



McGRIFF, SEIBELS & WILLIAMS, INC.



ASO Medical, Captive Benefits & Pharmacy Benefit Management Services RFP Analysis

Presented by:

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- **RFP Marketing Analysis**
 - **Medical Analysis & Scoring**
 - **PBM Analysis**
 - **Pros & Cons**
 - **Disruption**
 - **Provider/Facility Disruption**
 - **RX Disruption**

Medical Analysis & Scoring



ASO Administrator	BCBS Current Plan (Carve In)	BCBS Renewal Plan (Carve In)	Aetna Proposed Plan (Carve In)	Cigna Proposed Plan (Carve In)	IBA Proposed Plan (Carve Out)	Maestro Health Proposed Plan (Carve Out)	UMR Proposed Plan (Carve Out)	Bev Cap Proposed Plan (Carve In)
PBM Administrator	Prime RX	Prime RX	CVS	Focused 90 CVS Value	ProAct RX	ProAct RX	ProAct RX	Envision Rx
Network	BlueChoice PPO Network	BlueChoice PPO Network	Aetna Open Access Managed Choice Network	Open Access Plus Network	Cigna PPO Network	Cigna PPO Network	UHC Choice Plus Network	Aetna PPO
Annual ASO Admin. Fees (186)	\$76,892.40	\$75,039.84	\$47,898.72	\$75,330.00	\$99,100.80	\$116,421.12	\$126,799.92	\$216,347.76
Medical Repricing Claims Estimate	\$1,039,230.20	\$1,093,974.92	\$1,176,023.04	\$1,113,557.07	\$1,138,171.51	\$1,138,171.51	\$1,118,370.56	\$1,176,023.04
RX Claims	\$489,938.47	\$529,133.55	\$523,842.22	\$539,716.22	\$521,196.55	\$521,196.55	\$521,196.55	\$529,133.55
Projected Rebates / APC Fee	\$10,060.00	\$10,060.00	\$10,060.00	(\$55,800.00)	(\$126,219.00)	(\$126,219.00)	(\$126,219.00)	\$10,060.00
Run Out Admin Claims	-	-	\$11,606.40	\$11,606.40	\$11,606.40	\$11,606.40	\$11,606.40	\$11,606.40
Rate Guarantee	1 year- Until 12/31/2019	1 year- Until 12/31/2020	3 years- Until 12/31/2022	1 year- Until 12/31/2020*	2 years- Until 12/31/2021	3 years- Until 12/31/2022	2 years- Until 12/31/2021	1 year- Until 12/31/2020
Estimated Total Annual Cost	\$1,616,121.07	\$1,708,208.31	\$1,769,430.38	\$1,684,409.69	\$1,643,856.26	\$1,661,176.58	\$1,651,754.43	\$1,943,170.75
\$ Combined Difference over Current		\$92,087.24	\$153,309.30	\$68,288.62	\$27,735.18	\$45,055.50	\$35,633.36	\$327,049.68
Combined Percent over Current (Total)		5.70%	9.49%	4.23%	1.72%	2.79%	2.20%	20.24%
\$ Combined Difference over Renewal			\$61,222.06	(\$23,798.62)	(\$64,352.06)	(\$47,031.74)	(\$56,453.88)	\$234,962.44
Combined Percent over Renewal (Total)			3.58%	-1.39%	-3.77%	-2.75%	-3.30%	13.75%

This executive summary assumes the following:

- * Medical claims trended at 6% and repricing from carriers factored in
- * Pharmacy claims trended at 10% and repricing from APC factored in
- *IBNR (2.5 months of Medical & 0.5 months for RX): \$495,125.95
- *Rebate Consideration: Carve In solutions will not pay the fee of APC of \$10,060. Cigna gives 50% RX rebate sharing - equates an estimated amount of \$25 PEPM
- *IBA did not submit repricing and disruption file or summary. On Medical Repricing Claim Estimate, we are assuming Maestro information for IBA.
- *Aetna did not submit repricing file or summary. On Medical Repricing Claim Estimate, we are assuming BevCap information for Aetna.
- *Cigna rate guarantee for Yr 2 &3: 3% increase.
- *BevCap Collateral of \$82,718. Collateral needed before the effective date. This amount is not considered in the executive summary calculation. Envision RX does offer rebate sharing. Open to work with other PBM's.

PBM Analysis



	BCBS of TX (CURRENT)	BCBS of TX (PROPOSED)	ProAct Rx TRADITIONAL
Retail 30			
Brand Ingredient Cost	\$132,433	\$130,828	\$131,229
Generic Ingredient Cost	\$72,885	\$81,359	\$67,800
Dispensing Fee	\$3,003	\$3,230	\$2,247
Administrative Fee	\$0	\$0	\$0
Retail 90			
Brand Ingredient Cost	\$96,146	\$97,644	\$94,050
Generic Ingredient Cost	\$26,075	\$29,800	\$22,350
Dispensing Fee	\$549	\$619	\$0
Administrative Fee	\$0	\$0	\$0
Mail Order Service			
Brand Ingredient Cost	\$7,676	\$7,676	\$7,338
Generic Ingredient Cost	\$3,834	\$4,382	\$3,943
Dispensing Fee	\$0	\$0	\$0
Administrative Fee	\$0	\$0	\$0
Specialty			
Brand Ingredient Cost	\$271,978	\$271,978	\$276,893
Generic Ingredient Cost	\$28	\$28	\$29
Dispensing Fee	\$7	\$0	\$0
Administrative Fee	\$0	\$0	\$0
Projected Cost - Before Rebates	\$614,615	\$627,545	\$605,880
\$ Difference From Baseline - Before Rebates		\$12,930	(\$8,735)
% Difference From Baseline - Before Rebates		2.10%	-1.42%
Rebates			
Rebate Revenue	\$0	(\$75,330)	(\$126,219)
APC Comp	\$0	\$10,060	\$0
Projected Cost - After Rebates	\$614,615	\$562,274	\$479,661
\$ Difference From Baseline - After Rebates		(\$52,340)	(\$134,954)
Annualized - \$ Difference from Baseline - After Rebates			
% Difference From Baseline - After Rebates		-8.52%	-21.96%

This pricing is based on a 3-year agreement.

This analysis should not be construed as a guarantee of savings. It is an assumption based on Rx claims: 01.2018-12.2018

Rebate Estimates Include Specialty Rebates; Calculated Using Brand Specialty Claim Count Filled During Rx Claims Period.

Action Pharmaceutical Consulting's Compensation is included in the pricing quote.

Observations – Medical



BCBS of Texas	UMR	Pro's & Con's
Yes	Yes	Broad Network
Yes	Yes	Online Reporting Access; Member Portal; Mobile App Solution
Yes	No	Selection of Medical Vendor Requires Preferred PBM Vendor
Yes	Yes	Receive EDI Files with BenefitFirst
Yes	Yes	Provided References
No	No	RFP Submitted Originally as Town Required; Updated Response Provided
No	No	Performance Guarantee Offered
No	Yes	Allowance / Credit
Yes	Yes	ID Cards Customization
Yes	No	Online Wellness Program Available with No Extra Fees
Yes	Yes	Centers of Excellence
Yes	Yes	Stop Loss Carve Out Flexibility
No	Yes	Multiple Year Rate Guarantee
No	Yes	Member Disruption; Network Disruption
N/A	Yes	Charge for Historical Loading of Data

Observations – PBM



BCBS of Texas	ProAct Rx	Pro's & Con's
No	Yes	Agreed to Overall Generic Effective Rate
Yes	No	Deviations from Terms and Definitions in RFP Language
Yes	No	Selection of Medical Vendor Requires Preferred PBM Vendor
Yes	Yes	Can Offer Narrow Pharmacy Network with Deeper Discounts
Yes	Yes	Audit Recoveries Credited to the Plan
No	Yes	International Mail Order Program Available w/Cost Savings to the Plan & Member
Yes	Yes	Owens Specialty Pharmacy
Yes	Yes	Stand Alone Specialty Call Center
Yes	Yes	Specialty Supplies Included with Quote
Yes	Yes	Split-Fill Program at Specialty
Yes	Yes	Assumes Cost of Lost Specialty Medications if Confirmed Delivery Issue
No	Yes	Offers a Copay Card Accumulator Program
Yes	Yes	Ingredient Level Processing on Compounds
Yes	Yes	Compound Dispense Fee's Same as Channel Guarantee
No	Yes	Offering a \$4 Per Member Implementation Credit with Submitted Invoice
No	Yes	Rebates Earned Above Guarantee are Passed on to the Plan
Yes	No	No Cost for Prior Authorizations
Yes	Yes	Online Reporting Access
No	Yes	Privately Held Company
No	Yes	Member Disruption; Formulary, Re-Card, Specialty & Mail Order Changes
No	Yes	Charge for Historical Loading of Data
Yes	No	RFP Submitted Originally as Town Required; Updated Response Provided
No	Yes	Provided References

Disruption Analysis



Disruption Analysis - Shared Records

Town of Prosper

This report compares all shared records between all carriers. Some carriers excluded more records than others which can be seen on the "Excluded Records" line. To view disruption based on non-excluded records for each individual carrier, refer to the other disruption report.

All Records	Claims	Pre-Discount
Inpatient Hospital	380	\$475,639.41
Outpatient Hospital	2,271	\$1,425,765.96
Office	11,224	\$1,103,744.13
Other	602	\$521,616.83
Total	14,477	\$3,526,766.33

Excluded Records*	Claims	Pre-Discount
Inpatient Hospital	72	\$59,923.18
Outpatient Hospital	361	\$90,533.59
Office	2,729	\$17,533.19
Other	75	\$10,897.98
Total	3,237	\$178,887.94

Included Record	Claims	Pre-Discount
Inpatient Hospital	308	\$415,716.23
Outpatient Hospital	1,910	\$1,335,232.37
Office	8,495	\$1,086,210.94
Other	527	\$510,718.85
Total	11,240	\$3,347,878.39

*Records are excluded to ensure that all carriers are compared on the same data. Take into account how many records each carrier excluded.

BCBS

	Claims	Pre-Discount
Excluded Records	136	\$44,976.64
Percent Excluded	0.94%	1.28%

In-Network	Claims	Pre-Discount
Inpatient Hospital	308	\$415,716.23
Outpatient Hospital	1,749	\$1,149,694.45
Office	7,942	\$1,029,045.59
Other	436	\$404,711.95

Total	10,435	\$2,999,168.22
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Pct. In-Network	Claims	Pre-Discount
Inpatient Hospital	100.00%	100.00%
Outpatient Hospital	91.57%	86.10%
Office	93.49%	94.74%
Other	82.73%	79.24%

Total	92.84%	89.58%
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UHC

	Claims	Pre-Discount
Excluded Records	3,039	\$13,007.06
Percent Excluded	20.99%	0.37%

In-Network	Claims	Pre-Discount
Inpatient Hospital	303	\$413,916.23
Outpatient Hospital	1,814	\$1,247,780.61
Office	7,632	\$1,005,701.04
Other	438	\$401,562.06

Total	10,187	\$3,068,959.94
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Pct. In-Network	Claims	Pre-Discount
Inpatient Hospital	98.38%	99.57%
Outpatient Hospital	94.97%	93.45%
Office	89.84%	92.59%
Other	83.11%	78.63%

Total	90.63%	91.67%
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Provider/Facility Disruption



