MARKETING OVERVIEW

SLEBC

Effective Date: 01/01/2025

| CURRENT ENROLLMENT Medical - Employee Medical - Family | 102 | | | | | | |
|--|---|---|---|---|--|---|---|
| Total Medical Lives | 305 407 | | | | | | |
| | | FIRM | FIRM | PENDING | PENDING | PENDING | PENDING |
| CONTRACT TERMS | 2024 CURRENT | INITIAL RENEWAL | REVISED RENEWAL | OPTION 2 | OPTION 3 | OPTION 4 | OPTION 5 |
| Stop Loss Carrier MGU Third Party Administrator | GRANULAR DIRECT MERITAIN | GRANULAR DIRECT MERITAIN | GRANULAR DIRECT MERITAIN | GERBER LIFE ECU MERITAIN | LIBERTY MUTUAL DIRECT MERITAIN | COMPANION PACE MERITAIN | SYMETRA DIRECT MERITAIN |
| Specific Deductible Contract Type (Specific) Contract Type (Aggregate) Included in Specific Included in Aggregate Run In Limit on Aggregate No New Laser at Renewal Option Includes Plan Document Mirroring Rate Cap Percentage at Renewal | \$135,000 PAID PAID Medical, RX Medical, RX \$0 Y Y 40% | \$135,000 PAID PAID Medical, RX Medical, RX \$0 Y Y 40% | \$135,000 PAID PAID Medical, RX Medical, RX \$0 Y Y 40% | \$135,000 24 / 12 24 / 12 Medical, RX Medical, RX \$0 Y N 45% | \$135,000 24 / 12 24 / 12 Medical, RX Medical, RX \$1,718,800 N N 0% | \$135,000 24 / 12 24 / 12 Medical, RX Medical, RX \$1,854,541 Y N 50% | \$135,000 24 / 12 24 / 12 Medical, RX Medical, RX \$0 Y N 50% |
| FIXED COSTS | | | | | | | |
| Administrative Fees Individual Stop Loss Premiums Aggregate Stop Loss Premiums Other Stop Loss Fees | \$473,260 \$1,107,497 \$27,448 \$0 | \$481,221 \$1,211,677 \$29,157 \$0 | \$481,221 \$1,164,445 \$28,864 \$0 | \$481,221 \$1,101,265 \$26,813 \$0 | \$481,221 \$1,272,862 \$37,704 \$0 | \$481,221 \$1,993,192 \$30,232 \$0 | \$481,221 \$1,610,203 \$54,847 \$0 |
| A Total Annual Fixed Costs Total Percentage Change | \$1,608,205 | \$1,722,055 7.1% | \$1,674,530 4.1% | \$1,609,299 0.1% | \$1,791,787 11.4% | \$2,504,644 55.7% | \$2,146,271 33.5% |
| EXPECTED COST | | | | | | | |
| Annual Expected Claims | \$8,703,387 | \$9,438,271 | \$9,338,729 | \$8,826,110 | \$9,057,394 | \$9,721,540 | \$8,686,014 |
| B Total Expected Cost Total Percentage Change | \$10,311,592 | \$11,160,326 8.2% | \$11,013,258 6.8% | \$10,435,409 1.2% | \$10,849,180 5.2% | \$12,226,185 18.6% | \$10,832,285 5.0% |
| MAXIMUM COST | | | | | | | |
| Annual Maximum Claims | \$10,879,234 | \$11,797,838 | \$11,673,411 | \$11,032,638 | \$11,321,742 | \$12,151,926 | \$10,857,518 |
| <u>C</u> Total Maximum Cost Total Percentage Change | \$12,487,439 | \$13,519,894 8.3% | \$13,347,940 6.9% | \$12,641,937 1.2% | \$13,113,529 5.0% | \$14,656,570 17.4% | \$13,003,789 4.1% |
| Total Laser/Aggregating Spec Risk | \$140,000 | \$140,000 | \$140,000 | \$0 | \$0 | \$0 | \$0 |
| <u>D</u> Total Maximum Cost w/Laser Agg Spec Risk Total Percentage Change | \$12,627,439 | \$13,659,894 8.2% | \$13,487,940 6.8% | \$12,641,937 0.1% | \$13,113,529 3.8% | \$14,656,570 16.1% | \$13,003,789 3.0% |



