



Final Renewal Meeting

March 19, 2025



Gallagher

Insurance | Risk Management | Consulting



Gallagher

Insurance | Risk Management | Consulting



Table of Contents

- I. Agenda
- II. Public Comment Policy
- III. Meeting Minutes - EBC Preliminary Renewal 1/29/2025
- IV. Final Renewal Projections – July 1, 2025
- V. BCBS Legislative Updates
- VI. Stop Loss Marketing Results
- VII. 2025-2026 Budget
- VIII. Approval Items
- IX. Disclosures
- X. EBC Contacts



Location: Maggiano's Little Italy
1901 Woodfield Rd, Schaumburg, IL 60173

Date: March 19, 2025

Time: 10:00 a.m. – 1:30 p.m.

Purpose of Meeting: EBC Board of Directors Meeting
Final Renewal July 2025

AGENDA

	Item	Discussion Leader	Time
1.	Public Comment	Jeff Feyerer Stewart Diamond	10:00 – 10:05 a.m.
2.	Approve January 29, 2025 Preliminary Renewal Meeting Minutes	Jeff Feyerer	10:05 – 10:10 a.m.
3.	Final Renewal Projections – July 1, 2025	Luke Rafter Mel Diaz	10:10 – 10:40 a.m.
4.	BCBS Legislative Updates	Carrie Kyes Gabe Backstrom	10:40 – 11:00 a.m.
5.	Stop Loss Marketing Results	Chuck Bertolina Victoria Dowling	11:00 – 11:30 a.m.
6.	2025-2026 Budget	Tage Shumway Jason Coyle	11:30 – 11:40 a.m.
7.	Approval Items	Jeff Feyerer	11:40 – 11:50 a.m.
8.	Executive Committee - Officer Positions Term 7/1/25 to 6/30/27	Jeff Feyerer	11:50 a.m.
	LUNCH		

The Policy Regarding Public Comment

At each regular and special open meeting of the EBC Board of Directors, members of the public may comment to or ask questions of the EBC Board of Directors, subject to reasonable constraints.

The individuals appearing before the Board of Directors are expected to follow these guidelines:

1. Address the Board of Directors only at the appropriate time as indicated on the agenda and when recognized by the Chairman of the Board of Directors. A period of up to 30 minutes for public comment will be allowed.
2. Identify oneself and be brief. Each speaker will be permitted to speak for no more than 3 minutes.
3. Conduct oneself with respect and civility toward others and otherwise abide by EBC Policy.
4. If members of the public wishing to address the EBC focus their views on a particular issue, the Chairman or other presiding officer, shall endeavor to allow alternate or multiple views to be addressed.
5. Members of the public not able to speak at EBC meetings because the time was taken up by others, may write to the Chairman of the EBC their views, which will be distributed to all EBC members.
6. In the event that members of the public should violate the provisions of this policy or otherwise disturb meetings of the EBC, the Chairman or other presiding officer on his or her own discretion or as directed by a motion and vote of the Membership permitted to vote, may require a member of the public to follow these rules and to not otherwise cause a disturbance to the meeting and may take any steps permitted by law to cause such a person to be silenced or removed from the meeting.

Re: EBC Full Board Meeting – Preliminary Renewal 2025/2026
Date: January 29, 2025
Place: Maggiano’s Little Italy, 1901 E. Woodfield Road, Schaumburg, IL

Roll Call

<u>District</u>	<u>Absent/Present</u>
EPAA Subpool	Present
NSBC Subpool	Present
WPH Subpool	Present
AERO Special Ed Cooperative	Present
Addison SD4	Present
Beach Park SD 3	Present
Beecher CUSD 200U	Present
Bensenville SD 2	Absent
Berkeley SD 87	Present
Brookfield 95	Present
Brookwood SD 167	Present
Burbank SD 111	Absent
Burr Ridge CCSD 180	Present
Butler 53	Absent
Byron CUSD 226	Absent
Cary SD 26	Absent
CASE	Present
Calumet SD 132	Present
Crete Monee 201U	Present
Coal City CUSD 1	Absent
CCSD 46	Present
CCSD 146	Present
CCUSD 201	Present
Decatur SD 61	Present
Deerfield SD 109	Present
District 45	Present
Dolton SD 148	Present
Dolton SD 149	Present
Du Page SD 88	Present
East Maine SD 63	Present
East Prairie SD 73	Present
ECHO	Present
Edmund Lindop SD 92	Absent
Elmwood Park SD 401	Present
Evanston Skokie SD 65	Present
Evergreen Park SD 124	Present
Fairview SD 72	Present
Fenton SD 100	Absent
Forest Park SD 91	Present
Franklin Park SD 84	Present
Genoa Kingston SD 424	Absent

Glen Ellyn SD 41	Present
Glen Ellyn CCSD 89	Present
Golf SD 67	Present
Grayslake 127	Present
Herscher CUSD 2	Present
Hillside 93	Present
Itasca SD 10	Present
Kankakee SD 111	Present
Keeneyville SD 20	Absent
La Grange SD 102	Present
Lake Park SD 108	Present
LaSalle-Peru 120	Present
Lemont – Bromberek SD 113A	Present
Lincoln SD 156	Present
Lincolnwood SD 74	Present
Lisle SD 202	Present
Lombard SD 44	Present
Maercker SD 60	Present
Mannheim SD 83	Present
Manteno CUSD 5	Present
Marengo SD 165	Present
Marquardt SD 15	Present
Matteson SD 159	Present
Medinah SD 11	Present
Midlothian SD 143	Present
Mount Prospect SD 57	Present
Mundelein SD 120	Present
NDSEC	Present
Niles SD 71	Absent
Niles HSD 219	Present
Niles Township for Special Education 807	Present
Norridge SD 80	Present
North Chicago SD 187	Absent
North Palos SD 117	Present
Northbrook SD 28	Present
Northbrook/ Glenview SD 30	Present
NSSEO	Present
Oak Lawn Hometown SD 123	Present
Oak Park SD 97	Present
Oswego 308	Present
PAEC	Present
Palos SD 118	Present
Park Forest Chicago Heights 163	Present
Posen-Robbins SD 143.5	Present
Prairie Grove SD 46	Present
Prospect Heights SD 23	Present
Queen Bee SD 16	Present
Reavis High School 220	Absent
Rhodes SD 84.5	Present
Rich Township SD 227	Present
Ridgeland SD 122	Present

River Forest SD 90	Present
River Trails SD 26	Present
Riverside SD 96	Absent
Riverside Brookfield SD 208	Present
Roselle SD 12	Present
Salt Creek SD 48	Present
SASED	Absent
Sauk Village SD 168	Absent
Seneca 170	Present
Seneca THSD 160	Present
Skokie SD 68	Present
Skokie SD 69	Present
Skokie SD 73-1/2	Present
South Berwyn SD 100	Present
South Holland 150	Absent
SPEED JA 802	Present
Sterling Public School District 5	Present
Summit Hill SD 161	Present
SWCCCASE	Present
Thornton Fractional SD 215	Present
Thornton Township HSD 205	Absent
Union Ridge SD 86	Present
Warren Township HSD 121	Present
West Chicago CHSD 94	Present
West Northfield SD 31	Absent
Westchester SD 92.5	Absent
Westville CUSD 2	Present
Wilmington CUSD 209U	Present
Wood Dale SD 7	Present
Woodland SD 50	Present
Woodridge SD 68	Present
Zion SD 6	Present

District Guests:

Michael James	Proviso Area for Exceptional Children
Tracy Miller	Avoca SD 37
Ryan Evans	Brookfield SD 95
Glenn Campos	Oswego CUSD 308
Julie Swartzloff	West Chicago CHSD 94
Tom Beerheide	Sunset Ridge SD 29
Veronica Tano	Beach Park SD 3
Maria Grossi	Eisenhower Cooperative
Katie Hannigan	LaGrange Highland SD 106
Sonali Patil	Skokie SD 69
Melissa Mickey	Grayslake SD 127
April Jerger	Thornton Fractional HSD 215

Also Present:

Mr. Gabriel Backstrom	Blue Cross and Blue Shield of Illinois
Ms. Carrie Kyes	Blue Cross and Blue Shield of Illinois
Ms. Brynn Bannach	Hinge Health
Mr. Jason Coyle	Baker Tilly
Mr. Stewart Diamond	Ancel, Glink, Diamond, Bush
Mr. Mel Diaz	Gallagher Benefit Services
Ms. Victoria Dowling	Gallagher Benefit Services
Ms. Nancy Bellosa	Gallagher Benefit Services
Ms. Erica Mendoza	Gallagher Benefit Services
Ms. Allison Evors	Gallagher Benefit Services
Ms. Cindy Maloberti	Gallagher Benefit Services
Ms. Miriam Bates	Gallagher Benefit Services
Ms. Kelsey Smith	Gallagher Benefit Services
Ms. Dania Aviles	Gallagher Benefit Services
Ms. Alyssa De Long	Gallagher Benefit Services
Ms. Amna Siddiqui	Gallagher Benefit Services
Mr. Brian Franz	Gallagher Benefit Services
Ms. Lesley Pasillas	Gallagher Benefit Services
Mr. Luke Rafter	Gallagher Benefit Services
Mr. Peter Norton	Gallagher Benefit Services
Mr. Casey Kemerling	Gallagher Benefit Services
Mr. Adam Nadler	Gallagher Benefit Services
Ms. Jeanette Rowan	Gallagher Benefit Services

The meeting commenced at 9:32 AM.

I. AGENDA, QUORUM, PUBLIC COMMENT POLICY

Mr. Feyerer asked for roll call. On completion, it was concluded that there was a quorum. There were no public comments.

II. MEETING MINUTES – EBC FINAL RENEWAL 3/20/2024

Mr. Feyerer requested a motion to approve the Final Renewal Meeting Minutes from the March 20th, 2024 meeting. Dr. James Stelter (Queen Bee SD 16) motioned, and Mr. Ryan Berry (River Trails SD 26) seconded. A vote was taken to approve the final minutes, and they were approved.

III. 2024-2025 AUDIT APPROVAL

Mr. Feyerer introduced Mr. Jason Coyle from Baker Tilly to discuss the 2024-2025 audit. The audit was completed and submitted to the Illinois Department of Insurance in November 2024, covering the fiscal years ending June 30, 2024, and 2023. Mr. Coyle highlighted that the only distinction in the monthly financial statements is the inclusion of fair market value. Starting in 2025, adjustments to fair value will be made on a monthly basis to eliminate any future differences between the audit and monthly statements. The figures for 2024 note a decrease in net position of \$26.5 million, resulting in an end of year net position of \$38.5 million. This results in a working cash net position to expense ratio of 7.3%, which is below the EBC's minimum target of 10%. There were no questions regarding the audit.

Mr. Feyerer requested a motion for the audit to be approved. Mr. Curtis Saindon (Woodridge SD 68) motioned, and Dr. Gregory Harris (Roselle SD 12) seconded.

IV. PHARMACY PROCUREMENT RESULTS – JULY 1, 2025

Mr. Feyerer introduced Mr. Peter Norton from Gallagher to discuss the Pharmacy Benefit Manager (PBM) Procurement Project that was conducted due to the upcoming Prime contract renewal on July 1st, 2025. The project began in June 2024, and the market evaluation included Prime Therapeutics as the incumbent, CVS Caremark, Express Scripts, and OptumRx. CVS Caremark declined to quote due to the size of the Cooperative. OptumRx was eliminated from consideration due to the quote not being as competitive. Express Scripts presented a strong offer, while Prime Therapeutics improved upon their initial quote.

The final round resulted in a cost avoidance of roughly \$40 million, with improved contract terms from both Express Scripts and Prime. Ultimately, when considering member disruption as well as financials, Prime Therapeutics' bid surpassed that of Express Scripts, leading to a recommendation to remain with Prime Therapeutics. The contract duration is three years, with anticipated savings from drug costs and rebates. Prime Therapeutics offers unique benefits, such as integrated medical and pharmacy benefits with Blue Cross Blue Shield (BCBS) and provides a rebate credit that offsets medical administrative fees, resulting in positive cash flow. Unlike Express Scripts, Prime Therapeutics does not require a specific spending amount to receive credit allowances. Express Scripts also had network disruption, as Kroger pharmacy locations are excluded, affecting approximately 1,500 members. Mr. Norton concluded his presentation by recommending the EBC continue its partnership with Prime Therapeutics due to the ongoing improvements, minimal disruption to members, and greater financial outcomes.

Mr. Feyerer noted that the decision will be up for approval at the Final Renewal Meeting scheduled for March 19, 2025.

V. PRELIMINARY RENEWAL PROJECTIONS – JULY 1, 2025

Mr. Feyerer introduced Mr. Luke Rafter from Gallagher to discuss the projected financial outcomes for EBC districts. These projections are based on historical claims and economic data from November 2023 to October 2024. The final rate adjustments will be presented at the Final Renewal Meeting, using data from January 2024 to December 2024.

Rebates are utilized to offset claims, and administrative costs are charged on a per employee per month (PEPM) basis. Additional fixed costs include those related to healthcare reform, Gallagher consulting fees, and Cooperative charges. Due to previously depleted working cash levels, continued efforts are being made to rebuild them, with value-added program fees like the wellness program and Teladoc, incorporated into the premiums.

The preliminary EBC average adjustment indicates a 7% increase to PPO premium rates. When evaluating the total costs of services and premiums, a higher claims amount compared to premiums results in a higher loss ratio. The EBC experienced an average loss ratio of 103.2%. The EBC trend used this year for the PPO was 8% to allow for the increase in costs anticipated for the PPO next year due to various factors including higher rates for provider services.

HMO remains an efficient and affordable model for members. The EBC's preliminary average adjustment shows a 5.3% overall increase for the HMO, which is lower than the PPO and favorable compared to previous years, indicating stability. The EBC HMO trend is 7.0% with an average loss ratio of 99%. Pharmacy rebate estimations have been taken into account with the projections. BCBS continues to negotiate with providers on physician components annually, and costs for outpatient, inpatient, pharmacy, and physician services are included.

The Dental average adjustment is 4.1%, which is higher than pre-COVID levels. Trend is slightly lower at 4.0%, based on historical performance. Administrative fees are guaranteed, resulting in a favorable renewal with limited risk to the Cooperative. The EBC's average loss ratio for dental is 94.7%.

During the conversation that followed with the Full Board, Mr. Diaz advised that there is a tab in the binder with detailed information regarding the components included in the administrative charges, as well as each districts individual loss ratio and preliminary rate adjustment. Its important districts remember that the presented renewal adjustments are based on claims data through October 2024 and can change by a target of +/- 2%.

Ms. Victoria Dowling announced Gallagher is conducting a stop loss marketing; however, the process could not commence until this week, as carriers require the full calendar year of claims information at a minimum. The head of the Gallagher Stop Loss Practice (SLP) team will be addressing the marketing process at the final renewal meeting in March. Symetra has been a trusted partner since 2000, but a market check will ensure all aspects are optimized. Should the marketing result in a recommendation for a change in carrier, it will be an item to be voted on at the final renewal meeting; however, a carrier change will have no direct impact to EBC districts in how they administer their plans.

VI. ADVOCATE HMO IL EXIT

Mr. Rafter introduced Mr. Gabe Backstrom (BCBS) to discuss BCBS's initiatives aimed at maintaining the affordability of HMO Illinois plans. Due to annual negotiations with healthcare providers, there will be a change to the HMO network effective July 1, 2025, with Advocate Health exiting the HMO IL network. This decision is a result of efforts to maintain affordability within HMO IL, which was not feasible due to the higher costs associated with Advocate Health. Advocate Health will continue to be part of the Blue Advantage HMO (BAHMO) network. Districts may choose to conduct a special Open Enrollment period, allowing members to switch to any other district-provided plan, or transition from HMO IL to BAHMO to retain Advocate as their medical group. BCBS will send notification letters to impacted members needing to change their medical group, in mid-April.

A discussion followed where Mr. Backstrom shared negotiations with medical groups are conducted each year and there is no indication that Advocate will leave the BAHMO network in the near future. BCBS has provided a list of impacted members to Gallagher, who will distribute the information to each district. It's important to note that all family members will have to be in the same network (HMO IL or BAHMO) and BCBS can share the HMO disruption list, which includes members in a HMO IL exclusive medical group. The coverage can remain the same with both networks and from a member's standpoint, there is no distinction between the two. The BAHMO is 2-3% lower in cost.

VII. HINGE HEALTH

Mr. Feyerer introduced Ms. Carrie Keyes from BCBS who highlighted that musculoskeletal (MSK) issues are the highest medical claim category for EBC PPO plans, accounting for 13% of costs, primarily related to surgery. Barriers to physical therapy exist, with only 10% of individuals seeking care due to challenges with accessibility and cost.

The Hinge Health program was previously reviewed by the Executive Committee about 5 years ago; however, the decision was made to wait until there was more robust data before presenting to the Cooperative. Ms. Brynn Bannach from Hinge Health introduced the digital platform focused on enhancing MSK health quality.

Hinge Health offers a digital solution that reduces cost and increases care accessibility. The platform provides personalized care plans with access to physical therapists and U.S. board-certified coaches specializing in orthopedics. These professionals assist in habit formation, pain management, pre- and post-surgical support, and provide real-time feedback. Additionally, Hinge Health offers a public health program addressing pelvic health issues, providing comprehensive care for individuals experiencing pelvic floor disorders, including prenatal, pregnancy, and postpartum care.

Members undergo a clinical screening when they register to be triaged to the appropriate level of care on their personal digital devices. The first video visit with a physical therapist includes real-time feedback and education related to individual conditions. Tablets are available at no cost for those who do not have access to or prefer not to use personal devices.

Hinge Health is fully integrated with BCBS, projecting a net savings of \$2.65 million and a 2.68% return on investment (ROI). Pricing and implementation are managed through medical claims, with no administrative costs. The prevention program is offered at no cost as a value-add to help prevent chronic pain. The first session is \$250, with each subsequent visit costing \$50. The program includes 31 exercise sessions, with price protection at the overall program level set at \$970. All sessions are no out-of-pocket cost to the member and paid for by the plan.

The program is available to PPO members only, although there have been some discussions on how to potentially offer it to HMO members in the future. If approved by the Board, it will be added for all member districts 7/1/25, with custom communication sent to members to promote awareness.

VIII. DEPENDENT ELIGIBILITY AUDIT RESULTS & ONGOING AUDIT

Mr. Feyerer introduced Ms. Allison Evors and Ms. Cindy Maloberti from Gallagher to discuss the Dependent Eligibility Audit. Ms. Evors began by stating that all EBC districts have received their results from the initial audit, which commenced on October 1st, 2024. Due to many employees having a "documentation incomplete" status near the end of the audit, the deadline was extended from November 15th to the 20th, in an effort to prevent dependents from losing coverage.

A total of 131 districts participated in the initial Dependent Eligibility Audit, involving approximately 14,000 employees and the verification of around 34,000 dependents' information. Out of the 131 districts, 69 achieved 100% completion. The audit identified 67 dependents as ineligible based on the documentation submitted, with the most common reason being that they had reached the maximum age of 26. These dependents were already being dropped in Benefitsolver. Additional findings included 13 ineligible divorced spouses or domestic partners, and 6 spouses who had passed away.

The most significant impact was employees who did not respond to the audit, with 262 employees across 62 districts failing to comply. Furthermore, prior to the audit, 411 dependents were dropped, either during open enrollment or due to experiencing a qualifying life event. Feedback from districts was researched and addressed during the audit and led to the creation of a FAQ that can be shared with employees. The potential net savings for the Cooperative for the first year is estimated to be over \$1,800,000.

Ms. Evors confirmed the audit will be ongoing; however, as the EBC is entered in Impact Interactive's system as one client, there is no way to give individual districts access to the platform to run reports.

IX. GALLAGHER CONSULTING CONTRACT – JULY 1, 2025

Mr. Feyerer announced that the current Gallagher consulting contract, which was a five-year agreement, is set to expire on June 30, 2025. The EBC Executive Committee conducted a thorough market analysis and held interviews to gather comprehensive information to ensure that service costs align with the value provided. As a conclusion to the marketing exercise, Gallagher remains the preferred choice due to its exceptional services tailored for the Cooperative. An agreement has been finalized to extend the contract until June 30, 2030. The contract terms are linked to the Consumer Price Index (CPI) and Cooperative growth, with a 2.3% PEPM basis, capped at 3% over the contract duration. This agreement is anticipated to be mutually beneficial for the entire Cooperative. The contract will be presented for approval at the Final Renewal Meeting in March.

X. EXECUTIVE COMMITTEE BALLOT – OFFICER POSITIONS TERM- 7/1/25 TO 6/30/27

Mr. Feyerer announced that officer positions will be addressed at the March final renewal meeting. Current members have the option to continue in their roles. Mr. Diaz may be contacted for inquiries.

XI. ADJOURNMENT

Mr. Feyerer proposed a motion to adjourn; Mr. Jason Edelheit (NSBC) motioned, and Ms. Alicia Cieszykowski (Lake Park HSD 108) seconded. The meeting was adjourned at 11:35 am.

