





Proposed 2020 Premium Contribution Rates

Board of Trustees

August 27, 2019

A Division of the Department of State Treasurer

2020 Employee Premium Rates

Employer/Retirement System Contributions

✓ Conditionally approve of 4% increases in employer/Retirement Systems contributions for permanent employees and retirees, as assumed in the expected FY 2020 State Budget and shown on page 3 of this presentation.

80/20 and 70/30 Plan (Self-funded)

✓ Approve the 2020 employee premium rates for the 80/20 and 70/30 plans, as shown on page 4 of this presentation.

High Deductible Health Plan

✓ Conditionally approve a 4% increase in the employer premium rate for HDHP as shown on page 5 of this presentation, and approve the 2020 employee premium rate.

Medicare Advantage Plan

✓ Approve 2020 employee premium rates for the MA Base and MA Enhanced plans, as shown on page 6 of this presentation.

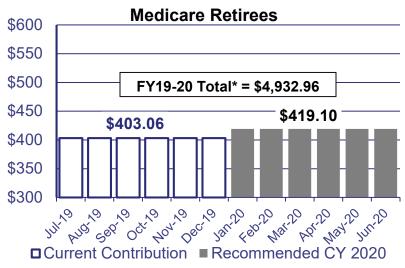
Other Member Groups (50% and 100% contributory; COBRA; National Guard, Firefighters, etc.)

✓ Approve premium rate policies for "other member groups," as described on page 7 of this presentation.

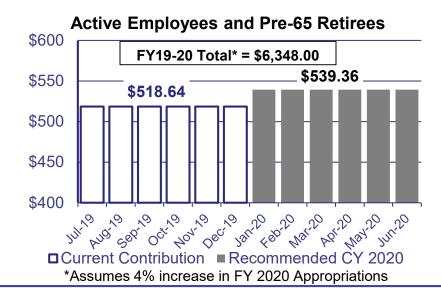


Employer/Retirement Systems Contributions 2020 Recommendation

- The State Budget which specifies maximum employer/Retirement Systems contributions for Medicare primary subscribers and for non-Medicare primary subscribers (active employees and pre-65/non-Medicare retirees) has not been approved for the 2019-20 Fiscal Year.
- The Plan is using the assumption that premiums will increase 4.00% in FY 2020, similar to increases in the past. This
 assumption leads to a maximum amount of \$4,933 for Medicare primary subscribers and \$6,348 for non-Medicare primary
 subscribers.
- The fiscal year maximum is translated to monthly contribution amounts the Plan is authorized to collect for each employee, retiree, and disabled member.
- For 2020, the Plan is assuming an increase of 4% in the monthly employer/Retirement Systems contributions, beginning January 2020.
- · Plan staff recommends increases to:
 - \$419.10/month for the Medicare primary population
 - \$539.36/month for the non-Medicare primary population



*Assumes 4% increase in FY 2020 Appropriations





80/20 and 70/30 Plans

2020 Recommendation

Base Premiums:

- Base premiums would not change for 2020.
- Tobacco Attestation wellness surcharge kept flat at \$60.

Dependent Tiers:

- Premiums for the dependent tiers would not change for 2020.
- The "Subscriber + Family" and "Subscriber + Children" tiers are frozen for a third year in a row.

Coverage & Tiers	2019 Rates	2020 Rates
80/20 Employees *		
Subscriber Only	\$50.00	\$50.00
Subscriber + Child(ren)	\$305.00	\$305.00
Subscriber + Spouse	\$700.00	\$700.00
Subscriber + Family	\$720.00	\$720.00
80/20 Retirees / Non-Med Dependents		
Subscriber Only	\$50.00	\$50.00
Subscriber + Child(ren)	\$305.00	\$305.00
Subscriber + Spouse	\$700.00	\$700.00
Subscriber + Family	\$720.00	\$720.00

^{*}Assumes "Yes" completion of tobacco attestation

Actuarial Value	
80/20 Active & Non-Medicare Plans	80.4%
70/30 Active & Non-Medicare Plans	74.7%
70/30 Medicare Plan	90.1%

