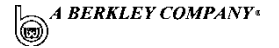


Berkley Life and Health Insurance Company



Urbandale, Iowa

Underwriting Office:
2445 Kuser Road, Suite 201
Hamilton Square, NJ 08690

Renewal Schedule of Insurance

Policyholder:	City of Douglas
State of Issue:	AZ
Policy Number:	ERL L23101757 002
Original Effective Date:	July 01, 2022
Renewal Effective Date:	July 01, 2023
Policy Period	July 01, 2023 through June 30, 2024

PERSONS TO BE COVERED UNDER THE STOP LOSS POLICY: Covered Person(s) who meet the eligibility requirements as set forth under the Policyholder's employee benefit Plan, including:

- COBRA Continuees

AGGREGATE STOP LOSS ☐ Yes ☒ No

Benefit Period: N/A

Losses Incurred from through
and Paid from through .

Plan Coverages applying to Aggregate Stop Loss: N/A

Included	Not Included		Included	Not Included	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Medical	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Vision Care
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Prescription Drugs	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Disability Income
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Dental Care	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Other

Aggregate Percentage Reimbursable (Excess of Attachment Point) N/A

Monthly Aggregate Factors: N/A

All included coverages are combined for determination of Aggregate Stop Loss liability under the terms of this Policy.

Maximum Aggregate Benefit per Benefit Period
(Excess of Annual Aggregate Attachment Point) N/A

Maximum Plan Losses per Covered Person per Benefit Period N/A

Minimum Annual Aggregate Attachment Point N/A

SPECIFIC STOP LOSS☒ Yes ☐ No**Benefit Period:**

Losses Incurred from **July 01, 2021** through **June 30, 2024**
and Paid from **July 01, 2023** through **June 30, 2024**.

Plan Coverages applying to Specific Stop Loss:

Included	Not Included		Included	Not Included	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Medical	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Vision Care
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Prescription Drugs	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Disability Income
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Dental Care	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Other:

Specific Deductible (Per Covered Person)

\$75,000.00

Special Limitations: **Inclusion of Plan Alignment does not delegate authority to the Policyholder or any third party in making final claim determinations under stop loss.**

Aggregating Specific Deductible
(if Aggregating Specific Endorsement is selected)

N/A

Specific Percentage Reimbursable
(Excess of Deductible)

100% all covered Plan benefits

Annual Maximum Specific Benefit
(per Covered Person in excess of the Specific Deductible)

Unlimited

PREMIUMS

Aggregate Premium per (month/annum):	Employee	<u>N/A</u>
Specific Premium per month:	Employee	\$95.72
	Employee & Family	\$326.08

ENDORSEMENTS ATTACHED:

<input checked="" type="checkbox"/> Terminal Liability Option Specific Coverage	Included
<input checked="" type="checkbox"/> Specific Simultaneous Funding	Included
<input checked="" type="checkbox"/> Experimental or Investigative Services	Included
<input checked="" type="checkbox"/> Exclusions	Included
<input checked="" type="checkbox"/> Actively at Work	Included
<input checked="" type="checkbox"/> Appeals	Included

DESIGNATED TPA:

TPA Name

Marpai Health f/k/aContinental Benefits, LLC

Address

City

State

Zip

5701 E Hillsborough Ave., Ste. 1407**Tampa****FL 33610**

In accepting this renewal, the Policyholder represents that such information accurately reflects the true facts and that the undersigned has authority to bind the Policyholder to the proposed renewal Policy. Accordingly, this renewal Schedule of Insurance, including any required Disclosure Statement, will be a part of the Policy if accepted by the Company.

Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

Signed at _____ this ____ day of _____, 2023

Signed for the Policyholder

X

Name

Title

Berkley Life and Health Insurance Company

| a Berkley Company
Urbandale, Iowa
[Underwriting Office:
2445 Kuser Road, Suite 201
Hamilton Square, NJ 08690]

Independent Dispute Resolution (IDR) Endorsement

This Endorsement revises and becomes a part of the Policy to which it is attached. This Endorsement is subject to all the provisions, limitations, and exclusions of the Policy, except as they are specifically modified herein. In the event any provision of the Policy and this Endorsement conflict, the terms of this Endorsement shall govern. Please read this Endorsement carefully.

This Endorsement attaches to and is made part of Policy Number ERL L23101757 002 issued to City of Douglas.

In the event Covered Services are Paid for a Covered Person due to an appeal of the payment amount by the provider of services for an emergency or certain out of network claim(s) that were incurred and paid in the immediate prior policy period, coverage will be allowed under the subsequent policy period with a credit for the Specific Deductible met in the prior policy period provided:

- a. Such Losses are not eligible under any other coverage; and
- b. Such Losses are otherwise payable under the terms of this Policy; and
- c. The Company was informed in writing with the details of the Loss within 60 days of the filing of an appeal for the claim denial; and
- d. The appeal was filed in conformity with the federal No Surprises Act as enacted or subsequently amended; and
- e. The Claim is paid within 120 days of the end of the immediate prior policy period; and
- f. The Policy renews and is in effect when the claim is Paid.