Provider Name	Provider City	Zip Code	Claimants	Services	Service Category
PUMPS IT INC	HOUSTON	77070	1	409	HOME
BOSTON HEART DIAGNOSTICS CORPORAT	FRAMINGHAM	01702	1	51	OFFICE
SYNERGENE LABORATORY LLC	HOUSTON	77058	1	39	OFFICE
CRYSTAL HANKEL	DENTON	76201	1	39	OFFICE
BRLI GENPATH DIAGNOSTICS INC	HOUSTON	77054	4	16	OFFICE
BENJAMIN CRABB	FRISCO	75033	1	13	OFFICE
KYLE CORREIA	PROSPER	75078	1	11	OFFICE
MP3 LAB INC	DALLAS	75204	2	10	OFFICE
MICHAEL WOODS	PLANO	75093	2	10	OFFICE
DORIAN APONTE	DENTON	76209	1	9	OFFICE
AMBER GALIPP	MCKINNEY	75071	1	8	OFFICE
BOSTON HEART DIAGNOSTICS CORP	FRAMINGHAM	01702	1	5	OFFICE
REBECCA PAWLEY DOWNEY	FRISCO	75033	1	5	OFFICE
KAI MEDICAL LABORATORY	DALLAS	75247	2	4	OFFICE
HEIDI JOHANSON	MCKINNEY	75070	1	4	OFFICE
BROCK PIERCE	MCKINNEY	75071	1	4	OFFICE
RAMAKRISHNA VELURI	GARLAND	75042	1	3	INPATIENT HOSPITAL
LESLEY HERRERA	DENTON	76209	1	3	OFFICE
LAURA SWARTWOOD	MCKINNEY	75070	1	2	OUTPATIENT HOSPITAL
LIFEWATCH SERVICES INC	ROSEMONT	60018	1	2	OFFICE
GARY DONOVITZ	ARLINGTON	76017	1	2	OFFICE
CAROLYN LYDE	LEWISVILLE	75057	1	2	OFFICE
MAJORS MEDICAL SERVICE	DALLAS	75235	1	2	HOME
NXGEN MDX LLC	GRAND RAPIDS	49504	1	1	OFFICE
KIMBERLY SCHAIVE	DALLAS	75247	1	1	OUTPATIENT HOSPITAL
GERALD GARCIA	PLANO	75074	1	1	OUTPATIENT HOSPITAL
DANIEL WANN	SHERMAN	75092	1	1	OUTPATIENT HOSPITAL
BENJAMIN CRABB	FRISCO	75033	1	1	EMERGENCY ROOM
TIMOTHY VASSBERG	ALLEN	75002	1	1	OFFICE
SADIA SIDDIQUI	SACHSE	75048	1	1	OFFICE
ACCESS DX LABORATORY LLC	HOUSTON	77025	1	0	OFFICE
WESTSIDE SURGICAL HOSPITAL	HOUSTON	77027	1	-16	OUTPATIENT HOSPITAL

RX Disruption

PROACT

Premium Exclusions

The following drugs would be excluded using ProAct's Premium Formulary.
Covered Alternative(s) have been provided as well:

Excluded Maintenance Meds	Covered Alternative(s)	# Rxs
ADDERALL XR CAP 10MG	Amphetamine-Dextroamphetamine	1
DULERA AER 200-5MCG	fluticasone/salmeterol, Breo Ellipta, Symbicort	1
FARXIGA TAB 10MG	Invokamet, Invokana, Jardiance	1
FARXIGA TAB 5MG	Invokamet, Invokana, Jardiance	1
LEVEMIR INJ FLEXTUOC	Lantus Insulin	1
NOVOLOG INJ 100/ML	Humalog Insulin	1
NOVOLOG INJ FLEXPEN	Humalog Insulin	1
PROVENTIL AER HFA	Proair HFA, Ventolin HFA	2
QVAR REDIHAL AER 40MCG	Flovent, Pulmicort	1
TROKENDI XR CAP 50MG	Topiramate ER	1
XOPENEX HFA AER	Proair HFA, Ventolin HFA	1
Total		12

1. Medical Marketing Analysis with Stop Loss Quotes
2. PBM Marketing Analysis
3. Repricing Analysis
4. Disruption Analysis

**Town of Prosper
Medical ASO and Captive Bid List
Effective Date: 1/1/2020**

Vendor	AM Best	Notes
Medical ASO		
Aetna	A (Excellent)	<i>On the spreadsheet</i>
BCBSTX	A (Excellent)	<i>Incumbent - On the spreadsheet</i>
Cigna	A (Excellent)	<i>On the spreadsheet</i>
Healthcare Highways	NR	<i>Declined to Quote</i>
IBA	NR	<i>On the spreadsheet</i>
Maetsro	NR	<i>On the spreadsheet</i>
UMR / UHC	A (Excellent)	<i>On the spreadsheet</i>
Captive		
Bev Cap / Berkley	NR / A+ Superior	<i>On the spreadsheet</i>
Roundstone	NR	<i>Declined to Quote</i>

This is not an insurance contract: This proposal is for comparison purposes only. Please refer to certificate booklet or proposal for additional details, including limitations and exclusions. Final rates and benefits will be determined by actual enrollment and plan selection.



Town of Prosper Executive Summary Effective Date: 1/1/2020

ASO Administrator	BCBS Current Plan (Carve In)	BCBS Renewal Plan (Carve In)	Aetna Proposed Plan (Carve In)	Cigna Proposed Plan (Carve In)	IBA Proposed Plan (Carve Out)	Maestro Health Proposed Plan (Carve Out)	UMR Proposed Plan (Carve Out)	Bev Cap Proposed Plan (Carve In)
PBM Administrator	Prime RX	Prime RX	CVS	Focused 90 CVS Value	ProAct RX	ProAct RX	ProAct RX	Envision Rx
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Annual ASO Admin. Fees (186)	\$76,892.40	\$75,039.84	\$47,898.72	\$75,330.00	\$99,100.80	\$116,421.12	\$126,799.92	\$216,347.76
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Rate Guarantee	1 year- Until 12/31/2019	1 year- Until 12/31/2020	3 years- Until 12/31/2022	1 year- Until 12/31/2020*	2 years- Until 12/31/2021	3 years- Until 12/31/2022	2 years- Until 12/31/2021	1 year- Until 12/31/2020
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* Pharmacy claims trended at 10% and repricing from APC factored in

*IBNR (2.5 months of Medical & 0.5 months for RX): \$495,125.95

*Rebate Consideration: Carve In solutions will not pay the fee of APC of \$10,060. Cigna gives 50% RX rebate sharing - equates an estimated amount of \$25 PEPM

*IBA did not submit repricing and disruption file or summary. On Medical Repricing Claim Estimate, we are assuming Maestro information for IBA.

*Aetna did not submit repricing file or summary. On Medical Repricing Claim Estimate, we are assuming BevCap information for Aetna.

*Cigna rate guarantee for Yr 2 & 3: 3% increase.

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Town of Prosper

ASO Medical Marketing Analysis

Effective Date: 1/1/2020

	BlueCross BlueShield Current Plan + Prime RX	BlueCross BlueShield Renewal Plan + Prime RX
Network	BlueChoice PPO Network	BlueChoice PPO Network
Set Up Fee / Captive Collateral	N/A	N/A
Renewal Fee	N/A	N/A
Administration Fees		
Medical Administration - Employee (186)	\$62.42	\$62.42
RX Rebate Credit	(\$32.92)	(\$33.75)
Stop Loss Interface Fee	Included	Included
Disease Management (BCBS-Wellbeing Enable)	\$4.95	\$4.95
Pre-Certification /Utilization Mgmt (pepm)	Included	Included
Nurse line	Included	Included
Large Case Management	Included	Included
PPO Access Fee (network)	Included	Included
Out of Network Savings PEPM Charge	N/A	N/A
External PBM Interface Fee	N/A	N/A
Total Admin Fees	\$34.45	\$33.62
Rate Guarantee	1 year- Until 12/31/2019	1 year- Until 12/31/2020
Total Monthly Admin Fee	\$6,407.70	\$6,253.32
Annual Admin Fee	\$76,892.40	\$75,039.84
Annual Difference	-	(\$1,852.56)
% Difference	-	-2.41%
RX Expected Rebates	\$0.00	\$0.00
APC Fee	\$0.00	\$10,060.00
Projected Cost After Rebates	\$76,892.40	\$85,099.84
Annual Difference	-	\$8,207.44
% Difference	-	11%
Run-In	N/A	N/A
Run-Out	\$20.80 PEPM for 3 months	\$20.56 PEPM for 3 months
Rx Administration	Included in the fee	Included in the fee; no carve out program
Medical & RX Integration	Included	Included
Allowances/ Credits	N/A	N/A
COBRA/ HIPAA Administration	N/A	Did not quote
SPD - Electronic Copy	Included	Included
ID Cards - Customized	Included	Included; third party vendor can be added if approved by BCBS association
Accept Eligibility from BenefitFirst	Yes	Yes



Town of Prosper

ASO Medical Marketing Analysis

Effective Date: 1/1/2020

	BlueCross BlueShield Current Plan + Prime RX	BlueCross BlueShield Renewal Plan + Prime RX
Network	BlueChoice PPO Network	BlueChoice PPO Network
Additional Information		
Performance Guarantee	N/A	Not offered
Subrogation	The standard fee is 25% of a cases reimb recovery. Workers' Comp recoveries are not assessed a fee & any recovery is credited back to the group at 100%.	The standard fee is 25% of a cases reimb recovery. Workers' Comp recoveries are not assessed a fee & any recovery is credited back to the group at 100%.
Wellness Programs	Well On Target Online Portal	Well On Target Online Portal. If added Wellbeing Empower coaching is available
Centers of Excellence Providers	BlueDistinction Program: all facilities must regularly reapply for quality control. Bariatric surgery; cardiac, fertility, maternity care; knee & hip replacement, spine surgery, transplant services, gene therapy, cellular immunotherapy	BlueDistinction Program: all facilities must regularly reapply for quality control. Bariatric surgery; cardiac, fertility, maternity care; knee & hip replacement, spine surgery, transplant services, gene therapy, cellular immunotherapy
Bundle Pricing Arrangements	N/A	Do not offer, but willing to further discuss how to coordinate members
Audit Duplicate Claims (4.3 questionnaire)	Auto-adjudicate 80% of claims through Blue Chips technology. Blue Chip is integrated with ClaimXten technology (software for audit procedure codes)	Auto-adjudicate 80% of claims through Blue Chips technology. Blue Chip is integrated with ClaimXten technology (software for audit procedure codes)
Out of Network Savings/Charge	Out of State EE will be access a dsct per claim of 4.14% not to exceed \$2K per claim	Out of State EE will be access a dsct per claim of 4.14% not to exceed \$2K per claim
Miscellaneous / Notes	<p>*Bank Account to pay claims needs to be open for 12 months.</p> <p>*The run-off claims liability is \$344.88 PEPM</p>	<p>*Benefits Value Advisor: \$2.95 PEPM (customer advocate -help memb to make care decisions)</p> <p>*Stop loss can be locked via written acceptance up to 45 cal. days after quote release</p> <p>*Services bill through claims: Livongo, Naturally Slim, Omada, Hinge Health</p> <p>*Wellbeing Enable Empower cost: \$7.95PEPM</p> <p>*Wellbeing Enable Savings: \$15PEPM approx./ Empower: \$20PEPM approx.</p> <p>*When unbundling a claim, there is a share savings of 25% charge process on the billing reconciliation</p>



Town of Prosper

ASO Medical Marketing Analysis

Effective Date: 1/1/2020

	BlueCross BlueShield Current Plan + Prime RX	BlueCross BlueShield Renewal Plan + Prime RX	Maestro Health Proposed Plan + ProAct RX
Network	BlueChoice PPO Network	BlueChoice PPO Network	Cigna PPO Network
Set Up Fee / Captive Collateral	N/A	N/A	N/A
Renewal Fee	N/A	N/A	N/A
Administration Fees			
Medical Administration - Employee (186)	\$62.42	\$62.42	\$32.00
RX Rebate Credit	(\$32.92)	(\$33.75)	\$0.00
Stop Loss Interface Fee	Included	Included	Included
Disease Management (BCBS-Wellbeing Enable)	\$4.95	\$4.95	\$4.00
Pre-Certification /Utilization Mgmt (pepm)	Included	Included	Included
Nurse line	Included	Included	\$1.00
Large Case Management	Included	Included	\$95/hr billed in 6 min increments
PPO Access Fee (network)	Included	Included	\$15.16
Out of Network Savings PEPM Charge	N/A	N/A	N/A
External PBM Interface Fee	N/A	N/A	N/A
Total Admin Fees	\$34.45	\$33.62	\$52.16
Rate Guarantee	1 year- Until 12/31/2019	1 year- Until 12/31/2020	3 years- Until 12/31/2022
Total Monthly Admin Fee	\$6,407.70	\$6,253.32	\$9,701.76
Annual Admin Fee	\$76,892.40	\$75,039.84	\$116,421.12
Annual Difference	-	(\$1,852.56)	\$39,528.72
% Difference	-	-2.41%	51.41%
RX Expected Rebates	\$0.00	\$0.00	(\$126,219.00)
APC Fee	\$0.00	\$10,060.00	\$0.00
Projected Cost After Rebates	\$76,892.40	\$85,099.84	(\$9,797.88)
Annual Difference	-	\$8,207.44	(\$86,690.28)
% Difference	-	11%	-112.74%
Run-In	N/A	N/A	N/A
Run-Out	\$20.80 PEPM for 3 months	\$20.56 PEPM for 3 months	4 months of admin fee; administer 12 mon of claims
Rx Administration	Included in the fee	Included in the fee; no carve out program	Carve out, Yes
Medical & RX Integration	Included	Included	Included
Allowances/ Credits	N/A	N/A	N/A
COBRA/ HIPAA Administration	N/A	Did not quote	Included in the fee
SPD - Electronic Copy	Included	Included	Included; uses PHIA Group
ID Cards - Customized	Included	Included; third party vendor can be added if approved by BCBS association	Included; third party vendor can be added
Accept Eligibility from BenefitFirst	Yes	Yes	Yes



