

Kenai Peninsula Borough School District
 Health Care Committee Monthly recap
 as of April 30, 2018

<u>Reserve Account</u>	<u>As of 6-30-16</u>	<u>As of 6-30-17</u>	<u>Monthly Contribution - Traditional</u>
Employee Share	578,048.09	701,399.69	Employee Share *
Employer Share	1,350,262.27	1,353,713.48	Employer Share
			392.15
			<u>1,783.73</u>
			2,175.88
			<u>Monthly Contribution - HDHP</u>
			Employee Share *
			Employer Share
			255.71
			<u>1,669.58</u>
			1,925.29

This document is provided to the Health Care Committee as a work paper to recap the contributions to and expenditures from the Health Care Plan each month. It is to be used primarily as an aid in estimating costs of the plan to determine if changes should be made in employee contribution amounts. Every effort is made to provide current and accurate information, but this information is not audited until after the end of the fiscal year.

	Number of Employees	YTD Employees	Current Month Obligations	YTD Obligations	Contributions Current Month Collected	Contributions YTD Collected
Employees						
KPEA Employees	562	5,622	220,388.30	2,204,667.30	289,484.17	2,320,678.78
KPEA Employees - HDHP	62	591	15,854.02	151,124.61	20,388.28	160,763.48
KPEA Repay EE Reserve					2,841.22	22,755.79
KPESA Employees	371	3,744	145,487.65	1,468,209.60	189,509.75	1,535,320.69
KPESA Employees - HDHP	42	381	10,739.82	97,425.51	13,369.12	101,840.92
KPESA Repay EE Reserve					1,886.64	15,055.84
Administrators	54	535	21,176.10	209,800.25	26,646.64	219,386.32
Administrators - HDHP	5	51	1,278.55	13,041.21	1,681.75	13,639.81
Admin Repay EE Reserve					270.64	2,165.12
Board Members	4	41	1,568.60	16,078.15	1,100.00	14,276.74
Board Members - HDHP	1	4	255.71	1,022.84	252.26	1,009.04
Board Repay EE Reserve					4.14	58.88
Exempt Employees	23	223	9,019.45	87,449.45	8,927.80	85,665.67
Exempt Employees - HDHP	4	31	1,022.84	7,927.01	1,119.71	8,103.26
Exempt Repay EE Reserve					117.30	935.94
Affordable Care Act **	-	-	0.00	0.00	-	-
ACA Empl Repay EE Reserve						
Total Employees on Payroll	1,128	11,223	426,791.04	4,256,745.93	557,599.42	4,501,656.28
COBRA Payers (FY18 = \$2215.88)	-	25	-	52,894.00	-	52,822.76
COBRA HD Payers (FY18 = \$1960.28)	1	10	1,960.28	19,602.80	-	23,198.41
Total Employees	1,129	11,258	428,751.32 *	4,329,242.73	557,599.42	4,577,677.45

* Current month employee obligations are a calculation of "Number of Employees" eligible for health care coverage during that month times the "Employee Share" (shown in the upper right corner of the sheet).

** Affordable Care Act (ACA) coverage is offered to employees once eligibility is determined. Eligibility is based on number of hours worked during the measurement period.

Employer						
Employer share	1,014	10,165	1,808,702.22	18,131,615.45	2,364,056.43	19,171,704.18
Employer share - HDHP	113	1,057	188,662.54	1,764,746.06	242,731.92	1,885,246.27
Total			2,426,116.08	24,225,604.24	3,164,387.77	25,634,627.90

+ Employee Share Split	Current Year Contribution Traditional	388.70	Subtotal	515,668.36	4,175,328.20
	Cobra	2,215.88	Subtotal	-	52,822.76
				515,668.36	4,228,150.96
	Current Year Contribution HDHP	252.26	Subtotal	36,811.12	285,356.51
	Cobra HD	1,960.28	Subtotal	-	23,198.41
				36,811.12	308,554.92
	Prior Year Reserve Repayment	3.45	Subtotal	5,119.94	40,971.57

Kenai Peninsula Borough School District	<u>Reserve Account</u>	<u>As of 6-30-16</u>	<u>As of 6-30-17</u>	<u>Monthly Contribution - Traditional</u>
	Employee Share	578,048.09	701,399.69	Employee Share *
Health Care Committee Monthly recap as of April 30, 2018	Employer Share	1,350,262.27	1,353,713.48	Employer Share <u>1,783.73</u>
				2,175.88

Expenditures

Since the health care plan is self-funded, both employee and employer contributions are collected and bills are paid from the accumulated funds.

