

Group Health Cost Illustration

Seibels

January 1, 2023



Health Plan Enrollment



	2 Tier	4 Tier
Employee	285	285
EE/SP	0	35
EE/CH	0	23
Emp/Family	122	64
Total	407	407

Administration Fees

	Current	Renewal	Option 1	Option 2	Option 3	Option 4
Third Party Administrator	TCC	PAI	PAI	PAI	PAI	PAI
ASO Fee	\$44.50	\$44.50	\$44.50	\$44.50	\$44.50	\$44.50
Commission	\$19.50	\$19.50	\$19.50	\$19.50	\$19.50	\$19.50
Disease Management	\$2.00	\$2.00	\$2.00	\$2.00	\$2.00	\$2.00
Utilization Review	\$2.00	\$2.00	\$2.00	\$2.00	\$2.00	\$2.00
Monthly Admin/EE	\$68.00	\$68.00	\$68.00	\$68.00	\$68.00	\$68.00
PPO Fee	Included	Included	Included	Included	Included	Included
Network Fee	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PPO	BCBS	BCBS	BCBS	BCBS	BCBS	BCBS
Total Monthly Admin	\$27,676.00	\$27,676.00	\$27,676.00	\$27,676.00	\$27,676.00	\$27,676.00
Annual Admin Fee	\$332,112	\$332,112	\$332,112	\$332,112	\$332,112	\$332,112

Alternate Stop-Loss Insurance Carriers

Contract basis	Specific	12/18	12/18	12/18	12/18	12/18	12/18
	Aggregate	12/18	12/18	12/18	12/18	12/18	12/18
Benefits Covered	Specific	Med/Rx	Med/Rx	Med/Rx	Med/Rx	Med/Rx	Med/Rx
	Aggregate	Med/Rx	Med/Rx	Med/Rx	Med/Rx	Med/Rx	Med/Rx
Aggregate Accomodation		Not Included	Not Included	Not Included	Not Included	Not Included	Not Included
Stop -Loss Underwriter		Optum	Optum	Berkley	Voya	Symetra	Sun Life
Third Party Administrator		ICC	PAI	PAI	PAI	PAI	PAI
Individual Deductible		Med/Rx	Med/Rx	Med/Rx	Med/Rx	Med/Rx	Med/Rx
Monthly Premium		\$75,000	\$75,000	\$75,000	\$75,000	\$75,000	\$75,000
Single Spec.		\$118.14	\$196.96	\$152.48	\$131.07	\$144.49	\$113.86
ES Spec.		\$269.42	\$437.00	\$303.73	\$239.05	\$287.83	\$307.73
EC Spec.		\$209.85	\$437.00	\$268.82	\$191.24	\$254.74	\$263.77
Family Spec.		\$368.45	\$437.00	\$456.20	\$541.51	\$432.32	\$454.27
Aggregate		\$4.27	\$4.60	\$2.26	\$3.63	\$2.29	\$3.16
Annual Stop-Loss Premium		\$858,083	\$1,313,371	\$1,073,604	\$1,017,322	\$1,017,374	\$940,328
Aggregate Factors	Single	\$632.48	\$661.11	\$551.41	\$590.01	\$585.36	\$569.67
	ES	\$1,329.28	\$1,428.29	\$1,098.42	\$1,175.30	\$1,166.03	\$1,196.30
	EC	\$1,008.14	\$1,116.92	\$972.14	\$1,040.18	\$1,031.98	\$1,025.38
	Family	\$1,852.30	\$1,983.40	\$1,649.83	\$1,765.30	\$1,751.39	\$1,765.96
Annual Aggregate Liability		\$4,422,192	\$4,692,399	\$3,882,539	\$4,154,300	\$4,121,558	\$4,089,978
Annual Fixed Cost		\$1,190,195	\$1,645,483	\$1,405,716	\$1,349,434	\$1,349,486	\$1,272,440
Annual Expected Claims		\$3,537,754	\$3,753,919	\$3,106,031	\$3,323,440	\$3,297,246	\$3,271,983
Annual Expected Plan Cost		\$4,395,837	\$5,067,290	\$4,179,635	\$4,340,763	\$4,314,621	\$4,212,310
Maximum Total Laser Claims		\$0	\$0	\$0	\$0	\$0	\$0
Annual Maximum Liability		\$5,612,388	\$6,337,882	\$5,288,255	\$5,503,735	\$5,471,044	\$5,362,418
Max cost with all lasers		\$5,612,388	\$6,337,882	\$5,288,255	\$5,503,735	\$5,471,044	\$5,362,418
Maximum Plan Costs - Change			12.93%	-5.78%	-1.94%	-2.52%	-4.45%