Town of Prosper

ASO Medical Marketing Analysis

Effective Date: 1/1/2020

	BlueCross BlueShield Current Plan + Prime RX	BlueCross BlueShield Renewal Plan + Prime RX	Maestro Health Proposed Plan + ProAct RX
Network	BlueChoice PPO Network	BlueChoice PPO Network	Cigna PPO Network
Additional Information			
Performance Guarantee	N/A	Not offered	Willing to develop one mutually agreed upon (willing to put 10% adm fee at risk)
Subrogation	The standard fee is 25% of a cases reimb recovery. Workers' Comp recoveries are not assessed a fee & any recovery is credited back to the group at 100%.	The standard fee is 25% of a cases reimb recovery. Workers' Comp recoveries are not assessed a fee & any recovery is credited back to the group at 100%.	25% of recovered savings
Wellness Programs	Well On Target Online Portal	Well On Target Online Portal. If added Wellbeing Empower coaching is available	HEALTHYme for an addtl cost
Centers of Excellence Providers	BlueDistinction Program: all facilities must regularly reapply for quality control. Bariatric surgery; cardiac, fertility, maternity care; knee & hip replacement, spine surgery, transplant services, gene therapy, cellular immunotherapy	BlueDistinction Program: all facilities must regularly reapply for quality control. Bariatric surgery; cardiac, fertility, maternity care; knee & hip replacement, spine surgery, transplant services, gene therapy, cellular immunotherapy	*Does not have a network of providers. *\$1.75PEPM Healthcare Blue Book
Bundle Pricing Arrangements	N/A	Do not offer, but willing to further discuss how to coordinate members	*\$4.50 Price MD's bundled surgeries *See PMD's bundled list for details of services available *Willing to work with current provider
Audit Duplicate Claims (4.3 questionnaire)	Auto-adjudicate 80% of claims through Blue Chips technology. Blue Chip is integrated with ClaimXten technology (software for audit procedure codes)	Auto-adjudicate 80% of claims through Blue Chips technology. Blue Chip is integrated with ClaimXten technology (software for audit procedure codes)	Yes, claims are identify by DOS, provider, and billed amount. No auto-adjudications of claims. Claim analyst looks at each claim.
Out of Network Savings/Charge	Out of State EE will be access a dsct per claim of 4.14% not to exceed \$2K per claim	Out of State EE will be access a dsct per claim of 4.14% not to exceed \$2K per claim	*If repriced with a RBP vendor (6 degrees) they keep 15% of savings on OON. If program is with Cigna, the cost is 30% of savings.
Miscellaneous / Notes	*Bank Account to pay claims needs to be open for 12 months. *The run-off claims liability is \$344.88 PEPM	*Benefits Value Advisor: \$2.95 PEPM (customer advocate -help memb to make care decisions) *Stop loss can be locked via written acceptance up to 45 cal. days after quote release *Services bill through claims: Livongo, Naturally Slim, Omada, Hinge Health *Wellbeing Enable Empower cost: \$7.95PEPM *Wellbeing Enable Savings: \$15PEPM approx./ Empower: \$20PEPM approx. *When unbundling a claim, there is a share savings of 25% charge process on the billing reconciliation	*Location: Charlotte, NC *Implementation: 90 days *Disease management catastrophic: \$95/Hr in 6 minute increment *Telemedicine: \$1.75PEPM



Town of Prosper

ASO Medical Marketing Analysis

Effective Date: 1/1/2020

	BlueCross BlueShield Current Plan + Prime RX	BlueCross BlueShield Renewal Plan + Prime RX	UMR (Carve In) Proposed Plan + Optum RX*	UMR (Carve Out) Proposed Plan + ProAct RX
Network	BlueChoice PPO Network	BlueChoice PPO Network	UHC Choice Plus Network	UHC Choice Plus Network
Set Up Fee / Captive Collateral	N/A	N/A	N/A	N/A
Renewal Fee	N/A	N/A	N/A	N/A
Administration Fees				
Medical Administration - Employee (186)	\$62.42	\$62.42	\$40.46	\$40.46
RX Rebate Credit	(\$32.92)	(\$33.75)	(\$31.75)	\$0.00
Stop Loss Interface Fee	Included	Included	\$5.00	\$5.00
Disease Management (BCBS-Wellbeing Enable)	\$4.95	\$4.95	\$3.85	\$3.85
Pre-Certification /Utilization Mgmt (pepm)	Included	Included	Included	Included
Nurse line	Included	Included	\$0.50	\$0.50
Large Case Management	Included	Included	Included	Included
PPO Access Fee (network)	Included	Included	Included	Included
Out of Network Savings PEPM Charge	N/A	N/A	\$4.00	\$4.00
External PBM Interface Fee	N/A	N/A	N/A	\$3.00
Total Admin Fees	\$34.45	\$33.62	\$22.06	\$56.81
Rate Guarantee	1 year- Until 12/31/2019	1 year- Until 12/31/2020	2 years- Until 12/31/2021	2 years- Until 12/31/2021
Total Monthly Admin Fee	\$6,407.70	\$6,253.32	\$4,103.16	\$10,566.66
Annual Admin Fee	\$76,892.40	\$75,039.84	\$49,237.92	\$126,799.92
Annual Difference	-	(\$1,852.56)	(\$27,654.48)	\$51,760.08
% Difference	-	-2.41%	-35.97%	68.98%
RX Expected Rebates	\$0.00	\$0.00	(\$11,776.00)	(\$126,219.00)
APC Fee	\$0.00	\$10,060.00	\$10,060.00	\$0.00
Projected Cost After Rebates	\$76,892.40	\$85,099.84	\$47,521.92	\$580.92
Annual Difference	-	\$8,207.44	(\$29,370.48)	(\$76,311.48)
% Difference	-	11%	-38.20%	-99.24%
Run-In	N/A	N/A	Excludes Run - In	Excludes Run - In
Run-Out	\$20.80 PEPM for 3 months	\$20.56 PEPM for 3 months	2 months of admin fee; administer 6 mon of claims	2 months of admin fee; administer 6 mon of claims
Rx Administration	Included in the fee	Included in the fee; no carve out program	Included in the fee	For carve out available - vendors require prior approval, additional fees may be applied
Medical & RX Integration	Included	Included	Included	Included
Allowances/ Credits	N/A	N/A	\$5,000 one time implementation credit - requires a 3 year agreement	\$5,000 one time implementation credit - requires a 3 year agreement
COBRA/ HIPAA Administration	N/A	Did not quote	\$1.05 pepm	\$1.05 pepm
SPD - Electronic Copy	Included	Included	Included	Included
ID Cards - Customized	Included	Included; third party vendor can be added if approved by BCBS association	Included; third party vendor can be added	Included; third party vendor can be added
Accept Eligibility from BenefitFirst	Yes	Yes	Yes	Yes



Town of Prosper ASO Medical Marketing Analysis Effective Date: 1/1/2020

	BlueCross BlueShield Current Plan + Prime RX	BlueCross BlueShield Renewal Plan + Prime RX	UMR (Carve In) Proposed Plan + Optum RX*	UMR (Carve Out) Proposed Plan + ProAct RX
Network	BlueChoice PPO Network	BlueChoice PPO Network	UHC Choice Plus Network	UHC Choice Plus Network
Additional Information				
Performance Guarantee	N/A	Not offered	None	None
Subrogation	The standard fee is 25% of a cases reimb recovery. Workers' Comp recoveries are not assessed a fee & any recovery is credited back to the group at 100%.	The standard fee is 25% of a cases reimb recovery. Workers' Comp recoveries are not assessed a fee & any recovery is credited back to the group at 100%.	Partners with Optum, claims with possible third party liability are flagged and additional information is requested from the member, 30% of recovered savings Credit Balance Recovery - 20% of recovered savings	Partners with Optum, claims with possible third party liability are flagged and additional information is requested from the member, 30% of recovered savings Credit Balance Recovery - 20% of recovered savings
Wellness Programs	Well On Target Online Portal	Well On Target Online Portal. If added Wellbeing Empower coaching is available	UMR likes to take a customized approach to wellness and prefer to walk through the groups current program to address needs. Live Rewards included. Additional Programs for a fee	UMR likes to take a customized approach to wellness and prefer to walk through the groups current program to address needs. Live Rewards included. Additional Programs for a fee
Centers of Excellence Providers	BlueDistinction Program: all facilities must regularly reapply for quality control. Bariatric surgery; cardiac, fertility, maternity care; knee & hip replacement, spine surgery, transplant services, gene therapy, cellular immunotherapy	BlueDistinction Program: all facilities must regularly reapply for quality control. Bariatric surgery; cardiac, fertility, maternity care; knee & hip replacement, spine surgery, transplant services, gene therapy, cellular immunotherapy	Bariatric, Complex Cancers, Congenital Heart Disease, Infertility, Kidney Disease (clinical support program), Fertility, Spine & Joint Surgeries & Solid Organ - Bone Marrow/Stem Cell Transplant Services - additional pepms apply for each center	Bariatric, Complex Cancers, Congenital Heart Disease, Infertility, Kidney Disease (clinical support program), Fertility, Spine & Joint Surgeries & Solid Organ - Bone Marrow/Stem Cell Transplant Services - additional pepms apply for each center
Bundle Pricing Arrangements	N/A	Do not offer, but willing to further discuss how to coordinate members	Does not have their own, can process bundled pricing-written in providers contract with UHC as a single rate of reimbursement for the bundled service	Does not have their own, can process bundled pricing-written in providers contract with UHC as a single rate of reimbursement for the bundled service
Audit Duplicate Claims (4.3 questionnaire)	Auto-adjudicate 80% of claims through Blue Chips technology. Blue Chip is integrated with ClaimXten technology (software for audit procedure codes)	Auto-adjudicate 80% of claims through Blue Chips technology. Blue Chip is integrated with ClaimXten technology (software for audit procedure codes)	Use 7 data elements to check for duplicate charges. Claims greater than \$25,000 are audited- Town can lower this threshold, 73% of claims auto adjudicated.	Use 7 data elements to check for duplicate charges. Claims greater than \$25,000 are audited- Town can lower this threshold, 73% of claims auto adjudicated.
Out of Network Savings/Charge	Out of State EE will be access a dsct per claim of 4.14% not to exceed \$2K per claim	Out of State EE will be access a dsct per claim of 4.14% not to exceed \$2K per claim	Advanced Claim Review - 30% of savings NPC & MNRP - 22% of savings *\$50,000/claim savings cap	Advanced Claim Review - 30% of savings NPC & MNRP - 22% of savings *\$50,000/claim savings cap
Miscellaneous / Notes	*Bank Account to pay claims needs to be open for 12 months. *The run-off claims liability is \$344.88 PEPM	*Benefits Value Advisor: \$2.95 PEPM (customer advocate -help memb to make care decisions) *Stop loss can be locked via written acceptance up to 45 cal. days after quote release *Services bill through claims: Livongo, Naturally Slim, Omada, Hinge Health *Wellbeing Enable Empower cost: \$7.95PEPM *Wellbeing Enable Savings: \$15PEPM approx./ Empower: \$20PEPM approx. *When unbundling a claim, there is a share savings of 25% charge process on the billing reconciliation	*Network Access Fee Excludes direct contracts *Telemedicine - \$1.25 - add dermatology no addtl cost - Behavioral Health \$0.30 pepm *Year 3 rate \$42.90, Rebate credits remain same Year 2 & 3 *Will assign claims processing/customer service location(s) if named as finalist - 8 national locations (1 in TX) *3 PDL options with different RX credits - Premium PDL rebate shown. (Select \$22 - Select Comprehensive \$27) *Maternity Management - \$0.65 pepm *Interactive Reporting - \$0.40 pepm *Added pricing for dental, STD and vision administration, COBRA and FSA *Implementation: 90 days *Stop Loss interface fee waived is using preferred vendor: BP, Berkeley, Optum, QBE, Sun Life, SwissRe, Symetra, Tokio Marine HCC, Voya, Zurich	*Network Access Fee Excludes direct contracts *Telemedicine - \$1.25 - add dermatology no addtl cost - Behavioral Health \$0.30 pepm *Year 3 rate \$42.90, Rebate credits remain same Year 2 & 3 *Will assign claims processing/customer service location(s) if named as finalist - 8 national locations (1 in TX) *Maternity Management - \$0.65 pepm *Interactive Reporting - \$0.40 pepm *Added pricing for dental, STD and vision administration, COBRA and FSA *Implementation: 90 days *Stop Loss interface fee waived is using preferred vendor: BP, Berkeley, Optum, QBE, Sun Life, SwissRe, Symetra, Tokio Marine HCC, Voya, Zurich