Coverage & Tiers	2019	2020
Coverage & Hers	Rates	Rates
70/30 Employees *		
Subscriber Only	\$25.00	\$25.00
Subscriber + Child(ren)	\$218.00	\$218.00
Subscriber + Spouse	\$590.00	\$590.00
Subscriber + Family	\$598.00	\$598.00
70/30 Retirees/Non-Med Dependents		
Subscriber Only	\$0.00	\$0.00
Subscriber + Child(ren)	\$218.00	\$218.00
Subscriber + Spouse	\$590.00	\$590.00
Subscriber + Family	\$598.00	\$598.00
70/30 Retirees/Med Dependents		
Subscriber Only	\$0.00	\$0.00
Subscriber + Child(ren)	\$155.00	\$155.00
Subscriber + Spouse	\$425.00	\$425.00
Subscriber + Family	\$444.00	\$444.00
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^{*}Assumes "Yes" completion of tobacco attestation



High Deductible Health Plan 2020 Recommendation

- Assumes an increase in Employer Premiums for the HDHP by 4%.
- Employee Premiums would stay the same in 2020.
- HDHP COBRA rates: COBRA participants would pay the full monthly premium (the employer and employee shares).
- Affordability Safe Harbor caps Employee only contributions at \$101.79.

Member Premium	2019 Rates	2020 Rates
HDHP		
Employee Only	\$96.00	\$96.00
Employee + Children	\$284.00	\$284.00
Employee + Spouse	\$513.00	\$513.00
Family	\$617.00	\$617.00

 2019
 2020

 HDHP Employer Contribution
 \$141.75
 \$147.42



Medicare Advantage Plans 2020 Recommendation

- The Plan negotiated 2020 premiums for fully insured coverage with UnitedHealthcare (Medicare Advantage Carrier)
- Health Insurance Provider Fee (HIP Fee) is a pass through expense for fully insured plans as mandated by the PPACA (2010).
 - There was a moratorium of the HIP Fee in 2019.
- Administration fees are included in all dependent rates and in 2020, are included with the MA Enhanced Buyup option for subscribers.

	Base	Plan	Enhanced Plan			
	Premium	HIP Fee	Premium	Buyup	HIP Fee	Admin
2019	85.00	0.00	85.00	63.00	0.00	4.00
2020	84.00	24.00	84.00	63.00	31.00	4.00

Coverage & Tiers	2019 Rates	2020 Rates
MA Base Retirees/Med Dependents		
Subscriber Only	\$0.00	\$0.00
Subscriber + Child(ren)	\$89.00	\$112.00
Subscriber + Spouse	\$89.00	\$112.00
Subscriber + Family	\$178.00	\$224.00
MA Enhanced Retirees/Med Dependents		
Subscriber Only	\$63.00	\$74.00
Subscriber + Child(ren)	\$215.00	\$256.00
Subscriber + Spouse	\$215.00	\$256.00
Subscriber + Family	\$367.00	\$438.00



Premium Rates for Other Member Groups 2020 Recommendation

100% Contributory Subscribers & COBRA Participants:

- Employee Premium + 2020 Assumed Employer Premium + Tobacco surcharge (\$0 or \$60)
 - Vary based on Medicare status, coverage, and tier.
- Tobacco Wellness surcharge also applies for Active, COBRA, and 80/20 Non-Medicare Retirees.

• 50% contributory Subscribers:

- Employee Premium + (50% x 2020 Assumed Employer Premium) + Tobacco surcharge (\$0 or \$60)
 - Vary based on Medicare status, coverage, and tier.
- Tobacco Wellness surcharge also applies for Active, COBRA, and 80/20 Non-Medicare Retirees
- Medicare Advantage subscribers will not add more than the fully insured premium + administrative costs to the Non-contributory premiums in the same tier.

National Guard, Firefighters, and Emergency Medical Personnel:

- (Employee Premium + 2020 Assumed Employer Premium) x 120% + Tobacco surcharge (\$0 or \$60)
 - Vary based on coverage and tier.
- The additional 20% rate factor to protect against adverse selection (See §135-48.58 NC General Statutes)
- If the tobacco attestation is not complete, the \$60 tobacco surcharge applies.



2020 Premium Rates – Requires Board Vote

Employer/Retirement System Contributions

✓ Conditionally approve a 4% increase in employer/Retirement Systems contributions for permanent employees and retirees, as assumed from the expected FY 2020 State Budget and shown on page 3 of this presentation.