March 14, 2025

Board of Directors
Educational Benefit Cooperative (EBC)

Re: Actuarial Review of Educational Benefit Cooperative Renewal for July 1, 2025

Dear Board Members:

I have reviewed the 2025 renewal projections prepared by the AJG office for Educational Benefit Cooperative. These medical/Rx and dental projections include a renewal period of 12 months beginning July 1, 2025. In particular, I reviewed the following items:

- I reviewed the claim data used for the projections, which was originally provided by Blue Cross, Prime Therapeutics, and MetLife. While I did not audit the data, I did review it for reasonableness and consistency with prior information. Based on my review, I believe the data inputs are satisfactory.
- I reviewed the methods and assumptions used in the development of the historical and projected future expenses. I find them to be consistent with standard industry underwriting practices with appropriate recognition of the plan's own history, and in my judgment, they are appropriate for this plan.
- The projections assume that the value of the current benefit mix will remain in effect for the renewal period. I believe this assumption is appropriate.

Based on my review, it is my opinion that the renewal projection is actuarially sound, that the exhibits accurately present the plan's historic performance, and that the suggested funding rate changes are reasonable and appropriate.

Please let me know if you have any questions.

Sincerely,



Robert L. Jordan, ASA, MAAA, FCA
National Director, Financial & Actuarial Consulting – Health Pools, Trusts & Coalitions

cc: Luke Rafter, GBS



Gallagher

Insurance | Risk Management | Consulting



Final Renewal Projections

For Plan Year

July 1, 2025 – June 30, 2026

Presented: March 19, 2025

EBC Overview

EBC History

The Educational Benefit Cooperative (EBC) is an entity created under Illinois state law, which allows school districts to join for the purpose of purchasing insurance. The EBC, established in 1984, began with eight school districts and has grown to current membership of 134 school districts, 121 individual members and 3 sub pools.

The purpose of the EBC is to provide economies of scale and risk pooling that will allow members greater long-term financial stability than purchasing insurance products individually in the commercial insurance market. Each member retains the ability to create and change their PPO, HMO, Dental and Life plan design, which is often required by the nature of bargained contracts.

Funding

The PPO and Dental plans are self-funded. The HMO is funded on a Cost-Plus funding arrangement and the Life insurance is insured.

PPO funding: Self-funded plans allow the plan sponsor to bear a greater amount of risk (claims), reduce overhead expenses such as insurance company risk charges, and are not subject to state mandated requirements. Self-funding has three basic components, claims, administration and reinsurance. EBC periodically reviews the most appropriate administration providers. Currently, EBC has retained Blue Cross Blue Shield of Illinois to provide claim administration services as well as access to their network of hospitals and physicians. EBC has also selected Prime Therapeutics as the Prescription Benefit Manager for PPO prescription card plans. EBC purchases reinsurance from Symetra. Reinsurance, often termed stop-loss insurance, is insurance a self-funded entity purchases to transfer the risk of catastrophic claims. As EBC has grown, the deductible amount of reinsurance has increased, as EBC can assume a greater level of risk. As EBC increases the risk level on these catastrophic claims, the cost of the reinsurance is reduced.

Dental funding: Similar to the PPO, the Dental plans of EBC are self-funded; however, in the case of dental, no reinsurance is necessary. Because dental plans generally have an annual benefit amount under \$2,000, claims are not as volatile or catastrophic as medical claims. Currently, EBC retains Metropolitan Life Insurance Company to provide claim administration services as well as access to their network of preferred dentists.

HMO funding: Cost-Plus funding has the same basic components as self-funding; claims, administration and reinsurance plus risk charges. EBC has selected Blue Cross Blue Shield of Illinois as the HMO provider. Blue Cross Blue Shield of Illinois does not offer a self-funded arrangement for their HMO products. The Cost-Plus funding arrangement has a similar risk-taking component to self-funding, but is filed as an insured product. Because of the insured status, HMO contracts are subject to Illinois state mandates. EBC pays administration, risk charges and physician service fees (doctor visits) on a monthly basis, based on enrollment. EBC funds the cost of prescription drug and hospital claims as they are incurred.

Life funding: The life insurance for EBC is fully insured. EBC members submit an insured premium rate to EBC who pays the full amount directly to Reliance Standard. A fully insured funding arrangement transfers 100% of the claim and risk to the insurance company.

For the self-funded and Cost-plus funded programs (PPO, Dental and HMO), EBC's consultant, Gallagher Benefit Services, develops appropriate funding rates. Each member submits monthly funding required based on those rates and enrollment. EBC pays all claims and expenses for all members as well as establishes a reserve for incurred but not reported claims. All member funds in excess of plan expenses and reserves are retained in the Working Cash Fund.

Banding Formula

EBC established a Banding Formula many years ago that is applied to the self-funded plans, the PPO and Dental. The HMO banding formula began in 2012. The bands are outlined in the EBC By-laws. Two components are used for the banding formula; (1) Paid Claim Loss Ratio and (2) Rate Increase.

Component 1 is the Paid Claim Loss Ratio. The Paid Claim Loss Ratio is determined by dividing the revenue submitted to EBC by the claims paid by EBC during the Experience Period. The resulting percentage is the Paid Claim Loss Ratio. The costs of administration of the plan are not included in the calculation. A Paid Claim Loss Ratio is developed for the entire cooperative of EBC (pool average) and individually for each member district (or sub pool) of EBC. The pool average Paid Claim Loss Ratio is the center of the Banding Formula. Each member's individual Paid Claim Loss Ratio determines its position on the Banding Formula.

Paid Claims are the total of all individual claims under \$75,000 plus the per capita share of all the EBC catastrophic claims between \$75,000 and \$1,000,000 for the PPO. For the HMO, Paid Claims are the total of all individual claims under \$75,000 plus the per capita share of all the EBC catastrophic claims between \$75,000 and \$350,000 plus physician service fees.

Component 2 is the (Pool Average) Rate Increase. The Rate Increase is developed by projecting the claims in the experience period to the end of the projection period and adding administrative and reinsurance costs for Total Projected Costs. Total Projected Costs are divided by Total Projected Revenue to determine the Rate Increase (pool average). The pool average rate increase is the center of the banding formula. Each member's individual Paid Claim Loss Ratio is developed and will fall within one banding range. The maximum deviation from the pool average rate increase ranges from +5% above the pool average rate increase or -5% below the pool average rate increase in 1% increments.

EXECUTIVE SUMMARY

2025/2026 Final Review

EBC Final Renewal Summary

Following is a brief highlight of the EBC renewal projection. The EBC sponsored plans are PPO medical, HMO medical, dental, and life insurance.

- The PPO medical rating formula produces a rate adjustment of 6.9%
 - 2025 trend for PPO plans: 8.0% *
- The HMO projection indicates a rate adjustment of 5.2%
 - 2025 trend for HMO plans: 7.0% *
- The Dental rating formula produces a rate adjustment of 4.0%
 - 2025 trend for dental plans: 4.0% *
- The Life/AD&D, Supplemental Life and Dependent Life insurance is underwritten by Reliance Standard Life Insurance Company. The rates are being held with no increase and guaranteed through 6/30/2027.

** Trend is a forecast of per capita claims cost that takes into account price inflation, utilization, government-mandated benefits, and new treatments, therapies and technology. There is usually a high correlation between trend rate and actual cost increases assessed by insurance carriers.*

EXHIBIT A

JULY 1, 2025 – JUNE 30, 2026 RENEWAL SUMMARY

Exhibit A summarizes the key elements that were reviewed for the Experience Period which show how each plan is operating and develops the Paid Claim Loss Ratio that is used in the Banding Formula.

The Experience Period reviewed was January 1, 2024 – December 31, 2024. The table below summarizes the key elements that develop the Paid Claim Loss Ratio by line of coverage.

PPO		
A	Revenue	\$ 407,452,115
B	Claims Under \$1,000,000	\$ 424,277,733
C	Paid Claim Loss Ratio (B / A)	104.1% Pool Average Loss Ratio which becomes the center of the Banding Formula (See Exhibit C)
HMO		
A	Revenue	\$ 156,032,686
B	Claims Under \$350,000 plus Physician Service Fees	\$ 155,992,755
C	Paid Claim Loss Ratio (B / A)	100.0% Pool Average Loss Ratio which becomes the center of the Banding Formula (See Exhibit C)
DENTAL		
A	Revenue	\$ 14,505,462
B	Claims	\$ 13,661,781
C	Paid Claim Loss Ratio (B / A)	94.2% Pool Average Loss Ratio which becomes the center of the Banding Formula (See Exhibit C)

Educational Benefit Cooperative
EXHIBIT A
For Period July 1, 2025 to June 30, 2026

PPO Experience Period Summary for 2025 to 2026 Renewal

		Experience Period 1/1/24 - 12/31/2024	% of Total Plan Costs
A.	Average Enrollment	20,881	
B.	Revenue	\$407,452,115	
C.	Claims under \$75,000	\$349,936,172	
D.	Claims \$75,000 - \$1,000,000	+	\$74,341,561
E.	Claims under \$1,000,000 (C + D)	=	\$424,277,733
F.	Rx Rebate	+	(\$56,853,954)
G.	Adjusted Claims (E - F)	=	\$367,423,779
H.	Plan Expenses		
	1. Claim Administration		\$12,322,916
	2. Reinsurance Premium/Liability	+	\$4,317,296
	3. Consulting Fees	+	\$2,752,743
	4. Healthcare Reform Fees	+	\$129,216
	5. Cooperative Charges	+	\$1,378,577
	6. Total Plan Expenses	=	\$20,900,749
I.	Total Plan Costs (G + H5)	=	\$388,324,528
J.	Paid Claim Loss Ratio (E / B)		104.1%
K.	Total Cost Loss Ratio (I / B)		95.3%

HMO Experience Period Summary for 2025 to 2026 Renewal

		Experience Period 1/1/24 - 12/31/2024	% of Total Plan Costs
A.	Average Enrollment	10,610	
B.	Revenue	\$156,032,686	
C.	Claims under \$75,000	\$95,476,101	
D.	Claims \$75,000 - \$350,000	\$18,558,213	
E.	Claims under \$350,000 (C+D)	\$114,034,313	
F.	Physician Service Fees	+	\$41,958,442
G.	Total Claims and Physician Service Fees	=	\$155,992,755
H.	Rx Rebate	+	(\$15,558,527)
I.	Adjusted Claims (G-H)	=	\$140,434,229
J.	Plan Expenses		
	1. Claim Administration		\$7,017,102
	2. Reinsurance Premium	+	\$4,586,169
	3. Consulting Fees	+	\$1,441,454
	4. Healthcare Reform Fees	+	\$0
	5. Cooperative Charges	+	\$709,240
	6. Total Plan Expenses	=	\$13,753,964
K.	Total Plan Costs (I + J5)	=	\$154,188,192
L.	Paid Claim Loss Ratio (G / B)		100.0%
M.	Total Cost Loss Ratio (K / B)		98.8%

Dental Experience Period Summary for 2025 to 2026 Renewal

		Experience Period 1/1/24 - 12/31/2024	% of Total Plan Costs
A.	Average Enrollment	16,743	
B.	Revenue	\$14,505,462	
C.	Claims	\$13,661,781	95.5%
D.	Plan Expenses		
	1. Claim Administration	\$650,758	
	2. Consulting Fees	+	\$0
	3. Total Plan Expenses	=	\$650,758 4.5%
E.	Total Plan Costs (C + D3)	=	\$14,312,539
F.	Paid Claim Loss Ratio (C / B)		94.2%
G.	Total Cost Loss Ratio (E / B)		98.7%

Note: Paid Claim Loss Ratio used to determine average rate of increase

This analysis is for illustrative purposes only, and is not a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. Please see your policy or contact us for specific information or further details in this regard.

EXHIBIT B

JULY 1, 2025 – JUNE 30, 2026 RENEWAL SUMMARY

Exhibit B summarizes the key elements of the cost projection for Projection/Renewal Period of July 1, 2025 – June 30, 2026.

Claims from the Experience Period are projected into the future and final administration cost increases added to develop Projected Total Costs. Projected Total Costs are compared to Projected Revenue to develop the needed Rate Increase.

The table below summarizes the key elements that develop the Rate Increase by line of coverage.

PPO		
A	Projected Revenue	\$ 429,090,295
B	Projected Total Costs (Claims + Expenses)	\$ 458,745,974
C	Rate Increase (B / A)	6.9% Pool Average Rate Increase which becomes the center of the Banding Formula (See Exhibit C)
HMO		
A	Projected Revenue	\$ 166,380,780
B	Projected Total Costs (Claims + Expenses)	\$ 174,993,009
C	Rate Increase (B / A)	5.2% Pool Average Rate Increase which becomes the center of the Banding Formula (See Exhibit C)
DENTAL		
A	Projected Revenue	\$ 15,160,105
B	Projected Total Costs (Claims + Expenses)	\$ 15,766,093
C	Paid Claim Loss Ratio (B / A)	4.0% Pool Average Rate Increase which becomes the center of the Banding Formula (See Exhibit C)

Educational Benefit Cooperative
EXHIBIT B
July 1, 2025 to June 30, 2026 RENEWAL SUMMARY

PPO Renewal Projection Summary for 2025 to 2026 Renewal

		Experience Period 7/1/25 - 6/30/2026	% of Total Plan Costs
A.	Projected Monthly Enrollment (#EEs)	21,346	
B.	Projected Annual Revenue	\$429,090,295	
C.	Claims under \$1,000,000	\$491,270,449	
D.	Estimated Annual Rx Rebates	+	(\$55,382,624)
E.	Adjusted Annual Claims under \$1,000,000 (C + D)	=	\$435,887,825
F.	Plan Expenses		95.0%
	1. Claim Administration	\$12,888,723	
	2. Reinsurance Premium/Liability	+	\$3,692,269
	3. Consulting Fees	+	\$3,199,551
	4. Healthcare Reform Fees	+	\$155,583
	5. Cooperative Charges	+	\$2,922,022
	6. Total Plan Expenses	=	\$22,858,149
G.	Total Plan Costs (E + F6)		\$458,745,974
H.	Pool Average Rate Adjustment (G / B)		6.9%
I.	Working Cash Fund Release		
J.	Revised Total Cost (G + I)		\$458,745,974
K.	Revised Average Rate Adjustment (J / B)		6.9%

HMO Renewal Projection Summary for 2025 to 2026 Renewal

		Experience Period 7/1/25 - 6/30/2026	% of Total Plan Costs
A.	Projected Monthly Enrollment (#EEs)	10,943	
B.	Projected Annual Revenue	\$166,380,780	
C.	Claims under \$350,000	\$133,228,317	
D.	Physician Service Fees	+	\$46,400,591
E.	Total Claims and Physician Service Fees (C + D)	=	\$179,628,908
F.	Estimated Annual Rx Rebates	+	(\$20,656,007)
G.	Adjusted Annual Claims under \$350,000 (E + F)	=	\$158,972,901
H.	Plan Expenses		90.8%
	1. Claim Administration	\$7,477,133	
	2. Reinsurance Premium	+	\$5,404,755
	3. Consulting Fees	+	\$1,640,246
	4. Healthcare Reform Fees	+	\$0
	5. Cooperative Charges	+	\$1,497,973
	6. Total Plan Expenses	=	\$16,020,108
I.	Total Plan Costs (G + H6)	=	\$174,993,009
J.	Pool Average Rate Adjustment (I / B)		5.2%
K.	Working Cash Fund Release		
L.	Revised Total Cost (I + K)		\$174,993,009
M.	Revised Average Rate Adjustment (L / B)		5.2%

Dental Renewal Projection Summary for 2025 to 2026 Renewal

		Experience Period 7/1/25 - 6/30/2026	% of Total Plan Costs
A.	Projected Monthly Enrollment (#EEs)	17,339	
B.	Projected Annual Revenue	\$15,160,105	
C.	Claims	\$15,164,776	96.2%
D.	Plan Expenses		
	1. Claim Administration	\$601,317	
	2. Consulting Fees	+	\$0
	3. Total Plan Expenses	=	\$601,317
			3.8%
E.	Total Plan Costs (C + D3)	=	\$15,766,093
F.	Pool Average Rate Adjustment (E / B)		4.0%
G.	Working Cash Fund Release		
H.	Revised Total Cost (E + G)		\$15,766,093
I.	Revised Average Rate Adjustment (H / B)		4.0%

Note: For PPO, HMO, and Dental coverage, see Exhibits 16, 17 & 18 of the Appendix for each district's rate increase based on the banding formula.

This analysis is for illustrative purposes only, and is not a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. Please see your policy or contact us for specific information or further details in this regard.

EXHIBIT C

JULY 1, 2025 – JUNE 30, 2026 RENEWAL SUMMARY

BANDING FORMULA

Exhibit C illustrates the Banding Formula which was described earlier in this material. Exhibits A and B showed how the Pool Average Paid Claim Loss Ratio and the Pool Average Rate Increase were developed.

Each EBC member's Loss Ratio is shown on Exhibits 16, 17 & 18 in the Appendix, along with the final rate increase for July 1, 2025 for the PPO, HMO, and Dental plans.

The loss ratio bands and corresponding final rate increases are shown in the table below.

PPO Average Loss Ratio = 104.1%		
Paid Claim Loss Ratio	Rate Adjustment	# of Members in Band
0.0% to 74.1%	1.9%	3
74.2% to 80.6%	2.9%	3
80.7% to 87.1%	3.9%	4
87.2% to 93.6%	4.9%	10
93.7% to 100.1%	5.9%	25
100.2% to 108.1%	6.9%	38
108.2% to 114.6%	7.9%	23
114.7% to 121.1%	8.9%	8
121.2% to 127.6%	9.9%	5
127.7% to 134.1%	10.9%	0
134.2% +	11.9%	3

HMO Average Loss Ratio = 100.0%		
Paid Claim Loss Ratio	Rate Adjustment	# of Members in Band
0.0% to 70.0%	0.2%	7
70.1% to 76.5%	1.2%	4
76.6% to 83.0%	2.2%	8
83.1% to 89.5%	3.2%	7
89.6% to 96.0%	4.2%	17
96.1% to 104.0%	5.2%	26
104.1% to 110.5%	6.2%	16
110.6% to 117.0%	7.2%	12
117.1% to 123.5%	8.2%	7
123.6% to 130.0%	9.2%	3
130.1% +	10.2%	1



Gallagher

Insurance | Risk Management | Consulting

DENTAL Average Loss Ratio = 94.2%		
Paid Claim Loss Ratio	Rate Adjustment	# of Members in Band
0.0% to 64.2%	-1.0%	0
64.3% to 79.2%	1.5%	6
79.3% to 109.2%	4.0%	60
109.3% to 124.2%	6.5%	5
124.3% +	9.0%	0

EXHIBITS D1, D2, D3

RENEWAL HISTORY

Exhibits D1, D2 and D3 show the most recent five-years of renewal highlights for the PPO (D1), HMO (D2) and Dental (D3) plans.

Each exhibit outlines the revenue and claims in the experience period used to develop the claim projections in each year as well as the projected costs for the renewal period.

The table below summarizes the recent five-year renewal increases for each plan. The increases shown are those applied after any Working Cash Fund usage.

5-Year History	PPO	HMO	Dental
7/25 – 6/26	6.9%	5.2%	4.0%
7/24 – 6/25	7.3%	8.8%	6.3%
7/23 – 6/24	10.4%	7.5%	2.6%
7/22 – 6/23	7.5%	9.7%	3.7%
7/21 – 6/22	-0.1%	-2.9%	-4.1%

Educational Benefit Cooperative
Renewal Summary
EXHIBIT D-1

PPO Five-Year History

Experience Period		Renewal Period 7/1/25-6/30/26	Renewal Period 7/1/24-6/30/25	Renewal Period 7/1/23-6/30/24	Renewal Period 7/1/22-6/30/23	Renewal Period 7/1/21-6/30/22	Renewal Period 7/1/20-6/30/21
		Experience Period 1/1/2024 - 12/31/2024	Experience Period 1/1/23 - 12/31/2023	Experience Period 1/1/22 - 12/31/2022	Experience Period 1/1/21 - 12/31/2021	Experience Period 1/1/20 - 12/31/20	Experience Period 1/1/19 - 12/31/19
A.	Average Enrollment	20,881	18,837	18,540	18,432	18,214	17,404
B.	Revenue	\$407,452,115	\$345,396,219	\$313,188,148	\$301,401,004	\$292,125,838	\$266,605,108
C.	Claims under \$1,000,000	\$424,277,733	\$358,214,418	\$339,017,208	\$311,212,017	\$270,076,267	\$263,767,363
D.	Paid Claim Loss Ratio (C / B)	104.1%	103.7%	108.2%	103.3%	92.5%	98.9%

Renewal Period		Renewal Period 7/1/25-6/30/26	Renewal Period 7/1/24-6/30/25	Renewal Period 7/1/22-6/30/23	Renewal Period 7/1/22-6/30/23	Renewal Period 7/1/21-6/30/22	Renewal Period 7/1/20-6/30/21
		Experience Period 1/1/2024 - 12/31/2024	Experience Period 1/1/22 - 12/31/2022	Experience Period 1/1/22 - 12/31/2022	Experience Period 1/1/21 - 12/31/2021	Experience Period 1/1/20 - 12/31/20	Experience Period 1/1/19 - 12/31/19
A.	Projected Monthly Enrollment (# EEs)	21,346	18,989	18,516	18,415	18,540	18,150
B.	Projected Annual Revenue	\$429,090,295	\$365,613,918	\$324,796,236	\$300,708,829	\$301,500,402	\$284,028,728
C.	Total Projected Plan Costs	\$458,745,974	\$392,484,369	\$358,689,283	\$323,154,509	\$304,715,966	\$300,191,745
D.	Pool Average Rate Increase (C/B)	6.9%	7.3%	10.4%	7.5%	1.1%	5.7%
E.	Adjusted Average Rate Increase *					-0.1%	

* Adjusted average rate increase reflects average rate adjustment after use of Working Cash Fund.