Town of Prosper Captive Marketing Analysis Effective Date: 1/1/2020

	BlueCross BlueShield Current Plan + Prime RX	BlueCross BlueShield Renewal Plan + Prime RX	BevCap Proposed Plan + Envision RX
Network	BlueChoice PPO Network	BlueChoice PPO Network	Open Choice Aetna Network
Set Up Fee / Captive Collateral	N/A	N/A	\$82,718
Renewal Fee	N/A	N/A	N/A
Administration Fees			
Medical Administration - Employee (186)	\$62.42	\$62.42	\$18.00
RX Rebate Credit	(\$32.92)	(\$33.75)	N/A
Stop Loss Interface Fee	Included	Included	\$4.00
Disease Management (BCBS-Wellbeing Enable)	\$4.95	\$4.95	\$4.00
Pre-Certification /Utilization Mgmt (pepm)	Included	Included	\$2.00
Compass / Member Advocate	\$0.00	\$0.00	\$2.00
Telemedicine (24/7 call-a-doc)	\$1.50	\$1.50	\$1.45
Kempton Group	\$4.75	\$4.75	\$0.00
Nurseline	Included	Included	\$3.50
Large Case Management	Included	Included	\$2.00
PPO Access Fee (network) (Aetna & PBM)	Included	Included	\$18.85
Captive Expenses (phia, management, adm., website)	N/A	N/A	\$41.13
Run Out Admin Claim Fee	N/A	N/A	\$5.20
Out of Network Savings PEPM Charge	N/A	N/A	N/A
Total Admin Fees	\$40.70	\$39.87	\$102.13
Rate Guarantee	1 year- Until 12/31/2019	1 year- Until 12/31/2020	1 year- Until 12/31/2020
Total Monthly Admin Fee	\$7,570.20	\$7,415.82	\$18,996.18
Annual Admin Fee	\$90,842.40	\$88,989.84	\$227,954.16
Annual Difference	-	(\$1,852.56)	\$137,111.76
% Difference	-	-2.04%	150.93%
Annual Stop Loss Premiums	\$432,494.64	\$445,373.28	\$503,747.52
Annual Liability - Maximum Expected	\$2,350,128.60	\$2,276,662.32	\$2,374,842.48
Annual Total Charges	\$2,873,465.64	\$2,811,025.44	\$3,106,544.16
Annual Difference	-	(\$62,440.20)	\$233,078.52
% Difference	-	-2.17%	8.11%



Town of Prosper

Captive Marketing Analysis

Effective Date: 1/1/2020

	BlueCross BlueShield Current Plan + Prime RX	BlueCross BlueShield Renewal Plan + Prime RX	BevCap Proposed Plan + Envision RX
Run-In	N/A	N/A	N/A
Run-Out	\$20.80 PEPM for 3 months	\$20.56 PEPM for 3 months	Written notification is required to term the captive. 3 months of admin fee (BevCap + Boon Chapman)
Rx Administration	Included in the fee	Included in the fee; no carve out program	Included in the fee; no carve out program
Medical & RX Integration	Included	Included	Included
Allowances/ Credits	N/A	N/A	N/A
COBRA/ HIPAA Administration	N/A	Did not quote	N/A
SPD - Electronic Copy	Included	Included	Included
ID Cards - Customized	Included	Included; third party vendor can be added if approved by BCBS association	Included; third party vendor can be added. Some of the customization is non-negotiable
Accept Eligibility from BenefitFirst	Yes	Yes	Yes
Performance Guarantee	N/A	Not offered	90% of all claims received paid in 10 days or less. / Audit measures: 2% random audit/ Financial: 99%/ Payment: 95%/ Accuracy: 95%
Subrogation	The standard fee is 25% of a cases reimb recovery. Workers' Comp recoveries are not assessed a fee & any recovery is credited back to the group at 100%.	The standard fee is 25% of a cases reimb recovery. Workers' Comp recoveries are not assessed a fee & any recovery is credited back to the group at 100%.	No cost - Included in Phia admin fee (\$2.50PEPM)
Wellness Programs	Well On Target Online Portal	Well On Target Online Portal. If added Wellbeing Empower coaching is available	Voluntary biometric screening & wellness: \$100 per employee per year fee (\$18,600 annual)
Centers of Excellence Providers	BlueDistinction Program: all facilities must regularly reapply for quality control. Bariatric surgery; cardiac, fertility, maternity care; knee & hip replacement, spine surgery, transplant services, gene therapy, cellular immunotherapy	BlueDistinction Program: all facilities must regularly reapply for quality control. Bariatric surgery; cardiac, fertility, maternity care; knee & hip replacement, spine surgery, transplant services, gene therapy, cellular immunotherapy	*Aetna Institutes of Excellence transplant network. Bariatric, Cardiac, Orthopedic surgery
Bundle Pricing Arrangements	N/A	Do not offer, but willing to further discuss how to coordinate members	Boon Chapman will handle the relationship with all vendors worked. They follow the Free Market Medical Association pillars
Audit Duplicate Claims (4.3 questionnaire)	Auto-adjudicate 80% of claims through Blue Chips technology. Blue Chip is integrated with ClaimXten technology (software for audit procedure codes)	Auto-adjudicate 80% of claims through Blue Chips technology. Blue Chip is integrated with ClaimXten technology (software for audit procedure codes)	*Auto-adjudicate less than 40% *Manually audit claims over \$10K
Kempton Group	*\$1,000 per claim fee. This fee is applicable for all claims higher than \$1K	*\$1,000 per claim fee. This fee is applicable for all claims higher than \$1K	*Boon Chapman provides similar services than the Kempton Group. They will not work with Kempton Group.
Out of Network Savings/Charge	Out of State EE will be access a dsct per claim of 4.14% not to exceed \$2K per claim	Out of State EE will be access a dsct per claim of 4.14% not to exceed \$2K per claim	*Boon Chapman receives 10% of achieved savings
Miscellaneous / Notes	*Bank Account to pay claims needs to be open for 12 months. *The run-off claims liability is \$344.88 PEPM	*Benefits Value Advisor: \$2.95PEPM (customer advocate -help memb to make care decisions) *Stop loss can be locked via written acceptance up to 45 cal. days after quote release *Services bill through claims: Livongo, Naturally Slim, Omada, Hinge Health *Wellbeing Enable Empower cost: \$7.95PEPM *Wellbeing Enable Savings: \$15PEPM approx./ Empower: \$20PEPM approx. *When unbundling a claim, there is a share savings of 25% charge process on the billing reconciliation	*Boon Chapman is the administrator/ Berkley the stop loss carrier / BC Cayman is the Captive Name *Proposal eff date 10/1/19 *Captive Layer: \$250K (27/15 contract) *Collateral Contribution for 1st Yr policy: \$82,718 needs to be funded prior to effective date and paid in cash *Can administer HDHP *IBNR is not factor into the calculation.



Town of Prosper

Stop Loss Marketing Analysis

Effective Date: 1/1/2020

Stop Loss Carrier	BCBS Current Plan	BCBS Renewal Plan	BevCap / Berkley Proposed Plan	Cigna Proposed Plan
TPA / Network	BCBS	BCBS	Boon Chapman	Cigna
SPECIFIC RETENTION	\$75,000	\$75,000	\$75,000	\$75,000
Contract	PAID	PAID	24/12	12/15
Coverages	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx
Lifetime Maximum Reimbursement	Unlimited	Unlimited	Unlimited	Unlimited
Specific Rates				
Single 88	\$163.71	\$185.67	\$91.42	\$188.09
Family 98	\$163.71	\$185.67	\$319.58	\$188.09
Composite 186	\$163.71	\$185.67	\$211.63	\$188.09
Specific Monthly Premium	\$30,450.06	\$34,534.62	\$39,363.80	\$34,984.74
Specific Annual Premium	\$365,400.72	\$414,415.44	\$472,365.60	\$419,816.88
Aggregate Rate				
Composite	\$30.06	\$13.87	\$14.06	\$8.33
Monthly Accomodation				
Aggregate Monthly Premium	\$5,591.16	\$2,579.82	\$2,615.16	\$1,549.38
Aggregate Annual Premium	\$67,093.92	\$30,957.84	\$31,381.92	\$18,592.56
AGGREGATE RETENTION				
Contract	PAID	PAID	24/12	12/15
Coverages	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx
Run-In Limit	n/a	n/a	\$445,283	n/a
Maximum Reimbursement	\$1,000,000	\$1,000,000	\$1,000,000	Unlimited
Corridor	125%	125%	120%	125%
Aggregate Factors				
Single 88	\$1,052.93	\$1,020.01	\$485.16	\$938.81
Family 98	\$1,052.93	\$1,020.01	\$1,583.77	\$938.81
Composite 186	\$1,052.93	\$1,020.01	\$1,064.00	\$938.81
Monthly Attachment Factor	\$195,844.05	\$189,721.86	\$197,903.54	\$174,618.66
Annual Attachment Factor	\$2,350,128.60	\$2,276,662.32	\$2,374,842.48	\$2,095,423.92

TOTAL FIXED COSTS

Total Monthly Premium	\$36,041.22	\$37,114.44	\$41,978.96	\$36,534.12
Total Annual Premium	\$432,494.64	\$445,373.28	\$503,747.52	\$438,409.44
Annual Difference	-	\$12,878.64	\$71,252.88	\$5,914.80
Percent Difference	-	2.98%	16.47%	1.37%
Total Maximum Liability	\$2,782,623.24	\$2,722,035.60	\$2,878,590.00	\$2,533,833.36
Annual Difference	-	(\$60,587.64)	\$95,966.76	(\$248,789.88)
Percent Difference	-	-2.18%	3.45%	-8.94%

Additional Comments:

Run Off Claim Liability: \$344.48
PEPM for 3 months

*Run Off Claim Liability: \$332.56
PEPM for 3 months

*Illustrative rates. Need add'l
claim data.

