**LOUISVILLE METRO HOUSING AUTHORITY**

**HEALTH CARE INSURANCE COVERAGE**

**PROPOSAL NO. 1570 – Addendum # 1**

**HMO**

**SUBSCRIBER COVERAGE TYPES BY MONTH & YEAR**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **DATE** | **Employee Only** | **Emp & Spouse/Dependent** | **Emp & Child/Children** | **Family** | **Total Contracts** | **Total Medical** | **Total Pharmacy** | **Total Claims** |
| **1-2020** | 77 | 32 | 50 | 3 | 162 | $111,080 | $ 45,326 | $156,406 |
| 2-2020 | 76 | 32 | 50 | 3 | 161 | 80,178 | 29,322 | 109,500 |
| 3-2020 | 76 | 32 | 51 | 3 | 162 | 74,381 | 51,504 | 125,885 |
| 4-2020 | 79 | 31 | 51 | 3 | 164 | 47,047 | 37,084 | 84,131 |
| 5-2020 | 79 | 31 | 49 | 3 | 162 | 71,366 | 38,911 | 110,227 |
| 6-2020 | 81 | 32 | 49 | 3 | 165 | 44,503 | 50,881 | 95,383 |
| 7-2020 | 81 | 32 | 49 | 3 | 165 | 50,285 | 55,748 | 106,033 |
| 8-2020 | 81 | 32 | 49 | 3 | 165 | 134,002 | 43,242 | 177,244 |
| 9-2020 | 81 | 31 | 49 | 3 | 164 | 45,058 | 63,568 | 108,626 |
| 10-2020 | 81 | 31 | 49 | 3 | 164 | 73,179 | 40,723 | 113,902 |
| 11-2020 | 81 | 31 | 49 | 3 | 164 | 65,131 | 54,241 | 119,372 |
| 12-2020 | 81 | 30 | 50 | 2 | 163 | 85,307 | 50,278 | 135,585 |
| **1-2021** | 82 | 31 | 52 | 2 | 167 | 74,600 | 58,900 | $133,500 |
| 2-2021 | 82 | 31 | 52 | 2 | 167 | 51,344 | 22,316 | 73,659 |
| 3-2021 | 81 | 31 | 53 | 2 | 167 | 163,723 | 83,208 | 246,931 |
| 4-2021 | 83 | 31 | 55 | 2 | 171 | 73,446 | 47,449 | 120,895 |
| 5-2021 | 84 | 32 | 53 | 2 | 171 | 69,785 | 92,424 | 162,208 |
| 6-2021 | 85 | 33 | 53 | 1 | 172 | 130,283 | 60,988 | 191,271 |
| 7-2021 | 86 | 34 | 53 | 1 | 174 | 107,744 | 51,293 | 159,037 |
| 8-2021 | 88 | 33 | 51 | 1 | 173 | 351,684 | 100,300 | 451,984 |
| 9-2021 | 90 | 33 | 51 | 1 | 175 | 157,056 | 60,628 | 217,684 |
| 10-2021 | 91 | 33 | 50 | 1 | 175 | 151,790 | 40,742 | 192,531 |
| 11-2021 | 89 | 33 | 48 | 1 | 171 | 167,841 | 85,493 | 253,334 |
| 12-2021 | 87 | 33 | 47 | 1 | 168 | 135,039 | 86,009 | 221,048 |

**LOUISVILLE METRO HOUSING AUTHORITY**

**HEALTH CARE INSURANCE COVERAGE**

**PROPOSAL NO. 1570 – Addendum # 1**

**PPO-1 (H2)**

**SUBSCRIBER COVERAGE TYPES BY MONTH & YEAR**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **DATE** | **Employee Only** | **Emp & Spouse/Dependent** | **Emp & Child/Children** | **Family** | **Total Contracts** | **Total Medical** | **Total Pharmacy** | **Total Claims** |
| **1-2020** | 20 | 11 | 11 | 1 | 43 | $110,482 | $ 6,946 | $117,429 |
| 2-2020 | 20 | 11 | 11 | 1 | 43 | 20,409 | 7,851 | 28,260 |
| 3-2020 | 19 | 11 | 11 | 1 | 42 | 50,081 | 29,406 | 79,487 |
| 4-2020 | 20 | 11 | 11 | 1 | 43 | 21,657 | 4,979 | 26,636 |
| 5-2020 | 21 | 11 | 11 | 2 | 45 | 29,869 | 8,864 | 38,733 |
| 6-2020 | 21 | 11 | 12 | 2 | 46 | 85,011 | 7,568 | 92,579 |
| 7-2020 | 21 | 11 | 12 | 2 | 46 | 113,848 | 17,849 | 131,697 |
| 8-2020 | 23 | 11 | 12 | 2 | 48 | 58,086 | 7,903 | 65,989 |
| 9-2020 | 24 | 11 | 11 | 3 | 49 | 184,800 | 8,975 | 193,775 |
| 10-2020 | 24 | 11 | 11 | 3 | 49 | 117,715 | 7,597 | 125,312 |
| 11-2020 | 26 | 10 | 11 | 3 | 50 | 29,105 | 23,102 | 52,207 |
| 12-2020 | 27 | 10 | 11 | 3 | 51 | 31,529 | 10,828 | 42,357 |
| **1-2021** | 31 | 11 | 13 | 3 | 58 | 14,968 | 9,064 | $ 24,032 |
| 2-2021 | 31 | 11 | 12 | 3 | 57 | 16,416 | 8,594 | 25,010 |
| 3-2021 | 31 | 11 | 12 | 3 | 57 | 42,353 | 14,572 | 56,925 |
| 4-2021 | 31 | 11 | 12 | 3 | 57 | 30,234 | 9,719 | 39,953 |
| 5-2021 | 31 | 11 | 12 | 3 | 57 | 11,115 | 15,389 | 26,503 |
| 6-2021 | 32 | 11 | 11 | 3 | 57 | 24,027 | 15,770 | 39,797 |
| 7-2021 | 32 | 11 | 11 | 3 | 57 | 82,330 | 17,552 | 99,882 |
| 8-2021 | 32 | 11 | 12 | 3 | 58 | 37,210 | 11,268 | 48,478 |
| 9-2021 | 34 | 11 | 12 | 3 | 60 | 28,375 | 35,324 | 63,699 |
| 10-2021 | 34 | 11 | 13 | 3 | 61 | 34,836 | 7,099 | 41,934 |
| 11-2021 | 35 | 11 | 13 | 3 | 62 | 25,526 | 52,556 | 78,082 |
| 12-2021 | 34 | 11 | 13 | 3 | 61 | 57,955 | 17,942 | 75,897 |

***\*\*DUE TO THE LOW NUMBER OF CONTRACTS IN THE PPO-2 AND PPO-3 PLANS, UPDATED CLAIMS DATA IS NOT AVAILABLE AT THIS TIME.***