80/20 and 70/30 Plan (Self-funded)

✓ Approve the 2020 Employee premium rates for the 80/20 and 70/30 plans, as shown on page 4 of this presentation.

High Deductible Health Plan

✓ Conditionally approve a 4% increase in the employer premium rate for HDHP as shown on page 5 of this presentation, and approve the 2020 Employee premium.

Medicare Advantage Plan

✓ Conditionally approve a 4% increase in the employer premium rate for HDHP as shown on page 6 of this presentation, and approve the 2020 employee premium.

Other Member Groups (50% and 100% contributory; COBRA; National Guard, Firefighters, etc.)

✓ Approve premium rate policies for "other member groups," as described on page 7 of this presentation.



Appendix: Detailed Rate Sheets

Active Employees and COBRA Recommended 2020 Premium Rates

	80/20 Plan Tobacco Attestation Complete? **		70/30 Plan Tobacco Attestation Complete? **		Employer
Active Employee Group *	Yes	No	Yes	No	Contribution
Active Employees					
Subscriber Only	\$50.00	\$110.00	\$25.00	\$85.00	\$539.36
Subscriber + Child(ren)	\$305.00	\$365.00	\$218.00	\$278.00	\$539.36
Subscriber + Spouse	\$700.00	\$760.00	\$590.00	\$650.00	\$539.36
Subscriber + Family	\$720.00	\$780.00	\$598.00	\$658.00	\$539.36
Job Share Employees (50% Contributory)					
Subscriber Only	\$319.68	\$379.68	\$294.68	\$354.68	\$269.68
Subscriber + Child(ren)	\$574.68	\$634.68	\$487.68	\$547.68	\$269.68
Subscriber + Spouse	\$969.68	\$1,029.68	\$859.68	\$919.68	\$269.68
Subscriber + Family	\$989.68	\$1,049.68	\$867.68	\$927.68	\$269.68
LOA, Direct Bill & COBRA					
(100% Contribution)					
Subscriber Only	\$589.36	\$649.36	\$564.36	\$624.36	\$0.00
Subscriber + Child(ren)	\$844.36	\$904.36	\$757.36	\$817.36	\$0.00
Subscriber + Spouse	\$1,239.36	\$1,299.36	\$1,129.36	\$1,189.36	\$0.00
Subscriber + Family	\$1,259.36	\$1,319.36	\$1,137.36	\$1,197.36	\$0.00

^{*} Assuming a 4% appropriations increase from the General Assembly for FY 2020 (\$6,348)

NO = Subscriber is a tobacco user and has **not** agreed to participate in a cessation program.



^{**} Tobacco Attestation:

YES = Subscriber is not a tobacco user **or** has agreed to participate in a cessation program.

Non-Medicare Retirees and Disabled Members

Recommended 2020 Premium Rates

	80/20 Plan Tobacco Attestation Complete? **			Retirement System
Non-Contributory Non-Medicare Members*	Yes	No	70/30 Plan	Contribution
Subscriber and All Dependents are Non-Medicare				
Subscriber Only	\$50.00	\$110.00	\$0.00	\$539.36
Subscriber + Child(ren)	\$305.00	•	\$218.00	\$539.36
Subscriber + Spouse	\$700.00	•	\$590.00	\$539.36
Subscriber + Family	\$720.00		\$598.00	\$539.36
Medicare Primary for One or More Dependent(s) Medicare Primary Dependents on MA Base Plan				
Subscriber + Child(ren)	\$162.00	\$222.00	\$112.00	\$539.36
Subscriber + Spouse	\$162.00	\$222.00	\$112.00	\$539.36
Subscriber + Family	\$274.00	\$334.00	\$224.00	\$539.36
Medicare Primary Dependents on MA Enhanced Plan				
Subscriber + Child(ren)	\$232.00	\$292.00	\$182.00	\$539.36
Subscriber + Spouse	\$232.00	\$292.00	\$182.00	\$539.36
Subscriber + Family	\$414.00	\$474.00	\$364.00	\$539.36
Medicare Primary Dependents on 70/30 Plan				
Subscriber + Child(ren)	\$205.00	\$265.00	\$155.00	\$539.36
Subscriber + Spouse	\$475.00	\$535.00	\$425.00	\$539.36
Subscriber + Family	\$494.00	\$554.00	\$444.00	\$539.36

^{*} Assuming a 4% appropriations increase from the General Assembly for FY 2020 (\$6,348)

YES = Subscriber is not a tobacco user **or** has agreed to participate in a cessation program.