*Stop Loss quote contingent on
large claims thru 8/31/19

*Stop Loss Renewal released 4-9
months prior to effective date:
Can be locked in (via written
acceptance) up to 45 calendar
days after quote is released. After
45 days, this quote becomes
illustrative

*Proposal based: losses incurred
10/1/18 - 12/31/20 & paid 10/1/19
- 12/31/20

*No new lasers & rate cap
provisions at renewal



Town of Prosper
Stop Loss Marketing Analysis - Market Check
\$75,000 - BCBS Administrator
Effective Date: 1/1/2020

Stop Loss Carrier	BCBS Current Plan	BCBS Renewal Plan	TMS Re Proposed Plan	HM - Option 1 Proposed Plan	HM - Option 2 Proposed Plan	QBE - Option 1 Proposed Plan	QBE - Option 2 Proposed Plan
TPA / Network	BCBS	BCBS	BCBS	BCBS	BCBS	BCBS	BCBS
SPECIFIC RETENTION	\$75,000	\$75,000	\$75,000	\$75,000	\$75,000	\$75,000	\$75,000
Contract	PAID	PAID	24/12	24/12	24/12	24/12	24/12
Coverages	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx
Lifetime Maximum Reimbursement	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Specific Rates							
Composite 186	\$163.71	\$185.67	\$183.18	\$205.00	\$218.33	\$194.45	\$208.00
Specific Monthly Premium	\$30,450.06	\$34,534.62	\$34,071.48	\$38,130.00	\$40,609.38	\$36,167.70	\$38,688.00
Specific Annual Premium	\$365,400.72	\$414,415.44	\$408,857.76	\$457,560.00	\$487,312.56	\$434,012.40	\$464,256.00
Aggregate Rate							
Composite	\$30.06	\$13.87	\$14.90	\$11.40	\$11.40	\$6.76	\$6.76
Monthly Accomodation							
Aggregate Monthly Premium	\$5,591.16	\$2,579.82	\$2,771.40	\$2,120.40	\$2,120.40	\$1,257.36	\$1,257.36
Aggregate Annual Premium	\$67,093.92	\$30,957.84	\$33,256.80	\$25,444.80	\$25,444.80	\$15,088.32	\$15,088.32
AGGREGATE RETENTION							
Contract	PAID	PAID	24/12	24/12	24/12	24/12	24/12
Coverages	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx
Run-In Limit	n/a	n/a	n/a	\$362,907	\$362,907	\$421,887	\$421,887
Maximum Reimbursement	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000
Corridor	125%	125%	125%	125%	125%	125%	125%
Aggregate Factors							
Composite 186	\$1,052.93	\$1,020.01	\$1,045.06	\$1,027.25	\$1,027.25	\$1,061.51	\$1,061.51
Monthly Attachment Factor	\$195,844.05	\$189,721.86	\$194,381.16	\$191,068.50	\$191,068.50	\$197,440.86	\$197,440.86
Annual Attachment Factor	\$2,350,128.60	\$2,276,662.32	\$2,332,573.92	\$2,292,822.00	\$2,292,822.00	\$2,369,290.32	\$2,369,290.32
TOTAL FIXED COSTS							
Total Monthly Premium	\$36,041.22	\$37,114.44	\$36,842.88	\$40,250.40	\$42,729.78	\$37,425.06	\$39,945.36
Total Annual Premium	\$432,494.64	\$445,373.28	\$442,114.56	\$483,004.80	\$512,757.36	\$449,100.72	\$479,344.32
Annual Difference	-	\$12,878.64	\$9,619.92	\$50,510.16	\$80,262.72	\$16,606.08	\$46,849.68
Percent Difference	-	2.98%	2.22%	11.68%	18.56%	3.84%	10.83%
Total Maximum Liability	\$2,782,623.24	\$2,722,035.60	\$2,774,688.48	\$2,775,826.80	\$2,805,579.36	\$2,818,391.04	\$2,848,634.64
Annual Difference	-	(\$60,587.64)	(\$7,934.76)	(\$6,796.44)	\$22,956.12	\$35,767.80	\$66,011.40
Percent Difference	-	-2.18%	-0.29%	-0.24%	0.82%	1.29%	2.37%
Additional Comments:		<i>Pending Large Claim Review</i>	<i>Pending Large Claim Review</i>	<i>Pending Large Claim Review</i>	<i>Pending Large Claim Review No New Lasers at Renewal with 50% rate cap</i>	<i>Pending Large Claim Review</i>	<i>Pending Large Claim Review No New Lasers at Renewal with 50% rate cap</i>



Town of Prosper
Stop Loss Marketing Analysis - Market Check
\$100,000 - BCBS Administrator
Effective Date: 1/1/2020

Stop Loss Carrier	BCBS Current Plan	BCBS Renewal Plan	TMS Re Proposed Plan	HM - Option 1 Proposed Plan	HM - Option 2 Proposed Plan	QBE - Option 1 Proposed Plan	QBE - Option 2 Proposed Plan
TPA / Network	BCBS	BCBS	BCBS	BCBS	BCBS	BCBS	BCBS
SPECIFIC RETENTION	\$75,000	\$75,000	\$100,000	\$100,000	\$100,000	\$100,000	\$100,000
Contract	PAID	PAID	24/12	24/12	24/12	24/12	24/12
Coverages	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx
Lifetime Maximum Reimbursement	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Specific Rates							
Composite 186	\$163.71	\$185.67	\$145.97	\$164.54	\$175.24	\$158.56	\$169.57
Specific Monthly Premium	\$30,450.06	\$34,534.62	\$27,150.42	\$30,604.44	\$32,594.64	\$29,492.16	\$31,540.02
Specific Annual Premium	\$365,400.72	\$414,415.44	\$325,805.04	\$367,253.28	\$391,135.68	\$353,905.92	\$378,480.24
Aggregate Rate							
Composite	\$30.06	\$13.87	\$18.68	\$12.53	\$12.53	\$8.43	\$8.43
Monthly Accommodation							
Aggregate Monthly Premium	\$5,591.16	\$2,579.82	\$3,474.48	\$2,330.58	\$2,330.58	\$1,567.98	\$1,567.98
Aggregate Annual Premium	\$67,093.92	\$30,957.84	\$41,693.76	\$27,966.96	\$27,966.96	\$18,815.76	\$18,815.76
AGGREGATE RETENTION							
Contract	PAID	PAID	24/12	24/12	24/12	24/12	24/12
Coverages	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx
Run-In Limit	n/a	n/a	n/a	\$375,511	\$375,511	\$426,425	\$426,425
Maximum Reimbursement	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000
Corridor	125%	125%	125%	125%	125%	125%	125%
Aggregate Factors							
Composite 186	\$1,052.93	\$1,020.01	\$1,069.44	\$1,071.42	\$1,071.42	\$1,072.93	\$1,072.93
Monthly Attachment Factor	\$195,844.05	\$189,721.86	\$198,915.84	\$199,284.12	\$199,284.12	\$199,564.98	\$199,564.98
Annual Attachment Factor	\$2,350,128.60	\$2,276,662.32	\$2,386,990.08	\$2,391,409.44	\$2,391,409.44	\$2,394,779.76	\$2,394,779.76
TOTAL FIXED COSTS							
Total Monthly Premium	\$36,041.22	\$37,114.44	\$30,624.90	\$32,935.02	\$34,925.22	\$31,060.14	\$33,108.00
Total Annual Premium	\$432,494.64	\$445,373.28	\$367,498.80	\$395,220.24	\$419,102.64	\$372,721.68	\$397,296.00
Annual Difference	-	\$12,878.64	(\$64,995.84)	(\$37,274.40)	(\$13,392.00)	(\$59,772.96)	(\$35,198.64)
Percent Difference	-	2.98%	-15.03%	-8.62%	-3.10%	-13.82%	-8.14%
Total Maximum Liability	\$2,782,623.24	\$2,722,035.60	\$2,754,488.88	\$2,786,629.68	\$2,810,512.08	\$2,767,501.44	\$2,792,075.76
Annual Difference	-	(\$60,587.64)	(\$28,134.36)	\$4,006.44	\$27,888.84	(\$15,121.80)	\$9,452.52
Percent Difference	-	-2.18%	-1.01%	0.14%	1.00%	-0.54%	0.34%
Additional Comments:		<i>Pending Large Claim Review</i>	<i>Pending Large Claim Review</i>	<i>Pending Large Claim Review</i>	<i>Pending Large Claim Review</i> <i>No New Lasers at Renewal with 50% rate cap</i>	<i>Pending Large Claim Review</i>	<i>Pending Large Claim Review</i> <i>No New Lasers at Renewal with 50% rate cap</i>



Town of Prosper
Stop Loss Marketing Analysis - Market Check
\$75,000 - UMR Administrator
Effective Date: 1/1/2020

Stop Loss Carrier	BCBS Current Plan	BCBS Renewal Plan	TMS Re Proposed Plan	HM - Option 1 Proposed Plan	HM - Option 2 Proposed Plan	QBE - Option 1 Proposed Plan	QBE - Option 2 Proposed Plan
TPA / Network	BCBS	BCBS	UMR	UMR	UMR	UMR	UMR
SPECIFIC RETENTION	\$75,000	\$75,000	\$75,000	\$75,000	\$75,000	\$75,000	\$75,000
Contract	PAID	PAID	24/12	24/12	24/12	24/12	24/12
Coverages	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx
Lifetime Maximum Reimbursement	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Specific Rates							
Composite 186	\$163.71	\$185.67	\$201.18	\$223.66	\$238.20	\$201.23	\$215.25
Specific Monthly Premium	\$30,450.06	\$34,534.62	\$37,419.48	\$41,600.76	\$44,305.20	\$37,428.78	\$40,036.50
Specific Annual Premium	\$365,400.72	\$414,415.44	\$449,033.76	\$499,209.12	\$531,662.40	\$449,145.36	\$480,438.00
Aggregate Rate							
Composite	\$30.06	\$13.87	\$15.66	\$12.31	\$12.31	\$6.97	\$6.97
Monthly Accomodation							
Aggregate Monthly Premium	\$5,591.16	\$2,579.82	\$2,912.76	\$2,289.66	\$2,289.66	\$1,296.42	\$1,296.42
Aggregate Annual Premium	\$67,093.92	\$30,957.84	\$34,953.12	\$27,475.92	\$27,475.92	\$15,557.04	\$15,557.04
AGGREGATE RETENTION							
Contract	PAID	PAID	24/12	24/12	24/12	24/12	24/12
Coverages	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx
Run-In Limit	n/a	n/a	n/a	\$399,199	\$399,199	\$426,425	\$426,425
Maximum Reimbursement	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000
Corridor	125%	125%	125%	125%	125%	125%	125%
Aggregate Factors							
Composite 186	\$1,052.93	\$1,020.01	\$1,097.31	\$1,129.98	\$1,129.98	\$1,093.36	\$1,093.36
Monthly Attachment Factor	\$195,844.05	\$189,721.86	\$204,099.66	\$210,176.28	\$210,176.28	\$203,364.96	\$203,364.96
Annual Attachment Factor	\$2,350,128.60	\$2,276,662.32	\$2,449,195.92	\$2,522,115.36	\$2,522,115.36	\$2,440,379.52	\$2,440,379.52
TOTAL FIXED COSTS							
Total Monthly Premium	\$36,041.22	\$37,114.44	\$40,332.24	\$43,890.42	\$46,594.86	\$38,725.20	\$41,332.92
Total Annual Premium	\$432,494.64	\$445,373.28	\$483,986.88	\$526,685.04	\$559,138.32	\$464,702.40	\$495,995.04
Annual Difference	-	\$12,878.64	\$51,492.24	\$94,190.40	\$126,643.68	\$32,207.76	\$63,500.40
Percent Difference	-	2.98%	11.91%	21.78%	29.28%	7.45%	14.68%
Total Maximum Liability	\$2,782,623.24	\$2,722,035.60	\$2,933,182.80	\$3,048,800.40	\$3,081,253.68	\$2,905,081.92	\$2,936,374.56
Annual Difference	-	(\$60,587.64)	\$150,559.56	\$266,177.16	\$298,630.44	\$122,458.68	\$153,751.32
Percent Difference	-	-2.18%	5.41%	9.57%	10.73%	4.40%	5.53%
Additional Comments:		<i>Pending Large Claim Review</i>	<i>Pending Large Claim Review</i>	<i>Pending Large Claim Review</i>	<i>Pending Large Claim Review</i>	<i>Pending Large Claim Review</i>	<i>Pending Large Claim Review</i>
					<i>No New Lasers at Renewal with 50% rate cap</i>		<i>No New Lasers at Renewal with 50% rate cap</i>



Town of Prosper
Stop Loss Marketing Analysis - Market Check
\$100,000 - UMR Administrator
Effective Date: 1/1/2020

Stop Loss Carrier	BCBS Current Plan	BCBS Renewal Plan	TMS Re Proposed Plan	HM - Option 1 Proposed Plan	HM - Option 2 Proposed Plan	QBE - Option 1 Proposed Plan	QBE - Option 2 Proposed Plan
TPA / Network	BCBS	BCBS	UMR	UMR	UMR	UMR	UMR
SPECIFIC RETENTION	\$75,000	\$75,000	\$100,000	\$100,000	\$100,000	\$100,000	\$100,000
Contract	PAID	PAID	24/12	24/12	24/12	24/12	24/12
Coverages	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx
Lifetime Maximum Reimbursement	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Specific Rates							
Composite 186	\$163.71	\$185.67	\$160.84	\$179.85	\$191.54	\$164.28	\$175.71
Specific Monthly Premium	\$30,450.06	\$34,534.62	\$29,916.24	\$33,452.10	\$35,626.44	\$30,556.08	\$32,682.06
Specific Annual Premium	\$365,400.72	\$414,415.44	\$358,994.88	\$401,425.20	\$427,517.28	\$366,672.96	\$392,184.72
Aggregate Rate							
Composite	\$30.06	\$13.87	\$19.62	\$13.49	\$13.49	\$8.69	\$8.69
Monthly Accomodation							
Aggregate Monthly Premium	\$5,591.16	\$2,579.82	\$3,649.32	\$2,509.14	\$2,509.14	\$1,616.34	\$1,616.34
Aggregate Annual Premium	\$67,093.92	\$30,957.84	\$43,791.84	\$30,109.68	\$30,109.68	\$19,396.08	\$19,396.08
AGGREGATE RETENTION							
Contract	PAID	PAID	24/12	24/12	24/12	24/12	24/12
Coverages	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx
Run-In Limit	n/a	n/a	n/a	\$416,365	\$416,365	\$426,425	\$426,425
Maximum Reimbursement	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000
Corridor	125%	125%	125%	125%	125%	125%	125%
Aggregate Factors							
Composite 186	\$1,052.93	\$1,020.01	\$1,122.91	\$1,178.57	\$1,178.57	\$1,105.12	\$1,105.12
Monthly Attachment Factor	\$195,844.05	\$189,721.86	\$208,861.26	\$219,214.02	\$219,214.02	\$205,552.32	\$205,552.32
Annual Attachment Factor	\$2,350,128.60	\$2,276,662.32	\$2,506,335.12	\$2,630,568.24	\$2,630,568.24	\$2,466,627.84	\$2,466,627.84

