## INTERNAL SERVICES FUND

The Internal Services Fund was established in July 2006 for the fiscal year ending June 30, 2006. At the time the fund was established, the Weston Public Schools were partially self-fund, with stop-loss insurance that covered specific plan participants with claims that exceed \$175,000 or aggregate claims for all plan participants that exceed 120% of expected. The district has maintained the threshold for specific plan participants at \$175,000. However, in the current year Aetna decreased the district's exposure to aggregate claims by decreasing the insured level for aggregate claims to 115%.

The Internal Services Fund provides a mechanism for full disclosure of revenue and expenditures on one statement, retaining fund balances specifically for health benefits, and establishing long-term budget stability. The Board of Education is responsible for recording the transactions for the fund and preparing periodic reports. The Town is responsible for maintaining the bank accounts and providing the necessary cash flow.

The fund was established to account for all of the business transactions associated with providing employees with the health benefit program outlined in collective bargaining agreements and the Board of Education's agreements with non-represented staff. The fund has a "Revenue and Expenditure Statement" and a "Balance Sheet".

There are several revenue sources that support this fund. The largest source of funding is from the Board of Education's Operating Budget, which consists of an annual appropriation. Other sources of funding are derived from employee cost sharing, the State Teachers' Retirement Board, retiree co-pay and COBRA.

The expenditures accounted for in this fund include paid and accrued claims for medical, prescription and dental coverage, stop-loss insurance, administrative fees, Medicare supplement payments, wellness program expenses, consultant fees and \$214,840 of the district's annual liability contribution of \$464,840. The remaining \$250,000 of this liability is included in the district's operating budget under the District-Wide cost center. At the end of each fiscal period, the district's insurance carrier provides the dollar amount of the outstanding claims liability, which is recorded in the financial statements of the Town.

The district typically issues a request for proposal every other year to obtain the lowest possible cost. This process resulted in a funding change for the 2010 and 2011 fiscal periods. The competitive process enabled the district to save approximately \$500,000 in the first year by changing from partially self-funded with Anthem to fully-funded with Cigna. Despite the fact that we were fully-insured, the Boards of Education, Selectmen and Finance maintained the fund to enable the district to re-enter the partially self-funded financing option in future years. As anticipated, in the spring of 2011 the district decided to convert back to a partially self-funded program with Cigna for FY 2012 based on the proposals received through the competitive process. In FY 2013, the district issued another request for proposal, which once again resulted in projected savings of more than \$425,000 by changing insurance carriers from Cigna to Aetna.

Another critical aspect of cost containment in the area of health benefits is plan design. Over the past five years, the district transitioned approximately 94% of the employees who receive health benefits from the higher cost PPO Plan to the lower cost H.S.A. High Deductible Plan. This transition resulted in significant savings for the district.

In 2013, the PPO Plan was eliminated for all employees eligible to enroll in the H.S.A. Plan. During negotiations with the bargaining groups, the parties agreed to recognize the H.S.A. Plan as the primary health benefit plan option for their members. Employees have the ability to enroll in the PPO Plan. However, they must pay 100% of the differential between the plans. As a result, the increase in the health benefits line item in the Board of Education's Operating Budget over the past five years has been relatively flat, which is an extraordinary accomplishment given the rate of increases for health insurance in the marketplace.

In FY 2015, staff represented by the WAA and WTA contracts will contribute 14% of the cost of their health benefits and those represented by AFSCME will contribute 12%. Based on the district's claims experience, our consultant has recommended that the Administrators' Requested Budget assume a 10% trend for medical and RX claims and 5% for dental. However, the district will continue to monitor current claims and the impact on future projections, and update the budget assumptions and associated contribution from the district's operating budget if appropriate. In addition, the district reduced the budget for the cost associated with the reduction of two staff members.