The Specific Deductible credit will only be for this IDR payment and no credit will be given for other Covered Losses in the current policy period. Claims for other Covered Losses will be subject to the Specific Deductible as stated in the current Policy.

Administrative or any similar fees for the IDR process are not covered under the Terms of the Stop Loss policy.

If the Policyholder terminates this Policy for any reason prior to the end of the Policy Period this Endorsement will be void.


All other terms, conditions, limitations and exclusions of the Policy remain unchanged.

EFFECTIVE DATE OF ENDORSEMENT: 07/01/2023

Signed for the Company:



President



Secretary

BERKLEY LIFE AND HEALTH INSURANCE COMPANY

PRIVACY NOTICE

Berkley Life and Health Insurance Company (the "Company"), a member company of the W. R. Berkley Corporation ("Berkley") group of companies and each other member of the Berkley group of companies ("Affiliates") understands our customers' concern about privacy of their information collected by the Company. Our Company is dedicated to protecting the confidentiality and security of nonpublic personal information we collect about our customers in accordance with applicable laws and regulations. This notice refers to the Company by using the terms "us," "we," or "our." This notice describes our privacy policy and how we treat the nonpublic personal information about our customers that we receive from them (Information").

Why We Collect and How We Use Information.

We collect and use Information for business purposes with respect to our insurance products and services and other business relations involving our customers. We gather this Information to evaluate your request for insurance, to evaluate your insurance claims, to administer, maintain or review your insurance policy, and to process your insurance transactions. We also accumulate certain information about the Producer's as may be required or permitted by law.

Your insurance agent or Producer also collects this Information and may use it to help with your overall insurance program or to market additional products and services to you. We may also use Information to offer you other products or services that we or our Affiliates provide.

How We Collect Information.

Most Information collected by us is provided by you or your insurance agent or Producer to us. We obtain Information from (i) applications or other forms submitted by you, your insurance agent or Producer or your authorized representatives to us and our Affiliates, and (ii) your transactions with us or our Affiliates. We may also obtain Information from other sources such as (i) consumer reporting agencies, (ii) other institutions or information services providers, (iii) employers, (iv) other insurers, or (v) your family members.

Information We Disclose.

We disclose any Information which we believe is necessary to conduct our business as permitted by applicable law or where required by applicable law. This disclosure may include (i) Information we receive from you on applications or other forms provided to us and our Affiliates, such as names, addresses, social security numbers, assets, employer information, salaries, etc. (ii) Information about your transactions with us and our Affiliates, such as policy coverages, premiums, payment history, etc., and (iii) Information we receive from a consumer reporting agency, such as credit worthiness and credit history.

To Whom We Disclose Information.

We may, as permitted or required by applicable law, disclose your Information to nonaffiliated third parties, such as (i) your insurance agent or Producer, (ii) independent claims adjusters, (iii) insurance support organizations, (iv) processing companies, (v) actuarial organizations, (vi) law firms, (vii) other insurance companies involved in an insurance transaction with you, (viii) law enforcement, regulatory, or governmental agencies, (ix) courts or parties therein pursuant to a subpoena or court order, (x) businesses with whom we have a marketing agreement, or (xi) our Affiliates.

We may share Information with our Affiliates so that they may offer you products and services from the Berkley group of companies or to analyze our book of business and to consolidate necessary information. We do not disclose Information to other companies or organizations not affiliated with us for the purpose of using Information to sell their products or services to you. For example, we do not sell your name to unaffiliated mail order or direct marketing companies.

How We Protect Information.

We require our employees to protect the confidentiality of Information as required by applicable law. Access to Information by our employees is limited to administering, offering, servicing, processing or maintaining of our

products and services. We also maintain physical, electronic and procedural safeguards designed to protect Information. When we share or provide Information to other persons or organizations, we contractually obligate them, if required by law, to treat Information as confidential and conform to our privacy policy and applicable laws and regulations.

Correction and Access to Information.

Upon our receipt of your written request to us at Berkley Life and Health Insurance Company, 475 Steamboat Road, Greenwich, Connecticut 06836-2519 we will, generally, make available Information for your review. If you believe the Information we have about you is incorrect or inaccurate, you may request that we make any necessary corrections, additions or deletions. If we agree with your belief, we will correct our records if required by applicable law. If we do not agree, you may submit to us a short statement of dispute, which we will include in any future disclosure by us of such Information if required by applicable law.

Requirements for Privacy Notice.

This privacy notice is being provided due to recently enacted federal and state laws and regulations establishing new privacy standards and requires us to provide this privacy policy. For additional information regarding our privacy policy, please visit our website, www.wrberkley.com or send your request for information to the W.R. Berkley Corporation's Chief Compliance Officer at 475 Steamboat Road, Greenwich, Connecticut 06836-2519.

Revised: June 25, 2019