TOTAL FIXED COSTS

Total Monthly Premium	\$36,041.22	\$37,114.44	\$33,565.56	\$35,961.24	\$38,135.58	\$32,172.42	\$34,298.40
Total Annual Premium	\$432,494.64	\$445,373.28	\$402,786.72	\$431,534.88	\$457,626.96	\$386,069.04	\$411,580.80
Annual Difference	-	\$12,878.64	(\$29,707.92)	(\$959.76)	\$25,132.32	(\$46,425.60)	(\$20,913.84)
Percent Difference	-	2.98%	-6.87%	-0.22%	5.81%	-10.73%	-4.84%

Total Maximum Liability	\$2,782,623.24	\$2,722,035.60	\$2,909,121.84	\$3,062,103.12	\$3,088,195.20	\$2,852,696.88	\$2,878,208.64
Annual Difference	-	(\$60,587.64)	\$126,498.60	\$279,479.88	\$305,571.96	\$70,073.64	\$95,585.40
Percent Difference	-	-2.18%	4.55%	10.04%	10.98%	2.52%	3.44%

Additional Comments: Pending Large Claim Review Pending Large Claim Review Pending Large Claim Review Pending Large Claim Review No New Lasers at Renewal with 50% rate cap Pending Large Claim Review No New Lasers at Renewal with 50% rate cap



Disclaimer

The following summary of coverages is to be used only as an overview of each policy written and in no way should it be used, nor is intended to be used, as a substitute for the original policy provisions. It has been prepared as a guideline for your reference only.

The policy/policies contain conditions, limitations and exclusions which may affect or limit coverage to be provided and should be reviewed by the insured to verify that coverage has been written as requested.

All of the information contained in this proposal is subject to the terms, conditions and limitations contained in the policies. Values are based on information provided by the client.

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McGRIFF, SEIBELS & WILLIAMS, INC. COMPENSATION STATEMENT

Our principal remuneration for the placement and service of your insurance policy(ies) will be by commission (a proportion of the premium paid that is allowed to us by the insurance company(ies)) and/or a mutually agreed fee.

You should be aware that we may receive additional income from the following sources:

- Interest or Investment Income earned on insurance premiums.**
- Expense Allowances or Reimbursements from insurance companies and other vendors for (a) educational and professional development programs; (b) managing and administering certain binding authorities and other similar facilities, including claims which may arise; and (c) attendance at insurance company meetings and events; all of which we believe enable us to provide more efficient service and competitive terms to those clients for whom we consider the use of such facilities appropriate.**
- Tier II Commission (sometimes referred to as “extra compensation”) is exclusive to the placement of employee benefits insurance and is based on premium volume of new business and/or premium retention.**
- Contingent Commission (sometimes referred to as “profit sharing”) which can be based on profitability, premium volume, premium retention, and/or growth. If any part of your account is on a fee basis, we will not accept contingent commissions related to your account.**

If you have questions or desire additional information about remuneration and other income, please contact your Agent who will put you in touch with our Chief Risk Manager for assistance. If any part of your insurance program is placed through any BB&T-owned companies (including retail insurance brokers BB&T Insurance Services, Inc. and BB&T Insurance Services of California, Inc.; wholesale insurance brokers CRC Insurance Services, Inc. and Crump Life Insurance Services, Inc.; managing general underwriter AmRisc, LP; insurance premium finance company, Prime Rate Premium Finance Corporation, Inc. or affiliates; or BB&T Assurance Company, Ltd.) disclosure of that income will also be included.

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Action
Pharmaceutical
Consulting



RFP #2019-61-A: 2020 PBM Vendor Analysis

Presented by:

Adam Aguilar, Pharmacy Benefit Consultant

Dawn Richardson, Account Executive

PROPRIETARY AND CONFIDENTIAL



McGRIFF, SEIBELS & WILLIAMS, INC.

Going Beyond The formulary

Vendors Solicited

- Aetna
- AmWins – *Did Not Submit Bid*
- BCBS of Texas
- CapitalRx
- CastiaRx – *Did Not Submit Bid*
- CerpassRx – *Did Not Submit Bid*
- CitizensRx – *Did Not Submit Bid*
- Cigna
- Express Scripts – *Declined to Bid*
- Envolve Pharmacy Solutions – *Did Not Submit Bid*
- Heritage Health Solutions
- MedImpact – *Did Not Submit Bid*
- OptumRx – *Declined to Bid*
- ProAct
- Roundstone Captive – *Declined to Bid*
- Southern Scripts – *Declined to Bid*
- UMR
- WellDyne



Financial Analysis: Traditional

	BCBS TX (CURRENT)	BCBS of TX (PROPOSED)	Aetna	CapitalRx TRADITIONAL	Cigna	Heritage Health Solutions TRADITIONAL	ProAct TRADITIONAL	UMR (Optum)	WellDyneRx TRADITIONAL
Retail 30									
Brand Ingredient Cost	\$132,433	\$130,828	\$131,631	\$132,433	\$129,704	\$132,433	\$131,229	\$131,631	\$133,236
Generic Ingredient Cost	\$72,885	\$81,359	\$71,190	\$58,477	\$90,682	\$67,800	\$67,800	\$72,037	\$67,800
Dispensing Fee	\$3,003	\$3,230	\$2,247	\$2,107	\$3,933	\$2,528	\$2,247	\$1,966	\$2,809
Administrative Fee	\$0	\$0	\$0	\$18,961	\$0	\$0	\$0	\$0	\$0
Retail 90									
Brand Ingredient Cost	\$96,146	\$97,644	\$98,243	\$94,649	\$93,451	\$95,847	\$94,050	\$95,847	\$97,045
Generic Ingredient Cost	\$26,075	\$29,800	\$26,075	\$21,419	\$29,800	\$22,350	\$22,350	\$26,386	\$23,592
Dispensing Fee	\$549	\$619	\$0	\$269	\$753	\$0	\$0	\$108	\$0
Administrative Fee	\$0	\$0	\$0	\$3,632	\$0	\$0	\$0	\$0	\$0
Mail Order Service									
Brand Ingredient Cost	\$7,676	\$7,676	\$7,434	\$7,338	\$7,531	\$7,338	\$7,338	\$7,386	\$7,628
Generic Ingredient Cost	\$3,834	\$4,382	\$4,163	\$3,724	\$5,258	\$3,724	\$3,943	\$4,217	\$3,943
Dispensing Fee	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Administrative Fee	\$0	\$0	\$0	\$203	\$0	\$0	\$0	\$0	\$0
Specialty									
Brand Ingredient Cost	\$271,978	\$271,978	\$280,170	\$278,532	\$278,532	\$270,340	\$276,893	\$271,978	\$271,978
Generic Ingredient Cost	\$28	\$28	\$29	\$29	\$29	\$28	\$29	\$28	\$28
Dispensing Fee	\$7	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Administrative Fee	\$0	\$0	\$0	\$223	\$0	\$0	\$0	\$0	\$0
Projected Cost - Before Rebates	\$614,615	\$627,545	\$621,182	\$621,995	\$639,673	\$602,388	\$605,880	\$611,584	\$608,059
\$ Difference From Baseline - Before Rebates		\$12,930	\$6,568	\$7,380	\$25,059	(\$12,226)	(\$8,735)	(\$3,030)	(\$6,556)
% Difference From Baseline - Before Rebates		2.10%	1.07%	1.20%	4.08%	-1.99%	-1.42%	-0.49%	-1.07%
Rebates									
Rebate Revenue	\$0	(\$75,330)	(\$69,605)	(\$143,930)	\$0	(\$101,350)	(\$126,219)	(\$11,776)	(\$79,590)
APC Comp	\$0	\$10,060	\$10,060	\$0	\$10,060	\$0	\$0	\$10,060	\$0
Projected Cost - After Rebates	\$614,615	\$562,274	\$561,636	\$478,065	\$649,733	\$501,038	\$479,661	\$609,868	\$528,469
\$ Difference From Baseline - After Rebates		(\$52,340)	(\$52,978)	(\$136,550)	\$35,118	(\$113,576)	(\$134,954)	(\$4,747)	(\$86,146)
Annualized - \$ Difference from Baseline - After Rebates									
% Difference From Baseline - After Rebates		-8.52%	-8.62%	-22.22%	5.71%	-18.48%	-21.96%	-0.77%	-14.02%

This pricing is based on a 3-year agreement.

This analysis should not be construed as a guarantee of savings. It is an assumption based on Rx claims: 01.2018-12.2018

Rebate Estimates Include Specialty Rebates; Calculated Using Brand Specialty Claim Count Filled During Rx Claims Period.

Action Pharmaceutical Consulting's Compensation is included in the pricing quote.

Aetna

Estimated Savings After Rebates: -8.62%, -\$52,978
Formulary Disruption: Unknown

Pros:

- ✓ Offering a 1-Year Term Through 12/31/2020
- ✓ Owns Mail and Specialty Pharmacy's

Cons:

- ✗ Discounts are not Locked in for Three Years
- ✗ Did not Respond to Pharmacy RFP; Provided Carve-In Quote Through Medical RFP
- ✗ Pricing Assumes Aetna Administers both Medical and Pharmacy Benefits
- ✗ Member Disruption; Formulary, Re-Card, Specialty & Mail Order Changes
- ✗ Single Source Generics are Not Included in Overall Generic Discount; Brand Discount
- ✗ Discounts and Dispensing Fee's Quoted are Not Guaranteed
- ✗ Some Preferred Brands will Process at Tier 1, Generic Copay Tier
- ✗ No Grace Fills at Retail for Specialty Medications

BCBS of Texas (Prime Therapeutics)

Estimated Savings After Rebates: -8.52%, -\$52,340

Formulary Disruption: None

Pros:

- ✓ No Member Disruption or Re-Card
- ✓ Ability to Offer Narrow Network w/ Deeper Discounts; CVS Excluded
- ✓ 100% of Desktop Audit Recoveries Credited to the Plan
- ✓ Owns Specialty and Mail Order Pharmacy's Through Partnership with Walgreens and Prime Therapeutics
- ✓ Stand Alone Specialty Call Center
- ✓ Specialty Supplies Included with Quote
- ✓ Split-Fill Program at Specialty
- ✓ Assumes Cost of Lost Specialty Medications
- ✓ Ingredient Level Processing on Compounds
- ✓ Loading of Historical Data Included in Quote
- ✓ Clinical and Administrative Prior Authorizations are Included with Quote

Cons:

- ✗ Carve-In Quote; Prime Therapeutics Required PBM
- ✗ Single Source Generics or Generics with 3 or Less Manufacturers Discounted as Brand
- ✗ Deviations to Terms and Definitions Not Notated in Response; BCBS Standard ASA Agreement Required
- ✗ 75% of Field Audit Recoveries Credited to the Plan
- ✗ Oral HIV and Transplant Medications Not Considered Specialty; No Specialty PA Attached
- ✗ Offering a PEPM Rebate Credit; Rebates Received Above Credit Retained by BCBS
- ✗ \$3,500 Annual Fee for Blue Insight Online Reporting Access
- ✗ Did Not Provide References; Cited Incumbent as Reason

CapitalRx

Estimated Savings After Rebates: -22.22%, -\$136,550
Formulary Disruption: 73.02% None, 19.24% Negative, 7.73% Excluded