NO = Subscriber is a tobacco user and has **not** agreed to participate in a cessation program.

MA = Medicare Advantage



^{**} Tobacco Attestation:

50% Contributory Non-Medicare Retirees Recommended 2020 Premium Rates

	80/20 Plan Tobacco Attestation Complete? **			Retirement System
50% Contributory Non-Medicare Retirees *	Yes	No	70/30 Plan	Contribution
Retiree and All Dependents are Non-Medicare				
Subscriber Only	\$319.68	\$379.68	\$269.68	\$269.68
Subscriber + Child(ren)	\$574.68	\$634.68	\$487.68	\$269.68
Subscriber + Spouse	\$969.68	\$1,029.68	\$859.68	\$269.68
Subscriber + Family	\$989.68	\$1,049.68	\$867.68	\$269.68
Medicare Primary for One or More Dependent(s) Medicare Primary Dependents on MA Base Plan				
Subscriber + Child(ren)	\$431.68	\$491.68	\$381.68	\$269.68
Subscriber + Spouse	\$431.68	\$491.68	\$381.68	\$269.68
Subscriber + Family	\$543.68	\$603.68	\$493.68	\$269.68
Medicare Primary Dependents on MA Enhanced Plan				
Subscriber + Child(ren)	\$501.68	\$561.68	\$451.68	\$269.68
Subscriber + Spouse	\$501.68	\$561.68	\$451.68	\$269.68
Subscriber + Family	\$683.68	\$743.68	\$633.68	\$269.68
Medicare Primary Dependents on 70/30 Plan				
Subscriber + Child(ren)	\$474.68	\$534.68	\$424.68	\$269.68
Subscriber + Spouse	\$744.68	\$804.68	\$694.68	\$269.68
Subscriber + Family	\$763.68	\$823.68	\$713.68	\$269.68

^{*} Assuming a 4% appropriations increase from the General Assembly for FY 2020 (\$6,348)

YES = Subscriber is not a tobacco user <u>or</u> has agreed to participate in a cessation program.

NO = Subscriber is a tobacco user and has **not** agreed to participate in a cessation program.

MA = Medicare Advantage



^{**} Tobacco Attestation:

100% Contributory Non-Medicare Retirees

Recommended 2020 Premium Rates

	80/20 Plan Tobacco Attestation Complete? **			Retirement System
100% Contributory Non-Medicare Retirees *	Yes	No	70/30 Plan	Contribution
Retiree and All Dependents are Non-Medicare				
Subscriber Only	\$589.36	\$649.36	\$539.36	\$0.00
Subscriber + Child(ren)	\$844.36	\$904.36	\$757.36	\$0.00
Subscriber + Spouse	\$1,239.36	\$1,299.36	\$1,129.36	\$0.00
Subscriber + Family	\$1,259.36	\$1,319.36	\$1,137.36	\$0.00
Medicare Primary for One or More Dependent(s) Medicare Primary Dependents on MA Base Plan				
Subscriber + Child(ren)	\$701.36	\$761.36	\$651.36	\$0.00
Subscriber + Spouse	\$701.36	\$761.36	\$651.36	\$0.00
Subscriber + Family	\$813.36	\$873.36	\$763.36	\$0.00
Medicare Primary Dependents on MA Enhanced Plan				
Subscriber + Child(ren)	\$771.36	\$831.36	\$721.36	\$0.00
Subscriber + Spouse	\$771.36	\$831.36	\$721.36	\$0.00
Subscriber + Family	\$953.36	\$1,013.36	\$903.36	\$0.00
Medicare Primary Dependents on 70/30 Plan				
Subscriber + Child(ren)	\$744.36	\$804.36	\$694.36	\$0.00
Subscriber + Spouse	\$1,014.36	\$1,074.36	\$964.36	\$0.00
Subscriber + Family	\$1,033.36	\$1,093.36	\$983.36	\$0.00

^{*} Assuming a 4% appropriations increase from the General Assembly for FY 2020 (\$6,348)

YES = Subscriber is not a tobacco user <u>or</u> has agreed to participate in a cessation program.

NO = Subscriber is a tobacco user and has **not** agreed to participate in a cessation program.