Educational Benefit Cooperative
Renewal Summary
EXHIBIT D-2

HMO Five-Year History

Experience Period		Renewal Period 7/1/25-6/30/26	Renewal Period 7/1/24-6/30/25	Renewal Period 7/1/23-6/30/24	Renewal Period 7/1/22-6/30/23	Renewal Period 7/1/21-6/30/22	Renewal Period 7/1/20-6/30/21
		Experience Period 1/1/2024 - 12/31/2024	Experience Period 1/1/22 - 12/31/2022	Experience Period 1/1/22 - 12/31/2022	Experience Period 1/1/21 - 12/31/2021	Experience Period 1/1/20 - 12/31/20	Experience Period 1/1/19 - 12/31/19
A.	Average Enrollment	10,610	9,510	9,506	9,586	9,513	9,075
B.	Revenue	\$156,032,686	\$132,769,342	\$123,250,712	\$121,430,889	\$119,219,887	\$107,238,474
C.	Claims under \$350,000	\$155,992,755	\$134,371,202	\$126,099,904	\$120,846,338	\$107,594,945	\$100,737,453
D.	Paid Claim Loss Ratio (C / B)	100.0%	101.2%	102.3%	99.5%	90.2%	93.9%

Renewal Period		Renewal Period 7/1/25-6/30/26	Renewal Period 7/1/24-6/30/25	Renewal Period 7/1/23-6/30/24	Renewal Period 7/1/22-6/30/23	Renewal Period 7/1/21-6/30/22	Renewal Period 7/1/20-6/30/21
		Experience Period 1/1/2024 - 12/31/2024	Experience Period 1/1/22 - 12/31/2022	Experience Period 1/1/22 - 12/31/2022	Experience Period 1/1/21 - 12/31/2021	Experience Period 1/1/20 - 12/31/20	Experience Period 1/1/19 - 12/31/19
A.	Projected Monthly Enrollment (# EEs)	10,943	9,639	9,458	9,598	9,665	9,391
B.	Projected Annual Revenue	\$166,380,780	\$138,272,383	\$128,196,835	\$119,435,496	\$124,041,438	\$114,762,463
C.	Total Projected Plan Costs	\$174,993,009	\$150,455,907	\$137,858,770	\$131,018,547	\$121,369,177	\$119,669,978
D.	Pool Average Rate Increase (C / B)	5.2%	8.8%	7.5%	9.7%	-2.2%	4.3%
E.	Adjusted Average Rate Increase *					-2.9%	

* Adjusted average rate increase reflects average rate adjustment after use of Working Cash Fund.

Educational Benefit Cooperative
Renewal Summary
EXHIBIT D-3

Dental Five-Year History

Experience Period		Renewal Period 7/1/25-6/30/26	Renewal Period 7/1/24-6/30/25	Renewal Period 7/1/23-6/30/24	Renewal Period 7/1/22-6/30/23	Renewal Period 7/1/21-6/30/22	Renewal Period 7/1/20-6/30/21
		Experience Period 1/1/2024 - 12/31/2024	Experience Period 1/1/22 - 12/31/2022	Experience Period 1/1/22 - 12/31/2022	Experience Period 1/1/21 - 12/31/2021	Experience Period 1/1/20 - 12/31/20	Experience Period 1/1/19 - 12/31/19
A.	Average Enrollment	16,743	16,051	15,624	15,379	14,971	14,678
B.	Revenue	\$14,505,462	\$13,182,161	\$12,432,993	\$12,363,379	\$11,568,337	\$11,015,532
C.	Claims	\$13,661,781	\$12,817,634	\$11,626,307	\$9,803,164	\$10,793,414	\$10,377,718
D.	Paid Claim Loss Ratio (C / B)	94.2%	97.2%	93.5%	79.3%	93.3%	94.2%

Renewal Period		Renewal Period 7/1/25-6/30/26	Renewal Period 7/1/24-6/30/25	Renewal Period 7/1/23-6/30/24	Renewal Period 7/1/22-6/30/23	Renewal Period 7/1/21-6/30/22	Renewal Period 7/1/20-6/30/21
		Experience Period 1/1/2024 - 12/31/2024	Experience Period 1/1/22 - 12/31/2022	Experience Period 1/1/22 - 12/31/2022	Experience Period 1/1/21 - 12/31/2021	Experience Period 1/1/20 - 12/31/20	Experience Period 1/1/19 - 12/31/19
A.	Projected Monthly Enrollment (# Ees)	17,339	16,354	15,651	15,718	15,593	15,280
B.	Projected Annual Revenue	\$15,160,105	\$13,705,393	\$12,740,773	\$12,277,328	\$12,614,704	\$12,128,662
C.	Total Projected Plan Costs	\$15,766,093	\$14,575,360	\$13,074,506	\$12,734,383	\$12,658,520	\$12,290,953
D.	Pool Average Rate Increase (E / C)	4.0%	6.3%	2.6%	3.7%	0.3%	1.3%
E.	Adjusted Average Rate Increase *					-4.1%	

* Adjusted average rate increase reflects average rate adjustment after use of Working Cash Fund.



Gallagher

Insurance | Risk Management | Consulting

APPENDIX

APPENDIX

For your reference, following is a brief description of the exhibits and graphs outlining the PPO, HMO and Dental cost and projection exhibits.

Exhibit 1 illustrates the monthly PPO medical and prescription drug claims on a paid basis. The Fixed Costs (claims administration fees, stop-loss premium fees, COBRA administration fees, consulting fees) are totaled and added to the claim costs to produce Total Costs. The column labeled Surplus/ (Deficit) is the difference between the Premium Paid (budgeted cost) and the Total Costs (actual cost). The Loss Ratio developed is the Premium Paid divided by the Total Costs. Any Loss Ratio under 100% results in additions to the Terminal Reserves/Working Cash Fund.

Exhibit 2 illustrates the monthly HMO medical and prescription drug claims on a paid basis. Physician Service Fees are included as a claim cost as these fees cover costs associated with doctor office visits. The Fixed Costs (claims administration fees, stop-loss premium fees, COBRA administration fees, consulting fees) are totaled and added to the claim costs to produce Total Costs. The column labeled Surplus/ (Deficit) is the difference between the Premium Paid (budgeted cost) and the Total Costs (actual cost). The Loss Ratio developed is the Premium Paid divided by the Total Costs. Any Loss Ratio under 100% results in additions to the Terminal Reserves/Working Cash Fund.

Exhibit 3 illustrates the monthly dental claims on a paid basis. The Fixed Costs (claims administration and consulting fees) are totaled and added to the claim costs to produce Total Costs. The column labeled Surplus/ (Deficit) is the difference between the Premium Paid (budgeted cost) and the Total Costs (actual cost). The Loss Ratio developed is the Premium Paid divided by the Total Costs. Any Loss Ratio under 100% results in additions to the Terminal Reserves/Working Cash Fund.

Exhibit 4 outlines the PPO medical claims and enrollment and dental claims and enrollment for the experience period which was used to project claims for the projection period.

The medical paid claims include all claims paid; no claims over the \$1,000,000 specific deductible have been removed. Additionally, the medical, prescription, and dental claims have not been adjusted to reflect mature claim levels due to growth of the cooperative.

Exhibit 5 outlines the HMO medical claims and enrollment for the experience period which was used to project claims for the projection period.

The medical paid claims include all claims paid; no claims over the \$350,000 specific deductible have been removed. Additionally, the claims have not been adjusted to reflect mature claim levels due to growth of the cooperative.

Exhibit 6 identifies all individual PPO claims in excess of \$75,000 per person during the experience period.

Exhibit 7 identifies all individual HMO claims in excess of \$75,000 per person during the experience period.

Exhibit 8 outlines the fixed cost and enrollment assumptions used for the PPO medical, HMO medical and dental plan projection period of 7/1/25 – 6/30/26. The fixed cost components are estimated for the renewal period. All renewal fees will be finalized in March.

Exhibit 9 is the PPO Medical Experience Projection formula. The formula begins with the paid medical and prescription drug claims illustrated on Exhibit 4. An adjustment for new members is made to account for increased growth of the cooperative. Any individual claim exceeding the stop-loss deductible of \$1,000,000 is removed. This results in Total Adjusted Claims.

The experience period enrollment is adjusted for growth of the cooperative, resulting in Total Adjusted Experience Period Enrollment.

The Total Adjusted Claims is divided by the Total Adjusted Experience Period Enrollment to develop a Total Adjusted Claims cost per employee per month. The trended per capita claim cost is multiplied by the projected monthly enrollment to produce projected annual claims. (Line A).

Line G represents the Total Projected PPO Medical Benefit Costs for the plan year beginning 7/1/25. When divided by the total annual revenue, the Needed Rate Adjustment is developed.

Exhibit 10 is the HMO Medical Experience Projection formula. The formula begins with the paid medical and prescription drug claims illustrated on Exhibit 5. An adjustment for new members is made to account for increased growth of the cooperative. Any individual claim exceeding the stop-loss deductible of \$350,000 is removed. This results in Total Adjusted Claims.

The experience period enrollment is adjusted for growth of the cooperative, resulting in Total Adjusted Experience Period Enrollment.

The Total Adjusted Claims is divided by the Total Adjusted Experience Period Enrollment to develop a Total Adjusted Claims cost per employee per month. The trended per capita claim cost is added to the physician service fee projected per capita cost, for a total per employee per month claim cost. When multiplied by the projected monthly enrollment the total projected annual claims are the result. (Line A).

Line D represents the Total Projected HMO Medical Benefit Costs when divided by the total annual revenue produces the Needed Rate Adjustment.

Exhibit 11 is the Dental Experience Projection formula. The formula begins with the paid dental claims illustrated on Exhibit 4. An adjustment for new members is made to account for increased growth of the cooperative. This results in Total Adjusted Claims.

The experience period enrollment is adjusted for growth of the cooperative, resulting in Total Adjusted Experience Period Enrollment.

The Total Adjusted Claims is divided by the Total Adjusted Experience Period Enrollment to develop a Total Adjusted Claims cost per employee per month. The trended per capita claim cost is multiplied by the projected monthly enrollment to produce projected annual claims (Line A).

Line D represents the Total Projected Dental Benefit Costs for the plan year. When divided by the total annual revenue the Needed Rate Adjustment is developed.

Exhibit 12 illustrates the calculation of the IBNR (Terminal Reserve) reserve adjustments for medical and dental plans.

Exhibit 13 compares claim costs and fixed costs for the prior plan year, current plan year and projection plan year for the PPO medical plans. The upper table illustrates those costs in total, making adjustments to the claim and fixed costs to account for growth of the cooperative.

The lower table breaks the PPO medical and prescription costs into a per employee per month cost which more effectively illustrates the change in the claims and fixed costs over the three periods.

Exhibit 14 compares claim costs and fixed costs for the prior plan year, current plan year and projection plan year for the HMO medical plans. The upper table illustrates those costs in total, making adjustments to the claim and fixed costs to account for growth of the cooperative.

The lower table breaks the HMO medical and prescription costs into a per employee per month cost which more effectively illustrates the change in the claims and fixed costs over the two periods.

Exhibit 15 compares claim costs and fixed costs for the prior plan year, current plan year and projection plan year for the dental plans. The upper table illustrates those costs in total, making adjustments to the claim and fixed costs to account for growth of the cooperative.

The lower table breaks the dental costs into a per employee per month cost which more effectively illustrates the change in the claims and fixed costs over the three periods.

Exhibit 16 outlines the PPO medical loss ratios for each member district or sub pool. All loss ratios are developed removing individual claims exceeding \$75,000 and adding the shared cost of claims between \$75,000 and \$1,000,000. Paid claims for new members have been adjusted to reflect mature claim levels. The pool average loss ratio as well as each member's loss-ratio is shown which determine each member's renewal adjustment according to the banding formula.

Exhibit 17 outlines the HMO medical loss ratios for each member district or sub pool. All loss ratios are developed removing individual claims exceeding \$75,000 and adding the shared cost of claims between \$75,000 and \$350,000. Paid claims for new members have been adjusted to reflect mature claim levels. The pool average loss ratio as well as each member's loss-ratio is shown which determine each member's renewal adjustment according to the banding formula.

Exhibit 18 breaks out dental experience by member district for the experience period. Paid claims for new members have been adjusted to reflect mature claim levels. The pool average loss ratio as well as each member's loss-ratio is shown which determine each member's renewal adjustment according to the banding formula.

Exhibit 19 illustrates the banding formula for the PPO medical and dental plans.

Exhibit 20 shows the average rate adjustments to the PPO medical, HMO medical and dental plans for the cooperative since plan year beginning July 1, 2011.

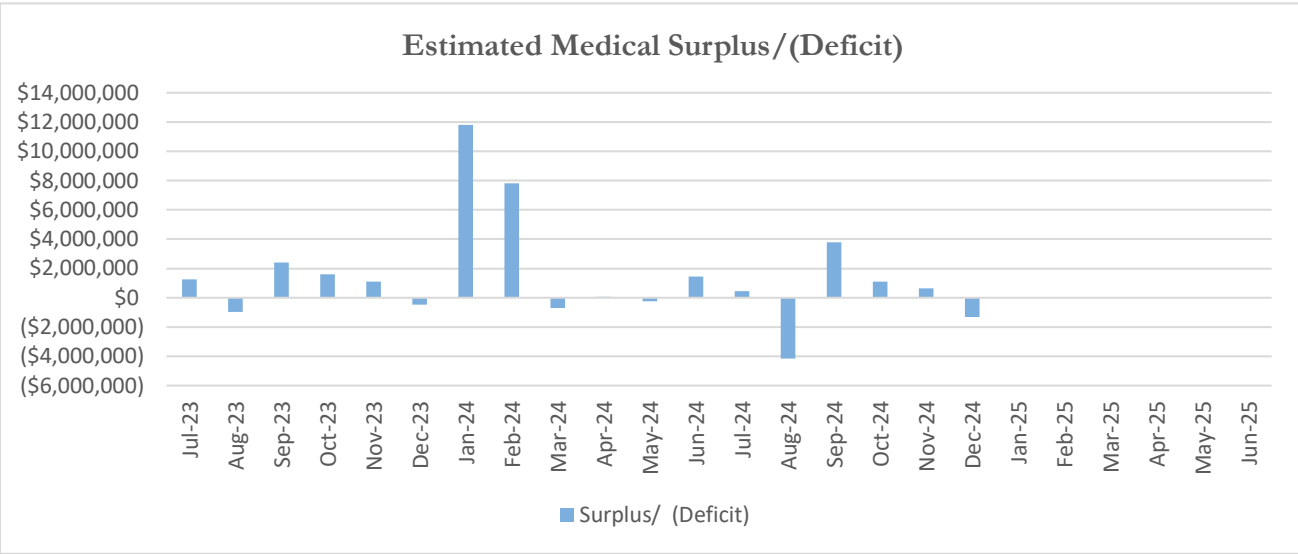
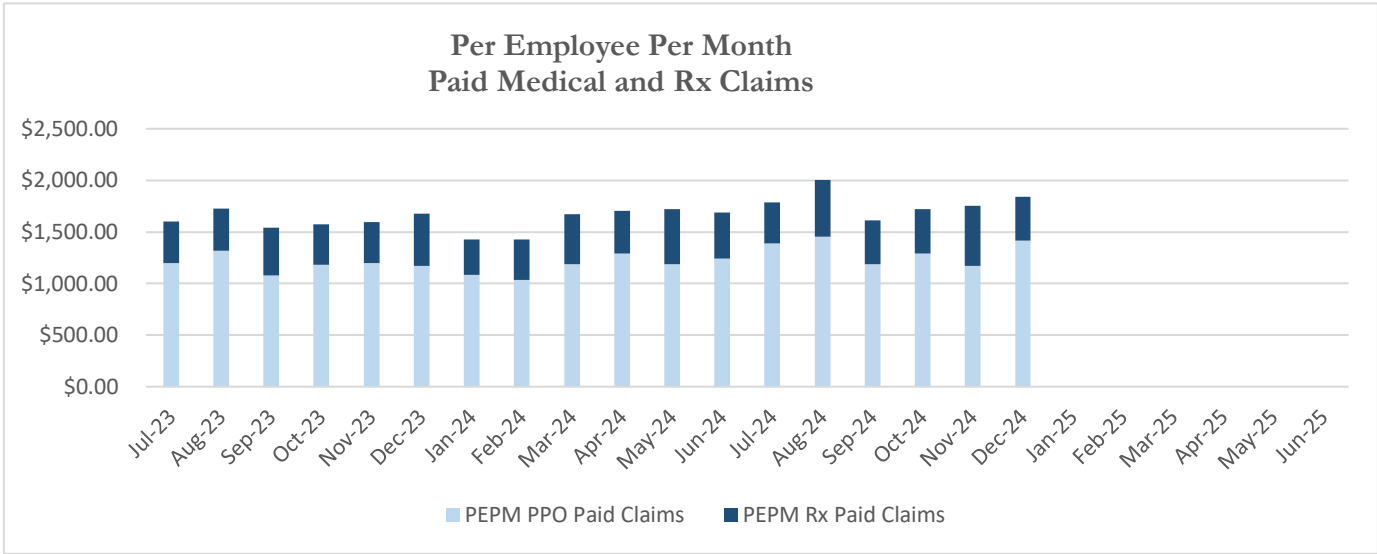
EBC

Exhibit 1

Monthly PPO Medical and Prescription Drug Experience Update

July 1, 2024 to June 30, 2025 Policy Period

Month	PPO Lives	Premium Paid	PPO Paid Claims	PEPM PPO Paid Claims	Rx Paid Claims	PEPM Rx Paid Claims	Stop Loss Claims over \$1,000,000	Total Net Paid Medical and Rx Claims	PEPM Paid Medical and Rx Claims	Rx Rebates and PG Payments	Fixed Costs	Total Costs	Surplus/ (Deficit)	Loss Ratio
Jul-23	18,708	\$30,162,000	\$22,440,548	\$1,199.52	\$7,486,730	\$400	\$0	\$29,927,277	\$1,599.70	(\$2,465,545)	\$1,460,097	\$28,921,829	\$1,240,170	95.9%
Aug-23	18,655	\$30,171,111	\$24,618,513	\$1,319.67	\$7,554,691	\$405	\$0	\$32,173,204	\$1,724.64	(\$2,497,263)	\$1,455,961	\$31,131,901	(\$960,790)	103.2%
Sep-23	18,853	\$30,428,477	\$20,355,645	\$1,079.70	\$8,711,641	\$462	\$0	\$29,067,285	\$1,541.79	(\$2,524,542)	\$1,471,414	\$28,014,157	\$2,414,320	92.1%
Oct-23	19,631	\$31,344,169	\$23,180,283	\$1,180.80	\$7,704,013	\$392	\$0	\$30,884,296	\$1,573.24	(\$2,680,079)	\$1,532,134	\$29,736,351	\$1,607,818	94.9%
Nov-23	19,197	\$30,755,047	\$23,015,378	\$1,198.90	\$7,667,181	\$399	\$0	\$30,682,558	\$1,598.30	(\$2,530,397)	\$1,498,262	\$29,650,423	\$1,104,624	96.4%
Dec-23	19,213	\$30,774,521	\$22,448,224	\$1,168.39	\$9,827,148	\$511	\$0	\$32,275,373	\$1,679.87	(\$2,536,128)	\$1,499,511	\$31,238,755	(\$464,235)	101.5%
Jan-24	20,588	\$32,688,786	\$22,301,945	\$1,083.25	\$7,048,146	\$342	\$0	\$29,350,091	\$1,425.59	(\$10,073,875)	\$1,606,825	\$20,883,040	\$11,805,746	63.9%
Feb-24	20,559	\$32,653,227	\$21,233,960	\$1,032.83	\$8,089,102	\$393	\$0	\$29,323,062	\$1,426.29	(\$6,071,547)	\$1,604,561	\$24,856,077	\$7,797,151	76.1%
Mar-24	20,544	\$32,559,174	\$24,441,542	\$1,189.72	\$9,914,703	\$483	\$0	\$34,356,245	\$1,672.33	(\$2,717,752)	\$1,603,391	\$33,241,884	(\$682,710)	102.1%
Apr-24	20,581	\$32,623,942	\$26,516,338	\$1,288.39	\$8,532,908	\$415	\$0	\$35,049,246	\$1,702.99	(\$4,103,829)	\$1,606,278	\$32,551,696	\$72,246	99.8%
May-24	20,579	\$32,702,064	\$24,427,427	\$1,187.01	\$10,999,694	\$535	\$0	\$35,427,121	\$1,721.52	(\$4,104,022)	\$1,606,122	\$32,929,221	(\$227,157)	100.7%
Jun-24	20,550	\$32,566,592	\$25,542,628	\$1,242.95	\$9,161,750	\$446	(\$1,090,674)	\$33,613,704	\$1,635.70	(\$4,090,477)	\$1,603,859	\$31,127,086	\$1,439,506	95.6%
Jul-24	20,801	\$35,055,896	\$28,890,853	\$1,389	\$8,230,997	\$396	\$0	\$37,121,850	\$1,785	(\$4,405,402)	\$1,885,403	\$34,601,851	\$454,046	98.7%
Aug-24	20,712	\$35,000,884	\$30,170,551	\$1,457	\$11,297,972	\$545	\$0	\$41,468,523	\$2,002	(\$4,204,851)	\$1,877,336	\$39,141,007	(\$4,140,123)	111.8%
Sep-24	21,165	\$35,552,167	\$25,127,086	\$1,187	\$8,999,531	\$425	\$0	\$34,126,617	\$1,612	(\$4,277,307)	\$1,918,396	\$31,767,705	\$3,784,461	89.4%
Oct-24	21,706	\$36,180,282	\$28,020,614	\$1,291	\$9,354,815	\$431	\$0	\$37,375,430	\$1,722	(\$4,261,819)	\$1,967,432	\$35,081,043	\$1,099,239	97.0%
Nov-24	21,143	\$35,316,907	\$24,742,697	\$1,170	\$12,290,308	\$581	\$0	\$37,033,005	\$1,752	(\$4,265,827)	\$1,916,402	\$34,683,579	\$633,328	98.2%
Dec-24	21,648	\$36,224,074	\$30,659,546	\$1,416	\$9,200,031	\$425	\$0	\$39,859,576	\$1,841	(\$4,277,246)	\$1,962,175	\$37,544,505	(\$1,320,431)	103.6%
Jan-25	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0.0%
Feb-25	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0.0%
Mar-25	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0.0%
Apr-25	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0.0%
May-25	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0.0%
Jun-25	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0.0%
Total 23/24 PY	127,175	\$213,330,211	\$167,611,346	\$1,317.96	\$59,373,654	\$466.87	\$0	\$226,985,000	\$1,784.82	(\$25,692,452)	\$11,527,142	\$212,819,690	\$510,520	99.8%



This analysis is for illustrative purposes only, and is not a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health care costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. Please see your policy or contact us for specific information or further details in this regard.