Pros:

- ✓ Ability to Offer Narrow Network w/ Deeper Discounts; CVS or Walmart Excluded
- ✓ Standard 80% of Audit Recoveries Credited to the Plan
- ✓ Covers Cost of Lost Specialty Medications
- ✓ Offers a Copay Card Accumulator Program with \$\$ Credited to the Plan; \$50/Claim
- ✓ Ingredient Level Processing on Compounds
- ✓ Compound Dispense Fee's Determined by Pharmacy and Passed Thru to Plan
- ✓ Loading of Historical Data Included in Quote
- ✓ Offering a \$1,000 Implementation Allowance w/ \$500 Annual Maintenance Allowance
- ✓ Administrative Prior Authorizations \$0
- ✓ Clinical Prior Authorizations \$35; Lower Than Industry Standard of \$50
- ✓ Online Reporting Access

Cons:

- ✗ Pass Thru Pricing with \$6.75 Per Claim Admin Fee
- ✗ Member Disruption; Formulary, Re-Card, Specialty & Mail Order Changes
- ✗ Does Not Own Mail or Specialty Pharmacy; Contracts with MagellanRx and Walmart
- ✗ Specialty Supplies not Included in Pricing
- ✗ Specialty Call Center is not Stand-Alone; Integrated with Member Services Center
- ✗ Oral HIV and Transplant Medications Not Considered Specialty; No Specialty PA Attached
- ✗ Does not Currently have Split-Fill Program at Specialty; Can Build Based on Town Parameters
- ✗ Compound Dispense Fee's Determined by Pharmacy and Passed Thru to Plan
- ✗ Member ID Cards \$0.75 Per Card, New & Replacement; Can Be Offset with Implementation Credit

Cigna

Estimated Costs Above Current After Rebates: +5.71%, +\$35,118

Formulary Disruption: 86.07% None, 3.94% Non-Preferred, 5.23% Not Covered (OTC PPI/NSA), 2.38% Excluded

Pros:

- ✓ Current Vendor Relationship as Dental Provider
- ✓ Owns Specialty and Mail Order Pharmacies; Accredo through ESI
- ✓ Stand Alone Specialty Call Center
- ✓ Specialty Supplies Included with Quote
- ✓ Split-Fill Program at Specialty
- ✓ Assumes Cost of Lost Specialty Medications
- ✓ Ingredient Level Processing on Compounds
- ✓ Loading of Historical Data Included in Quote
- ✓ Clinical and Administrative Prior Authorizations are Included with Quote
- ✓ \$10,000 Implementation Credit with Copy of a Paid Invoice
- ✓ Online Reporting Access; Cigna Access
- ✓ \$100,000 Transitional Credit with Offer

Cons:

- ✗ Cannot Carve-Out; Must Adopt Medical, Prescription and Stop-Loss
- ✗ Member Disruption; Formulary, Re-Card, Specialty & Mail Order Changes
- ✗ Did not Agree to Overall Generic Effective Rate
- ✗ Quoted Discounts are Estimates, Not Guaranteed
- ✗ Walgreens and Sam's Club Required Exclusion from Retail 90 Network
- ✗ 30% of Audit Recoveries Maintained by Cigna; Industry Standard is 20%
- ✗ Compound Dispensing Fee's \$10/Claim
- ✗ Does Not Offer Specialty Rebates
- ✗ Agreed to Terms and Conditions w/Caveats; Cigna Standard ASO Agreement Required
 - ✗ Dispute Resolution, Brand Drug Definition, Generic Drug Definition, PG Reconciliation Process, Rebates
- ✗ Did not Include References; Available if Selected as Finalist
- ✗ Initial Deposit Required Prior to Go-Live

Heritage Health Solutions

Estimated Savings After Rebates: -18.48%, -\$113,576
Formulary Disruption: Unknown

Pros:

- ✓ Agreed to Overall Generic Effective Rate
- ✓ 80% of Audit Recoveries Credited to the Plan
- ✓ Stand Alone Specialty Call Center Thru Briova
- ✓ Specialty Supplies Included with Quote
- ✓ Split-Fill Program at Specialty
- ✓ Assumes Cost of Lost Specialty Medications if Confirmed Delivery Issue
- ✓ Offers a Copay Card Accumulator Program
- ✓ Ingredient Level Processing on Compounds
- ✓ Loading of Historical Data Included in Quote
- ✓ Offering a \$4 Per Member Implementation Credit with Submitted Invoice
- ✓ Administrative Prior Authorizations \$0
- ✓ Clinical Prior Authorizations \$45; Lower Than Industry Standard of \$50

Cons:

- ✗ Member Disruption; Formulary, Re-Card, Specialty & Mail Order Changes
- ✗ Retail 90 Requires Choice of CVS Exclusive or Walgreens Exclusive; All Other Pharmacies Excluded
- ✗ Does Not Own Specialty or Mail Order; Briova Specialty & Optum Mail Order
- ✗ Compound Dispensing Fee's \$10/Claim
- ✗ Not Able to Provide Ingredient Level Compound Reporting
- ✗ Any Rebates Earned Above Minimum Guarantee Retained by Heritage
- ✗ DUR Included, RDUR Charged at \$0.27 PMPM if Elected
- ✗ Does not Currently Have Online Reporting Access
- ✗ Did not Provide Formulary Disruption; Requires a Detailed Claims Data Report

ProAct Rx

Estimated Savings After Rebates: -21.96%, -\$134,954
Formulary Disruption: Unknown

Pros:

- ✓ Agreed to Overall Generic Effective Rate
- ✓ Can Offer Narrow Pharmacy Network with Deeper Discounts; Excludes CVS & Target
- ✓ 80% of Audit Recoveries Credited to the Plan
- ✓ International Mail Order Program Available w/Cost Savings to the Plan & Member
- ✓ Owns Specialty Pharmacy; Noble Health Services
- ✓ Stand Alone Specialty Call Center
- ✓ Specialty Supplies Included with Quote
- ✓ Split-Fill Program at Specialty
- ✓ Assumes Cost of Lost Specialty Medications if Confirmed Delivery Issue
- ✓ Offers a Copay Card Accumulator Program
- ✓ Ingredient Level Processing on Compounds
- ✓ Compound Dispense Fee's Same as Channel Guarantee
- ✓ Offering a \$4 Per Member Implementation Credit with Submitted Invoice
- ✓ 90% of Rebates Earned Above Guarantee are Passed on to the Plan
- ✓ Administrative Prior Authorizations \$0; Clinical Prior Authorizations \$40; Lower Than Industry Standard of \$50
- ✓ Online Reporting Access
- ✓ Privately Held Company

Cons:

- ✗ Member Disruption; Formulary, Re-Card, Specialty & Mail Order Changes
- ✗ Loading of Historical Data \$5,000; One-Time Cost Not Retained by ProAct – Can Use Implementation Credit to Offset Cost
- ✗ RFP Not Submitted Originally as Town Required; Updated Response Provided
- ✗ Did not Provide Formulary Disruption; Requires a Detailed Claims Data Report

UMR (OptumRx)

Estimated Savings After Rebates: -0.77%, -\$4,747
Formulary Disruption: No Disruption 92.0%, Non-Formulary 8.0%

Pros:

- ✓ Can Offer Narrow Pharmacy Network with Deeper Discounts; Excludes CVS or Walgreens
- ✓ 80% of Audit Recoveries Credited to the Plan
- ✓ Owns Specialty & Mail Order Pharmacy's
- ✓ Stand Alone Specialty Call Center (Briova)
- ✓ Specialty Supplies Included with Quote
- ✓ Split-Fill Program at Specialty
- ✓ Assumes Cost of Lost Specialty Medications if Confirmed Delivery Issue
- ✓ Offers a Copay Card Accumulator Program
- ✓ Ingredient Level Processing on Compounds
- ✓ Loading of Historical Data at No Cost to the Plan
- ✓ Clinical and Administrative Prior Authorizations Included in Cost
- ✓ Online Reporting Access
- ✓ Strong Clinical Programs

Cons:

- ✗ Member Disruption; Formulary, Re-Card, Specialty & Mail Order Changes
- ✗ Did not Agree to Overall Generic Effective Rate
- ✗ Compound Claim Dispensing Fee's are \$7.50/Claim
- ✗ No Implementation Credit Offered in RFP
- ✗ Rebates Offered are Offset with Rebate Fee Credit to Medical
- ✗ Agreed to Terms & Conditions with Caveats; Caveats Not Outlined in Response
- ✗ Assigned Staff and References Only Available if Selected as a Finalist

WellDyne Rx

Estimated Savings After Rebates: -14.02%, -\$86,146

Formulary Disruption: No Disruption 98.70%, Non-Formulary 0.83%, Excluded 0.47%

Pros:

- ✓ Privately Held Company
- ✓ Owns Specialty & Mail Order Pharmacy's
- ✓ Stand Alone Specialty Call Center; US Specialty Care
- ✓ Partial Fill Program
- ✓ Offers a Copay Card Accumulator Program with \$\$ Credited to the Plan
- ✓ Strong Clinical Programs

Cons:

- ✗ Member Disruption; Formulary, Re-Card, Specialty & Mail Order Changes
- ✗ RFP Questionnaire Not Submitted; Unable to Provide by Deadline on Follow-Up
- ✗ Firm Information, Product/Service Information, References, & Proof of Insurance Not Submitted; Unable to Provide by Deadline on Follow-Up

APC Recommendations

■ ProAct Rx

- Well known in the market place and manages over half-million member lives
- Provided second largest estimated savings at 21%

■ WellDyne Rx

- Larger PBM with new Upper Management
- Provided the second largest savings at 14%

■ Capital Rx

- Provided largest estimated savings of any vendor at 22%





Q&A

Repricing Analysis - Shared Records

Town of Prosper

This report compares all shared records between all carriers. Some carriers excluded more records than others which can be seen on the "Excluded Records" line. To view disruption based on non-excluded records for each individual carrier, refer to the other disruption report.

All Records	Claims	Pre-Discount	Excluded Records*	Claims	Pre-Discount	Included Record	Claims	Pre-Discount
Inpatient Hospital	380	\$475,639.41	Inpatient Hospital	72	\$59,923.18	Inpatient Hospital	308	\$415,716.23
Outpatient Hospital	2,271	\$1,425,765.96	Outpatient Hospital	361	\$90,533.59	Outpatient Hospital	1,910	\$1,335,232.37
Office	11,224	\$1,103,744.13	Office	2,729	\$17,533.19	Office	8,495	\$1,086,210.94
Other	602	\$521,616.83	Other	75	\$10,897.98	Other	527	\$510,718.85
Total	14,477	\$3,526,766.33	Total	3,237	\$178,887.94	Total	11,240	\$3,347,878.39

*Records are excluded to ensure that all carriers are compared on the same data. Take into account how many records each carrier excluded.

BCBS	Inpatient Hospital	Outpatient Hospital	Office	All Other	Total
Pre-Discount Claims	\$415,716.23	\$1,335,232.37	\$1,086,210.94	\$510,718.85	\$3,347,878.39
Pre-Discount Claims In-Network	\$415,716.23	\$1,149,694.45	\$1,029,045.59	\$404,711.95	\$2,999,168.22
Repriced Claims In-Network	\$184,617.41	\$493,976.42	\$399,991.79	\$168,145.34	\$1,246,730.97
Discount Percentage	55.59%	57.03%	61.13%	58.45%	58.43%
Pre-Discount Claims Out-of-Network	\$0.00	\$185,537.92	\$57,165.35	\$106,006.90	\$348,710.17
Repriced Claims Out-of-Network	\$0.00	\$37,993.00	\$23,900.55	\$23,975.56	\$85,869.11
Discount Percentage	0.00%	79.52%	58.19%	77.38%	75.38%
Pre-Discount Claims	\$415,716.23	\$1,335,232.37	\$1,086,210.94	\$510,718.85	\$3,347,878.39
Repriced Claims	\$184,617.41	\$531,969.42	\$423,892.34	\$192,120.91	\$1,332,600.08
Discount Percentage	55.59%	60.16%	60.98%	62.38%	60.20%

Bevcap	Total
Pre-Discount Claims	\$3,347,878.39
Pre-Discount Claims In-Network	\$3,279,115.05
Repriced Claims In-Network	\$1,557,579.65
Discount Percentage	52.50%
Pre-Discount Claims	\$3,279,115.05
Repriced Claims	\$1,557,579.65
Discount Percentage	52.50%

*Bevcap repricing data was provided in summary format. Bevcap did not reprice out of network claims

Repricing Analysis - Shared Records

Town of Prosper

This report compares all shared records between all carriers. Some carriers excluded more records than others which can be seen on the "Excluded Records" line. To view disruption based on non-excluded records for each individual carrier, refer to the other disruption report.