MA = Medicare Advantage



^{**} Tobacco Attestation:

Medicare Primary Subscribers Recommended 2020 Premium Rates

	Medicare Advantage			Retirement
	Base	Enhanced	Medicare	System
Non-Contributory Medicare Primary Subscribers *	Plan	Plan	70/30 Plan	Contribution
Medicare Primary for Retiree and One or More Dependents				
Subscriber Only	\$0.00	\$74.00	\$0.00	\$419.10
Subscriber + Child(ren)	\$112.00	\$256.00	\$155.00	\$419.10
Subscriber + Spouse	\$112.00	\$256.00	\$425.00	\$419.10
Subscriber + Family	\$224.00	\$438.00	\$444.00	\$419.10
Non-Medicare Primary for Dependent(s)				
Dependents on 80/20 Plan				
Subscriber + Child(ren)	\$255.00	\$329.00	\$255.00	\$419.10
Subscriber + Spouse	\$650.00	\$724.00	\$650.00	\$419.10
Subscriber + Family	\$670.00	\$744.00	\$670.00	\$419.10
Dependents on 70/30 Plan				
Subscriber + Child(ren)	\$218.00	\$292.00	\$218.00	\$419.10
Subscriber + Spouse	\$590.00	\$664.00	\$590.00	\$419.10
Subscriber + Family	\$598.00	\$672.00	\$598.00	\$419.10

^{*} Assuming a 4% appropriations increase from the General Assembly for FY 2020 (\$4,933)

50% Contributory Medicare Primary Subscribers Recommended 2020 Premium Rates

	Medicare Advantage			Retirement
	Base	Enhanced	Medicare	System
50% Contributory Medicare Retirees *	Plan	Plan	70/30 Plan	Contribution
Medicare Primary for Retiree and One or More Dependents				
Subscriber Only	\$112.00	\$182.00	\$209.55	\$209.55
Subscriber + Child(ren)	\$224.00	\$364.00	\$364.55	\$209.55
Subscriber + Spouse	\$224.00	\$364.00	\$634.55	\$209.55
Subscriber + Family	\$336.00	\$546.00	\$653.55	\$209.55
Non-Medicare Primary for Dependent(s)				
Dependents on 80/20 Plan				
Subscriber + Child(ren)	\$367.00	\$437.00	\$464.55	\$209.55
Subscriber + Spouse	\$762.00	\$832.00	\$859.55	\$209.55
Subscriber + Family	\$782.00	\$852.00	\$879.55	\$209.55
Dependents on 70/30 Plan				
Subscriber + Child(ren)	\$330.00	\$400.00	\$427.55	\$209.55
Subscriber + Spouse	\$702.00	\$772.00	\$799.55	\$209.55
Subscriber + Family	\$710.00	\$780.00	\$807.55	\$209.55

^{*} Assuming a 4% appropriations increase from the General Assembly for FY 2020 (\$4,933)



COBRA and 100% Contributory Medicare Primary Subscribers Recommended 2020 Premium Rates

	Medicare Advantage			Retirement
	Base	Enhanced	Medicare	System
100% Contributory Medicare Primary Subscribers *	Plan	Plan	70/30 Plan	Contribution
Medicare Primary for Retiree and One or More Dependents				
Subscriber Only	\$112.00	\$182.00	\$419.10	\$0.00
Subscriber + Child(ren)	\$224.00	\$364.00	\$574.10	\$0.00
Subscriber + Spouse	\$224.00	\$364.00	\$844.10	\$0.00
Subscriber + Family	\$336.00	\$546.00	\$863.10	\$0.00
Non-Medicare Primary for Dependent(s)				
Dependents on 80/20 Plan				
Subscriber + Child(ren)	\$367.00	\$437.00	\$674.10	\$0.00
Subscriber + Spouse	\$762.00	\$832.00	\$1,069.10	\$0.00
Subscriber + Family	\$782.00	\$852.00	\$1,089.10	\$0.00
Dependents on 70/30 Plan				
Subscriber + Child(ren)	\$330.00	\$400.00	\$637.10	\$0.00
Subscriber + Spouse	\$702.00	\$772.00	\$1,009.10	\$0.00
Subscriber + Family	\$710.00	\$780.00	\$1,017.10	\$0.00

^{*} Assuming a 4% appropriations increase from the General Assembly for FY 2020 (\$4,933)