EBC

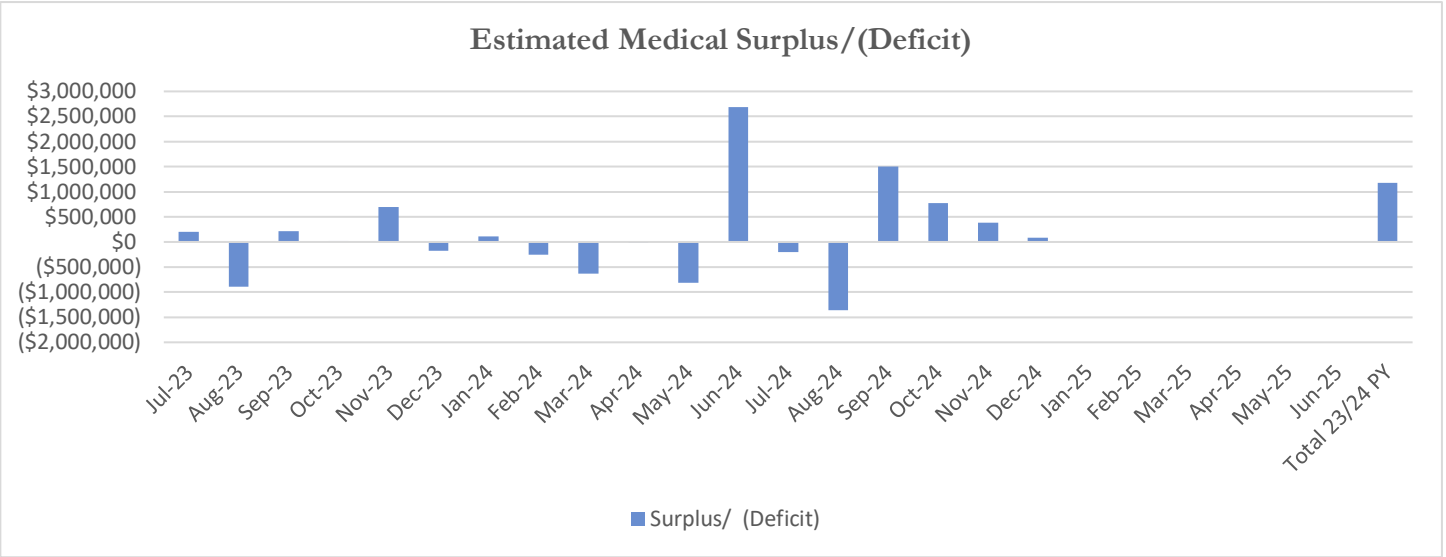
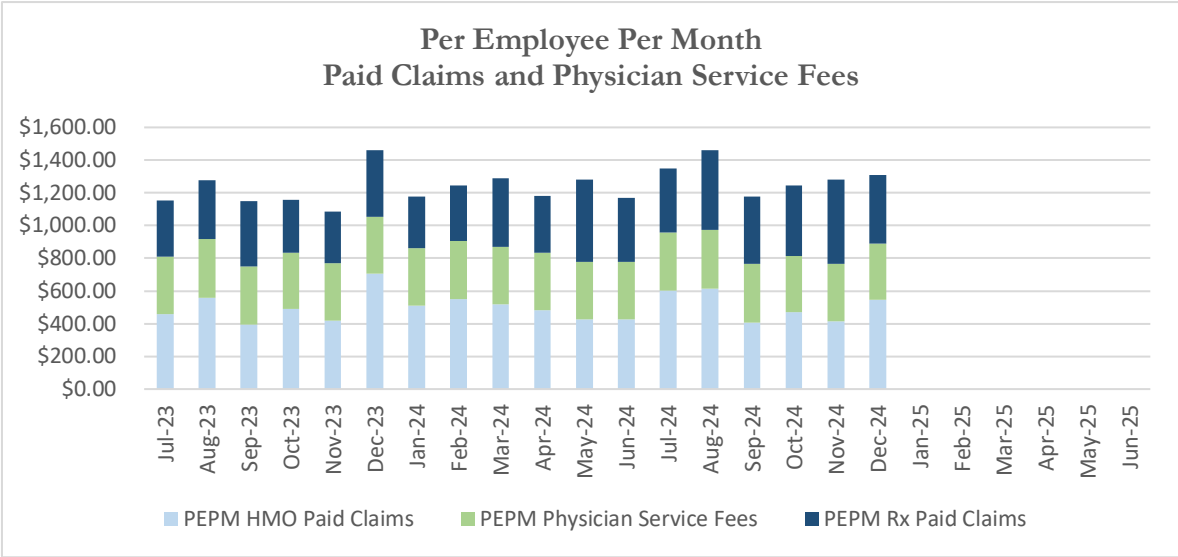
Exhibit 2

Monthly HMO Medical and Prescription Drug Experience Update

July 1, 2024 to June 30, 2025 Policy Period

Month	HMO Lives	Premium Paid	HMO Paid Claims	PEPM HMO Paid Claims	HMO Physician Service Fees	PEPM Physician Service Fees	Rx Paid Claims	PEPM Rx Paid Claims	Stop Loss Claims over \$350,000	Total Net Paid Claims and PSF's	PEPM Paid Claims and PSF's	Rx Rebates and PG Payments	Fixed Costs	Total Costs	Surplus/ (Deficit)	Loss Ratio
Jul-23	9,437	\$11,442,155	\$4,307,405	\$456.44	\$3,342,067	\$354	\$3,240,085	\$343	\$0	\$10,889,558	\$1,154	(\$591,328)	\$943,889	11,242,118	\$200,037	98.3%
Aug-23	9,343	\$11,353,460	\$5,212,885	\$557.95	\$3,368,099	\$361	\$3,331,913	\$357	\$0	\$11,913,497	\$1,275	(\$598,656)	\$934,487	12,249,328	(\$895,868)	107.9%
Sep-23	9,390	\$11,329,088	\$3,688,922	\$392.86	\$3,360,750	\$358	\$3,731,195	\$397	\$0	\$10,780,867	\$1,148	(\$602,257)	\$939,188	11,117,798	\$211,291	98.1%
Oct-23	9,833	\$11,669,392	\$4,835,690	\$491.78	\$3,347,561	\$340	\$3,190,232	\$324	\$0	\$11,373,483	\$1,157	(\$690,395)	\$983,497	11,666,584	\$2,808	100.0%
Nov-23	9,611	\$11,458,239	\$4,014,745	\$417.72	\$3,379,082	\$352	\$3,019,156	\$314	\$0	\$10,412,983	\$1,083	(\$607,298)	\$961,292	10,766,978	\$691,262	94.0%
Dec-23	9,781	\$11,651,341	\$6,903,975	\$705.86	\$3,407,488	\$348	\$3,984,988	\$407	(\$2,836,154)	\$11,460,297	\$1,172	(\$615,557)	\$978,296	11,823,035	(\$171,694)	101.5%
Jan-24	10,294	\$12,299,737	\$5,234,028	\$508.45	\$3,620,604	\$352	\$3,263,918	\$317	(\$317,924)	\$11,800,625	\$1,146	(\$646,956)	\$1,029,606	12,183,275	\$116,462	99.1%
Feb-24	10,290	\$12,342,229	\$5,672,996	\$551.31	\$3,638,909	\$354	\$3,497,526	\$340	(\$586,749)	\$12,222,682	\$1,188	(\$650,424)	\$1,029,206	12,601,464	(\$259,235)	102.1%
Mar-24	10,336	\$12,378,498	\$5,364,355	\$519.00	\$3,637,631	\$352	\$4,313,067	\$417	(\$686,682)	\$12,628,371	\$1,222	(\$650,550)	\$1,033,807	13,011,628	(\$633,130)	105.1%
Apr-24	10,311	\$12,359,757	\$4,956,386	\$480.69	\$3,641,126	\$353	\$3,582,992	\$347	(\$188,267)	\$11,992,235	\$1,163	(\$650,676)	\$1,031,306	12,372,866	(\$13,109)	100.1%
May-24	10,346	\$12,389,776	\$4,424,846	\$427.69	\$3,640,746	\$352	\$5,207,313	\$503	(\$448,853)	\$12,824,052	\$1,240	(\$650,550)	\$1,034,807	13,208,309	(\$818,533)	106.6%
Jun-24	10,316	\$12,364,695	\$4,410,545	\$427.54	\$3,631,344	\$352	\$4,019,480	\$390	(\$338,996)	\$11,722,373	\$1,136	(\$3,074,036)	\$1,031,806	9,680,144	\$2,684,551	78.3%
Jul-24	10,464	\$13,534,589	\$6,294,152	\$602	\$3,718,857	\$355	\$4,104,494	\$392	(\$125,834)	\$13,991,669	\$1,337	(\$1,473,194)	\$1,223,765	\$13,742,240	(\$207,651)	101.5%
Aug-24	10,404	\$13,475,414	\$6,370,215	\$612	\$3,744,876	\$360	\$5,073,230	\$488	(\$78,199)	\$15,110,121	\$1,452	(\$1,487,201)	\$1,216,748	\$14,839,668	(\$1,364,253)	110.1%
Sep-24	10,841	\$13,934,658	\$4,406,182	\$406	\$3,876,595	\$358	\$4,473,044	\$413	(\$32,502)	\$12,723,319	\$1,174	(\$1,562,050)	\$1,267,855	\$12,429,125	\$1,505,533	89.2%
Oct-24	11,321	\$14,351,369	\$5,332,421	\$471	\$3,887,073	\$343	\$4,888,224	\$432	(\$289,417)	\$13,818,303	\$1,221	(\$1,568,700)	\$1,323,991	\$13,573,594	\$777,775	94.6%
Nov-24	11,037	\$14,112,078	\$4,591,850	\$416	\$3,881,285	\$352	\$5,681,904	\$515	(\$141,964)	\$14,013,075	\$1,270	(\$1,569,973)	\$1,290,777	\$13,733,879	\$378,198	97.3%
Dec-24	11,361	\$14,358,739	\$6,194,088	\$545	\$3,895,092	\$343	\$4,780,588	\$421	(\$353,472)	\$14,516,296	\$1,278	(\$1,574,218)	\$1,328,669	\$14,270,747	\$87,992	99.4%
Jan-25	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0.0%
Feb-25	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0.0%
Mar-25	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0.0%
Apr-25	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0.0%
May-25	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0.0%
Jun-25	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0.0%
Total 23/24 PY	65,428	\$83,766,848	\$33,188,909	\$507.26	\$23,003,778	\$351.59	\$29,001,484	\$443.26	(\$1,021,387)	\$84,172,784	\$1,286.49	(\$9,235,335)	\$7,651,805	\$82,589,253	\$1,177,595	98.6%

Note: Beginning 7/1/2022 ADP discounts are no longer reported separately from the paid claims



This analysis is for illustrative purposes only, and is not a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health care costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. Please see your policy or contact us for specific information or further details in this regard.

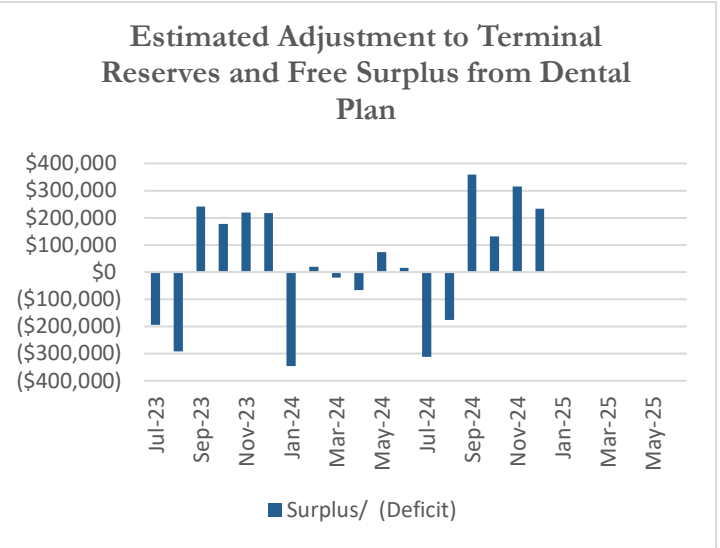
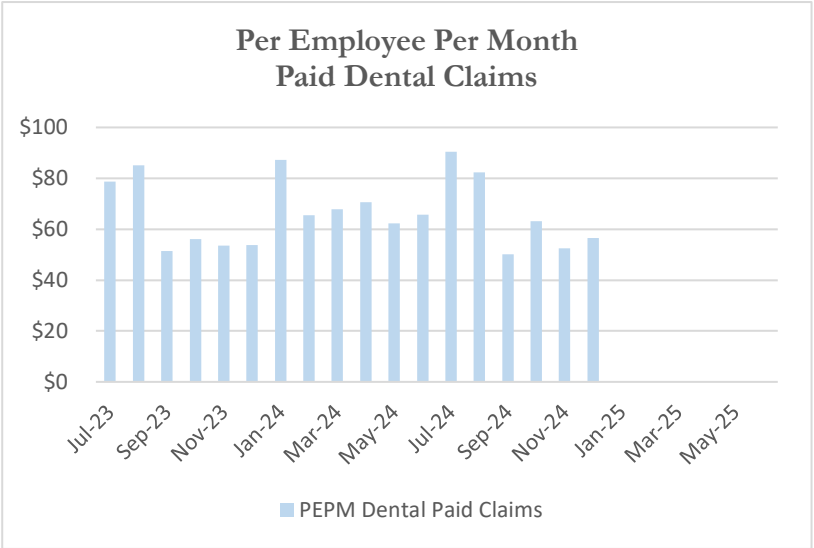
EBC

Exhibit 3

Monthly Dental Experience Update

July 1, 2024 to June 30, 2025 Policy Period

Month	Dental Lives	Premium Paid	Dental Paid Claims	PEPM Dental Paid Claims	Fixed Costs	Total Costs	Surplus/ (Deficit)	Loss Ratio
Jul-23	16,064	\$1,127,955	\$1,264,986	\$79	\$57,670	\$1,322,656	(\$194,701)	117.3%
Aug-23	15,959	\$1,122,285	\$1,357,357	\$85	\$57,293	\$1,414,649	(\$292,365)	126.1%
Sep-23	16,132	\$1,129,914	\$830,972	\$52	\$57,914	\$888,886	\$241,028	78.7%
Oct-23	17,014	\$1,191,463	\$953,640	\$56	\$61,080	\$1,014,720	\$176,742	85.2%
Nov-23	16,763	\$1,176,619	\$896,517	\$53	\$60,179	\$956,696	\$219,922	81.3%
Dec-23	16,712	\$1,174,809	\$897,238	\$54	\$59,996	\$957,234	\$217,575	81.5%
Jan-24	16,735	\$1,175,546	\$1,461,460	\$87	\$60,079	\$1,521,538	(\$345,992)	129.4%
Feb-24	16,710	\$1,173,083	\$1,093,146	\$65	\$59,989	\$1,153,134	\$19,948	98.3%
Mar-24	16,703	\$1,171,791	\$1,132,535	\$68	\$59,964	\$1,192,499	(\$20,708)	101.8%
Apr-24	16,743	\$1,176,586	\$1,183,749	\$71	\$60,107	\$1,243,857	(\$67,270)	105.7%
May-24	16,516	\$1,163,344	\$1,030,029	\$62	\$59,292	\$1,089,321	\$74,023	93.6%
Jun-24	16,735	\$1,174,986	\$1,098,819	\$66	\$60,079	\$1,158,898	\$16,088	98.6%
Jul-24	16,696	\$1,244,513	\$1,508,835	\$90	\$48,251	\$1,557,086	(\$312,573)	125.1%
Aug-24	16,566	\$1,236,348	\$1,363,815	\$82	\$47,876	\$1,411,691	(\$175,343)	114.2%
Sep-24	16,594	\$1,238,811	\$831,554	\$50	\$47,957	\$879,511	\$359,300	71.0%
Oct-24	17,030	\$1,255,228	\$1,074,741	\$63	\$49,217	\$1,123,958	\$131,271	89.5%
Nov-24	16,553	\$1,231,883	\$868,694	\$52	\$47,838	\$916,533	\$315,351	74.4%
Dec-24	17,339	\$1,263,342	\$980,535	\$57	\$50,110	\$1,030,645	\$232,697	81.6%
Jan-25	0	\$0	\$0	\$0	\$0	\$0	\$0	0.0%
Feb-25	0	\$0	\$0	\$0	\$0	\$0	\$0	0.0%
Mar-25	0	\$0	\$0	\$0	\$0	\$0	\$0	0.0%
Apr-25	0	\$0	\$0	\$0	\$0	\$0	\$0	0.0%
May-25	0	\$0	\$0	\$0	\$0	\$0	\$0	0.0%
Jun-25	0	\$0	\$0	\$0	\$0	\$0	\$0	0.0%
Total 23/24 PY	100,778	\$7,470,126	\$6,628,175	\$65.77	\$291,248	\$6,919,423	\$550,703	92.6%



This analysis is for illustrative purposes only, and is not a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health care costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. Please see your policy or contact us for specific information or further details in this regard.

EBC Exhibit 4

PPO & Dental Experience Period Used to Forecast Renewal Claim Costs ¹ Experience Period: January 1, 2024 to December 31, 2024

Month	PPO Lives	Medical Paid Claims	Rx Paid Claims	Total Paid Medical and Rx Claims	Dental Lives	Dental Paid Claims
Dec-23	19,213	-	-	-	16,712	-
Jan-24	20,588	\$22,301,945	\$7,048,146	\$29,350,091	16,735	\$1,461,460
Feb-24	20,559	\$21,233,960	\$8,089,102	\$29,323,062	16,710	\$1,093,146
Mar-24	20,544	\$24,441,542	\$9,914,703	\$34,356,245	16,703	\$1,132,535
Apr-24	20,581	\$26,516,338	\$8,532,908	\$35,049,246	16,743	\$1,183,749
May-24	20,579	\$24,427,427	\$10,999,694	\$35,427,121	16,516	\$1,030,029
Jun-24	20,550	\$25,542,628	\$9,161,750	\$34,704,378	16,735	\$1,098,819
Jul-24	20,801	\$28,890,853	\$8,230,997	\$37,121,850	16,696	\$1,508,835
Aug-24	20,712	\$30,170,551	\$11,297,972	\$41,468,523	16,566	\$1,363,815
Sep-24	21,165	\$25,127,086	\$8,999,531	\$34,126,617	16,594	\$831,554
Oct-24	21,706	\$28,020,614	\$9,354,815	\$37,375,430	17,030	\$1,074,741
Nov-24	21,143	\$24,742,697	\$12,290,308	\$37,033,005	16,553	\$868,694
Dec-24	-	\$30,659,546	\$9,200,031	\$39,859,576	-	\$980,535
Total ²	248,141	\$312,075,185	\$113,119,958	\$425,195,143	200,293	\$13,627,913

1. Experience period information represents claims paid through EBC only. No adjustment has been made to account for growth.
2. Total represents 1 month lag for medical and dental employees. The lag is used to better match the enrollment with the claim cost.

