20
Family - 0 Medicare	\$2,429.89	\$2,387.50	\$2,374.44
EE+Ch - 0 Medicare	\$1,371.69	\$1,347.76	\$1,340.39
<u>Medical Premium</u>			
Single - 0 Medicare	\$812.34	\$780.42	\$774.63
EE+Spouse - 0 Medicare	\$1,770.89	\$1,701.30	\$1,688.69
Family - 0 Medicare	\$2,014.60	\$1,935.43	\$1,921.09
EE+Ch - 0 Medicare	\$1,137.27	\$1,092.58	\$1,084.48
<u>Rx Premium</u>			
Single - 0 Medicare	\$167.45	\$182.28	\$182.80
EE+Spouse - 0 Medicare	\$365.05	\$397.38	\$398.51
Family - 0 Medicare	\$415.29	\$452.07	\$453.35
EE+Ch - 0 Medicare	\$234.42	\$255.18	\$255.91

Exhibit 4F – Plan Year 2020 15-Month Retiree Premiums: Effective 10/1/2019

	2035	HD 1500	Tiered Network
	Horizon PPO	Horizon PPO	Horizon HMO
<u>Total Premium</u>			
Single - 0 Medicare	\$14,697	\$14,441	\$14,361
EE+Spouse - 0 Medicare	\$32,039	\$31,480	\$31,308
Family - 0 Medicare	\$36,448	\$35,813	\$35,617
EE+Ch - 0 Medicare	\$20,575	\$20,216	\$20,106
<u>Medical Premium</u>			
Single - 0 Medicare	\$12,185	\$11,706	\$11,619
EE+Spouse - 0 Medicare	\$26,563	\$25,520	\$25,330
Family - 0 Medicare	\$30,219	\$29,031	\$28,816
EE+Ch - 0 Medicare	\$17,059	\$16,389	\$16,267
<u>Rx Premium</u>			
Single - 0 Medicare	\$2,512	\$2,734	\$2,742
EE+Spouse - 0 Medicare	\$5,476	\$5,961	\$5,978
Family - 0 Medicare	\$6,229	\$6,781	\$6,800
EE+Ch - 0 Medicare	\$3,516	\$3,828	\$3,839