STOP LOSS DETAIL

SLEBC

Effective Date: 01/01/2025

| | MEDICAL CURRENT ENDOLLMENT | | | | | | | |
|----------|---|---------------------------|--------------------|--------------------|----------------------|----------------------------|----------------------------|----------------------|
| | MEDICAL - CURRENT ENROLLMENT Medical - Employee | 102 | | | | | | |
| | Medical - Family Total Medical Lives | 305 | | | | | | |
| | i otal Medical Lives | 407 | | 11/1 DEADLINE | | | | |
| | | | FIRM | FIRM | PENDING | PENDING | PENDING | PENDING |
| | | 2024 | INITIAL | REVISED | | | | |
| | CONTRACT TERMS | CURRENT | RENEWAL | RENEWAL | OPTION 2 | OPTION 3 | OPTION 4 | OPTION 5 |
| | Stop Loss Carrier MGU | GRANULAR DIRECT | GRANULAR DIRECT | GRANULAR DIRECT | GERBER LIFE ECU | LIBERTY MUTUAL DIRECT | COMPANION PACE | SYMETRA DIRECT |
| | Third Party Administrator | MERITAIN | MERITAIN | MERITAIN | MERITAIN | MERITAIN | MERITAIN | MERITAIN |
| | Specific Deductible Contract Type (Specific) | \$135,000 PAID | \$135,000 PAID | \$135,000 PAID | \$135,000 24 / 12 | \$135,000 24 / 12 | \$135,000 24 / 12 | \$135,000 24 / 12 |
| | Contract Type (Specific) Contract Type (Aggregate) | PAID | PAID | PAID | 24 / 12 | 24 / 12 | 24 / 12 | 24 / 12 |
| | Included in Specific | Medical, RX | Medical, RX | Medical, RX | Medical, RX | Medical, RX | Medical, RX | Medical, RX |
| | Included in Aggregate Run In Limit on Aggregate | Medical, RX \$0 | Medical, RX \$0 | Medical, RX \$0 | Medical, RX \$0 | Medical, RX \$1,718,800 | Medical, RX \$1,854,541 | Medical, RX \$0 |
| | No New Laser at Renewal Option | Y | Υ | Y | Y | N | Υ | Υ |
| | Includes Plan Document Mirroring Rate Cap Percentage at Renewal | Y 40% | Y 40% | Y 40% | N 45% | N 0% | N 50% | N 50% |
| | Nate Cap referriage at Neriewal | 40 /0 | 40 /0 | 40 70 | 4370 | 0 70 | 30 /8 | 30 /0 |
| | STOP LOSS FEES | | | | | | | |
| | Employee Specific Premium & Fees | \$108.20 | \$118.38 | \$113.76 | \$93.45 | \$100.49 | \$153.69 | \$127.73 |
| | Family Specific Premium & Fees | \$266.41 | \$291.47 | \$280.11 | \$269.64 | \$314.17 | \$493.19 | \$397.23 |
| | Total ISL Premium (PEPM) | \$226.76 | \$248.09 | \$238.42 | \$225.48 | \$260.62 | \$408.11 | \$329.69 |
| <u>A</u> | Total Annual Individual Stop Loss Premium | \$1,107,497 | \$1,211,677 | \$1,164,445 | \$1,101,265 | \$1,272,862 | \$1,993,192 | \$1,610,203 |
| | Total Percentage Change | | 9.4% | 5.1% | -0.6% | 14.9% | 80.0% | 45.4% |
| | Aggregate Premium & Fees | \$5.62 | \$5.97 | \$5.91 | \$5.49 | \$7.72 | \$6.19 | \$11.23 |
| <u>B</u> | Total Annual Aggregate Stop Loss Premium | \$27,448 | \$29,157 | \$28,864 | \$26,813 | \$37,704 | \$30,232 | \$54,847 |