Group Life & AD&D Comparison



CLARKE & COMPANY
BENEFITS LLC

Seibels

January 1, 2023

Life Enrollment

	Employees Eligible
Total	245

Carrier Benefits

Life Insurance	AUL 2020	AUL 2021	Mutual of Omaha 2021	The Standard 2021	
Benefit	3 x BAE/ Max \$350,000	3 x BAE/ Max \$350,000	3 x BAE/ Max \$350,000	3 x BAE/ Max \$350,000	
AD&D	3 x BAE/ Max \$350,000	3 x BAE/ Max \$350,000	3 x BAE/ Max \$350,000	3 x BAE/ Max \$350,000	
Conversion	Yes	Yes	Yes	Yes	
Portable	No	No	No	No	
Waiver of Premium	Yes	Yes	Yes	Yes	
Rate Guarantee	1 year	2 years	2 years	3 years	
Tiered Cost Factors					
Volume	24,674,950	24,674,950	24,674,950	24,674,950	
Life/Add Rate per 1000	\$0.140	\$0.140	\$0.130	\$0.130	
Group Cost Factors					
Monthly Cost	\$3,454.49	\$3,454.49	\$3,207.74	\$3,207.74	
Annual Cost	\$41,454	\$41,454	\$38,493	\$38,493	
Annual Increase		\$0	-\$2,961	-\$2,961	

Group Short Term Disability Comparison



CLARKE & COMPANY
BENEFITS LLC

Seibels
January 1, 2023

Disability Enrollment

	Employees Eligible
Total	245

Carrier Benefits

Short Term Disability	AUL 2020	AUL 2021	The Standard 2021	Mutual of Omaha 2021	
Benefit %	60%	60%	60%	60%	
Elimination Period	14 days	14 days	14 days	14 days	
Max. Weekly Benefit	\$1,250	\$1,250	\$1,250	\$1,250	
Partial	Yes	Yes	Yes	Yes	
Benefit duration	11 weeks	11 weeks	11 weeks	11 weeks	
Pre-ex	3/12	3/12	3/12	3/12	
Rate guarantee	1 years	1 years	2 years	2 years	
Tiered Cost Factors					
Volume	\$46,124	\$46,124	\$46,124	\$46,124	
Rates/per \$10	\$0.31	\$0.31	\$0.28	\$0.33	
Monthly Cost	\$1,430	\$1,430	\$1,291	\$1,522	
Yearly Cost	\$17,158	\$17,158	\$15,498	\$18,265	
Annual Increase		\$0	-\$1,660	\$1,107	
% difference		0%	-10%	6%	

Group Long Term Disability Comparison



CLARKE & COMPANY
BENEFITS LLC

Seibels
January 1, 2023

Disability Enrollment

	Employees Eligible
Total	245

Carrier Benefits

Long Term Disability	AUL 2020	AUL 2021	Mutual of Omaha	The Standard	The Standard
Benefit % Partners	60%	60%	60%	60%	60%
Benefit % all others	60%	60%	60%	66 2/3%	60%
Elimination Period	90 days	90 days	90 days	90 days	90 days
Max. Monthly Partners	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000
Max Monthly Others	\$6,000	\$6,000	\$6,000	\$6,000	\$6,000
Benefit Duration Class I	SSNRA	SSNRA	SSNRA	SSNRA	SSNRA
Benefit Duration Class II	2 years	2 years	2 years	2 years	2 years
Definition of Disability	own occ	own occ	own occ	own occ	own occ
Survivor Benefit	3 months	3 months	3 months	3 months	3 months
Pre Existing Conditions	3/12	3/12	3/12	3/12	3/12
Waiver of Premium	Yes	Yes	Yes	Yes	Yes
Rate guarantee	1 year	2 years	2 years	3 years	3 years
Tiered Cost Factors					
Volume	\$786,748	\$786,748	\$786,748	\$786,748	\$786,748
Rates/per \$100	\$0.34	\$0.34	\$0.29	\$0.33	\$0.29
Monthly Cost	\$2,675	\$2,675	\$2,282	\$2,596	\$2,282
Yearly Cost	\$32,099	\$32,099	\$27,379	\$31,155	\$27,379
Annual Increase		\$0	-\$4,720	-\$944	-\$4,720
% difference		0%	-15%	-3%	-15%