Exhibit 5A – Plan Year 2020 Employee Plan Option Summary

	State Actives							
	CWA Unity PPO Plan	CWA Unity New Hire PPO Plan ²	NJDIRECT PPO Plan	NJDIRECT PPO New Hire Plan ²	\$15 HMO	HDHP 4000	HDHP 1500	Tiered Network
In-Network								
Deductible (Single/Family) ¹	None	\$100	None	\$100	None	\$4,000/\$8,000	\$1,500/\$3,000	Tier 1: \$0 Tier 2: \$1,500/\$3,000
Coinsurance OOP Maximum (Single/Family)	\$800/\$2,000	\$800/\$2,000	\$800/\$2,000	\$800/\$2,000	None	None	None	None
Total In-Network OOP Maximum (Single/Family) ¹	\$6,520/\$13,040	\$6,520/\$13,040	\$6,520/\$13,040	\$6,520/\$13,040	\$6,520/\$13,040	\$5,000/\$10,000	\$2,500/\$5,000	Tier 1: \$2,500/\$5,000 Tier 2: \$4,500/\$9,000
Overall Coinsurance	10%	10%	10%	10%	None	20%	20%	Tier 1: None Tier 2: 20%
PCP	\$15 copay	\$15 copay	\$15 copay	\$15 copay	\$15 copay	20% coinsurance after deductible	20% coinsurance after deductible	Tier 1: \$5 copay Tier 2: \$20 copay
Specialist	\$15 copay	\$15 copay	\$15 copay	\$15 copay	\$15 copay	20% coinsurance after deductible	20% coinsurance after deductible	Tier 1: \$15 copay Tier 2: \$30 copay
Emergency Room	\$150 copay	\$150 copay	\$150 copay	\$150 copay	\$100 copay	20% coinsurance after deductible	20% coinsurance after deductible	\$100 copay
Inpatient Hospital	No charge	No charge	No charge	No charge	No charge	20% coinsurance after deductible	20% coinsurance after deductible	Tier 1: \$150 copay Tier 2: 20% coinsurance after deductible
Out-of-Network								
Deductible (Single/Family)	\$400/\$1000	\$400/\$1000	\$400/\$1000	\$400/\$1000	Not covered	Combined with In-Network Deductible	Combined with In-Network Deductible	Not covered
Total Out-of-Network OOP Maximum (Single/Family)	\$2,000/\$5,000	\$2,000/\$5,000	\$2,000/\$5,000	\$2,000/\$5,000	Not covered	\$6,000/\$12,000	\$3,500/\$7,000	Not covered
Overall Coinsurance	30% (175% CMS)	30% (175% CMS)	30% (175% CMS)	30% (175% CMS)	Not covered	40%	40%	Not covered
MH/SA Coinsurance	30% (195% CMS)	30% (195% CMS)	30% (195% CMS)	30% (195% CMS)	Not covered	40%	40%	Not covered
Inpatient Hospital Deductible	\$500/Stay	\$500/Stay	\$500/Stay	\$500/Stay	Not covered	None	None	Not covered
Routine Lab Services	Not Covered	Not Covered	Not Covered	Not Covered	Not covered	Not Covered	Not Covered	Not covered
Prescription Drug								
OOP Maximum (Single/Family)	\$1,630/\$3,260	\$1,630/\$3,260	\$1,630/\$3,260	\$1,630/\$3,260	\$1,630/\$3,260	Subject to Deductible and Coinsurance	Subject to Deductible and Coinsurance	\$1,630/\$3,260
Retail - Generic	\$7	\$7	\$7	\$7	\$3			\$7
Retail - Brand	\$16	\$16	\$16	\$16	\$10			\$16
Retail - Brand w/ Generic Available	Member Pays the Difference	Member Pays the Difference	Member Pays the Difference	Member Pays the Difference	Member Pays the Difference			Member Pays the Difference
Mail - Generic	\$18	\$18	\$18	\$18	\$5			\$18
Mail - Brand	\$40	\$40	\$40	\$40	\$15			\$40
Mail - Brand w/ Generic Available	Member Pays the Difference	Member Pays the Difference	Member Pays the Difference	Member Pays the Difference	Member Pays the Difference			Member Pays the Difference

¹ For all HDHP plans the in-network and out-of-network OOP Maximum and the in-network Deductible for Medical and Prescription Drug are integrated.

² Actives that are hired on or after 7/1/2019 are automatically enrolled in the Unity New Hire or 2019 New Hire Plan based on the Group they belong to.

The plan options shown above are provided for reference purposes and reflect potential options available to a member. The plan options shown above are not available for all members and can be dependent on multiple factors such as union designation, years of service, etc.