	TRADITIONAL		HDHP	
	Current Month	Year-To-Date	Current Month	Year-To-Date
Claims				
Health Care Claims paid by TPA (Rehn)	2,405,371.50	20,318,813.37	54,651.77	477,967.85
Prescription Claims paid by Caremark	466,763.95	4,540,419.68	5,992.30	50,747.94
HRA		-	7,600.10	43,743.67
Total Claims Paid	<u>2,872,135.45</u>	<u>24,859,233.05</u>	<u>68,244.17</u>	<u>572,459.46</u>
Administration				
TPA (Rehn) fees and costs	48,467.43	450,155.08	1,929.88	29,700.71
TPA (Rehn) HRA fees and costs		-	399.00	2,369.50
Aetna Administration Fees	19,565.87	189,915.80	2,199.71	19,854.03
Consultant Fees	5,034.04	50,713.41	565.96	5,286.58
Stop Loss Premiums	196,567.00	1,637,319.24	22,099.25	172,599.18
Affordable Care Act Fee	-	98,544.80	-	10,554.86
Total Administration	<u>269,634.34</u>	<u>2,426,648.33</u>	<u>27,193.80</u>	<u>240,364.86</u>
Total Claims plus Administration	<u>3,141,769.79</u>	<u>27,285,881.38</u>	<u>95,437.97</u>	<u>812,824.32</u>
Adjustments				
Stop Loss reimbursements	(337,804.51)	(3,842,268.56)		
Prescription Rebates	-	(545,603.37)	-	(14,063.95)
Health Care Claims refund	-	(989.78)	-	-
Other adjustments	-	(50.00)	-	-
Total Adjustments	<u>(337,804.51)</u>	<u>(4,388,911.71)</u>	<u>-</u>	<u>(14,063.95)</u>
Total Expenditures	<u>2,803,965.28</u>	<u>22,896,969.67</u>	<u>95,437.97</u>	<u>798,760.37</u>

Obligations/Contributions

Health care obligations and contributions provide employee and employer amounts of health care contributions using different calculation methods.

Obligations are estimates of funds that employees and the district will be obligated to contribute, based on the plan year (July through June).

Returning employees are covered by the health care plan for the entire plan year, meaning the 12 month period July through June; both employee and employer are obligated to pay for 12 months of coverage. New employees pay for coverage from date of hire through June, the end of the plan year. If an employee works at all during a month, both employee and employer pay for the entire month of coverage.

Actual Contributions made by employees and benefits paid by the employer during the payroll process are shown on the sheet in the columns labeled "Collected." The division of payments is governed by the Collective Bargaining Agreements and Memorandums of Understanding between the district and the employee groups.

Employee-paid contributions are deductions from payroll checks. Employees who work 12 months make contributions each pay period. Many school district employees do not work 12 months, so contributions are collected for those employees during the 9 month period from September through May.

For this reason, contributions are generally larger than obligations for September through May and contributions are generally smaller than obligations for June, July and August.

The "Collected" columns show what is actually available for paying health care costs. The "Obligations" show what is estimated to be available by month, based on number of employees at the current rate of contributions.

