

Issuing Carrier: **Berkley Life and Health Insurance Co.**
 Underwriter: **Aleksandra Jankowska**
 Group: **City of Douglas**

Effective: 07/01/2022 Proposal No 260163
 Expiration: 06/30/2023

INDIVIDUAL EXCESS LOSS COVERAGE

Coverages	↓		
	Option 1	Option 2	Option 3
	Medical, Rx Card	Medical, Rx Card	Medical, Rx Card
Contract Type	24/12	24/12	24/12
Annual Specific Deductible per Individual	\$ 60,000	\$ 75,000	\$ 90,000
Maximum Annual Reimbursement	Unlimited	Unlimited	Unlimited
Maximum Lifetime Reimbursement	Unlimited	Unlimited	Unlimited
Quoted Rate Per Month	<u>Enrollment</u>		
Single	111 \$ 109.17	\$ 88.90	\$ 76.31
Family	41 \$ 368.83	\$ 307.30	\$ 269.89
Composite	152 \$ 179.21	\$ 147.81	\$ 128.53
Terminal Liability	Included	Included	Included
Estimated Annual Premium	\$ 326,879	\$ 269,606	\$ 234,431
Quoted Rate(s) includes Commissions of	0.00%	0.00%	0.00%

ILLUSTRATIVE PROPOSAL

AGGREGATE EXCESS LOSS COVERAGE

Coverages	Option 1	Option 2	Option 3
	Medical, Rx Card	Medical, Rx Card	Medical, Rx Card
Contract Type	24/12	24/12	24/12
Loss Limit Per Individual	\$ 60,000	\$ 75,000	\$ 90,000
Maximum Annual Reimbursement	\$ 1,000,000	\$ 1,000,000	\$ 1,000,000
Aggregate Corridor	120%	120%	120%
Rate Per Month	<u>Enrollment</u>		
Composite	152 \$ 10.80	\$ 12.60	\$ 14.23
Monthly Accommodation Rate per Employee	\$ 2.21	\$ 2.21	\$ 2.21
Terminal Liability Rate per Employee	\$ 2.21	\$ 2.21	\$ 2.21
Estimated Annual Premium	\$ 27,761	\$ 31,044	\$ 34,018
Rate(s) includes Commissions of	0.00%	0.00%	0.00%
Annual Aggregate Deductible	\$ 1,237,460	\$ 1,278,767	\$ 1,311,972
Minimum Aggregate Deductible	\$ 1,237,460	\$ 1,278,767	\$ 1,311,972
Run-in Limited To	\$ 185,600	\$ 191,800	\$ 196,800
Monthly Aggregate Claim Factors	<u>Enrollment</u>		
<u>Medical, RxCard*</u>			
Single	111 \$ 436.57	\$ 451.14	\$ 462.86
Family	41 \$ 1,333.23	\$ 1,377.74	\$ 1,413.50
Composite	152 \$ 678.43	\$ 701.08	\$ 719.28

ILLUSTRATIVE PROPOSAL

OVERALL COST SUMMARY

	Option 1	Option 2	Option 3
Total Annual Fixed Costs	\$ 354,640	\$ 300,650	\$ 268,449
Variable Costs	\$ 1,237,460	\$ 1,278,767	\$ 1,311,972
Maximum Annual Liability	\$ 1,592,100	\$ 1,579,417	\$ 1,580,421

PROPOSAL QUALIFICATIONS AND CONTINGENCIES

This is a firm and final proposal, subject to completion of a signed Proposal and completed Disclosure Statement. These must be received within 10 business days of issuance of this proposal, or the rates/factors are subject to change.

In order to issue a policy, the following must be provided in addition to the signed proposal and approved by the Company:

- a. Completed application signed and dated by an Officer or Authorized Representative of the policyholder, and the policyholder's agent.
- b. Copy of the completed signed plan document, and prior plan document if run-in coverage is requested.
- c. Initial premium deposit along with supporting documentation.
- d. Final census

Anyone disclosed as terminated from coverage is not covered by the stop loss and no run-in will be accepted on these claimants

Marpai Health will administer all claims.

Aetna PPO is the underlying PPO network.

Additional compensation may be paid to a licensed producer in addition to the base commission identified herein.

The rates and factors quoted are based on the data submitted. Any inaccurate or incomplete data submitted may result in changes. We will not be bound by any typographical errors or omissions contained herein.

Rx claims are assumed to be included in all Large Claimant and Paid Claim Reporting submitted if Rx coverage is requested. If Rx claims are not included in the Large Claims Reports submitted, the rates and factors are subject to change upon receipt and review of either a Large Claims Report including both Medical and Rx claims, or a report from the Rx vendor for any claimants with \$10,000 or more in Rx claims.

In the event there is a 15% or greater change in enrollment or participation, rates and factors may be recalculated.

Proposal assumes retirees are not covered under the stop loss policy.

Administration costs and network access fees are not included in the stop loss costs or coverage.

If any individuals are lasered, only the amount up to the group specific deductible applies to the aggregate for each individual.

Policy alignment with your plan document is subject to review and approval by Berkley and may affect your quoted rates. With Policy Alignment, the Experimental or Investigative Services and Exclusions Coverage Endorsements are included. These replace the existing Experimental or Investigation Services and Exclusions from the policy and replace it with that of the Underlying plan language. Please submit a copy of your executed plan document within 60 days of the effective date for our review and approval.

Composite rates are illustrative only.

An Individual Specific Deductible of \$100,000 for member

An Individual Specific Deductible of \$200,000 for member

Initial the selected proposal option:

	Option 1	Option 2	Option 3
Specific			
Aggregate		X	
		X	



City of Douglas

Current vs. Renewal Rates - Effective July 1, 2022

Product	2021	2022
Medical Administration Includes Claims Processing, Customer Service (including a dedicated toll-free phone line), Standard Reporting, Web Portal, On-line Enrollment Tool, Initial ID Cards Mailed to Employee Homes, up to three EDI files to non-Marpal vendors, and up to three premium remittance services)	\$21.29	\$22.00
AI-Powered Services Includes: Marpal Cares, Top 10% Providers, Gaps in Care, Mobile App, Marpal Clinical Review, GITHrive, Regenxx	\$9.05	\$9.50
Compliance Fee Includes management of the following Compliance Requirements: ID cards, Provider Directories, Machine Readable Files, Continuity of Care, Surprise Billing and Independent Dispute Resolution (IDR), and advanced EOBs	N/A	\$1.50
AHH	\$3.06	\$3.15
2 nd Level Appeals	\$1.59	\$1.70
Aetna	\$18.28	\$19.09
Total PEPM	\$53.27	\$56.94
Current Employee	157	157
Total Monthly Premium	\$8,363.39	\$8,939.58

6.89 % increase