Exhibit 5B – Plan Year 2020 Early Retiree Plan Option Summary

	State Early Retirees												
	CWA Unity Early Retiree Plan	NDIRECT PPO Early Retiree Plan	\$10 PPO	\$15 PPO	\$10 HMO	1525PPO	1525HMO	2030PPO	2030HMO	HDHP 4000	HDHP 1500	Tiered Network	
In-Network													
Deductible (Single/Family) ¹	\$0	\$0	None	None	None	None	None	None	None	\$4,000/\$8,000	\$1,500/\$3,000	Tier 1: \$0 Tier 2: \$1,500/\$3,000	
Coinsurance OOP Maximum (Single/Family)	\$800/\$2,000	\$800/\$2,000	None	\$400/\$1,000	None	\$400/\$1,000	None	\$800/\$2,000	None	None	None	None	
Total In-Network OOP Maximum (Single/Family) ¹	\$6,799/\$13,598	\$6,799/\$13,598	\$400/\$1,000	\$6,799/\$13,598	\$6,799/\$13,598	\$6,799/\$13,598	\$6,799/\$13,598	\$6,799/\$13,598	\$6,799/\$13,598	\$5,000/\$10,000	\$2,500/\$5,000	Tier 1: \$2,500/\$5,000 Tier 2: \$4,500/\$9,000	
Overall Coinsurance	10%	10%	None	None	None	None	None	None	None	20%	20%	Tier 1: None Tier 2: 20%	
PCP	\$15 copay	\$15 copay	\$10 copay	\$15 copay	\$10 copay	\$15 copay	\$15 copay	\$20 copay	\$20 copay	20% coinsurance after deductible	20% coinsurance after deductible	Tier 1: \$5 copay Tier 2: \$20 copay	
Specialist	\$15 copay	\$15 copay	\$10 copay	\$15 copay	\$10 copay	\$25 copay	\$25 copay	\$30 copay/ \$20 copay (child)	\$30 copay/ \$20 copay (child)	20% coinsurance after deductible	20% coinsurance after deductible	Tier 1: \$15 copay Tier 2: \$30 copay	
Emergency Room	\$150 copay	\$150 copay	\$75 copay	\$100 copay	\$85 copay	\$100 copay	\$100 copay	\$125 copay	\$125 copay	20% coinsurance after deductible	20% coinsurance after deductible	\$100 copay	
Inpatient Hospital	No charge	No charge	No charge	No charge	No charge	No charge	No charge	No charge	No charge	20% coinsurance after deductible	20% coinsurance after deductible	Tier 1: \$150 copay Tier 2: 20% coinsurance after deductible	
Out-of-Network													
Deductible (Single/Family)	\$400/\$1000	\$400/\$1000	\$100/\$250	\$100/\$250	Not covered	\$100/\$250	Not covered	\$200/\$500	Not covered	Combined with In-Network Deductible	Combined with In-Network Deductible	Not covered	
Total Out-of-Network OOP Maximum (Single/Family)	\$2,000/\$5,000	\$2,000/\$5,000	\$2,000/\$5,000	\$2,000/\$5,000	Not covered	\$2,000/\$5,000	Not covered	\$5,000/\$12,500	Not covered	\$6,000/\$12,000	\$3,500/\$7,000	Not covered	
Overall Coinsurance	30% (175% CMS)	30% (175% CMS)	20%	30%	Not covered	30%	Not covered	30%	Not covered	40%	40%	Not covered	
MH/SA Coinsurance	30% (195% CMS)	30% (195% CMS)	20%	30%	Not Covered	30%	Not Covered	30%	Not Covered	40%	40%	Not covered	
Inpatient Hospital Deductible	\$500/Stay	\$500/Stay	\$200/Stay	\$200/Stay	Not Covered	\$200/Stay	Not Covered	\$500/Stay	Not Covered	None	None	Not covered	
Routine Lab Services	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered	Not covered	Not Covered	Not Covered	Not covered	
Prescription Drug													
OOP Maximum (Single/Family)	\$1,351/\$2,702	\$1,351/\$2,702	\$1,351/\$2,702	\$1,351/\$2,702	\$1,351/\$2,702	\$1,351/\$2,702	\$1,351/\$2,702	\$1,351/\$2,702	\$1,351/\$2,702	\$1,351/\$2,702	\$1,351/\$2,702	\$1,630/\$3,260	
Retail - Generic	\$7	\$7	\$10	\$10	\$6	\$7	\$7	\$3	\$3	Subject to Deductible and Coinsurance	Subject to Deductible and Coinsurance	\$7	
Retail - Preferred Brand	\$16	\$16	\$22	\$22	\$12	\$16	\$16	\$18	\$18			\$16	
Retail - Non-Preferred Brand	\$35	\$35	\$44	\$44	\$24	\$35	\$35	\$46	\$46			\$35	
Retail - Brand w/ Generic available	Member Pays the Difference	Member Pays the Difference	Member Pays the Difference	Member Pays the Difference	Member Pays the Difference	Member Pays the Difference	Member Pays the Difference	Member Pays the Difference	Member Pays the Difference			Member Pays the Difference	Member Pays the Difference
Mail - Generic	\$5	\$5	\$5	\$5	\$5	\$5	\$5	\$5	\$5			\$5	\$18
Mail - Preferred Brand	\$40	\$40	\$28	\$28	\$18	\$40	\$40	\$36	\$36			\$40	
Mail - Non-Preferred Brand	\$88	\$88	\$55	\$55	\$30	\$88	\$88	\$92	\$92			\$88	
Mail - Brand w/ Generic available	Member Pays the Difference	Member Pays the Difference	Member Pays the Difference	Member Pays the Difference	Member Pays the Difference	Member Pays the Difference	Member Pays the Difference	Member Pays the Difference	Member Pays the Difference			Member Pays the Difference	Member Pays the Difference

¹ For all HDHP plans the in-network and out-of-network OOP Maximum and the in-network Deductible for Medical and Prescription Drug are integrated.