FY 2015 will be the first year the district will be taxed for the Affordable Care Act (ACA). Accordingly, this budget includes \$54,707 for this expense. Our employees who participate in the district's health care plan may also be subject to a "Cadillac Tax." This is an excess tax that impacts plans that cost more than the threshold amount established by the federal government.

As of June 30, 2013, there was a balance of \$2,184,405. The projected reserve balance at the end of FY 2014 is projected to be \$1,893,548 and in FY 2015 is \$1,678,708. The decrease in fund balance from year-to-year is mostly attributed to the OPEB contributions of \$214,840 per year. Based on the reserve balance calculations provided by our consultant for the FY 2015 budget deliberations, this fund balance is well below the Market Standard Target Values Model of \$3,175,965 and the Carrier IBNR/75% ASO Corridor Model of \$2,516,475. Rather, it is \$403,892 below the lowest recommended reserve balance based on the Carrier IBNR/50% ASO Corridor Model of \$2,082,600. A copy of our consultant's exhibit of Reserve Modeling can be found on page 142. As we move forward, the Boards may want to revisit the practice of intentionally drawing down the Internal Services Fund for OPEB.

## WESTON PUBLIC SCHOOLS INTERNAL SERVICES FUND FOR HEALTH BENEFITS PROGRAM

Actual 2012  ENUES AND EX  6,124,504  853,343 283,156 106,863 0 1,243,362		Budget 2014 RES 6,314,029 753,258 310,000 145,000	Unaudited Expected 2014 6,314,029 705,420	Projected 2015 6,982,247
6,124,504 853,343 283,156 106,863	6,466,224 677,496 292,395 94,647	6,314,029 753,258 310,000	705,420	
6,124,504 853,343 283,156 106,863	6,466,224 677,496 292,395 94,647	6,314,029 753,258 310,000	705,420	
853,343 283,156 106,863	677,496 292,395 94,647	753,258 310,000	705,420	
853,343 283,156 106,863	677,496 292,395 94,647	753,258 310,000	705,420	
283,156 106,863 0	292,395 94,647	310,000		
283,156 106,863 0	292,395 94,647	310,000		789,520
106,863 0	94,647		307,015	292,500
0		147.000	84,638	84,636
1,243,362		0	0	0.,05
	1,123,935	1,208,258	1,097,073	1,166,656
7,367,866	7,590,159	7,522,287	7,411,102	8,148,903
6,120,445	6,396,273	6,161,987	6,331.706	7,090,242
0	0	0		(38,944
378,549	735,017	659,950		594,150
407,791	379,383			395,000
104,894	109,527			108,455
7,011,679	7,620,200	7,307,447	7,487,119	8,148,903
173,300	214,800	214,840	214,840	214,840
625,021	750,000	750,000	750,000	750,000
0	625,021	750,000	750,000	750,000
625,021	124,979	0	0	0
7,810,000	7,959,979	7,522,287	7,701,959	8,363,743
(442,134)	(369,820)	0	(290,857)	(214,840
ICE SHEET				
2 162 927	2 170 246	2 420 620	0.004.405	0 5 10 7 10
		3,432,030	2,934,405	2,643,548
16,419	(244,841)	0	(290,857)	(214,840)
0				
3,179,246	2,934,405	3,432,630	2,643,548	2,428,708
625,021	750,000	625,021	750,000	750,000
625,021	750,000	625,021	750.000	750,000
		,	. = 2,244	
2,996,359	2,554,225	2,807,609	2,184,405	1,893,548
(442,134)	(369,820)	0		(214,840)
		2,807,609	1,893,548	1,678,708
3,179,246	2,934.405	3,432,630	2,643,548	2,428,708
	6,120,445 0 378,549 407,791 104,894 7,011,679 173,300 625,021 0 625,021 7,810,000 (442,134) ICE SHEET 3,162,827 16,419 0 3,179,246 625,021 625,021 625,021 2,996,359 (442,134) 2,554,225	6,120,445 6,396,273 0 0 378,549 735,017 407,791 379,383 104,894 109,527 7,011,679 7,620,200 173,300 214,800  625,021 750,000 0 625,021 625,021 124,979  7,810,000 7,959,979 (442,134) (369,820)  ICE SHEET  3,162,827 3,179,246 16,419 (244,841) 0 3,179,246 2,934,405  625,021 750,000 625,021 750,000 625,021 750,000 625,021 750,000 2,996,359 2,554,225 (442,134) (369,820) 2,554,225 2,184,405	6,120,445 6,396,273 6,161,987 0 0 0 378,549 735,017 659,950 407,791 379,383 377,055 104,894 109,527 108,455 7,011,679 7,620,200 7,307,447 173,300 214,800 214,840  625,021 750,000 750,000 0 625,021 750,000 625,021 124,979 0  7,810,000 7,959,979 7,522,287  (442,134) (369,820) 0  3,179,246 2,934,405 3,432,630 625,021 750,000 625,021 625,021 750,000 625,021 625,021 750,000 625,021 625,021 750,000 625,021 2,996,359 2,554,225 2,807,609 (442,134) (369,820) 0 2,554,225 2,184,405 2,807,609	6,120,445 6,396,273 6,161,987 6,331,706 0 0 0 0 0 378,549 735,017 659,950 674,178 407,791 379,383 377,055 372,780 104,894 109,527 108,455 108,455 7,011,679 7,620,200 7,307,447 7,487,119 173,300 214,800 214,840 214,840 625,021 750,000 750,000 750,000 0 625,021 750,000 750,000 750,000 625,021 124,979 0 0 7,810,000 7,959,979 7,522,287 7,701,959 (442,134) (369,820) 0 (290,857)  3,179,246 2,934,405 3,432,630 2,643,548 625,021 750,000 625,021 750,000 3,179,246 2,934,405 3,432,630 2,643,548 625,021 750,000 625,021 750,000 625,021 750,000 625,021 750,000 625,021 750,000 625,021 750,000 2,996,359 2,554,225 2,807,609 2,184,405 (442,134) (369,820) 0 (290,857) 2,554,225 2,184,405 2,807,609 1,893,548