This analysis is for illustrative purposes only, and is not a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health care costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. Please see your policy or contact us for specific information or further details in this regard.

EBC

Exhibit 5

HMO Experience Period Used to Forecast Renewal Claim Costs ¹

Experience Period: January 1, 2024 to December 31, 2024

Month	HMO Lives	Medical Paid Claims	Rx Paid Claims	Total Paid Medical and Rx Claims
Dec-23	9,781	-	-	-
Jan-24	10,294	\$5,234,028	\$3,263,918	\$8,497,946
Feb-24	10,290	\$5,672,996	\$3,497,526	\$9,170,522
Mar-24	10,336	\$5,364,355	\$4,313,067	\$9,677,422
Apr-24	10,311	\$4,956,386	\$3,582,992	\$8,539,377
May-24	10,346	\$4,424,846	\$5,207,313	\$9,632,159
Jun-24	10,316	\$4,410,545	\$4,019,480	\$8,430,025
Jul-24	10,464	\$6,294,152	\$4,104,494	\$10,398,646
Aug-24	10,404	\$6,370,215	\$5,073,230	\$11,443,445
Sep-24	10,841	\$4,406,182	\$4,473,044	\$8,879,226
Oct-24	11,321	\$5,332,421	\$4,888,224	\$10,220,646
Nov-24	11,037	\$4,591,850	\$5,681,904	\$10,273,754
Dec-24	-	\$6,194,088	\$4,780,588	\$10,974,676
Total ²	125,741	\$63,252,064	\$52,885,779	\$116,137,843

1. Experience period information represents claims paid through EBC only. No adjustment has been made to account for growth.

2. Total represents 1 month lag for medical employees. The lag is used to better match the enrollment with the claim cost.

This analysis is for illustrative purposes only, and is not a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health care costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. Please see your policy or contact us for specific information or further details in this regard.