The plan options shown above are provided for reference purposes and reflect potential options available to a member. The plan options shown above are not available for all members and can be dependent on multiple factors such as union designation, years of service, etc.

Exhibit 5C – Plan Year 2020 Medicare Retiree Plan Option Summary

	State Medicare Advantage ²				State Medicare Supplement				
	\$10 PPO	\$15 PPO	\$10 HMO	1525HMO	\$10 HMO	1525PPO	1525HMO	2030PPO	2030HMO
In-Network									
Deductible (Single/Family)	None	None	None	None	None	None	None	None	None
Coinsurance OOP Maximum (Single/Family) ¹	None	None	None	None	None	\$400/\$1,000	None	\$800/\$2,000	None
Total In-Network OOP Maximum (Single/Family)	\$1,000 per person	\$1,000 per person	\$2,500 per person	\$2,500 per person	\$6,799/\$13,598	\$6,799/\$13,598	\$6,799/\$13,598	\$6,799/\$13,598	\$6,799/\$13,598
Overall Coinsurance	None	None	None	None	None	None	None	None	None
PCP	\$10 copay	\$15 copay	\$10 copay	\$15 copay	\$10 copay	\$15 copay	\$15 copay	\$20 copay	\$20 copay
Specialist	\$10 copay	\$15 copay	\$10 copay	\$25 copay	\$10 copay	\$25 copay	\$25 copay	\$30 copay/ \$20 copay (child)	\$30 copay/ \$20 copay (child)
Emergency Room	\$75 copay	\$75 copay	\$75 copay	\$75 copay	\$85 copay	\$100 copay	\$100 copay	\$125 copay	\$125 copay
Inpatient Hospital	No charge	No charge	No charge	No charge	No charge	No charge	No charge	No charge	No charge
Out-of-Network									
Deductible (Single/Family)	None	None	Not Covered	Not Covered	Not covered	\$100/\$250	Not covered	\$200/\$500	Not covered
Coinsurance OOP Maximum (Single/Family) ¹	None	None	Not Covered	Not Covered	Not covered	None	Not covered	None	Not covered
Total Out-of-Network OOP Maximum (Single/Family)	\$1,000 per person; Combined with IN OOP	\$1,000 per person; Combined with IN OOP	Not Covered	Not Covered	Not covered	\$2,000/\$5,000	Not covered	\$5,000/\$12,500	Not covered
Overall Coinsurance	None	None	Not Covered	Not Covered	Not covered	30%	Not covered	30%	Not covered
Prescription Drug									
OOP Maximum (Single/Family)	\$1,351/\$2,702	\$1,351/\$2,702	\$1,351/\$2,702	\$1,351/\$2,702	\$1,351/\$2,702	\$1,351/\$2,702	\$1,351/\$2,702	\$1,351/\$2,702	\$1,351/\$2,702
Retail - Generic	\$10	\$10	\$6	\$7	\$6	\$7	\$7	\$3	\$3
Retail - Preferred Brand	\$22	\$22	\$12	\$16	\$12	\$16	\$16	\$18	\$18
Retail - Non-Preferred Brand	\$44	\$44	\$24	\$35	\$24	\$35	\$35	\$46	\$46
Mail - Generic	\$5	\$5	\$5	\$5	\$5	\$5	\$5	\$5	\$5
Mail - Preferred Brand	\$28	\$28	\$18	\$40	\$18	\$40	\$40	\$36	\$36
Mail - Non-Preferred Brand	\$55	\$55	\$30	\$88	\$30	\$88	\$88	\$92	\$92

¹ Coinsurance OOP Maximum applies on the Horizon \$15 PPO for IN outpatient private duty nursing, IN or OON ambulance, DME and some prosthetic and orthotic services

² Medicare Advantage plans do not have In-Network and Out-of-Network differentiation. Medicare Advantage plans provide coverage at the same benefit level regardless of network status for visits to any provider that accepts Medicare.

The plan options shown above are provided for reference purposes and reflect potential options available to a member. The plan options shown above are not available for all members and can be dependent on multiple factors such as union designation, years of service, etc.