Firefighters, Rescue Squad Workers, and National Guard Recommended 2020 Premium Rates

Firefighters, Rescue Squad Workers,	80/20 Plan Tobacco Attestation Complete? **		70/30 Plan Tobacco Attestation Complete? **		Employer
and National Guard *	Yes	No	Yes	No	Contribution
Subscriber Only	707.23	767.23	677.23	737.23	\$0.00
Subscriber + Child(ren)	\$1,013.23	\$1,073.23	\$908.83	\$968.83	\$0.00
Subscriber + Spouse	\$1,487.23	\$1,547.23	\$1,355.23	\$1,415.23	\$0.00
Subscriber + Family	\$1,511.23	\$1,571.23	\$1,364.83	\$1,424.83	\$0.00

^{*} Assuming a 4% appropriations increase from the General Assembly for FY 2020 (\$6,348)

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^{**} Tobacco Attestation:









Open Enrollment Update

Board of Trustees Meeting

August 27, 2019

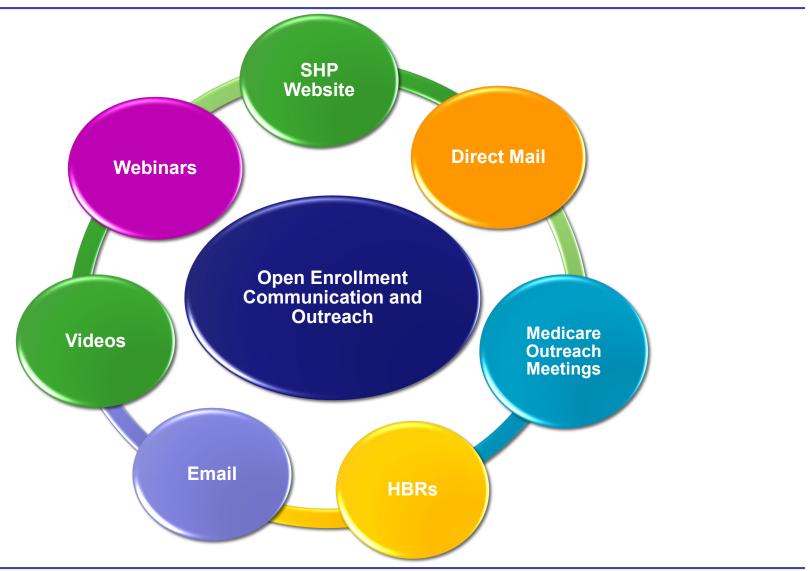
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Open Enrollment Dates Finalized



- Open Enrollment will be held Nov. 2-19, 2019.
- Plan staff is working with all vendors and employing units in preparation for this updated timeline.
- The Eligibility and Enrollment Support Center will have extended hours during Open Enrollment:
 - Monday-Friday, 8 a.m. 10 p.m.
 - Saturdays, 8 a.m. 5 p.m.
 - Sundays, Noon 5 p.m.

Open Enrollment Communication Strategy





Open Enrollment Communication Update

HBR Trainings

- HBR training sessions have been rescheduled.
 - The Plan will host 5 webinars in September.
 - Additional trainings in partnership with NC Flex will also be held in-person at various locations across the state.

Medicare Outreach Events

- Medicare Outreach events scheduled for September and October across the state.
 - Invites have been mailed.

Member Outreach

- Multiple webinars for members will be offered in October and November.
- All members will receive a Decision Guide by the end of October.
- All members will receive a new ID card by the end of December.













Financial Update Board of Trustees

August 27, 2019

A Division of the Department of State Treasurer

Financial Results: Actual vs. Budgeted Fiscal Year to Date June 2019

Fiscal Year 2019	Actual thru JUN 2019	Authorized Budget (per Segal 4-02-19)	Variance Fav/(Unfav) Budget
Beginning Cash Balance	\$1.063b	\$971.1m	\$91.7m
Plan Revenue	\$3.661b	\$3.656b	\$4.1m
Net Claims Payments	\$3.108b	\$3.288b	\$180.9m
Medicare Advantage Premiums	\$188.2m	\$213.6m	\$25.3m
Net Administrative Expenses	\$130.9m	\$196.1m	\$65.3m
Total Plan Expenses	\$3.427b	\$3.698b	\$271.5m
Net Income/(Loss)	\$233.9m	(\$41.7m)	\$275.6m
Ending Cash Balance	\$1.296b	\$929.5m	\$367.2m