**Kenai Peninsula Borough School District
Healthcare Expenditures Split
as of April 30, 2018**

Traditional Plan				HDHP			
YTD Participants	10165			YTD Participants	1057		
Net Expenditures	22,896,969.67			Net Expenditures	798,760.37		
ER - Employer Cap \$1731.45	17,600,189.25			ER - Employer Cap \$1645.61	1,739,409.77		
EE - Employee Cap \$305.55	<u>3,105,915.75</u>			EE - Employee Cap \$182.85	<u>193,272.45</u>		
Total Cap Expenditure EE/ER	20,706,105.00			Total Cap Expenditure EE/ER	1,932,682.22		
Expenditures over Cap	2,190,864.67			Expenditures over Cap	-		
50/50 Split of Expenditures over Cap	1,095,432.34			50/50 Split of Expenditures over Cap	-		
ER Expenditures Up To Cap	17,600,189.25			ER Expenditures Up To Cap	718,884.33		
ER Expenditures Above Cap	<u>1,095,432.34</u>			ER Expenditures Above Cap	<u>-</u>		
Total ER Expenditures	18,695,621.59			Total ER Expenditures	718,884.33		
EE Expenditures Up To Cap	3,105,915.75			EE Expenditures Up To Cap	79,876.04		
EE Expenditures Above Cap	<u>1,095,432.34</u>			EE Expenditures Above Cap	<u>-</u>		
Total EE Expenditures	4,201,348.09			Total EE Expenditures	79,876.04		
Total ER & EE Expenditures	22,896,969.67			Total ER & EE Expenditures	798,760.37		
Through	Traditional Summary			Through	HDHP Summary		
March 2018	YTD EXP	YTD REV	REV Less EXP	March 2018	YTD EXP	YTD REV	REV Less EXP
Employer	18,695,621.59	19,171,704.18	476,082.59	Employer	718,884.33	1,885,246.27	1,166,361.94
Employee	<u>4,201,348.09</u>	<u>4,228,150.96</u>	<u>26,802.87</u>	Employee	<u>79,876.04</u>	<u>308,554.92</u>	<u>228,678.88</u>
Totals	22,896,969.68	23,399,855.14	502,885.46	Totals	798,760.37	2,193,801.19	1,395,040.82
Obligation per Employee	Year-to-date			Obligation per Employee	Year-to-date		
388.70 EE/1783.73 ER Split	2,172.43	19,551.87		252.26 EE/1669.58 ER Split	1,921.84	17,296.56	
Monthly Cost per Employee - ER		1839.22		Monthly Cost per Employee - ER		680.12	
Monthly Cost per Employee - EE + Cobra		<u>413.32</u>		Monthly Cost per Employee - EE + Cobra		<u>75.57</u>	
		2252.53				755.69	
Current Variance		(80.10)		Current Variance		1,166.15	

Obligations indicate the funds that will be accumulated per employee per month. Expenditures are amounts that have been paid through the plan.

A positive number for "current variance" represents the amount per employee per month that is estimated to be collected above the amount spent year-to-date. A negative number represents the amount of expenditures (per employee per month) that are more than what is estimated to be collected for payment of those expenditures.

Kenai Peninsula Borough School District
Contribution Modeling with 4-Tiers

Based on April enrollment

Employee Only
Employee + Spouse
Employee + Child(ren)
Employee + Family

Traditional	HDHP	Total
163	38	201
210	26	236
103	7	110
537	44	581
1013	115	1128

Assumptions if you allow Opt Out*

Traditional	HDHP	Total
163	38	201
170	21	191
103	7	110
495	41	536
931	107	1038

Current employee contribution
Total monthly employee cont.

392.15	255.71	
397,247.95	29,406.65	426,654.60

	Multiplier	Traditional	HDHP	Total
Employee Only	1	234.00	152.58	
Employee + Spouse	1.5	351.00	228.88	
Employee + Children	1.5	351.00	228.88	
Employee + Family	2	468.00	305.17	
Total monthly employee cont.		399,321.00	26,778.64	426,099.64

Traditional	HDHP	Total
255.50	166.60	
383.25	249.91	
383.25	249.91	
511.00	333.21	
399,218.75	26,989.91	426,208.66

*Assumes 180 employees are double covered;
Half opt out; Half of these are in EE + spouse, and half in EE + Family

The current employee contribution is for 2017-18.

Kenai Peninsula Borough School District

Followup information from the April 18, 2018 meeting

- Estimated savings for applying non-PPO coinsurance to all non-PPO providers.
The estimates assume that the non-PPO coinsurance does not apply to the OOP maximum. (This is consistent with the treatment of non-PPO facility services in Anchorage.) These estimates are based on data over the past 12 months through April 2018, provided by Rehn.
 - At 70% reimbursement, the plan would save approximately \$394,000 based on the reduced reimbursement alone.
 - At 60% reimbursement, the plan would save approximately \$580,000 based on the reduced reimbursement alone.
 - If all of these non-PPO providers joined the Aetna network and offered a 20% discount, the plan would save approximately \$340,000.