EBC

Exhibit 6

PPO Specific Stop-Loss Summary

Experience Period: January 1, 2024 to December 31, 2024

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
1	\$ 1,370,058	\$ 1,295,058	\$ 370,058
2	\$ 1,201,548	\$ 1,126,548	\$ 201,548
3	\$ 971,849	\$ 896,849	\$ -
4	\$ 918,811	\$ 843,811	\$ -
5	\$ 882,787	\$ 807,787	\$ -
6	\$ 784,235	\$ 709,235	\$ -
7	\$ 761,916	\$ 686,916	\$ -
8	\$ 724,342	\$ 649,342	\$ -
9	\$ 718,516	\$ 643,516	\$ -
10	\$ 664,300	\$ 589,300	\$ -
11	\$ 622,391	\$ 547,391	\$ -
12	\$ 603,376	\$ 528,376	\$ -
13	\$ 593,851	\$ 518,851	\$ -
14	\$ 592,931	\$ 517,931	\$ -
15	\$ 585,142	\$ 510,142	\$ -
16	\$ 561,370	\$ 486,370	\$ -
17	\$ 559,792	\$ 484,792	\$ -
18	\$ 557,136	\$ 482,136	\$ -
19	\$ 556,021	\$ 481,021	\$ -
20	\$ 525,265	\$ 450,265	\$ -
21	\$ 520,635	\$ 445,635	\$ -
22	\$ 517,603	\$ 442,603	\$ -
23	\$ 503,637	\$ 428,637	\$ -
24	\$ 500,924	\$ 425,924	\$ -
25	\$ 498,680	\$ 423,680	\$ -
26	\$ 496,984	\$ 421,984	\$ -
27	\$ 475,976	\$ 400,976	\$ -
28	\$ 467,606	\$ 392,606	\$ -
29	\$ 460,690	\$ 385,690	\$ -
30	\$ 456,758	\$ 381,758	\$ -
31	\$ 449,825	\$ 374,825	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
94	\$ 285,940	\$ 210,940	\$ -
95	\$ 283,314	\$ 208,314	\$ -
96	\$ 279,894	\$ 204,894	\$ -
97	\$ 278,435	\$ 203,435	\$ -
98	\$ 276,931	\$ 201,931	\$ -
99	\$ 276,356	\$ 201,356	\$ -
100	\$ 272,728	\$ 197,728	\$ -
101	\$ 270,058	\$ 195,058	\$ -
102	\$ 270,050	\$ 195,050	\$ -
103	\$ 269,992	\$ 194,992	\$ -
104	\$ 269,441	\$ 194,441	\$ -
105	\$ 268,459	\$ 193,459	\$ -
106	\$ 267,828	\$ 192,828	\$ -
107	\$ 263,574	\$ 188,574	\$ -
108	\$ 260,822	\$ 185,822	\$ -
109	\$ 260,649	\$ 185,649	\$ -
110	\$ 258,894	\$ 183,894	\$ -
111	\$ 258,570	\$ 183,570	\$ -
112	\$ 249,177	\$ 174,177	\$ -
113	\$ 249,110	\$ 174,110	\$ -
114	\$ 245,400	\$ 170,400	\$ -
115	\$ 242,183	\$ 167,183	\$ -
116	\$ 241,963	\$ 166,963	\$ -
117	\$ 239,704	\$ 164,704	\$ -
118	\$ 238,963	\$ 163,963	\$ -
119	\$ 238,374	\$ 163,374	\$ -
120	\$ 237,732	\$ 162,732	\$ -
121	\$ 235,773	\$ 160,773	\$ -
122	\$ 235,768	\$ 160,768	\$ -
123	\$ 235,409	\$ 160,409	\$ -
124	\$ 235,029	\$ 160,029	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
32	\$ 442,422	\$ 367,422	\$ -
33	\$ 437,781	\$ 362,781	\$ -
34	\$ 435,463	\$ 360,463	\$ -
35	\$ 434,561	\$ 359,561	\$ -
36	\$ 431,882	\$ 356,882	\$ -
37	\$ 429,160	\$ 354,160	\$ -
38	\$ 426,667	\$ 351,667	\$ -
39	\$ 411,618	\$ 336,618	\$ -
40	\$ 404,134	\$ 329,134	\$ -
41	\$ 387,080	\$ 312,080	\$ -
42	\$ 385,453	\$ 310,453	\$ -
43	\$ 383,999	\$ 308,999	\$ -
44	\$ 382,353	\$ 307,353	\$ -
45	\$ 379,663	\$ 304,663	\$ -
46	\$ 376,635	\$ 301,635	\$ -
47	\$ 375,670	\$ 300,670	\$ -
48	\$ 358,015	\$ 283,015	\$ -
49	\$ 357,978	\$ 282,978	\$ -
50	\$ 357,096	\$ 282,096	\$ -
51	\$ 356,088	\$ 281,088	\$ -
52	\$ 355,489	\$ 280,489	\$ -
53	\$ 349,285	\$ 274,285	\$ -
54	\$ 335,930	\$ 260,930	\$ -
55	\$ 334,864	\$ 259,864	\$ -
56	\$ 334,701	\$ 259,701	\$ -
57	\$ 334,128	\$ 259,128	\$ -
58	\$ 331,782	\$ 256,782	\$ -
59	\$ 329,868	\$ 254,868	\$ -
60	\$ 328,546	\$ 253,546	\$ -
61	\$ 327,136	\$ 252,136	\$ -
62	\$ 324,029	\$ 249,029	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
125	\$ 234,964	\$ 159,964	\$ -
126	\$ 234,726	\$ 159,726	\$ -
127	\$ 231,510	\$ 156,510	\$ -
128	\$ 229,068	\$ 154,068	\$ -
129	\$ 228,583	\$ 153,583	\$ -
130	\$ 227,927	\$ 152,927	\$ -
131	\$ 227,498	\$ 152,498	\$ -
132	\$ 227,005	\$ 152,005	\$ -
133	\$ 226,613	\$ 151,613	\$ -
134	\$ 225,090	\$ 150,090	\$ -
135	\$ 224,517	\$ 149,517	\$ -
136	\$ 223,803	\$ 148,803	\$ -
137	\$ 223,771	\$ 148,771	\$ -
138	\$ 221,826	\$ 146,826	\$ -
139	\$ 221,277	\$ 146,277	\$ -
140	\$ 220,948	\$ 145,948	\$ -
141	\$ 220,450	\$ 145,450	\$ -
142	\$ 219,615	\$ 144,615	\$ -
143	\$ 219,204	\$ 144,204	\$ -
144	\$ 219,040	\$ 144,040	\$ -
145	\$ 216,406	\$ 141,406	\$ -
146	\$ 216,206	\$ 141,206	\$ -
147	\$ 215,802	\$ 140,802	\$ -
148	\$ 214,402	\$ 139,402	\$ -
149	\$ 212,700	\$ 137,700	\$ -
150	\$ 212,643	\$ 137,643	\$ -
151	\$ 210,447	\$ 135,447	\$ -
152	\$ 209,516	\$ 134,516	\$ -
153	\$ 208,912	\$ 133,912	\$ -
154	\$ 208,483	\$ 133,483	\$ -
155	\$ 206,330	\$ 131,330	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
63	\$ 322,333	\$ 247,333	\$ -
64	\$ 322,233	\$ 247,233	\$ -
65	\$ 321,218	\$ 246,218	\$ -
66	\$ 320,270	\$ 245,270	\$ -
67	\$ 320,270	\$ 245,270	\$ -
68	\$ 316,372	\$ 241,372	\$ -
69	\$ 314,219	\$ 239,219	\$ -
70	\$ 313,965	\$ 238,965	\$ -
71	\$ 312,729	\$ 237,729	\$ -
72	\$ 312,249	\$ 237,249	\$ -
73	\$ 310,993	\$ 235,993	\$ -
74	\$ 308,945	\$ 233,945	\$ -
75	\$ 308,582	\$ 233,582	\$ -
76	\$ 308,014	\$ 233,014	\$ -
77	\$ 307,458	\$ 232,458	\$ -
78	\$ 307,046	\$ 232,046	\$ -
79	\$ 306,080	\$ 231,080	\$ -
80	\$ 305,316	\$ 230,316	\$ -
81	\$ 304,683	\$ 229,683	\$ -
82	\$ 304,052	\$ 229,052	\$ -
83	\$ 302,380	\$ 227,380	\$ -
84	\$ 302,234	\$ 227,234	\$ -
85	\$ 302,133	\$ 227,133	\$ -
86	\$ 301,115	\$ 226,115	\$ -
87	\$ 298,850	\$ 223,850	\$ -
88	\$ 298,763	\$ 223,763	\$ -
89	\$ 297,240	\$ 222,240	\$ -
90	\$ 294,173	\$ 219,173	\$ -
91	\$ 293,263	\$ 218,263	\$ -
92	\$ 289,319	\$ 214,319	\$ -
93	\$ 286,966	\$ 211,966	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
156	\$ 206,181	\$ 131,181	\$ -
157	\$ 205,772	\$ 130,772	\$ -
158	\$ 204,768	\$ 129,768	\$ -
159	\$ 204,282	\$ 129,282	\$ -
160	\$ 203,788	\$ 128,788	\$ -
161	\$ 203,562	\$ 128,562	\$ -
162	\$ 202,892	\$ 127,892	\$ -
163	\$ 202,620	\$ 127,620	\$ -
164	\$ 202,340	\$ 127,340	\$ -
165	\$ 200,578	\$ 125,578	\$ -
166	\$ 200,021	\$ 125,021	\$ -
167	\$ 199,501	\$ 124,501	\$ -
168	\$ 199,355	\$ 124,355	\$ -
169	\$ 199,155	\$ 124,155	\$ -
170	\$ 199,049	\$ 124,049	\$ -
171	\$ 198,929	\$ 123,929	\$ -
172	\$ 198,619	\$ 123,619	\$ -
173	\$ 197,025	\$ 122,025	\$ -
174	\$ 196,947	\$ 121,947	\$ -
175	\$ 196,419	\$ 121,419	\$ -
176	\$ 195,942	\$ 120,942	\$ -
177	\$ 195,022	\$ 120,022	\$ -
178	\$ 194,932	\$ 119,932	\$ -
179	\$ 194,674	\$ 119,674	\$ -
180	\$ 194,443	\$ 119,443	\$ -
181	\$ 194,198	\$ 119,198	\$ -
182	\$ 193,807	\$ 118,807	\$ -
183	\$ 193,757	\$ 118,757	\$ -
184	\$ 193,723	\$ 118,723	\$ -
185	\$ 193,496	\$ 118,496	\$ -
186	\$ 192,882	\$ 117,882	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
187	\$ 192,695	\$ 117,695	\$ -
188	\$ 192,516	\$ 117,516	\$ -
189	\$ 192,171	\$ 117,171	\$ -
190	\$ 191,406	\$ 116,406	\$ -
191	\$ 190,202	\$ 115,202	\$ -
192	\$ 188,611	\$ 113,611	\$ -
193	\$ 188,341	\$ 113,341	\$ -
194	\$ 186,242	\$ 111,242	\$ -
195	\$ 185,832	\$ 110,832	\$ -
196	\$ 185,788	\$ 110,788	\$ -
197	\$ 185,741	\$ 110,741	\$ -
198	\$ 185,013	\$ 110,013	\$ -
199	\$ 184,453	\$ 109,453	\$ -
200	\$ 184,105	\$ 109,105	\$ -
201	\$ 184,042	\$ 109,042	\$ -
202	\$ 183,865	\$ 108,865	\$ -
203	\$ 181,986	\$ 106,986	\$ -
204	\$ 180,723	\$ 105,723	\$ -
205	\$ 180,648	\$ 105,648	\$ -
206	\$ 179,797	\$ 104,797	\$ -
207	\$ 179,672	\$ 104,672	\$ -
208	\$ 179,623	\$ 104,623	\$ -
209	\$ 179,614	\$ 104,614	\$ -
210	\$ 179,605	\$ 104,605	\$ -
211	\$ 179,180	\$ 104,180	\$ -
212	\$ 178,349	\$ 103,349	\$ -
213	\$ 177,912	\$ 102,912	\$ -
214	\$ 177,701	\$ 102,701	\$ -
215	\$ 177,415	\$ 102,415	\$ -
216	\$ 177,088	\$ 102,088	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
277	\$ 153,012	\$ 78,012	\$ -
278	\$ 152,321	\$ 77,321	\$ -
279	\$ 152,301	\$ 77,301	\$ -
280	\$ 152,080	\$ 77,080	\$ -
281	\$ 151,991	\$ 76,991	\$ -
282	\$ 151,734	\$ 76,734	\$ -
283	\$ 151,147	\$ 76,147	\$ -
284	\$ 151,107	\$ 76,107	\$ -
285	\$ 151,066	\$ 76,066	\$ -
286	\$ 151,044	\$ 76,044	\$ -
287	\$ 150,823	\$ 75,823	\$ -
288	\$ 150,593	\$ 75,593	\$ -
289	\$ 150,279	\$ 75,279	\$ -
290	\$ 150,208	\$ 75,208	\$ -
291	\$ 149,674	\$ 74,674	\$ -
292	\$ 149,274	\$ 74,274	\$ -
293	\$ 149,174	\$ 74,174	\$ -
294	\$ 149,054	\$ 74,054	\$ -
295	\$ 148,732	\$ 73,732	\$ -
296	\$ 147,171	\$ 72,171	\$ -
297	\$ 147,154	\$ 72,154	\$ -
298	\$ 147,131	\$ 72,131	\$ -
299	\$ 146,596	\$ 71,596	\$ -
300	\$ 146,451	\$ 71,451	\$ -
301	\$ 146,187	\$ 71,187	\$ -
302	\$ 146,069	\$ 71,069	\$ -
303	\$ 145,943	\$ 70,943	\$ -
304	\$ 145,910	\$ 70,910	\$ -
305	\$ 145,787	\$ 70,787	\$ -
306	\$ 145,714	\$ 70,714	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
217	\$ 177,081	\$ 102,081	\$ -
218	\$ 176,583	\$ 101,583	\$ -
219	\$ 176,579	\$ 101,579	\$ -
220	\$ 176,454	\$ 101,454	\$ -
221	\$ 176,184	\$ 101,184	\$ -
222	\$ 175,673	\$ 100,673	\$ -
223	\$ 175,451	\$ 100,451	\$ -
224	\$ 174,870	\$ 99,870	\$ -
225	\$ 174,785	\$ 99,785	\$ -
226	\$ 174,277	\$ 99,277	\$ -
227	\$ 174,045	\$ 99,045	\$ -
228	\$ 173,235	\$ 98,235	\$ -
229	\$ 173,151	\$ 98,151	\$ -
230	\$ 171,935	\$ 96,935	\$ -
231	\$ 171,239	\$ 96,239	\$ -
232	\$ 171,220	\$ 96,220	\$ -
233	\$ 171,140	\$ 96,140	\$ -
234	\$ 170,493	\$ 95,493	\$ -
235	\$ 170,375	\$ 95,375	\$ -
236	\$ 170,279	\$ 95,279	\$ -
237	\$ 170,187	\$ 95,187	\$ -
238	\$ 170,162	\$ 95,162	\$ -
239	\$ 170,100	\$ 95,100	\$ -
240	\$ 169,730	\$ 94,730	\$ -
241	\$ 169,404	\$ 94,404	\$ -
242	\$ 167,498	\$ 92,498	\$ -
243	\$ 166,487	\$ 91,487	\$ -
244	\$ 166,406	\$ 91,406	\$ -
245	\$ 166,398	\$ 91,398	\$ -
246	\$ 166,169	\$ 91,169	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
307	\$ 145,711	\$ 70,711	\$ -
308	\$ 145,488	\$ 70,488	\$ -
309	\$ 145,455	\$ 70,455	\$ -
310	\$ 145,152	\$ 70,152	\$ -
311	\$ 144,578	\$ 69,578	\$ -
312	\$ 144,242	\$ 69,242	\$ -
313	\$ 144,238	\$ 69,238	\$ -
314	\$ 144,091	\$ 69,091	\$ -
315	\$ 143,716	\$ 68,716	\$ -
316	\$ 143,667	\$ 68,667	\$ -
317	\$ 143,129	\$ 68,129	\$ -
318	\$ 142,913	\$ 67,913	\$ -
319	\$ 142,240	\$ 67,240	\$ -
320	\$ 142,130	\$ 67,130	\$ -
321	\$ 142,022	\$ 67,022	\$ -
322	\$ 141,113	\$ 66,113	\$ -
323	\$ 140,908	\$ 65,908	\$ -
324	\$ 140,860	\$ 65,860	\$ -
325	\$ 140,798	\$ 65,798	\$ -
326	\$ 140,488	\$ 65,488	\$ -
327	\$ 140,124	\$ 65,124	\$ -
328	\$ 139,419	\$ 64,419	\$ -
329	\$ 139,192	\$ 64,192	\$ -
330	\$ 138,841	\$ 63,841	\$ -
331	\$ 138,811	\$ 63,811	\$ -
332	\$ 138,720	\$ 63,720	\$ -
333	\$ 138,653	\$ 63,653	\$ -
334	\$ 138,652	\$ 63,652	\$ -
335	\$ 138,604	\$ 63,604	\$ -
336	\$ 138,371	\$ 63,371	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
247	\$ 164,960	\$ 89,960	\$ -
248	\$ 164,595	\$ 89,595	\$ -
249	\$ 163,894	\$ 88,894	\$ -
250	\$ 163,338	\$ 88,338	\$ -
251	\$ 163,217	\$ 88,217	\$ -
252	\$ 163,055	\$ 88,055	\$ -
253	\$ 162,706	\$ 87,706	\$ -
254	\$ 162,536	\$ 87,536	\$ -
255	\$ 162,522	\$ 87,522	\$ -
256	\$ 162,369	\$ 87,369	\$ -
257	\$ 161,746	\$ 86,746	\$ -
258	\$ 161,489	\$ 86,489	\$ -
259	\$ 160,790	\$ 85,790	\$ -
260	\$ 159,816	\$ 84,816	\$ -
261	\$ 159,463	\$ 84,463	\$ -
262	\$ 158,934	\$ 83,934	\$ -
263	\$ 158,026	\$ 83,026	\$ -
264	\$ 157,894	\$ 82,894	\$ -
265	\$ 157,323	\$ 82,323	\$ -
266	\$ 157,253	\$ 82,253	\$ -
267	\$ 156,967	\$ 81,967	\$ -
268	\$ 156,858	\$ 81,858	\$ -
269	\$ 155,081	\$ 80,081	\$ -
270	\$ 155,008	\$ 80,008	\$ -
271	\$ 154,855	\$ 79,855	\$ -
272	\$ 154,303	\$ 79,303	\$ -
273	\$ 154,177	\$ 79,177	\$ -
274	\$ 153,706	\$ 78,706	\$ -
275	\$ 153,659	\$ 78,659	\$ -
276	\$ 153,043	\$ 78,043	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
337	\$ 138,347	\$ 63,347	\$ -
338	\$ 138,344	\$ 63,344	\$ -
339	\$ 137,963	\$ 62,963	\$ -
340	\$ 137,181	\$ 62,181	\$ -
341	\$ 136,873	\$ 61,873	\$ -
342	\$ 136,858	\$ 61,858	\$ -
343	\$ 136,739	\$ 61,739	\$ -
344	\$ 136,728	\$ 61,728	\$ -
345	\$ 136,260	\$ 61,260	\$ -
346	\$ 135,914	\$ 60,914	\$ -
347	\$ 135,651	\$ 60,651	\$ -
348	\$ 135,591	\$ 60,591	\$ -
349	\$ 135,452	\$ 60,452	\$ -
350	\$ 135,198	\$ 60,198	\$ -
351	\$ 135,059	\$ 60,059	\$ -
352	\$ 134,956	\$ 59,956	\$ -
353	\$ 134,322	\$ 59,322	\$ -
354	\$ 134,102	\$ 59,102	\$ -
355	\$ 132,808	\$ 57,808	\$ -
356	\$ 132,634	\$ 57,634	\$ -
357	\$ 132,404	\$ 57,404	\$ -
358	\$ 132,222	\$ 57,222	\$ -
359	\$ 132,088	\$ 57,088	\$ -
360	\$ 131,565	\$ 56,565	\$ -
361	\$ 131,060	\$ 56,060	\$ -
362	\$ 131,001	\$ 56,001	\$ -
363	\$ 130,750	\$ 55,750	\$ -
364	\$ 130,684	\$ 55,684	\$ -
365	\$ 130,528	\$ 55,528	\$ -
366	\$ 130,490	\$ 55,490	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
367	\$ 130,395	\$ 55,395	\$ -
368	\$ 129,219	\$ 54,219	\$ -
369	\$ 128,862	\$ 53,862	\$ -
370	\$ 128,715	\$ 53,715	\$ -
371	\$ 128,566	\$ 53,566	\$ -
372	\$ 128,364	\$ 53,364	\$ -
373	\$ 128,276	\$ 53,276	\$ -
374	\$ 128,160	\$ 53,160	\$ -
375	\$ 127,916	\$ 52,916	\$ -
376	\$ 127,424	\$ 52,424	\$ -
377	\$ 127,269	\$ 52,269	\$ -
378	\$ 126,816	\$ 51,816	\$ -
379	\$ 126,582	\$ 51,582	\$ -
380	\$ 126,577	\$ 51,577	\$ -
381	\$ 126,503	\$ 51,503	\$ -
382	\$ 126,417	\$ 51,417	\$ -
383	\$ 126,397	\$ 51,397	\$ -
384	\$ 126,147	\$ 51,147	\$ -
385	\$ 125,893	\$ 50,893	\$ -
386	\$ 125,813	\$ 50,813	\$ -
387	\$ 125,248	\$ 50,248	\$ -
388	\$ 125,049	\$ 50,049	\$ -
389	\$ 124,821	\$ 49,821	\$ -
390	\$ 124,499	\$ 49,499	\$ -
391	\$ 124,124	\$ 49,124	\$ -
392	\$ 124,120	\$ 49,120	\$ -
393	\$ 122,981	\$ 47,981	\$ -
394	\$ 122,796	\$ 47,796	\$ -
395	\$ 122,454	\$ 47,454	\$ -
396	\$ 122,226	\$ 47,226	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
457	\$ 114,039	\$ 39,039	\$ -
458	\$ 114,019	\$ 39,019	\$ -
459	\$ 113,961	\$ 38,961	\$ -
460	\$ 113,961	\$ 38,961	\$ -
461	\$ 113,750	\$ 38,750	\$ -
462	\$ 113,749	\$ 38,749	\$ -
463	\$ 113,555	\$ 38,555	\$ -
464	\$ 113,554	\$ 38,554	\$ -
465	\$ 113,333	\$ 38,333	\$ -
466	\$ 113,312	\$ 38,312	\$ -
467	\$ 113,203	\$ 38,203	\$ -
468	\$ 112,982	\$ 37,982	\$ -
469	\$ 112,914	\$ 37,914	\$ -
470	\$ 112,842	\$ 37,842	\$ -
471	\$ 112,688	\$ 37,688	\$ -
472	\$ 112,688	\$ 37,688	\$ -
473	\$ 112,214	\$ 37,214	\$ -
474	\$ 112,062	\$ 37,062	\$ -
475	\$ 112,043	\$ 37,043	\$ -
476	\$ 111,975	\$ 36,975	\$ -
477	\$ 111,842	\$ 36,842	\$ -
478	\$ 111,734	\$ 36,734	\$ -
479	\$ 111,705	\$ 36,705	\$ -
480	\$ 111,577	\$ 36,577	\$ -
481	\$ 111,495	\$ 36,495	\$ -
482	\$ 111,373	\$ 36,373	\$ -
483	\$ 111,366	\$ 36,366	\$ -
484	\$ 110,947	\$ 35,947	\$ -
485	\$ 110,640	\$ 35,640	\$ -
486	\$ 110,529	\$ 35,529	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
397	\$ 122,075	\$ 47,075	\$ -
398	\$ 121,997	\$ 46,997	\$ -
399	\$ 121,815	\$ 46,815	\$ -
400	\$ 121,771	\$ 46,771	\$ -
401	\$ 121,724	\$ 46,724	\$ -
402	\$ 121,704	\$ 46,704	\$ -
403	\$ 121,605	\$ 46,605	\$ -
404	\$ 121,583	\$ 46,583	\$ -
405	\$ 121,454	\$ 46,454	\$ -
406	\$ 121,403	\$ 46,403	\$ -
407	\$ 121,202	\$ 46,202	\$ -
408	\$ 121,135	\$ 46,135	\$ -
409	\$ 121,025	\$ 46,025	\$ -
410	\$ 120,942	\$ 45,942	\$ -
411	\$ 120,428	\$ 45,428	\$ -
412	\$ 120,318	\$ 45,318	\$ -
413	\$ 120,304	\$ 45,304	\$ -
414	\$ 120,227	\$ 45,227	\$ -
415	\$ 120,191	\$ 45,191	\$ -
416	\$ 120,110	\$ 45,110	\$ -
417	\$ 120,090	\$ 45,090	\$ -
418	\$ 119,738	\$ 44,738	\$ -
419	\$ 119,637	\$ 44,637	\$ -
420	\$ 119,581	\$ 44,581	\$ -
421	\$ 119,566	\$ 44,566	\$ -
422	\$ 119,496	\$ 44,496	\$ -
423	\$ 119,453	\$ 44,453	\$ -
424	\$ 119,410	\$ 44,410	\$ -
425	\$ 119,272	\$ 44,272	\$ -
426	\$ 119,268	\$ 44,268	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
487	\$ 110,480	\$ 35,480	\$ -
488	\$ 110,471	\$ 35,471	\$ -
489	\$ 110,456	\$ 35,456	\$ -
490	\$ 110,421	\$ 35,421	\$ -
491	\$ 110,103	\$ 35,103	\$ -
492	\$ 109,966	\$ 34,966	\$ -
493	\$ 109,960	\$ 34,960	\$ -
494	\$ 109,924	\$ 34,924	\$ -
495	\$ 109,812	\$ 34,812	\$ -
496	\$ 109,694	\$ 34,694	\$ -
497	\$ 109,676	\$ 34,676	\$ -
498	\$ 109,570	\$ 34,570	\$ -
499	\$ 109,447	\$ 34,447	\$ -
500	\$ 109,113	\$ 34,113	\$ -
501	\$ 108,994	\$ 33,994	\$ -
502	\$ 108,922	\$ 33,922	\$ -
503	\$ 108,562	\$ 33,562	\$ -
504	\$ 108,322	\$ 33,322	\$ -
505	\$ 108,125	\$ 33,125	\$ -
506	\$ 108,099	\$ 33,099	\$ -
507	\$ 107,829	\$ 32,829	\$ -
508	\$ 107,601	\$ 32,601	\$ -
509	\$ 107,499	\$ 32,499	\$ -
510	\$ 107,162	\$ 32,162	\$ -
511	\$ 107,158	\$ 32,158	\$ -
512	\$ 106,942	\$ 31,942	\$ -
513	\$ 106,874	\$ 31,874	\$ -
514	\$ 106,679	\$ 31,679	\$ -
515	\$ 106,599	\$ 31,599	\$ -
516	\$ 106,563	\$ 31,563	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
427	\$ 118,697	\$ 43,697	\$ -
428	\$ 118,476	\$ 43,476	\$ -
429	\$ 118,452	\$ 43,452	\$ -
430	\$ 118,397	\$ 43,397	\$ -
431	\$ 118,175	\$ 43,175	\$ -
432	\$ 118,123	\$ 43,123	\$ -
433	\$ 117,977	\$ 42,977	\$ -
434	\$ 117,774	\$ 42,774	\$ -
435	\$ 117,364	\$ 42,364	\$ -
436	\$ 117,282	\$ 42,282	\$ -
437	\$ 116,831	\$ 41,831	\$ -
438	\$ 116,792	\$ 41,792	\$ -
439	\$ 116,740	\$ 41,740	\$ -
440	\$ 116,730	\$ 41,730	\$ -
441	\$ 116,529	\$ 41,529	\$ -
442	\$ 116,448	\$ 41,448	\$ -
443	\$ 116,410	\$ 41,410	\$ -
444	\$ 116,168	\$ 41,168	\$ -
445	\$ 115,511	\$ 40,511	\$ -
446	\$ 115,475	\$ 40,475	\$ -
447	\$ 115,326	\$ 40,326	\$ -
448	\$ 115,005	\$ 40,005	\$ -
449	\$ 114,960	\$ 39,960	\$ -
450	\$ 114,874	\$ 39,874	\$ -
451	\$ 114,794	\$ 39,794	\$ -
452	\$ 114,638	\$ 39,638	\$ -
453	\$ 114,250	\$ 39,250	\$ -
454	\$ 114,196	\$ 39,196	\$ -
455	\$ 114,127	\$ 39,127	\$ -
456	\$ 114,082	\$ 39,082	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
517	\$ 106,454	\$ 31,454	\$ -
518	\$ 106,325	\$ 31,325	\$ -
519	\$ 106,264	\$ 31,264	\$ -
520	\$ 105,252	\$ 30,252	\$ -
521	\$ 105,028	\$ 30,028	\$ -
522	\$ 104,988	\$ 29,988	\$ -
523	\$ 104,732	\$ 29,732	\$ -
524	\$ 104,263	\$ 29,263	\$ -
525	\$ 104,100	\$ 29,100	\$ -
526	\$ 103,943	\$ 28,943	\$ -
527	\$ 103,906	\$ 28,906	\$ -
528	\$ 103,797	\$ 28,797	\$ -
529	\$ 103,792	\$ 28,792	\$ -
530	\$ 103,737	\$ 28,737	\$ -
531	\$ 103,534	\$ 28,534	\$ -
532	\$ 103,460	\$ 28,460	\$ -
533	\$ 103,458	\$ 28,458	\$ -
534	\$ 103,349	\$ 28,349	\$ -
535	\$ 103,308	\$ 28,308	\$ -
536	\$ 102,993	\$ 27,993	\$ -
537	\$ 102,870	\$ 27,870	\$ -
538	\$ 102,841	\$ 27,841	\$ -
539	\$ 102,830	\$ 27,830	\$ -
540	\$ 102,676	\$ 27,676	\$ -
541	\$ 102,625	\$ 27,625	\$ -
542	\$ 102,357	\$ 27,357	\$ -
543	\$ 102,292	\$ 27,292	\$ -
544	\$ 102,289	\$ 27,289	\$ -
545	\$ 102,033	\$ 27,033	\$ -
546	\$ 101,958	\$ 26,958	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
547	\$ 101,791	\$ 26,791	\$ -
548	\$ 101,636	\$ 26,636	\$ -
549	\$ 101,560	\$ 26,560	\$ -
550	\$ 101,523	\$ 26,523	\$ -
551	\$ 101,459	\$ 26,459	\$ -
552	\$ 101,316	\$ 26,316	\$ -
553	\$ 101,313	\$ 26,313	\$ -
554	\$ 101,247	\$ 26,247	\$ -
555	\$ 101,126	\$ 26,126	\$ -
556	\$ 100,838	\$ 25,838	\$ -
557	\$ 100,750	\$ 25,750	\$ -
558	\$ 100,699	\$ 25,699	\$ -
559	\$ 100,644	\$ 25,644	\$ -
560	\$ 100,624	\$ 25,624	\$ -
561	\$ 100,606	\$ 25,606	\$ -
562	\$ 100,379	\$ 25,379	\$ -
563	\$ 100,323	\$ 25,323	\$ -
564	\$ 100,297	\$ 25,297	\$ -
565	\$ 100,149	\$ 25,149	\$ -
566	\$ 100,148	\$ 25,148	\$ -
567	\$ 100,095	\$ 25,095	\$ -
568	\$ 100,050	\$ 25,050	\$ -
569	\$ 99,989	\$ 24,989	\$ -
570	\$ 99,861	\$ 24,861	\$ -
571	\$ 99,798	\$ 24,798	\$ -
572	\$ 99,668	\$ 24,668	\$ -
573	\$ 99,664	\$ 24,664	\$ -
574	\$ 99,519	\$ 24,519	\$ -
575	\$ 99,442	\$ 24,442	\$ -
576	\$ 99,323	\$ 24,323	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
637	\$ 93,759	\$ 18,759	\$ -
638	\$ 93,748	\$ 18,748	\$ -
639	\$ 93,603	\$ 18,603	\$ -
640	\$ 93,533	\$ 18,533	\$ -
641	\$ 93,522	\$ 18,522	\$ -
642	\$ 93,504	\$ 18,504	\$ -
643	\$ 93,280	\$ 18,280	\$ -
644	\$ 93,256	\$ 18,256	\$ -
645	\$ 93,041	\$ 18,041	\$ -
646	\$ 93,039	\$ 18,039	\$ -
647	\$ 92,930	\$ 17,930	\$ -
648	\$ 92,904	\$ 17,904	\$ -
649	\$ 92,870	\$ 17,870	\$ -
650	\$ 92,812	\$ 17,812	\$ -
651	\$ 92,787	\$ 17,787	\$ -
652	\$ 92,765	\$ 17,765	\$ -
653	\$ 92,668	\$ 17,668	\$ -
654	\$ 92,665	\$ 17,665	\$ -
655	\$ 92,620	\$ 17,620	\$ -
656	\$ 92,540	\$ 17,540	\$ -
657	\$ 92,492	\$ 17,492	\$ -
658	\$ 92,352	\$ 17,352	\$ -
659	\$ 92,193	\$ 17,193	\$ -
660	\$ 92,043	\$ 17,043	\$ -
661	\$ 91,793	\$ 16,793	\$ -
662	\$ 91,767	\$ 16,767	\$ -
663	\$ 91,682	\$ 16,682	\$ -
664	\$ 91,629	\$ 16,629	\$ -
665	\$ 91,624	\$ 16,624	\$ -
666	\$ 91,462	\$ 16,462	\$ -
667	\$ 91,320	\$ 16,320	\$ -
668	\$ 91,288	\$ 16,288	\$ -
669	\$ 91,255	\$ 16,255	\$ -
670	\$ 91,223	\$ 16,223	\$ -
671	\$ 91,145	\$ 16,145	\$ -
672	\$ 91,029	\$ 16,029	\$ -
673	\$ 91,023	\$ 16,023	\$ -
674	\$ 90,997	\$ 15,997	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
577	\$ 99,267	\$ 24,267	\$ -
578	\$ 99,120	\$ 24,120	\$ -
579	\$ 99,088	\$ 24,088	\$ -
580	\$ 98,953	\$ 23,953	\$ -
581	\$ 98,875	\$ 23,875	\$ -
582	\$ 98,760	\$ 23,760	\$ -
583	\$ 98,565	\$ 23,565	\$ -
584	\$ 98,411	\$ 23,411	\$ -
585	\$ 98,265	\$ 23,265	\$ -
586	\$ 98,160	\$ 23,160	\$ -
587	\$ 98,156	\$ 23,156	\$ -
588	\$ 98,133	\$ 23,133	\$ -
589	\$ 98,086	\$ 23,086	\$ -
590	\$ 97,897	\$ 22,897	\$ -
591	\$ 97,686	\$ 22,686	\$ -
592	\$ 97,665	\$ 22,665	\$ -
593	\$ 97,567	\$ 22,567	\$ -
594	\$ 97,492	\$ 22,492	\$ -
595	\$ 97,415	\$ 22,415	\$ -
596	\$ 97,300	\$ 22,300	\$ -
597	\$ 97,155	\$ 22,155	\$ -
598	\$ 97,143	\$ 22,143	\$ -
599	\$ 97,111	\$ 22,111	\$ -
600	\$ 97,054	\$ 22,054	\$ -
601	\$ 97,037	\$ 22,037	\$ -
602	\$ 96,748	\$ 21,748	\$ -
603	\$ 96,665	\$ 21,665	\$ -
604	\$ 96,585	\$ 21,585	\$ -
605	\$ 96,431	\$ 21,431	\$ -
606	\$ 96,367	\$ 21,367	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
675	\$ 90,995	\$ 15,995	\$ -
676	\$ 90,981	\$ 15,981	\$ -
677	\$ 90,966	\$ 15,966	\$ -
678	\$ 90,951	\$ 15,951	\$ -
679	\$ 90,902	\$ 15,902	\$ -
680	\$ 90,890	\$ 15,890	\$ -
681	\$ 90,672	\$ 15,672	\$ -
682	\$ 90,511	\$ 15,511	\$ -
683	\$ 90,493	\$ 15,493	\$ -
684	\$ 90,401	\$ 15,401	\$ -
685	\$ 90,397	\$ 15,397	\$ -
686	\$ 90,295	\$ 15,295	\$ -
687	\$ 90,189	\$ 15,189	\$ -
688	\$ 90,152	\$ 15,152	\$ -
689	\$ 90,108	\$ 15,108	\$ -
690	\$ 90,092	\$ 15,092	\$ -
691	\$ 90,037	\$ 15,037	\$ -
692	\$ 89,939	\$ 14,939	\$ -
693	\$ 89,824	\$ 14,824	\$ -
694	\$ 89,823	\$ 14,823	\$ -
695	\$ 89,796	\$ 14,796	\$ -
696	\$ 89,755	\$ 14,755	\$ -
697	\$ 89,721	\$ 14,721	\$ -
698	\$ 89,652	\$ 14,652	\$ -
699	\$ 89,603	\$ 14,603	\$ -
700	\$ 89,577	\$ 14,577	\$ -
701	\$ 89,575	\$ 14,575	\$ -
702	\$ 89,494	\$ 14,494	\$ -
703	\$ 89,492	\$ 14,492	\$ -
704	\$ 89,488	\$ 14,488	\$ -
705	\$ 89,360	\$ 14,360	\$ -
706	\$ 89,358	\$ 14,358	\$ -
707	\$ 89,182	\$ 14,182	\$ -
708	\$ 89,064	\$ 14,064	\$ -
709	\$ 88,914	\$ 13,914	\$ -
710	\$ 88,880	\$ 13,880	\$ -
711	\$ 88,845	\$ 13,845	\$ -
712	\$ 88,675	\$ 13,675	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
607	\$ 96,217	\$ 21,217	\$ -
608	\$ 96,099	\$ 21,099	\$ -
609	\$ 95,919	\$ 20,919	\$ -
610	\$ 95,899	\$ 20,899	\$ -
611	\$ 95,862	\$ 20,862	\$ -
612	\$ 95,684	\$ 20,684	\$ -
613	\$ 95,683	\$ 20,683	\$ -
614	\$ 95,672	\$ 20,672	\$ -
615	\$ 95,668	\$ 20,668	\$ -
616	\$ 95,613	\$ 20,613	\$ -
617	\$ 95,594	\$ 20,594	\$ -
618	\$ 95,517	\$ 20,517	\$ -
619	\$ 95,517	\$ 20,517	\$ -
620	\$ 95,239	\$ 20,239	\$ -
621	\$ 95,205	\$ 20,205	\$ -
622	\$ 95,111	\$ 20,111	\$ -
623	\$ 94,985	\$ 19,985	\$ -
624	\$ 94,906	\$ 19,906	\$ -
625	\$ 94,881	\$ 19,881	\$ -
626	\$ 94,773	\$ 19,773	\$ -
627	\$ 94,745	\$ 19,745	\$ -
628	\$ 94,613	\$ 19,613	\$ -
629	\$ 94,546	\$ 19,546	\$ -
630	\$ 94,532	\$ 19,532	\$ -
631	\$ 94,531	\$ 19,531	\$ -
632	\$ 94,356	\$ 19,356	\$ -
633	\$ 94,075	\$ 19,075	\$ -
634	\$ 93,927	\$ 18,927	\$ -
635	\$ 93,855	\$ 18,855	\$ -
636	\$ 93,823	\$ 18,823	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
713	\$ 88,632	\$ 13,632	\$ -
714	\$ 88,611	\$ 13,611	\$ -
715	\$ 88,546	\$ 13,546	\$ -
716	\$ 88,517	\$ 13,517	\$ -
717	\$ 88,501	\$ 13,501	\$ -
718	\$ 88,441	\$ 13,441	\$ -
719	\$ 88,328	\$ 13,328	\$ -
720	\$ 88,254	\$ 13,254	\$ -
721	\$ 88,240	\$ 13,240	\$ -
722	\$ 88,236	\$ 13,236	\$ -
723	\$ 88,166	\$ 13,166	\$ -
724	\$ 88,139	\$ 13,139	\$ -
725	\$ 88,101	\$ 13,101	\$ -
726	\$ 87,825	\$ 12,825	\$ -
727	\$ 87,815	\$ 12,815	\$ -
728	\$ 87,750	\$ 12,750	\$ -
729	\$ 87,593	\$ 12,593	\$ -
730	\$ 87,436	\$ 12,436	\$ -
731	\$ 87,412	\$ 12,412	\$ -
732	\$ 87,361	\$ 12,361	\$ -
733	\$ 87,361	\$ 12,361	\$ -
734	\$ 87,349	\$ 12,349	\$ -
735	\$ 87,339	\$ 12,339	\$ -
736	\$ 87,334	\$ 12,334	\$ -
737	\$ 87,334	\$ 12,334	\$ -
738	\$ 87,324	\$ 12,324	\$ -
739	\$ 87,184	\$ 12,184	\$ -
740	\$ 87,142	\$ 12,142	\$ -
741	\$ 87,087	\$ 12,087	\$ -
742	\$ 87,068	\$ 12,068	\$ -
743	\$ 87,065	\$ 12,065	\$ -
744	\$ 87,011	\$ 12,011	\$ -
745	\$ 87,006	\$ 12,006	\$ -
746	\$ 86,969	\$ 11,969	\$ -
747	\$ 86,958	\$ 11,958	\$ -
748	\$ 86,904	\$ 11,904	\$ -
749	\$ 86,899	\$ 11,899	\$ -
750	\$ 86,831	\$ 11,831	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
751	\$ 86,813	\$ 11,813	\$ -
752	\$ 86,775	\$ 11,775	\$ -
753	\$ 86,763	\$ 11,763	\$ -
754	\$ 86,526	\$ 11,526	\$ -
755	\$ 86,385	\$ 11,385	\$ -
756	\$ 86,242	\$ 11,242	\$ -
757	\$ 86,191	\$ 11,191	\$ -
758	\$ 86,122	\$ 11,122	\$ -
759	\$ 86,025	\$ 11,025	\$ -
760	\$ 85,969	\$ 10,969	\$ -
761	\$ 85,963	\$ 10,963	\$ -
762	\$ 85,830	\$ 10,830	\$ -
763	\$ 85,772	\$ 10,772	\$ -
764	\$ 85,575	\$ 10,575	\$ -
765	\$ 85,474	\$ 10,474	\$ -
766	\$ 85,436	\$ 10,436	\$ -
767	\$ 85,073	\$ 10,073	\$ -
768	\$ 84,999	\$ 9,999	\$ -
769	\$ 84,940	\$ 9,940	\$ -
770	\$ 84,909	\$ 9,909	\$ -
771	\$ 84,892	\$ 9,892	\$ -
772	\$ 84,605	\$ 9,605	\$ -
773	\$ 84,577	\$ 9,577	\$ -
774	\$ 84,498	\$ 9,498	\$ -
775	\$ 84,479	\$ 9,479	\$ -
776	\$ 84,446	\$ 9,446	\$ -
777	\$ 84,378	\$ 9,378	\$ -
778	\$ 84,340	\$ 9,340	\$ -
779	\$ 84,336	\$ 9,336	\$ -
780	\$ 84,329	\$ 9,329	\$ -
781	\$ 84,224	\$ 9,224	\$ -
782	\$ 84,059	\$ 9,059	\$ -
783	\$ 84,020	\$ 9,020	\$ -
784	\$ 83,927	\$ 8,927	\$ -
785	\$ 83,912	\$ 8,912	\$ -
786	\$ 83,847	\$ 8,847	\$ -
787	\$ 83,841	\$ 8,841	\$ -
788	\$ 83,793	\$ 8,793	\$ -
789	\$ 83,719	\$ 8,719	\$ -
790	\$ 83,656	\$ 8,656	\$ -
791	\$ 83,543	\$ 8,543	\$ -
792	\$ 83,471	\$ 8,471	\$ -
793	\$ 83,444	\$ 8,444	\$ -
794	\$ 83,352	\$ 8,352	\$ -
795	\$ 83,200	\$ 8,200	\$ -
796	\$ 83,192	\$ 8,192	\$ -
797	\$ 83,177	\$ 8,177	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
892	\$ 76,982	\$ 1,982	\$ -
893	\$ 76,950	\$ 1,950	\$ -
894	\$ 76,944	\$ 1,944	\$ -
895	\$ 76,893	\$ 1,893	\$ -
896	\$ 76,853	\$ 1,853	\$ -
897	\$ 76,792	\$ 1,792	\$ -
898	\$ 76,724	\$ 1,724	\$ -
899	\$ 76,707	\$ 1,707	\$ -
900	\$ 76,610	\$ 1,610	\$ -
901	\$ 76,595	\$ 1,595	\$ -
902	\$ 76,584	\$ 1,584	\$ -
903	\$ 76,438	\$ 1,438	\$ -
904	\$ 76,430	\$ 1,430	\$ -
905	\$ 76,192	\$ 1,192	\$ -
906	\$ 76,190	\$ 1,190	\$ -
907	\$ 76,188	\$ 1,188	\$ -
908	\$ 76,169	\$ 1,169	\$ -
909	\$ 76,169	\$ 1,169	\$ -
910	\$ 76,100	\$ 1,100	\$ -
911	\$ 76,067	\$ 1,067	\$ -
912	\$ 76,059	\$ 1,059	\$ -
913	\$ 75,971	\$ 971	\$ -
914	\$ 75,952	\$ 952	\$ -
915	\$ 75,924	\$ 924	\$ -
916	\$ 75,880	\$ 880	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
798	\$ 83,110	\$ 8,110	\$ -
799	\$ 83,093	\$ 8,093	\$ -
800	\$ 83,034	\$ 8,034	\$ -
801	\$ 82,975	\$ 7,975	\$ -
802	\$ 82,966	\$ 7,966	\$ -
803	\$ 82,965	\$ 7,965	\$ -
804	\$ 82,895	\$ 7,895	\$ -
805	\$ 82,890	\$ 7,890	\$ -
806	\$ 82,868	\$ 7,868	\$ -
807	\$ 82,852	\$ 7,852	\$ -
808	\$ 82,851	\$ 7,851	\$ -
809	\$ 82,736	\$ 7,736	\$ -
810	\$ 82,728	\$ 7,728	\$ -
811	\$ 82,625	\$ 7,625	\$ -
812	\$ 82,620	\$ 7,620	\$ -
813	\$ 82,456	\$ 7,456	\$ -
814	\$ 82,364	\$ 7,364	\$ -
815	\$ 82,320	\$ 7,320	\$ -
816	\$ 82,307	\$ 7,307	\$ -
817	\$ 82,270	\$ 7,270	\$ -
818	\$ 82,268	\$ 7,268	\$ -
819	\$ 82,245	\$ 7,245	\$ -
820	\$ 82,022	\$ 7,022	\$ -
821	\$ 81,859	\$ 6,859	\$ -
822	\$ 81,804	\$ 6,804	\$ -
823	\$ 81,773	\$ 6,773	\$ -
824	\$ 81,694	\$ 6,694	\$ -
825	\$ 81,668	\$ 6,668	\$ -
826	\$ 81,556	\$ 6,556	\$ -
827	\$ 81,443	\$ 6,443	\$ -
828	\$ 81,334	\$ 6,334	\$ -
829	\$ 81,328	\$ 6,328	\$ -
830	\$ 81,304	\$ 6,304	\$ -
831	\$ 81,286	\$ 6,286	\$ -
832	\$ 81,268	\$ 6,268	\$ -
833	\$ 81,258	\$ 6,258	\$ -
834	\$ 81,194	\$ 6,194	\$ -
835	\$ 81,105	\$ 6,105	\$ -
836	\$ 80,966	\$ 5,966	\$ -
837	\$ 80,846	\$ 5,846	\$ -
838	\$ 80,740	\$ 5,740	\$ -
839	\$ 80,714	\$ 5,714	\$ -
840	\$ 80,693	\$ 5,693	\$ -
841	\$ 80,500	\$ 5,500	\$ -
842	\$ 80,478	\$ 5,478	\$ -
843	\$ 80,432	\$ 5,432	\$ -
844	\$ 80,371	\$ 5,371	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
917	\$ 75,830	\$ 830	\$ -
918	\$ 75,823	\$ 823	\$ -
919	\$ 75,790	\$ 790	\$ -
920	\$ 75,759	\$ 759	\$ -
921	\$ 75,721	\$ 721	\$ -
922	\$ 75,691	\$ 691	\$ -
923	\$ 75,609	\$ 609	\$ -
924	\$ 75,590	\$ 590	\$ -
925	\$ 75,513	\$ 513	\$ -
926	\$ 75,458	\$ 458	\$ -
927	\$ 75,434	\$ 434	\$ -
928	\$ 75,376	\$ 376	\$ -
929	\$ 75,291	\$ 291	\$ -
930	\$ 75,179	\$ 179	\$ -
931	\$ 75,168	\$ 168	\$ -
932	\$ 75,160	\$ 160	\$ -
933	\$ 75,141	\$ 141	\$ -
934	\$ 75,101	\$ 101	\$ -
935	\$ 75,070	\$ 70	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000
845	\$ 80,360	\$ 5,360	\$ -
846	\$ 80,350	\$ 5,350	\$ -
847	\$ 80,281	\$ 5,281	\$ -
848	\$ 80,163	\$ 5,163	\$ -
849	\$ 80,044	\$ 5,044	\$ -
850	\$ 79,931	\$ 4,931	\$ -
851	\$ 79,924	\$ 4,924	\$ -
852	\$ 79,916	\$ 4,916	\$ -
853	\$ 79,865	\$ 4,865	\$ -
854	\$ 79,830	\$ 4,830	\$ -
855	\$ 79,830	\$ 4,830	\$ -
856	\$ 79,801	\$ 4,801	\$ -
857	\$ 79,644	\$ 4,644	\$ -
858	\$ 79,538	\$ 4,538	\$ -
859	\$ 79,537	\$ 4,537	\$ -
860	\$ 79,419	\$ 4,419	\$ -
861	\$ 79,384	\$ 4,384	\$ -
862	\$ 79,327	\$ 4,327	\$ -
863	\$ 79,323	\$ 4,323	\$ -
864	\$ 79,322	\$ 4,322	\$ -
865	\$ 79,198	\$ 4,198	\$ -
866	\$ 79,056	\$ 4,056	\$ -
867	\$ 79,026	\$ 4,026	\$ -
868	\$ 78,828	\$ 3,828	\$ -
869	\$ 78,789	\$ 3,789	\$ -
870	\$ 78,776	\$ 3,776	\$ -
871	\$ 78,649	\$ 3,649	\$ -
872	\$ 78,510	\$ 3,510	\$ -
873	\$ 78,390	\$ 3,390	\$ -
874	\$ 78,220	\$ 3,220	\$ -
875	\$ 78,072	\$ 3,072	\$ -
876	\$ 78,007	\$ 3,007	\$ -
877	\$ 78,003	\$ 3,003	\$ -
878	\$ 78,000	\$ 3,000	\$ -
879	\$ 77,887	\$ 2,887	\$ -
880	\$ 77,841	\$ 2,841	\$ -
881	\$ 77,837	\$ 2,837	\$ -
882	\$ 77,788	\$ 2,788	\$ -
883	\$ 77,607	\$ 2,607	\$ -
884	\$ 77,563	\$ 2,563	\$ -
885	\$ 77,401	\$ 2,401	\$ -
886	\$ 77,367	\$ 2,367	\$ -
887	\$ 77,348	\$ 2,348	\$ -
888	\$ 77,345	\$ 2,345	\$ -
889	\$ 77,188	\$ 2,188	\$ -
890	\$ 77,138	\$ 2,138	\$ -
891	\$ 77,048	\$ 2,048	\$ -

