

<b>CURRENT ENROLLMENT:</b> Single: <b>64</b> Family: <b>180</b> <b>TOTAL: 244</b>	<b>CURRENT PH/ASR PH STOP-LOSS EXPRESS SCRIPTS</b>	<b>RENEWAL PH/ASR PH STOP-LOSS EXPRESS SCRIPTS</b>	<b>OPTION 1 PH/ASR ARDELLIS STOP-LOSS EXPRESS SCRIPTS</b>
<b>SPECIFIC STOP LOSS COVERAGE</b>			
Benefits Covered	MED/RX INDIVIDUAL	MED/RX INDIVIDUAL	MED/RX INDIVIDUAL
Accumulator Type	PAID	PAID	24/12
Specific Contract Basis			
<b>Specific Deductible</b>	<b>\$110,000</b>	<b>\$110,000</b>	<b>\$110,000</b>
<b>Aggregating Specific Deductible</b>	<b>\$50,000</b>	<b>\$50,000</b>	<b>\$50,000</b>
Employee Premium	\$149.48	\$194.32	\$193.25
Family Premium	\$375.99	\$488.79	\$483.14
<b>ANNUAL SPECIFIC STOP LOSS PREMIUM</b>	<b>\$926,939</b>	<b>\$1,205,024</b>	<b>\$1,191,998</b>
<b>AGGREGATE STOP LOSS COVERAGE</b>			
Benefits Covered	MED/RX	MED/RX	MED/RX
Aggregate Contract Basis	PAID	PAID	24/12
Aggregate Premium Rate	\$13.01	\$13.92	\$10.74
<b>ANNUAL AGG. STOP LOSS PREMIUM</b>	<b>\$38,093</b>	<b>\$40,758</b>	<b>\$31,447</b>
Run-In Limit	\$0	\$0	\$0
Employee Aggregate Factor	\$1,050.20	\$1,108.27	\$1,039.59
Family Aggregate Factor	\$2,641.67	\$2,787.73	\$2,614.98
<b>ANNUAL AGGREGATE EXPECTED CLAIMS</b>	<b>\$5,210,049</b>	<b>\$5,498,119</b>	<b>\$5,157,410</b>
<b>ANNUAL AGGREGATE ATTACHMENT POINT</b>	<b>\$6,512,561</b>	<b>\$6,872,648</b>	<b>\$6,446,762</b>
<b>ADMINISTRATION FEES</b>			
Medical Administration Fee	\$60.44	\$62.25	\$62.25
Provider Network Access Fee	Included	Included	Included
Case Management/Certification Fee	Included	Included	Included
Prescription Drug Administration Fee	Included	Included	Included
COBRA Administration Fee	Included	Included	Included
Dental Administration Fee	\$3.00	\$3.00	\$3.00
Vision Administration Fee	\$1.65	\$1.65	\$1.65
Flexible Spending Fee	\$6.45	\$6.45	\$6.45
<b>ANNUAL ADMINISTRATION FEES</b>	<b>\$209,469</b>	<b>\$214,769</b>	<b>\$214,769</b>
<b>EST. ANNUAL FIXED COSTS</b>			
	<b>\$1,174,501</b>	<b>\$1,460,551</b>	<b>\$1,438,214</b>
% Change from Current		24.4%	22.5%
<b>EST. ANNUAL EXPECTED COSTS</b>			
	<b>\$6,384,550</b>	<b>\$7,008,669</b>	<b>\$6,645,623</b>
% Change from Current		9.8%	4.1%
<b>EST. ANNUAL MAXIMUM COSTS</b>			
	<b>\$7,687,062</b>	<b>\$8,333,199</b>	<b>\$7,884,976</b>
Max Costs % Change from Current		8.4%	2.6%
<b>Note:</b>			

• The above costs include the liability for the aggregating specific deductible shown above.

## PRIORITY HEALTH CONTINGENCIES

- Stop loss quotes require receipt and review of an updated specific report, precertification report, case management report and pending/held report through the date indicated below.
- Priority Health: Stop loss quotes are firm. Proposal assumes that gene therapy is excluded. If gene therapy will be included, the member with HAE would be excluded and there will be an additional \$6.53 PEPM (~\$19K/annually).
- Ardellis: Stop loss will require updated claim information through 4/30/2025. Stop loss quote is subject to change if gene therapy coverage is added. Stop loss quote includes a guarantee of no new lasers at renewal and a 45% maximum renewal increase to the specific premium (based on duplicate contract terms).
- The PCORI fee is not included in the options quoted.