- Durable medical equipment.
 - Over the past 12 months:
 - ✓ Total billed = \$10,723
 - ✓ Total PPO discount = \$3,817
 - ✓ Total paid = \$5,955
 - The benefit was similar to other groups administered by Rehn.

- The total amount paid for infertility testing was approximately \$24,000.

- The total amount paid for elective abortions was approximately \$21,000.

Prescription Coinsurance Modeling – Common prescriptions

Data provided by National Cooperative Rx

Medication	Current Copay	New Copay		
Generic				
Lisinopril 40 mg	\$5	\$0.80		
Atorvastatin 80 mg	\$5	\$3.70		
Levothyroxine 1 mg	\$5	\$3.79		
Montelukast 10 mg	\$5	\$1.71		
Sertraline 100 mg	\$5	\$0.75		
Metoprolol ER 25 mg	\$5	\$2.10		
Amlodipine 10 mg	<\$5	<\$0.50		
Metformin 1000 mg	\$5	\$0.53		
Brand – Tier 2				
Lyrica 100 mg	\$25	\$124.38		
Lamictal XR 100 mg	\$25	\$698.18		
Proair Inhaler	\$25	\$12		
Advair Dis 250/50	\$25	\$78.60		
Eliquis	\$25	\$78.00		
Bystolic 10 mg	\$25	\$68.90		
Vyvanse 40 mg	\$25	\$54.38		
Andogel Pump	\$25	\$104		
Brand – Tier 3			Preferred Alternative	
Armour Thyroid	\$50	\$60.60	Levothyroxine	\$3.79
Breo Inhaler	\$50	\$161.00	Symbicort	\$57.30
Nasonex	\$50	\$125.25	Fluticasone	\$1.37
Relpax 40 mg	\$50	\$620.29	Sumatriptan	\$0.77
Restasis	\$50	\$253.50	OTC Eye Drop	<\$5 OTC
Aczone Gel	\$50	\$357.14	Adapaline	\$16.11
Moviprep	\$50	\$48.40	PEG	\$0 ACA
Zolof 100 mg	\$50	\$127	Sertraline	\$0.75

Kenai Peninsula Borough School District

Surgery Center of Kenai Issue

The Surgery Center of Kenai is a non-PPO facility. The billed charges at SCK are significantly higher than at Central Peninsula Hospital (see the data provided below by Rehn).

Procedure	Surgery Center of Kenai (billed)	Central Peninsula Hospital (billed prior to discount)
1	\$5,859.09	\$2,148.21
2	\$10,494.50	\$5,408.00
3	\$12,928.60	\$3,234.06
4	\$14,400.00	\$4,046.00

Rehn has used a fee negotiation service to negotiate the pricing at SCK on individual claims, but this is becoming less effective. It is not possible to negotiate a long-term discount with this facility without compromising the Central Peninsula Hospital contract. If the plan were to pay these claims at 60% of submitted charges, the KPBSD would pay significantly more than if the services were received at Central Peninsula Hospital.

- Option 1: Exclude the Surgery Center of Kenai from coverage.
- Option 2: Treat the Surgery Center of Kenai the same way the plan treats non-PPO providers in Anchorage. The allowable cost will be equal to 50% of the billed charge and the services will be reimbursed at 60% of the allowable amount.

Kenai Peninsula Borough School District

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- Option 2: Treat the Surgery Center of Kenai the same way the plan treats non-PPO providers in Anchorage. The allowable cost will be equal to 50% of the billed charge and the services will be reimbursed at 60% of the allowable amount.