	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$1,000,000	Claim Count
PPO - Current Rolling 12 Months	\$ 144,949,535	\$ 74,913,167	\$ 571,606	935
Per Capita Cost - January 1, 2024 to December 31, 2024	\$ 586.71	\$ 303.22	\$ 2.31	
PPO - Prior Rolling 12 Month	\$ 123,404,078	\$ 67,379,078	\$ 3,211,769	747
Per Capita Cost - January 1, 2023 to December 31, 2023	\$ 547.51	\$ 298.94	\$ 14.25	
Percentage Change	7.16%	1.43%	-83.76%	25.2%

This analysis is for illustrative purposes only, and is not a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health care costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. Please see your policy or contact us for specific information or further details in this regard.

EBC

Exhibit 7

HMO Specific Stop-Loss Summary

Experience Period: January 1, 2024 to December 31, 2024

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$350,000
1	\$ 880,418	\$ 805,418	\$ 530,418
2	\$ 865,613	\$ 790,613	\$ 515,613
3	\$ 777,618	\$ 702,618	\$ 427,618
4	\$ 748,760	\$ 673,760	\$ 398,760
5	\$ 614,247	\$ 539,247	\$ 264,247
6	\$ 596,989	\$ 521,989	\$ 246,989
7	\$ 581,322	\$ 506,322	\$ 231,322
8	\$ 550,621	\$ 475,621	\$ 200,621
9	\$ 539,160	\$ 464,160	\$ 189,160
10	\$ 507,564	\$ 432,564	\$ 157,564
11	\$ 471,071	\$ 396,071	\$ 121,071
12	\$ 460,243	\$ 385,243	\$ 110,243
13	\$ 458,731	\$ 383,731	\$ 108,731
14	\$ 448,588	\$ 373,588	\$ 98,588
15	\$ 436,981	\$ 361,981	\$ 86,981
16	\$ 435,540	\$ 360,540	\$ 85,540
17	\$ 390,896	\$ 315,896	\$ 40,896
18	\$ 337,239	\$ 262,239	\$ -
19	\$ 331,694	\$ 256,694	\$ -
20	\$ 328,092	\$ 253,092	\$ -
21	\$ 312,521	\$ 237,521	\$ -
22	\$ 299,689	\$ 224,689	\$ -
23	\$ 295,118	\$ 220,118	\$ -
24	\$ 294,410	\$ 219,410	\$ -
25	\$ 294,013	\$ 219,013	\$ -
26	\$ 293,867	\$ 218,867	\$ -
27	\$ 281,215	\$ 206,215	\$ -
28	\$ 279,184	\$ 204,184	\$ -
29	\$ 277,564	\$ 202,564	\$ -
30	\$ 276,854	\$ 201,854	\$ -
31	\$ 276,524	\$ 201,524	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$350,000
32	\$ 275,047	\$ 200,047	\$ -
33	\$ 266,508	\$ 191,508	\$ -
34	\$ 258,879	\$ 183,879	\$ -
35	\$ 244,973	\$ 169,973	\$ -
36	\$ 242,007	\$ 167,007	\$ -
37	\$ 237,046	\$ 162,046	\$ -
38	\$ 232,318	\$ 157,318	\$ -
39	\$ 231,372	\$ 156,372	\$ -
40	\$ 229,734	\$ 154,734	\$ -
41	\$ 229,473	\$ 154,473	\$ -
42	\$ 221,975	\$ 146,975	\$ -
43	\$ 217,811	\$ 142,811	\$ -
44	\$ 211,937	\$ 136,937	\$ -
45	\$ 209,788	\$ 134,788	\$ -
46	\$ 202,739	\$ 127,739	\$ -
47	\$ 202,138	\$ 127,138	\$ -
48	\$ 200,858	\$ 125,858	\$ -
49	\$ 196,038	\$ 121,038	\$ -
50	\$ 193,093	\$ 118,093	\$ -
51	\$ 189,453	\$ 114,453	\$ -
52	\$ 187,454	\$ 112,454	\$ -
53	\$ 187,039	\$ 112,039	\$ -
54	\$ 183,057	\$ 108,057	\$ -
55	\$ 182,203	\$ 107,203	\$ -
56	\$ 181,822	\$ 106,822	\$ -
57	\$ 181,578	\$ 106,578	\$ -
58	\$ 181,488	\$ 106,488	\$ -
59	\$ 180,734	\$ 105,734	\$ -
60	\$ 179,272	\$ 104,272	\$ -
61	\$ 178,642	\$ 103,642	\$ -
62	\$ 177,300	\$ 102,300	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$350,000
63	\$ 173,268	\$ 98,268	\$ -
64	\$ 172,748	\$ 97,748	\$ -
65	\$ 172,068	\$ 97,068	\$ -
66	\$ 171,765	\$ 96,765	\$ -
67	\$ 171,699	\$ 96,699	\$ -
68	\$ 171,092	\$ 96,092	\$ -
69	\$ 170,825	\$ 95,825	\$ -
70	\$ 169,249	\$ 94,249	\$ -
71	\$ 168,364	\$ 93,364	\$ -
72	\$ 165,434	\$ 90,434	\$ -
73	\$ 164,435	\$ 89,435	\$ -
74	\$ 158,415	\$ 83,415	\$ -
75	\$ 156,012	\$ 81,012	\$ -
76	\$ 153,316	\$ 78,316	\$ -
77	\$ 153,078	\$ 78,078	\$ -
78	\$ 152,046	\$ 77,046	\$ -
79	\$ 151,242	\$ 76,242	\$ -
80	\$ 151,061	\$ 76,061	\$ -
81	\$ 149,442	\$ 74,442	\$ -
82	\$ 149,148	\$ 74,148	\$ -
83	\$ 148,576	\$ 73,576	\$ -
84	\$ 147,375	\$ 72,375	\$ -
85	\$ 145,430	\$ 70,430	\$ -
86	\$ 144,080	\$ 69,080	\$ -
87	\$ 143,750	\$ 68,750	\$ -
88	\$ 142,578	\$ 67,578	\$ -
89	\$ 141,889	\$ 66,889	\$ -
90	\$ 140,474	\$ 65,474	\$ -
91	\$ 138,929	\$ 63,929	\$ -
92	\$ 138,036	\$ 63,036	\$ -
93	\$ 137,343	\$ 62,343	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$350,000
94	\$ 137,102	\$ 62,102	\$ -
95	\$ 136,490	\$ 61,490	\$ -
96	\$ 133,241	\$ 58,241	\$ -
97	\$ 133,190	\$ 58,190	\$ -
98	\$ 132,337	\$ 57,337	\$ -
99	\$ 131,180	\$ 56,180	\$ -
100	\$ 130,808	\$ 55,808	\$ -
101	\$ 130,034	\$ 55,034	\$ -
102	\$ 128,943	\$ 53,943	\$ -
103	\$ 128,839	\$ 53,839	\$ -
104	\$ 128,654	\$ 53,654	\$ -
105	\$ 126,601	\$ 51,601	\$ -
106	\$ 126,524	\$ 51,524	\$ -
107	\$ 126,301	\$ 51,301	\$ -
108	\$ 125,785	\$ 50,785	\$ -
109	\$ 124,879	\$ 49,879	\$ -
110	\$ 124,701	\$ 49,701	\$ -
111	\$ 124,212	\$ 49,212	\$ -
112	\$ 124,195	\$ 49,195	\$ -
113	\$ 122,469	\$ 47,469	\$ -
114	\$ 122,286	\$ 47,286	\$ -
115	\$ 121,366	\$ 46,366	\$ -
116	\$ 121,340	\$ 46,340	\$ -
117	\$ 120,950	\$ 45,950	\$ -
118	\$ 120,351	\$ 45,351	\$ -
119	\$ 119,937	\$ 44,937	\$ -
120	\$ 118,722	\$ 43,722	\$ -
121	\$ 118,485	\$ 43,485	\$ -
122	\$ 116,811	\$ 41,811	\$ -
123	\$ 115,244	\$ 40,244	\$ -
124	\$ 114,707	\$ 39,707	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$350,000
125	\$ 114,466	\$ 39,466	\$ -
126	\$ 113,499	\$ 38,499	\$ -
127	\$ 112,521	\$ 37,521	\$ -
128	\$ 112,041	\$ 37,041	\$ -
129	\$ 111,912	\$ 36,912	\$ -
130	\$ 111,744	\$ 36,744	\$ -
131	\$ 110,730	\$ 35,730	\$ -
132	\$ 110,184	\$ 35,184	\$ -
133	\$ 109,975	\$ 34,975	\$ -
134	\$ 109,877	\$ 34,877	\$ -
135	\$ 109,832	\$ 34,832	\$ -
136	\$ 109,214	\$ 34,214	\$ -
137	\$ 108,736	\$ 33,736	\$ -
138	\$ 108,576	\$ 33,576	\$ -
139	\$ 108,554	\$ 33,554	\$ -
140	\$ 108,458	\$ 33,458	\$ -
141	\$ 106,722	\$ 31,722	\$ -
142	\$ 106,327	\$ 31,327	\$ -
143	\$ 105,802	\$ 30,802	\$ -
144	\$ 105,739	\$ 30,739	\$ -
145	\$ 105,530	\$ 30,530	\$ -
146	\$ 104,916	\$ 29,916	\$ -
147	\$ 104,844	\$ 29,844	\$ -
148	\$ 104,294	\$ 29,294	\$ -
149	\$ 103,724	\$ 28,724	\$ -
150	\$ 103,632	\$ 28,632	\$ -
151	\$ 103,384	\$ 28,384	\$ -
152	\$ 103,198	\$ 28,198	\$ -
153	\$ 102,546	\$ 27,546	\$ -
154	\$ 102,248	\$ 27,248	\$ -
155	\$ 102,005	\$ 27,005	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$350,000
156	\$ 101,882	\$ 26,882	\$ -
157	\$ 101,148	\$ 26,148	\$ -
158	\$ 100,784	\$ 25,784	\$ -
159	\$ 100,741	\$ 25,741	\$ -
160	\$ 100,694	\$ 25,694	\$ -
161	\$ 100,654	\$ 25,654	\$ -
162	\$ 99,881	\$ 24,881	\$ -
163	\$ 99,634	\$ 24,634	\$ -
164	\$ 99,043	\$ 24,043	\$ -
165	\$ 98,988	\$ 23,988	\$ -
166	\$ 98,842	\$ 23,842	\$ -
167	\$ 98,656	\$ 23,656	\$ -
168	\$ 97,904	\$ 22,904	\$ -
169	\$ 97,638	\$ 22,638	\$ -
170	\$ 97,618	\$ 22,618	\$ -
171	\$ 97,034	\$ 22,034	\$ -
172	\$ 96,765	\$ 21,765	\$ -
173	\$ 96,465	\$ 21,465	\$ -
174	\$ 96,090	\$ 21,090	\$ -
175	\$ 96,036	\$ 21,036	\$ -
176	\$ 95,854	\$ 20,854	\$ -
177	\$ 95,447	\$ 20,447	\$ -
178	\$ 95,399	\$ 20,399	\$ -
179	\$ 94,620	\$ 19,620	\$ -
180	\$ 94,552	\$ 19,552	\$ -
181	\$ 94,506	\$ 19,506	\$ -
182	\$ 94,501	\$ 19,501	\$ -
183	\$ 94,360	\$ 19,360	\$ -
184	\$ 94,132	\$ 19,132	\$ -
185	\$ 94,027	\$ 19,027	\$ -
186	\$ 93,693	\$ 18,693	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$350,000
187	\$ 93,667	\$ 18,667	\$ -
188	\$ 93,510	\$ 18,510	\$ -
189	\$ 93,475	\$ 18,475	\$ -
190	\$ 93,032	\$ 18,032	\$ -
191	\$ 92,562	\$ 17,562	\$ -
192	\$ 92,061	\$ 17,061	\$ -
193	\$ 91,733	\$ 16,733	\$ -
194	\$ 90,976	\$ 15,976	\$ -
195	\$ 90,931	\$ 15,931	\$ -
196	\$ 90,873	\$ 15,873	\$ -
197	\$ 89,804	\$ 14,804	\$ -
198	\$ 89,718	\$ 14,718	\$ -
199	\$ 89,630	\$ 14,630	\$ -
200	\$ 89,547	\$ 14,547	\$ -
201	\$ 89,112	\$ 14,112	\$ -
202	\$ 89,095	\$ 14,095	\$ -
203	\$ 88,969	\$ 13,969	\$ -
204	\$ 88,939	\$ 13,939	\$ -
205	\$ 88,612	\$ 13,612	\$ -
206	\$ 88,497	\$ 13,497	\$ -
207	\$ 88,439	\$ 13,439	\$ -
208	\$ 88,229	\$ 13,229	\$ -
209	\$ 88,183	\$ 13,183	\$ -
210	\$ 88,021	\$ 13,021	\$ -
211	\$ 87,745	\$ 12,745	\$ -
212	\$ 87,737	\$ 12,737	\$ -
213	\$ 87,611	\$ 12,611	\$ -
214	\$ 87,471	\$ 12,471	\$ -
215	\$ 87,360	\$ 12,360	\$ -
216	\$ 87,347	\$ 12,347	\$ -
217	\$ 87,330	\$ 12,330	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$350,000
218	\$ 87,229	\$ 12,229	\$ -
219	\$ 87,126	\$ 12,126	\$ -
220	\$ 87,101	\$ 12,101	\$ -
221	\$ 87,065	\$ 12,065	\$ -
222	\$ 86,965	\$ 11,965	\$ -
223	\$ 86,912	\$ 11,912	\$ -
224	\$ 86,557	\$ 11,557	\$ -
225	\$ 86,552	\$ 11,552	\$ -
226	\$ 86,551	\$ 11,551	\$ -
227	\$ 86,126	\$ 11,126	\$ -
228	\$ 85,776	\$ 10,776	\$ -
229	\$ 85,741	\$ 10,741	\$ -
230	\$ 85,674	\$ 10,674	\$ -
231	\$ 85,365	\$ 10,365	\$ -
232	\$ 85,160	\$ 10,160	\$ -
233	\$ 84,809	\$ 9,809	\$ -
234	\$ 84,375	\$ 9,375	\$ -
235	\$ 84,252	\$ 9,252	\$ -
236	\$ 83,881	\$ 8,881	\$ -
237	\$ 83,771	\$ 8,771	\$ -
238	\$ 83,291	\$ 8,291	\$ -
239	\$ 83,055	\$ 8,055	\$ -
240	\$ 82,973	\$ 7,973	\$ -
241	\$ 82,838	\$ 7,838	\$ -
242	\$ 82,742	\$ 7,742	\$ -
243	\$ 82,661	\$ 7,661	\$ -
244	\$ 82,366	\$ 7,366	\$ -
245	\$ 82,190	\$ 7,190	\$ -
246	\$ 82,120	\$ 7,120	\$ -
247	\$ 82,073	\$ 7,073	\$ -
248	\$ 81,838	\$ 6,838	\$ -