Financial Results Actual vs. Budgeted Fiscal Year to Date June 2019

Per Member Per Month (PMPM) Analysis

Fiscal Year 2019	Actual thru JUN 2019	Authorized Budget (per Segal 4-02-19)	Variance Fav/(Unfav) Budget
Plan Revenue	\$417.36	\$421.27	(\$3.91)
Net Claims Payments	\$354.91	\$379.26	\$24.35
Medicare Advantage Premiums	\$21.50	\$24.63	\$3.14
Net Administrative Expenses	\$14.94	\$22.62	\$7.67
Total Plan Expenses	\$391.35	\$426.51	\$35.16
Net Income/(Loss)	\$26.01	(\$5.24)	\$31.25

Comparing actual results to the budget projection on a PMPM basis helps correct for changes in membership that occurred during the year.





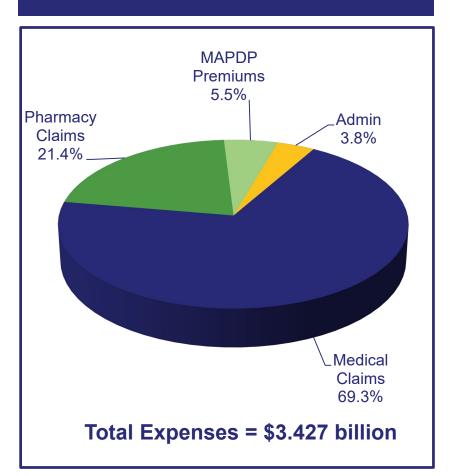
Financial Results: Fiscal Year to Date June 2019 [FY19/FY18]

Fiscal Year 2019	Actual thru JUN 2019	Actual thru JUN 2018	Variance Fav/(Unfav)
Beginning Cash Balance	\$1.063b	\$912m	\$151m
Plan Revenue	\$3.661b	\$3.482b	\$179m
Net Claims Payments	\$3.108b	\$2.974b	(\$134m)
Medicare Advantage Premiums	\$188.2m	\$211.1m	\$22.9m
Net Administrative Expenses	\$130.9m	\$145.9m	\$15.0m
Total Plan Expenses	\$3.427b	\$3.331b	(\$96m)
Net Income/(Loss)	\$233.9m	\$150.8m	\$83.1m
Ending Cash Balance	\$1.296b	\$1.063b	\$233m

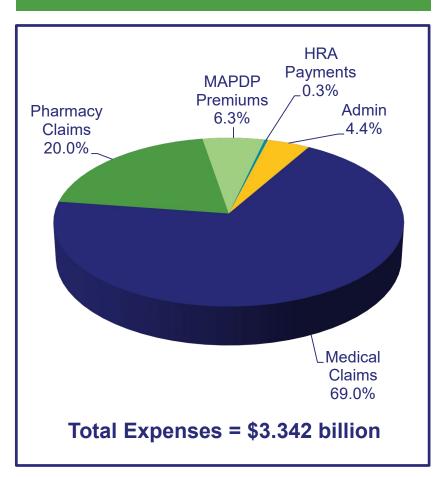


Allocation of Total Expenditures

Fiscal YTD June 2019



Fiscal Year 2018



Sources: BCBSNC Net Disbursements reports; Financial Status Reports FY-YTD





^{*}After rebates

Financial Results: Actual vs. Budgeted Calendar Year to Date June 2019

Calendar Year 2019	Actual thru JUN 2019	Authorized Budget (per Segal 4-02-19)	Variance Fav/(Unfav) Budget
Beginning Cash Balance	\$1.118b	\$1.118b	\$0.0m
Plan Revenue	\$1.831b	\$1.823b	\$8.0m
Net Claims Payments	\$1.501b	\$1.531b	\$29.6m
Medicare Advantage Premiums	\$85.0m	\$86.8m	\$1.8m
Net Administrative Expenses	\$66.1m	\$131.4m	\$65.2m
Total Plan Expenses	\$1.652b	\$1.749b	\$96.7 m
Net Income/(Loss)	\$179.0m	\$74.4m	\$104.7m
Ending Cash Balance	\$1.296b	\$1.192b	\$104.7m