State of New Jersey

State Health Benefits Program

Appendix

CWA Unity PPO and NJDIRECT PPO Plan Options

CWA Unity PPO Plan: Beginning July 1, 2019, the CWA Unity PPO Plan is available to all current CWA Employees, and this plan option replaces the PPO plan options currently available to CWA Active Employees (PPO15, PPO1525, PPO2030 and PPO2035). CWA Employees who are hired after July 1, 2019 are eligible to enroll in the CWA Unity PPO New Hire Plan which includes an in-network deductible. All CWA Early Retirees who attain 25 years of service credit on or after July 1, 2019 and retire on or after July 1, 2019 are assumed to be enrolled in the CWA Unity PPO plan option with no in-network deductible.

NJDIRECT PPO Plan: As contracts are ratified, other State Active Employees are eligible to enroll in the NJDIRECT PPO Plan. This plan option replaces the PPO plan options currently available to State Active Employees (PPO15, PPO1525, PPO2030 and PPO2035). Other State Active Employees who are hired after contracts have been ratified are eligible to enroll in the NJDIRECT PPO New Hire Plan which includes an in-network deductible. Other eligible State Early Retirees who attain 25 years of service credit and retire on or after the date which contracts are ratified are assumed to be enrolled in the NJDIRECT PPO Early Retiree plan option with no in-network deductible.

New State Early Retiree Plan Options: Effective June 26, 2019, the State Health Benefits Plan Design Committee approved PDC Resolution 2019-6 which required SHBP Early Retirees to be offered the same plan options as Actives (Tiered Network, CWA Unity/NJDIRECT PPO, HD1500 (excluding employer HSA funding)). An Early Retiree is defined as a person who is not yet eligible for Medicare, without regard to the date on which the Early Retiree accrued 25 years of non-consecutive or consecutive service credit or otherwise qualified for retiree health benefits and without regard to the date on which the early retiree retired. This resolution was intended to take effect as soon as practicable but no later than October 1, 2019. Retiree premiums shown in this report for these new plan options are developed based on an October 1, 2019 effective date and represent a 15-Month premium.

The proposed Active, New Hire, and Early Retiree CWA Unity PPO and NJDIRECT PPO plan options are assumed to have an out-of-network reimbursement equal to 175% of CMS. The OON reimbursement for mental health and substance abuse (MH/SA) benefits is assumed to be equal to 195% of CMS. Furthermore, it is assumed that out-of-network routine lab services are not covered in the proposed Active, New Hire, and Early Retiree CWA Unity PPO and NJDIRECT PPO plan options.

CWA Unity PPO and NJDIRECT PPO Premium Rates

The monthly premium for these new plan options were developed on an incurred basis using experience, assumptions, and methodologies consistent with the Mid-Year Reports dated April 1, 2019.

The State Current Active, New Hire, and Early Retiree CWA Unity and NJDIRECT PPO Plan Year 2019 premiums are based on Plan Year 2019 estimated cost and premium rates trended to the mid-point of the 18-month projection period. Premiums were adjusted to reflect the theoretical difference in actuarial value determined using Aon's proprietary actuarial value model as well as benefit change estimates provided by the medical and prescription drug vendors. Aon's actuarial value model incorporates national average cost, utilization, and demographic data combined with plan design provisions specific to the SHBP (e.g. – copays, deductibles, etc.)

**18-Month Premium Effective July 1, 2019
CWA Unity PPO and NJDIRECT PPO Monthly Plan Premiums**

The following charts show the monthly CWA PPO and NJDIRECT PPO plan premiums for current State Active Employees as well as State Actives hired on or after July 1, 2019. The monthly premiums illustrated are representative of an "18-month premium" effective July 1, 2019 through December 31, 2020:

	CWA Unity PPO		NJDIRECT PPO	
	Horizon PPO \$0	Horizon PPO \$100	Horizon PPO \$0	Horizon PPO \$100
<u>Medical Coverage Only</u>				
Single	\$666.47	\$662.96	\$666.47	\$662.96
Employee+Spouse	\$1,332.94	\$1,325.93	\$1,332.94	\$1,325.93
Family	\$1,906.10	\$1,896.07	\$1,906.10	\$1,896.07
Employee+Child(ren)	\$1,239.64	\$1,233.11	\$1,239.64	\$1,233.11
Adult Child Rate	\$584.63	\$581.55	\$584.63	\$581.55
	CWA Unity PPO		NJDIRECT PPO	
	Horizon PPO \$0	Horizon PPO \$100	Horizon PPO \$0	Horizon PPO \$100
<u>Rx Card</u>				
Single	\$114.68	\$114.68	\$114.68	\$114.68
Employee+Spouse	\$229.35	\$229.35	\$229.35	\$229.35
Family	\$327.97	\$327.97	\$327.97	\$327.97
Employee+Child(ren)	\$213.30	\$213.30	\$213.30	\$213.30
Adult Child Rate	\$100.59	\$100.59	\$100.59	\$100.59