Kenai Peninsula Borough School District
 Cost Projection Summary - Data through March 2018

	Current Experience (4/17-3/18)	Projected 2018-19 Traditional	Projected 2018-19 HDHP	Projected 2018-19 (Combined)
Expected Claims	1,980.37	2,219.20	1,527.04	2,156.47
Administration (Rehn)	14.21	14.64	14.64	14.64
Specific Stop Loss Premium	150.74	230.12	230.12	230.12
Aggregate Stop Loss Premium	2.35	2.73	2.73	2.73
Prescription Admin Fee	0.60	0.60	0.60	0.60
Consulting Fees (PSF)	4.95	4.95	4.95	4.95
Transitional Reinsurance Fee	8.03	-	-	-
AVAP Fee	8.83	9.11	9.11	9.11
Other fees and costs	25.39	25.39	25.39	25.39
Aetna+Teledoc+MBH	18.65	19.44	19.44	19.44
HRA Utilization and Fee	3.58	-	42.03	3.81
Total	2,217.71	2,526.18	1,876.05	2,467.25

Assumptions:

- Expected Claims are based on 75% credibility for the most recent 12 month period, 25% credibility for the prior 12 month period, 9% trend and no additional margin. Current claims are net of expected stop loss reimbursement.
- Administration fees reflect base administration only, and do not include bank reconciliation, or COBRA Administration. 3% increase estimated.
- Specific stop loss premiums increased 40% 1/1/18 with another 40% increase 1/1/19; Aggregate stop loss est. increase 10%
- The Utilization Review Fee includes estimated case management charges.
- The Prescription Administration Fee is shown above on a per employee per month basis, estimated from a fee of \$0.20 per covered participant (including dependents).
- The Consulting Fee is on a flat annual basis, but is expressed above on a PEPM figure across all Borough and SD employees.
- Other fees and costs include PPO access fees, repricing fees, utilization review costs and all other incidental costs paid through Rehn

The stop loss rates shown above assume maintenance of the current \$220,000 individual deductible, and a \$1 million aggregate limit.

KPBSD Health Care Contribution Amount Information
 March 2018 Projections

1. FY18 Cap Information

	FY18 Cap Amount <u>Traditional</u>	FY18 Cap Amount <u>HDHP</u>
District (85% Traditional - 90% HDHP)	\$ 1,731.45	\$ 1,645.61
Employee (15% Traditional - 10% HDHP)	<u>\$ 305.55</u>	<u>\$ 182.85</u>
Monthly Total	\$ 2,037.00	\$ 1,828.46

2. FY18 Contributions

	FY18 Contributions <u>Traditional</u>	FY18 Contributions <u>HDHP</u>
FY18 Broker Recommended Total Amount Monthly	\$ 2,141.55	\$ 1,876.39
Excess above Cap	\$ 104.55	\$ 47.93
50% of Excess	\$ 52.28	\$ 23.97
District	\$ 1,783.73	\$ 1,669.58
Employee	<u>\$ 357.83</u>	<u>\$ 206.81</u>
Total FY18 Amounts Per Broker Rec	\$ 2,141.55	\$ 1,876.39
Actual FY18 Employee Rates set by Health Care Sub-Committee	388.7	252.26

**3. FY19 Contributions Status Quo
 Using March 2018 Claims Usage data**

	FY19 Contributions <u>Traditional</u>	FY19 Contributions <u>HDHP</u>
FY19 Broker Recommended Amount Monthly	\$ 2,526.18	\$ 1,876.05
Amount above/below Cap	\$ 489.18	\$ 47.59
50% of Excess/Reduction	\$ 244.59	\$ 23.80
District	\$ 1,976.04	\$ 1,688.45
Employee	<u>\$ 550.14</u>	<u>\$ 206.64</u>
Total FY19 Amounts Per Broker Rec	\$ 2,526.18	\$ 1,895.09

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Kenai Peninsula Borough School District
 Cost Projection Summary - Data through November 2017

	Current Experience (12/16-11/17)	Projected 2018-19 Traditional	Projected 2018-19 HDHP	Projected 2018-19 (Combined)
Expected Claims	1,891.00	2,175.43	1,522.80	2,120.89
Administration (Rehn)	14.21	14.64	14.64	14.64
Specific Stop Loss Premium	136.98	220.54	220.54	220.54
Aggregate Stop Loss Premium	2.35	2.99	2.99	2.99
Utilization Review Fee	4.81	-	-	-
Prescription Admin Fee	0.60	0.60	0.60	0.60
Consulting Fees (PSF)	4.62	4.62	4.62	4.62
Transitional Reinsurance Fee	3.90	-	-	-
AVAP Fee	8.71	8.99	8.99	8.99
Aetna+Teledoc+MBH	15.16	19.44	19.44	19.44
HRA Utilization and Fee	2.23	-	31.25	2.38
Total	2,084.56	2,447.24	1,825.86	2,395.09
Difference from Current	N/A	362.68	-258.70	310.52
% Change from Current	N/A	17%	-12%	15%

