

**RUSO: RATE COMPARISON - MEDICAL & RX
FULLY INSURED MEDICARE PLANS (MEDICARE RETIREES)**

BEST AND FINAL OFFERS

Medical Plan Vendor	CURRENT - OSEEGIB (HealthChoice)	Blue Cross Blue Shield of OK	UHC
Rx Vendor		Blue Cross Blue Shield of OK	UHC
Medical PLAN			
Inpatient Hospital Fees			
Days 1-60	\$1,068	\$1,068	\$1,068
Days 61-90	\$267 a day	\$267 a day	\$267 a day
Days 91-150	\$534 a day	\$534 a day	\$534 a day
Beyond day 150	100% of eligible charges for 365 additional days	100% of eligible charges for 365 additional days	100% of eligible charges for 365 additional days
Blood Deductible	Approved charges for first 3 pints	Approved charges for first 3 pints	Approved charges for first 3 pints
Skilled Nursing Facility Care			
Days 1-20	\$0	\$0	\$0
Days 21-100	Up to \$133.50 a day	Up to \$133.50 a day	Up to \$133.50 a day
Physician Services			
First \$135 of Medicare-approved amounts	\$0	\$0	\$0
Remainder of Medicare-approved amounts	20%	20%	20%
Part B excess charges above Medicare-approved amounts	100% of Part B excess charges	100% of Part B excess charges	100% of Part B excess charges
Blood deductible (outpatient)			
Remainder of Medicare-approved outpatient amounts	20%	20%	20%
Part D			
High			
Pharmacy Deductible	N/A	None	None
Cost Sharing/Copay 25% - Member's share \$601.25 75% - Plan's share \$1,803.75	Plan pays allowed charges after Member copay is satisfied. Member Copay: Tier 1/2 (\$100 or less) - \$25 Tier 1/2 (\$100 or more) - 25% up to \$50 Tier 3 (\$100 or less) - \$50 Tier 3 (\$100 or more) - 50% up to \$100	Member Copays: Generic (Retail) - 25% up to \$25 max Brand (Retail) - 25% up to \$50 max NP Brand (Retail) - 50% up to \$100 max Specialty (Retail) - 50% up to \$100 max Mail order (90 day supply)- 2.5 x retail	Member copays: Tier 1 (Retail) - \$25 Tier 2 (Retail) - Min: 25% Max: \$50 Tier 3 (Retail) - Min: 50% Max: \$100 Tier 4 (Retail) - Min: 50% Max: \$100 Mail Order (90 day supply) - 2.0 x retail
Coverage Gap	No Gap - Unlimited	No Gap - Unlimited	No Gap - Unlimited
Annual Out-Of-Pocket Maximum	\$4,550	\$4,550	\$4,550
Coverage after Annual OOP Max	100%	Member Pays \$2.50 or 5%, whichever is greater	100% Catastrophic Coverage
Low			
Pharmacy Deductible	\$295	\$310	\$310
Cost Sharing/Copay 25% - Member's share \$601.25 75% - Plan's share \$1,803.75	Plan Pays: 75% of Plan's share of next \$2,405	Member Copays: Generic (Retail) - 25% Brand (Retail) - 25% Non Preferred Brand (Retail) - 25% Specialty (Retail) - 25% Mail order (90 day supply) - 25%	Member copays: Tier 1 (Retail) - 25% Tier 2 (Retail) - 25% Tier 3 (Retail) - 25% Tier 4 (Retail) - 25% Mail Order (90 day supply) - 25%
Coverage Gap (total spend)	\$2,830	\$2,830	\$2,830
Annual Out-Of-Pocket Maximum	\$4,350	\$4,550	\$4,550
Coverage after Annual OOP Max	100%	Member Pays \$2.50 or 5%, whichever is greater	100% Catastrophic Coverage

**RUSO: RATE COMPARISON - MEDICAL & RX
FULLY INSURED MEDICARE PLANS (MEDICARE RETIREES)**

BEST AND FINAL OFFERS

	CURRENT - OSEEGIB	Blue Cross Blue Shield of OK	UHC
PREMIUM / COST	2010 Rates	2010 Rates ⁽²⁾	2010 Rates
Admin Fee			
High Plan w/Part D (65 - 69)	\$289.42	\$313.97	\$294.20
High Plan w/Part D (70+)	\$289.42	\$359.27	\$294.20
Low Plan w/ Part D (65 - 69)	\$236.10	\$238.50	\$233.46
Low Plan w/ Part D (70+)	\$236.10	\$283.80	\$233.46
Without Part D (65 - 69)	NA ⁽¹⁾	\$171.10	\$185.30
Without Part D (70 +)	NA ⁽¹⁾	\$216.40	\$185.30
Est. Monthly Cost	\$440,245	\$521,178	\$446,127
Est. Annual Cost (Yr 1)	\$5,282,941	\$6,254,136	\$5,353,518
RATE GUARANTEE	1 year	1 year	1 year

Notes:	(1) OSEEGIB does not offer a Supplement Plan without Part D rather they offer the same plan with Part D but without the subsidy. Members electing this option would no longer have a Part D plan.	(1) Part D Premiums: High - \$142.87 Low - \$67.40 (2) BCBS of OK rates are shown for Ages 65-69 who are enrolled in Medicare Part B 6 months or longer: Age 65-69 new to Medicare: \$136.90 Age 65-69 not new to Medicare \$171.10 Age 70+ new to Medicare \$188.20 Age 70+ not new to Medicare \$216.40 (3) No grace period - entities would have to front the monies for retirees and reconcile OTRS and Retiree payments	Ovations Standard Formulary for both PDP plans used. Minimum participation in RX plan is 51 eligible retirees (1) Part D Rates: High - \$108.90 Low - \$48.16
--------	---	---	---

Estimated Enrollment	Medicare Retirees			
	EE Only	EE/Sp	EE + 1 Child	TOTAL
High Option with Part D (65 - 69)	338	73	1	412
High Option with Part D (70+)	588	154	2	744
Low Option with Part D (65 - 69)	22	3	0	25
Low Option with Part D (70+)	73	13	1	87
Without Part D (65 - 69)	2	0	0	2
Without Part D (70 +)	4	1	0	5
Global Health/Care/P'Care	15	4	0	19
Total	1,025	265	4	1,294