Note: Numbers may not add due to rounding

CWA Unity PPO and NJDIRECT PPO 18-Month Plan Premiums

	CWA Unity PPO		NJDIRECT PPO	
	Horizon PPO \$0	Horizon PPO \$100	Horizon PPO \$0	Horizon PPO \$100
<u>Medical Coverage Only</u>				
Single	\$11,996	\$11,933	\$11,996	\$11,933
Employee+Spouse	\$23,993	\$23,867	\$23,993	\$23,867
Family	\$34,310	\$34,129	\$34,310	\$34,129
Employee+Child(ren)	\$22,314	\$22,196	\$22,314	\$22,196
Adult Child Rate	\$10,523	\$10,468	\$10,523	\$10,468
	CWA Unity PPO		NJDIRECT PPO	
	Horizon PPO \$0	Horizon PPO \$100	Horizon PPO \$0	Horizon PPO \$100
<u>Rx Card</u>				
Single	\$2,064	\$2,064	\$2,064	\$2,064
Employee+Spouse	\$4,128	\$4,128	\$4,128	\$4,128
Family	\$5,903	\$5,903	\$5,903	\$5,903
Employee+Child(ren)	\$3,839	\$3,839	\$3,839	\$3,839
Adult Child Rate	\$1,811	\$1,811	\$1,811	\$1,811

Note: Numbers may not add due to rounding

The following charts show the monthly CWA plan premiums for Early Retirees. The monthly premiums illustrated are representative of an "18-month premium" effective July 1, 2019 through December 31, 2020:

**Early Retirees
CWA Unity PPO and NJDIRECT PPO Monthly Plan Premiums**

	CWA Unity PPO	NJDIRECT PPO
	Horizon PPO \$0	Horizon PPO \$0
<u>Total Premium</u>		
Single - 0 Medicare	\$1,143.43	\$1,143.43
EE+Spouse - 0 Medicare	\$2,492.68	\$2,492.68
Family - 0 Medicare	\$2,835.71	\$2,835.71
EE+Ch - 0 Medicare	\$1,600.81	\$1,600.81
<u>Medical Premium</u>		
Single - 0 Medicare	\$948.17	\$948.17
EE+Spouse - 0 Medicare	\$2,067.01	\$2,067.01
Family - 0 Medicare	\$2,351.46	\$2,351.46
EE+Ch - 0 Medicare	\$1,327.45	\$1,327.45
<u>Rx Premium</u>		
Single - 0 Medicare	\$195.26	\$195.26
EE+Spouse - 0 Medicare	\$425.67	\$425.67
Family - 0 Medicare	\$484.25	\$484.25
EE+Ch - 0 Medicare	\$273.36	\$273.36

Note: Numbers may not add due to rounding

**Early Retirees
CWA Unity PPO and NJDIRECT PPO 18-Month Plan Premiums**

	CWA Unity PPO	NJDIRECT PPO
	Horizon PPO \$0	Horizon PPO \$0
<u>Total Premium</u>		
Single - 0 Medicare	\$20,582	\$20,582
EE+Spouse - 0 Medicare	\$44,868	\$44,868
Family - 0 Medicare	\$51,043	\$51,043
EE+Ch - 0 Medicare	\$28,815	\$28,815
<u>Medical Premium</u>		
Single - 0 Medicare	\$17,067	\$17,067
EE+Spouse - 0 Medicare	\$37,206	\$37,206
Family - 0 Medicare	\$42,326	\$42,326
EE+Ch - 0 Medicare	\$23,894	\$23,894
<u>Rx Premium</u>		
Single - 0 Medicare	\$3,515	\$3,515
EE+Spouse - 0 Medicare	\$7,662	\$7,662
Family - 0 Medicare	\$8,717	\$8,717
EE+Ch - 0 Medicare	\$4,920	\$4,920

Note: Numbers may not add due to rounding

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