## Weston BOE 2014-15 Initial Reserve Modeling

Reserve Model: Market Standard Target Values

Medical IBNR:

15.75% Approx 2 Months Medical-1 Month Dental

ASO Claim Corridor:

25.00% Full Corridor to 125%

**Budget Stabilization:** 

5.00%

45.75%

Fiscal Year Ending June 30

2014

Total Actual/Expected Claims

\$ 6,942,000 (L&R Initial 10% Projection)

Claim IBNR:

\$ 1,093,365

ASO Corridor: Stabilization:

\$ 1,735,500 \$ 347,100

Combined Reserve:

\$ 3,175,965

Reserve Model: Carrier IBNR/75% ASO Corridor

Medical IBNR:

12.50% Approx 1.5 Months

ASO Claim Corridor:

18.75% 3/4 Corridor to 125% ASL

Budget Stabilization:

<u>5.00%</u>

36.25%

Fiscal Year End June 30

2014

Total Actual/Expected Claims

\$ 6.942.000 (L&R Initial 10% Projection)

Claim IBNR:

\$ 867,750

ASO Corridor:

\$ 1,301,625

Stabilization:

\$ 347,100

Combined Reserve:

\$ 2,516,475

Reserve Model: Carrier IBNR/ 50% ASO Corridor

Medical IBNR:

12.50% Approx 1.5 Months

ASO Claim Corridor:

12.50% 1/2 Corridor to 125% ASL

Budget Stabilization:

<u>5.00%</u>

30.00%

Fiscal Year End June 30

2014

Total Actual/Expected Claims

\$ 6.942.000 (L&R Initial 10% Projection)

Claim IBNR:

\$ 867,750

ASO Corridor:

\$ 867,750

Stabilization:

\$ 347,100

**Combined Reserve:** 

2,082,600

L&R/CBMD

Created:

12/17/2013