Assumptions:

- Expected Claims are based on 75% credibility for the most recent 12 month period, 25% credibility for the prior 12 month period, 9% trend and no additional margin. Current claims are net of expected stop loss reimbursement.
- Administration fees reflect base administration only, and do not include bank reconciliation, or COBRA Administration. 3% increase estimated.
- Stop loss premiums are estimated to increase 40% 1/1/18 with another 30% increase 1/1/19
- The Utilization Review Fee includes estimated case management charges.
- The Prescription Administration Fee is shown above on a per employee per month basis, estimated from a fee of \$0.20 per covered participant (including dependents).
- The Consulting Fee is on a flat annual basis, but is expressed above on a PEPM figure across all Borough and SD employees.

The stop loss rates shown above assume maintenance of the current \$220,000 individual deductible, and a \$1 million aggregate limit.

KPBSD Health Care Contribution Amount Information
November 2017 Projections

1. FY18 Cap Information

	FY18 Cap Amount <u>Traditional</u>	FY18 Cap Amount <u>HDHP</u>
District (85% Traditional - 90% HDHP)	\$ 1,731.45	\$ 1,645.61
Employee (15% Traditional - 10% HDHP)	\$ <u>305.55</u>	\$ <u>182.85</u>
Monthly Total	\$ 2,037.00	\$ 1,828.46

2. FY18 Contributions

	FY18 Contributions <u>Traditional</u>	FY18 Contributions <u>HDHP</u>
FY18 Broker Recommended Total Amount Monthly	\$ 2,141.55	\$ 1,876.39
Excess above Cap	\$ 104.55	\$ 47.93
50% of Excess	\$ 52.28	\$ 23.97
District	\$ 1,783.73	\$ 1,669.58
Employee	\$ <u>357.83</u>	\$ <u>206.81</u>
Total FY18 Amounts Per Broker Rec	\$ 2,141.55	\$ 1,876.39
Actual FY18 Employee Rates set by Health Care Sub-Committee	388.7	252.26

3. FY19 Contributions Status Quo

	FY19 Contributions <u>Traditional</u>	FY19 Contributions <u>HDHP</u>
FY19 Broker Recommended Amount Monthly	\$ 2,447.24	\$ 1,825.86
Amount above/below Cap	\$ 410.24	\$ (2.60)
50% of Excess/Reduction	\$ 205.12	\$ (1.30)
District	\$ 1,936.57	\$ 1,643.27
Employee	\$ <u>510.67</u>	\$ <u>182.59</u>
Total FY19 Amounts Per Broker Rec	\$ 2,447.24	\$ 1,825.86

Stacey Cockroft

From: Stacey Cockroft
Sent: Tuesday, May 15, 2018 11:47 AM
To: Bruce Rife; cmsavoie@psfinc.com; Dave Jones; David Brighton; Elizabeth Hayes; Joel Burns; John O'Brien; John Sanborn; Kristen Vix; Matt Fischer; Stephanie Bohrsen; Tracy Silta; Vaughn Dosko
Subject: Specific Stop Loss Report 4/30/2018

Below is the specific stop loss report through 4/30/2018.

Subscriber	Relationship	Total Amt	Amt over Spec	Amt Requested	Amt Reimbursed	Non Reimbursed Expenses	Amt Open
1	Dependent	\$571,593.63	\$351,593.63	\$205,532.81	\$205,532.81		\$146,060.82
2	Dependent	\$551,386.95	\$331,386.95	\$192,374.89	\$192,374.89		\$139,012.06
		\$1,122,980.58	\$682,980.58	\$397,907.70	\$397,907.70	\$0.00	\$285,072.88

Thank you,

Stacey Cockroft

Kenai Peninsula Borough School District
Employee Benefits Manager
148 N. Binkley St. Soldotna, AK 99669
Phone: (907) 714-8879 Fax: (907) 262-9645
scockroft@kpbsd.k12.ak.us



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