All Records	Claims	Pre-Discount	Excluded Records*	Claims	Pre-Discount	Included Record	Claims	Pre-Discount
Inpatient Hospital	380	\$475,639.41	Inpatient Hospital	72	\$59,923.18	Inpatient Hospital	308	\$415,716.23
Outpatient Hospital	2,271	\$1,425,765.96	Outpatient Hospital	361	\$90,533.59	Outpatient Hospital	1,910	\$1,335,232.37
Office	11,224	\$1,103,744.13	Office	2,729	\$17,533.19	Office	8,495	\$1,086,210.94
Other	602	\$521,616.83	Other	75	\$10,897.98	Other	527	\$510,718.85
Total	14,477	\$3,526,766.33	Total	3,237	\$178,887.94	Total	11,240	\$3,347,878.39

*Records are excluded to ensure that all carriers are compared on the same data. Take into account how many records each carrier excluded.

Cigna	Inpatient Hospital	Outpatient Hospital	Office	All Other	Total
Pre-Discount Claims	\$415,716.23	\$1,335,232.37	\$1,086,210.94	\$510,718.85	\$3,347,878.39
Pre-Discount Claims In-Network	\$414,970.23	\$1,331,162.28	\$980,251.19	\$502,257.00	\$3,228,640.70
Repriced Claims In-Network	\$188,509.93	\$550,109.67	\$397,871.78	\$186,131.34	\$1,322,622.72
Discount Percentage	54.57%	58.67%	59.41%	62.94%	59.03%
Pre-Discount Claims Out-of-Network	\$746.00	\$4,070.09	\$105,959.75	\$8,461.85	\$119,237.69
Repriced Claims Out-of-Network	\$433.59	\$2,365.62	\$61,985.03	\$4,935.07	\$69,719.31
Discount Percentage	41.88%	41.88%	41.50%	41.68%	41.53%
Pre-Discount Claims	\$415,716.23	\$1,335,232.37	\$1,086,210.94	\$510,718.85	\$3,347,878.39
Repriced Claims	\$188,943.52	\$552,475.29	\$459,856.81	\$191,066.40	\$1,392,342.03
Discount Percentage	54.55%	58.62%	57.66%	62.59%	58.41%

Maestro	Inpatient Hospital	Outpatient Hospital	Office	All Other	Total
Pre-Discount Claims	\$415,716.23	\$1,335,232.37	\$1,086,210.94	\$510,718.85	\$3,347,878.39
Pre-Discount Claims In-Network	\$414,970.23	\$1,325,592.28	\$978,186.19	\$470,083.65	\$3,188,832.35
Repriced Claims In-Network	\$225,328.83	\$544,818.43	\$416,707.32	\$212,007.73	\$1,398,862.31
Discount Percentage	45.70%	58.90%	57.40%	54.90%	56.13%
Pre-Discount Claims Out-of-Network	\$746.00	\$9,640.09	\$108,024.75	\$40,635.20	\$159,046.04
Repriced Claims Out-of-Network	\$405.08	\$3,962.08	\$46,018.54	\$18,326.48	\$68,712.17
Discount Percentage	45.70%	58.90%	57.40%	54.90%	56.80%
Pre-Discount Claims	\$415,716.23	\$1,335,232.37	\$1,086,210.94	\$510,718.85	\$3,347,878.39
Repriced Claims	\$225,733.91	\$548,780.50	\$462,725.86	\$230,334.20	\$1,467,574.48
Discount Percentage	45.70%	58.90%	57.40%	54.90%	56.16%

*Maestro repricing data was provided in summary format

Repricing Analysis - Shared Records

Town of Prosper

This report compares all shared records between all carriers. Some carriers excluded more records than others which can be seen on the "Excluded Records" line. To view disruption based on non-excluded records for each individual carrier, refer to the other disruption report.

All Records	Claims	Pre-Discount	Excluded Records*	Claims	Pre-Discount	Included Record	Claims	Pre-Discount
Inpatient Hospital	380	\$475,639.41	Inpatient Hospital	72	\$59,923.18	Inpatient Hospital	308	\$415,716.23
Outpatient Hospital	2,271	\$1,425,765.96	Outpatient Hospital	361	\$90,533.59	Outpatient Hospital	1,910	\$1,335,232.37
Office	11,224	\$1,103,744.13	Office	2,729	\$17,533.19	Office	8,495	\$1,086,210.94
Other	602	\$521,616.83	Other	75	\$10,897.98	Other	527	\$510,718.85
Total	14,477	\$3,526,766.33	Total	3,237	\$178,887.94	Total	11,240	\$3,347,878.39

**Records are excluded to ensure that all carriers are compared on the same data. Take into account how many records each carrier excluded.*

UHC	Inpatient Hospital	Outpatient Hospital	Office	All Other	Total
Pre-Discount Claims	\$415,716.23	\$1,335,232.37	\$1,086,210.94	\$510,718.85	\$3,347,878.39
Pre-Discount Claims In-Network	\$413,916.23	\$1,247,780.61	\$1,005,701.04	\$401,562.06	\$3,068,959.94
Repriced Claims In-Network	\$215,775.42	\$515,411.33	\$425,657.61	\$144,479.93	\$1,301,324.29
Discount Percentage	47.87%	58.69%	57.68%	64.02%	57.60%
Pre-Discount Claims Out-of-Network	\$1,800.00	\$87,451.76	\$80,509.90	\$109,156.79	\$278,918.45
Repriced Claims Out-of-Network	\$848.57	\$39,837.83	\$34,979.67	\$30,288.22	\$105,954.29
Discount Percentage	52.86%	54.45%	56.55%	72.25%	62.01%
Pre-Discount Claims	\$415,716.23	\$1,335,232.37	\$1,086,210.94	\$510,718.85	\$3,347,878.39
Repriced Claims	\$216,623.99	\$555,249.16	\$460,637.28	\$174,768.15	\$1,407,278.58
Discount Percentage	47.89%	58.42%	57.59%	65.78%	57.97%

Disruption Analysis - Shared Records

Town of Prosper

This report compares all shared records between all carriers. Some carriers excluded more records than others which can be seen on the "Excluded Records" line. To view disruption based on non-excluded records for each individual carrier, refer to the other disruption report.

All Records	Claims	Pre-Discount
Inpatient Hospital	380	\$475,639.41
Outpatient Hospital	2,271	\$1,425,765.96
Office	11,224	\$1,103,744.13
Other	602	\$521,616.83

Excluded Records*	Claims	Pre-Discount
Inpatient Hospital	72	\$59,923.18
Outpatient Hospital	361	\$90,533.59
Office	2,729	\$17,533.19
Other	75	\$10,897.98

Included Record	Claims	Pre-Discount
Inpatient Hospital	308	\$415,716.23
Outpatient Hospital	1,910	\$1,335,232.37
Office	8,495	\$1,086,210.94
Other	527	\$510,718.85

Total	14,477	\$3,526,766.33
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Total	3,237	\$178,887.94
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Total	11,240	\$3,347,878.39
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*Records are excluded to ensure that all carriers are compared on the same data. Take into account how many records each carrier excluded.

BCBS

	Claims	Pre-Discount
Excluded Records	136	\$44,976.64
Percent Excluded	0.94%	1.28%

Aetna

	Claims	Pre-Discount
Excluded Records	193	\$122,574.68
Percent Excluded	1.33%	3.48%

Bevcap

	Claims	Pre-Discount
Excluded Records	193	\$122,574.68
Percent Excluded	1.33%	3.48%

In-Network	Claims	Pre-Discount
Inpatient Hospital	308	\$415,716.23
Outpatient Hospital	1,749	\$1,149,694.45
Office	7,942	\$1,029,045.59
Other	436	\$404,711.95

In-Network	Claims	Pre-Discount
Inpatient Hospital	306	\$414,970.23
Outpatient Hospital	1,829	\$1,308,328.73
Office	8,362	\$1,075,684.62
Other	522	\$503,392.07

In-Network	Claims	Pre-Discount
Inpatient Hospital	306	\$414,970.23
Outpatient Hospital	1,829	\$1,308,328.73
Office	8,180	\$1,065,210.02
Other	507	\$490,606.07

Total	10,435	\$2,999,168.22
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Total	11,019	\$3,302,375.65
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Total	10,822	\$3,279,115.05
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Pct. In-Network	Claims	Pre-Discount
Inpatient Hospital	100.00%	100.00%
Outpatient Hospital	91.57%	86.10%
Office	93.49%	94.74%
Other	82.73%	79.24%

Pct. In-Network	Claims	Pre-Discount
Inpatient Hospital	99.35%	99.82%
Outpatient Hospital	95.76%	97.99%
Office	98.43%	99.03%
Other	99.05%	98.57%

Pct. In-Network	Claims	Pre-Discount
Inpatient Hospital	99.35%	99.82%
Outpatient Hospital	95.76%	97.99%
Office	96.29%	98.07%
Other	96.20%	96.06%

Total	92.84%	89.58%
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Total	98.03%	98.64%
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Total	96.28%	97.95%
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Disruption Analysis - Shared Records

Town of Prosper

This report compares all shared records between all carriers. Some carriers excluded more records than others which can be seen on the "Excluded Records" line. To view disruption based on non-excluded records for each individual carrier, refer to the other disruption report.

All Records	Claims	Pre-Discount
Inpatient Hospital	380	\$475,639.41
Outpatient Hospital	2,271	\$1,425,765.96
Office	11,224	\$1,103,744.13
Other	602	\$521,616.83

Excluded Records*	Claims	Pre-Discount
Inpatient Hospital	72	\$59,923.18
Outpatient Hospital	361	\$90,533.59
Office	2,729	\$17,533.19
Other	75	\$10,897.98

Included Record	Claims	Pre-Discount
Inpatient Hospital	308	\$415,716.23
Outpatient Hospital	1,910	\$1,335,232.37
Office	8,495	\$1,086,210.94
Other	527	\$510,718.85

Total	14,477	\$3,526,766.33
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Total	3,237	\$178,887.94
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Total	11,240	\$3,347,878.39
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*Records are excluded to ensure that all carriers are compared on the same data. Take into account how many records each carrier excluded.

Cigna

	Claims	Pre-Discount
Excluded Records	-	\$0.00
Percent Excluded	0.00%	0.00%

In-Network	Claims	Pre-Discount
Inpatient Hospital	306	\$414,970.23
Outpatient Hospital	1,859	\$1,331,162.28
Office	7,393	\$980,251.19
Other	517	\$502,257.00

Total	10,075	\$3,228,640.70
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Pct. In-Network	Claims	Pre-Discount
Inpatient Hospital	99.35%	99.82%
Outpatient Hospital	97.33%	99.70%
Office	87.03%	90.25%
Other	98.10%	98.34%

Total	89.64%	96.44%
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Maestro

	Claims	Pre-Discount
Excluded Records	32	\$1,644.86
Percent Excluded	0.22%	0.05%

In-Network	Claims	Pre-Discount
Inpatient Hospital	306	\$414,970.23
Outpatient Hospital	1,856	\$1,325,592.28
Office	7,379	\$978,186.19
Other	486	\$470,083.65

Total	10,027	\$3,188,832.35
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Pct. In-Network	Claims	Pre-Discount
Inpatient Hospital	99.35%	99.82%
Outpatient Hospital	97.17%	99.28%
Office	86.86%	90.05%
Other	92.22%	92.04%

Total	89.21%	95.25%
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UHC

	Claims	Pre-Discount
Excluded Records	3,039	\$13,007.06
Percent Excluded	20.99%	0.37%

In-Network	Claims	Pre-Discount
Inpatient Hospital	303	\$413,916.23
Outpatient Hospital	1,814	\$1,247,780.61
Office	7,632	\$1,005,701.04
Other	438	\$401,562.06

Total	10,187	\$3,068,959.94
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Pct. In-Network	Claims	Pre-Discount
Inpatient Hospital	98.38%	99.57%
Outpatient Hospital	94.97%	93.45%
Office	89.84%	92.59%
Other	83.11%	78.63%

Total	90.63%	91.67%
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