



**RENEWAL RATE SUMMARY FOR
CITY OF HUDSON**

Renewal Effective: 1/1/2017
Group Number: G01885
County: Summit
Network: SC Premier

The rates presented are applicable to the SC Premier network. Please see SummaCare's Provider Directory for a complete listing of hospitals, physicians and other applicable providers within the selected network.

Current GAC Benefit Plan Design And Monthly Premiums		
Coverage	PPO 9120-6E & Rx Rider BTG	
	Employees	Premium
Single	32	\$534.99
Employee & Spouse	27	\$1,102.07
Employee & Child(ren)	12	\$1,035.19
Family	60	\$1,669.14
Monthly Premiums	131	\$159,446
Renewal GAC Benefit Plan Design And Monthly Premiums		
Coverage	PPO 9120-6E & Rx Rider BTG	
	Employees	Premium
Single	32	\$572.42
Employee & Spouse	27	\$1,179.19
Employee & Child(ren)	12	\$1,107.64
Family	60	\$1,785.96
Monthly Premiums	131	\$170,605
Premium Increase:		7.00%
Rates Do Not Include the \$6.00 Per Contract NEO HRA Fee		

Proposed rates include required fees and taxes related to the Affordable Care Act. All taxes and fees are subject to state premium tax, and are averaged over the length of the contract period if spanning more than one year. Fees are subject to change in the event of future regulatory requirements.

APPROVED

JANE HOVINGTON 11/17/16
 CITY MANAGER DATE