| | Total Percentage Change | | 6.2% | 5.2% | -2.3% | 37.4% | 10.1% | 99.8% |
| | Specific Advancement Fee | INCLUDED | INCLUDED | INCLUDED | INCLUDED | INCLUDED | INCLUDED | INCLUDED |
| <u>c</u> | Total Annual Stop Loss Fees | \$1,134,945 | \$1,240,835 | \$1,193,309 | \$1,128,078 | \$1,310,566 | \$2,023,424 | \$1,665,051 |
| <u> </u> | Total Percentage Change | \$ 1,134, 3 43 | 9.3% | 5.1% | -0.6% | 15.5% | 78.3% | 46.7% |
| | | • | 0.0,0 | 0.1.70 | 0.070 | 1010,0 | 10.070 | 1011 /2 |
| | EXPECTED CLAIMS | | | | | | | |
| | Expected Employee Medical Cost | \$850.34 | \$922.14 | \$912.41 | \$694.38 | \$689.62 | \$713.62 | \$752.63 |
| | Expected Family Medical Cost | \$2,093.60 | \$2,270.38 | \$2,246.43 | \$2,179.29 | \$2,244.07 | \$2,417.50 | \$2,121.53 |
| <u>D</u> | Total Annual Expected Claims | \$8,703,387 | \$9,438,271 | \$9,338,729 | \$8,826,110 | \$9,057,394 | \$9,721,540 | \$8,686,014 |
| | Total Percentage Change | | 8.4% | 7.3% | 1.4% | 4.1% | 11.7% | -0.2% |
| | MAXIMUM CLAIMS | | | | | | | |
| | Maximum Employee Aggregate Factor | \$1,062.92 | \$1,152.67 | \$1,140.51 | \$867.97 | \$862.02 | \$892.03 | \$940.79 |
| | Maximum Family Aggregate Factor | \$2,617.00 | \$2,837.97 | \$2,808.04 | \$2,724.11 | \$2,805.09 | \$3,021.88 | \$2,651.91 |
| | Total Attachment Point (PEPM) | \$2,227.53 | \$2,415.61 | \$2,390.13 | \$2,258.93 | \$2,318.13 | \$2,488.11 | \$2,223.08 |
| <u>E</u> | Total Annual Maximum Claims | \$10,879,234 | \$11,797,838 | \$11,673,411 | \$11,032,638 | \$11,321,742 | \$12,151,926 | \$10,857,518 |
| | Total Percentage Change | | 8.4% | 7.3% | 1.4% | 4.1% | 11.7% | -0.2% |
| | Aggregate Corridor | 125% | 125% | 125% | 125% | 125% | 125% | 125% |
| | Minimum Attachment Point | \$10,228,485 | \$10,618,054 | \$10,677,581 | \$11,223,004 | \$11,458,845 | \$12,363,607 | \$11,056,637 |
| | Additional Net Laser Risk: | | | | | | | |
| | Claimant #1 Claimant #2 | \$140,000.00 | \$140,000.00 | \$140,000.00 | notonti | al for larg | no lacor | rick |
| | Conditional/Other* | | | | Potenti | ai ioi iai | ye iaser | ISK |
| <u>F</u> | Total Maximum Claims w/ Net Laser Risk | \$11,019,234 | \$11,937,838 | \$11,813,411 | \$11,032,638 | \$11,321,742 | \$12,151,926 | \$10,857,518 |
| | Total Paraantaga Changa | | 0 20/ | 7 20/ | 0.49/ | 2 70/ | 10.20/ | 1 E0/ |



Total Percentage Change

8.3%

7.2%

0.1%

2.7%

10.3%

-1.5%

ADMINISTRATIVE DETAIL

SLEBC

Effective Date: 01/01/2025

MEDICAL - CURRENT ENROLLMENT

Medical - Employee Medical - Family Total Medical Lives

| 102 | |
|-----|--|
| 305 | |
| 407 | |

FIRM

FIXED ADMINISTRATIVE COST

Stop Loss Carrier MGU

Third Party Administrator Monthly (PEPM) Fees:

Apta Health Program Fee
Apta Health Care Coordination Fee
TPA Medical Administration
Stand Alone Cobra
Network Access Fee
PBM Integration
COBRA Administration
Broker Fees
Telemedicine Fee
Stop Loss Fees

| 2024 |
|----------------|
| CURRENT |
| GRANULAR |
| DIRECT |
| MERITAIN |
| |

| \$15.61 | |
|---------|--|
| \$36.26 | |
| \$16.77 | |
| \$0.80 | |
| \$13.95 | |
| \$1.92 | |
| \$1.39 | |
| \$5.47 | |
| \$1.00 | |
| \$1.53 | |
| \$2.20 | |
| | |

| INITIAL <u>RENEWAL</u> |
|---------------------------|
| GRANULAR |
| DIRECT |
| MERITAIN |
| |

| \$15.61 | |
|---------|--|
| \$37.89 | |
| \$16.77 | |
| \$0.80 | |
| \$13.95 | |
| \$1.92 | |
| \$1.39 | |
| \$5.47 | |
| \$1.00 | |
| \$1.53 | |
| \$2.20 | |

То

Total Annual Fixed Administrative Cost

Total Percentage Change

Healthcare Bluebook Fee

\$473,260

\$481,221 1.7%

Novo Connection Analytics Sentinel Suite Fee (per script)

\$2.00

\$2.50

OPTIONAL SERVICE FEES

Novo Connection Analytics - PGx Testing
Novo Connection Analytics - Rx Tourism
Apta Cash
Edison Health
Apta Early Steps Maternity
Apta Health Coaching
Apta Tobacco Cessation
GoodRx



SLEBC

Effective Date: 01/01/2025

ASSUMPTIONS OF QUOTATION

In addition to the Assumptions listed within the ASO Proposal, the following Assumptions have been used to obtain the attached Stop-Loss Proposals. Any deviance in these assumptions could increase or reduce the factors shown.

Final participation will be a Minimum of 75% of Eligible Employees and their Dependents and COBRA participants do not exceed 10% of covered employee base.

If enrollment changes +/-10% during the contract period, or in the final month of enrollment reported for quoting, a recalculation to the rates and PPO access and integration fees are included. PPO directories are available online.

No coverage included for expenses resulting from procedures which are considered experimental.

All known conditions and large claims have been disclosed by the Employer, Prior Carrier, and Third Party Administrator.

All claims in excess of \$67,500 incurred in the past 12 months have been reviewed for diagnosis and current prognosis. Any individual with the potential to reach this amount has been disclosed.

Quote assumes run-out claims will be administered by the current carrier. If run-in is selected, run-in limits may be placed on coverage based on updated claim experience.

Quotes are subject to approval of Third Party Administrator, PPO Networks and UR Vendor.

We have made every effort to supply you with an accurate and comprehensive proposal, however, we will not be bound by any typographical errors or omissions contained herein.

Quotes are based on data submitted including census, claims, premium history, large claim information, and other relevant information. Any inaccuracy in the data will require additional calculations. Quotes assume Employer's claims account is fully funded through the end of the policy period and no claims are being held for slow funding reasons. Variations may cause change in quoted amounts.

THE ATTACHED QUOTES ARE NOT BINDING NOR DO THEY GUARANTEE COVERAGE

CONDITIONS OF QUOTATION

General Conditions

All stop-loss rates are based upon the above effective date and the data submitted. Rates are also subject to final

- · Receipt and verification of final Census
- · Receipt and verification of final Plan Document
- Monthly paid claims, large claims, and enrollments for the 24 month period prior to the effective date
- Review of individual shock loss data including diagnosis, prognosis, and amount of paid claims
- Signed and approved disclosure statement from stop-loss provider

The stop-loss rates require all employees to be actively at work or to be disclosed

*We recommend that your definition of full-time employee be updated to include "legally employed."