Number of Claimant	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$350,000
249	\$ 81,266	\$ 6,266	\$ -
250	\$ 80,710	\$ 5,710	\$ -
251	\$ 80,392	\$ 5,392	\$ -
252	\$ 79,715	\$ 4,715	\$ -
253	\$ 79,537	\$ 4,537	\$ -
254	\$ 79,377	\$ 4,377	\$ -
255	\$ 79,338	\$ 4,338	\$ -
256	\$ 79,270	\$ 4,270	\$ -
257	\$ 78,941	\$ 3,941	\$ -
258	\$ 78,931	\$ 3,931	\$ -
259	\$ 78,859	\$ 3,859	\$ -
260	\$ 78,854	\$ 3,854	\$ -
261	\$ 78,469	\$ 3,469	\$ -
262	\$ 78,442	\$ 3,442	\$ -
263	\$ 78,090	\$ 3,090	\$ -
264	\$ 77,708	\$ 2,708	\$ -
265	\$ 77,681	\$ 2,681	\$ -
266	\$ 77,193	\$ 2,193	\$ -
267	\$ 76,556	\$ 1,556	\$ -
268	\$ 76,394	\$ 1,394	\$ -
269	\$ 76,112	\$ 1,112	\$ -
270	\$ 75,732	\$ 732	\$ -
271	\$ 75,483	\$ 483	\$ -
272	\$ 75,388	\$ 388	\$ -
273	\$ -	\$ -	\$ -
274	\$ -	\$ -	\$ -
275	\$ -	\$ -	\$ -
276	\$ -	\$ -	\$ -
277	\$ -	\$ -	\$ -
278	\$ -	\$ -	\$ -
279	\$ -	\$ -	\$ -

	Total Claim	Amount of Claims Exceeding \$75,000	Amount of Claims Exceeding \$350,000	Claim Count
HMO - Current Rolling 12 Months	\$ 42,772,574	\$ 22,372,574	\$ 3,814,361	272
Per Capita Cost - January 1, 2024 to December 31, 2024	\$ 344.55	\$ 180.22	\$ 30.73	
HMO - Prior Rolling 12 Month	\$ 38,940,282	\$ 21,690,282	\$ 4,979,550	230
Per Capita Cost - January 1, 2023 to December 31, 2023	\$ 342.10	\$ 190.55	\$ 43.75	
Percentage Change	0.72%	-5.42%	-29.76%	18.3%

This analysis is for illustrative purposes only, and is not a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health care costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. Please see your policy or contact us for specific information or further details in this regard.

EBC
Exhibit 8
Projection Assumptions
For Period July 1, 2025 to June 30, 2026

	PPO Medical		HMO Medical		Dental	
Projected Enrollment (December 2024)						
Employee	21,346		10,943		17,339	
Members	44,837		22,772			
	PEPM Fee	Annual Cost	PEPM Fee	Annual Cost	PEPM Fee	Annual Cost
Claim Administration Fees	\$43.59	\$11,165,666	\$39.98	\$5,250,014	\$2.89	\$601,317
Rx Administration Fees	Included in Claims		Included in Medical Admin			
Prescription Drug Rebates ¹	(\$216.21)	(\$55,382,624)	(\$157.30)	(\$20,656,007)		
COBRA Fees	\$0.43	\$110,145	\$0.43	\$56,466		
Billing and Enrollment Services	\$2.44	\$625,011	\$2.44	\$320,411		
6055/6056 Reporting	\$0.22	\$56,353	\$0.22	\$28,890		
HMO Managed Care Fee			\$13.87	\$1,821,353		
PCORI - PMPY Fee ³	\$3.47	\$155,583				
Member Rewards PEPM	\$0.95	\$243,344				
BVA (Benefit Value Advisor) PEPM	\$2.00	\$512,304				
Pre-Funded Rewards Bank per Employee	\$0.66	\$170,000				
HMO Allocated Taxes/Fees ⁴			\$0.00	\$0		
GBS Fees ⁶	\$12.49	\$3,199,551	\$12.49	\$1,640,246	\$0.00	\$0
Stop-Loss Premium						
Specific Premium ⁵	\$12.56	\$3,217,269	\$41.06	\$5,391,835		
Aggregate Premium			\$0.10	\$12,921		
Wellness (Vaccines/Screenings)	\$3.61	\$925,529	\$3.61	\$474,471		
Wellness incentive rebate	\$4.39	\$1,123,856	\$4.39	\$576,144		
Teladoc	\$1.96	\$502,430	\$1.96	\$257,570		
Cooperative Administration Charges	\$1.12	\$287,575	\$1.12	\$147,425		
Dependent Audit	\$0.32	\$82,632	\$0.32	\$42,363		
TOTAL FIXED COSTS		(\$33,005,374)		(\$4,635,899)		\$601,317
Fiduciary Policy Fee⁷	\$0.02	\$5,899				
Aggregating Specific Claim Liability	\$1.85	\$475,000				
Annual Claim Trend Factor	8.00%		7.00%		4.0%	

NOTES:

- (1) Prescription drug rebates are for districts with prescription coverage at BCBSIL only. Minimum PEPM guarantees.
- (2) BCBS PPO Network Access Fees of 0.78% of Illinois facility savings are included in the claim amounts shown on the medical projection.
- (3) PCORI Fees is based on the 2025 amount released by IRS. This is subject to change based on legislation
- (4) Reflects Blue Cross Blue Shield of Illinois current, estimated effects of Health Insurer Fee, plus federal and state taxes applicable to this fee.
- (5) Stop loss premiums reflect \$1,000,000 individual stop loss level on the PPO and \$350,000 individual stop level on the HMO.
- (6) GBS Fee based on contract effective July 1, 2025
- (7) Fiduciary Policy fee represents a \$25 per trustee fee and is built into the PPO Renewal

This analysis is for illustrative purposes only, and is not a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. Please see your policy or contact us for specific information or further details in this regard.

EBC

Exhibit 9

PPO Experience Projection

For Period July 1, 2025 to June 30, 2026

			Period Evaluated					
			1/1/2024					
			12/31/2024					
Paid Medical Claims			\$312,075,185					
Paid Prescription Drug Claims			\$113,119,958					
Claim Adjustment for Immature Districts			\$1,297,004					
Claim Adjustment for Groups Receiving Average Increase			(\$1,965,549)					
Claim Adjustment for Prior Year Improved Rx Pricing			\$0					
Claim Adjustment for Seasonality			\$0					
Claims over \$1,000,000			(\$571,606)					
Total Adjusted Claims			\$423,954,992					
Actual Experience Period Enrollment			248,141					
Enrollment Adjustment for New Members			0					
Enrollment Adjustment for Groups Receiving Average Increase			(1,085)					
Total Adjusted Experience Period Enrollment			247,056					
Total Adjusted Claims PEPM			\$1,716.03					
Trend Adjustment			1.122					
<table><tr><td>Annual Trend</td><td>8.00%</td></tr><tr><td>Trend Months</td><td>18.0</td></tr></table>			Annual Trend	8.00%	Trend Months	18.0		
Annual Trend	8.00%							
Trend Months	18.0							
Monthly Weighted Per Capita Projected Claims			\$1,926.02					
Dependent Audit ROI			(\$0.32)					
Projected Enrollment			21,346					
A.	Annual Projected Claims		\$493,270,322					
B.	Estimated Annual Rebates		(\$55,382,624)					
C.	Adjusted Projected Claims		\$437,887,698					
D.	Pharmacy Adjustment for Improved Discounts		(\$1,999,872)					
E.	Total Fixed Costs*		\$22,383,149					
F.	Aggregating Specific Claim Liability*		\$475,000					
G.	Total Projected PPO Medical Benefit Costs (C+D+E+F)		\$458,745,974					
H.	Anticipated Revenue (Based on December Premium)		\$429,090,295					
I.	Needed Rate Adjustment (G/H)		6.9%					
Working Cash Fund Release			\$0					
Revised Total Costs			\$458,745,974					
Revised Increase			6.9%					

* See Assumptions for calculations.

This analysis is for illustrative purposes only, and is not a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. Please see your policy or contact us for specific information or further details in this regard.

EBC

Exhibit 10

HMO Experience Projection

For Period July 1, 2025 to June 30, 2026

		Period Evaluated					
		1/1/2024					
		12/31/2024					
Paid Medical Claims		\$63,252,064					
Paid Prescription Drug Claims		\$52,885,779					
Claim Adjustment for Immature Districts		\$417,964					
Claim Adjustment for Groups Receiving Average Increase		(\$1,051,611)					
Claim Adjustment for Seasonality		\$0					
COVID Adjustment		\$0					
Claims over \$350,000		(\$3,814,361)					
Total Adjusted Claims		\$111,689,835					
Actual Experience Period Enrollment		125,741					
Enrollment Adjustment for New Members		0					
Enrollment Adjustment for Groups Receiving Average Increase		(1,602)					
Total Adjusted Experience Period Enrollment		124,139					
Total Adjusted Claims PEPM		\$899.72					
Trend Adjustment		1.107					
<table><tr><td>Annual Trend</td><td>7.00%</td></tr><tr><td>Trend Months</td><td>18.0</td></tr></table>		Annual Trend	7.00%	Trend Months	18.0		
Annual Trend	7.00%						
Trend Months	18.0						
Monthly Weighted Per Capita Projected Claims		\$995.82					
Monthly Per Capita Projected Physician Service Fees		\$353.35					
Dependent Audit ROI		(\$0.32)					
Monthly Per Capita Projected Claims & Physician Service Fees		\$1,348.85					
Projected Enrollment		10,943					
A.	Annual Projected Claims & Physician Service Fees	\$177,125,398					
B.	Estimated Annual Rebates	(\$20,656,007)					
C.	Adjusted Projected Claims	\$156,469,391					
D.	Claims Fluctuation Margin	\$2,503,510					
E.	Total Fixed Costs*	\$16,020,108					
F.	Total Projected HMO Medical Benefit Costs (C+D+E)	\$174,993,009					
G.	Anticipated Revenue (Based on December Premium)	\$166,380,780					
H.	Needed Rate Adjustment (F/G)	5.2%					
Working Cash Fund Release		\$0					
Revised Total Costs		\$174,993,009					
Revised Increase		5.2%					

* See Assumptions for calculations.

This analysis is for illustrative purposes only, and is not a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. Please see your policy or contact us for specific information or further details in this regard.

EBC
Exhibit 11
Dental Experience Projection
For Period July 1, 2025 to June 30, 2026

			Period Evaluated					
			1/1/2024					
			12/31/2024					
Paid Dental Claims			\$13,627,913					
Claim Adjustment for Immature Districts			\$0					
Claim Adjustment for Groups Receiving Average Increase			\$0					
Claim Adjustment for Seasonality			\$0					
Other Adjustment			\$0					
Total Adjusted Claims			\$13,627,913					
Actual Experience Period Enrollment			200,293					
Enrollment Adjustment for New Members			0					
Enrollment Adjustment for Groups Receiving Average Increase			0					
Total Adjusted Experience Period Enrollment			200,293					
Total Adjusted Claims PEPM			\$68.04					
Trend Adjustment			1.061					
<table border="1"><tr><td>Annual Trend</td><td>4.00%</td></tr><tr><td>Trend Months</td><td>18.0</td></tr></table>			Annual Trend	4.00%	Trend Months	18.0		
Annual Trend	4.00%							
Trend Months	18.0							
Monthly Per Capita Projected Claims			\$72.16					
Projected Enrollment			17,339					
A.	Annual Projected Claims		\$15,014,776					
B.	Claims Fluctuation Margin		\$150,000					
C.	Total Fixed Costs*		\$601,317					
D.	Total Projected Dental Benefit Costs (A+B+C)		\$15,766,093					
E.	Anticipated Revenue (Based on December Premium)		\$15,160,105					
F.	Needed Rate Adjustment (D/E)		4.0%					
Working Cash Fund Release			\$0					
Revised Total Costs			\$15,766,093					
Revised Increase			4.0%					

* See Assumptions for calculations.

This analysis is for illustrative purposes only, and is not a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. Please see your policy or contact us for specific information or further details in this regard.

EBC

Exhibit 12

IBNR Reserve Adjustment

For Period July 1, 2025 to June 30, 2026

Terminal Reserve and Working Cash Fund at December 31, 2024	\$104,184,735
Total Estimated Funding Variance for January 1, 2025 to June 30, 2025	\$35,855
Projected Needed Terminal Reserve at June 30, 2025	\$83,819,074
Projected Working Cash Fund at June 30, 2025	\$20,401,516

Terminal Reserve and Working Cash Fund at December 31, 2024	\$104,184,735
Total Estimated Funding Variance for January 1, 2025 to June 30, 2025	\$35,855
Projected Needed Terminal Reserve at June 30, 2026	\$84,452,045
Projected Working Cash Fund at June 30, 2026	\$19,768,544

Assumptions (Based on Projected Claims):
PPO Medical Reserves = 77.8% of Total
HMO Medical Reserves = 19.6% of Total
Dental Reserves = 2.7% of Total

PPO Medical	
	@15%
Terminal Reserve Needed Per Projection	\$65,683,155
As of June 30, 2026 (\$84,452,045 *77.8%) =	\$65,683,155
Adjustment (See Exhibit 9)	\$0

HMO Medical	
	@15%
Terminal Reserve Needed Per Projection	\$16,516,674
As of June 30, 2026 (\$84,452,045 *19.6%) =	\$16,516,674
Adjustment (See Exhibit 10)	\$0

Dental	
	@15%
Terminal Reserve Needed Per Projection	\$2,252,216
As of June 30, 2026 (\$84,452,045 *2.7%) =	\$2,252,216
Adjustment (See Exhibit 11)	\$0

This analysis is for illustrative purposes only, and is not a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. Please see your policy or contact us for specific information or further details in this regard.

EBC
Exhibit 13
PPO Total Plan Costs Summary

	Actual 7/1/2023 through 6/30/2024	Projected 7/1/2024 through 6/30/2025	Projected 7/1/2025 through 6/30/2026
Average PPO Employees for Period	19,805	21,422	21,346
Paid PPO and Prescription Drug Claims	\$383,220,136	\$456,021,072	\$493,270,322
Claims over Excess	(\$1,090,674)	\$0	\$0
Net Paid Medical Claims	\$382,129,463	\$456,021,072	\$493,270,322
Medical Reserve Adjustment for New Groups	\$0	\$1,297,004	\$0
Claims Fluctuation Margin	\$0	\$0	(\$1,999,872)
A. Total PPO Net Paid Claims	\$382,129,463	\$457,318,076	\$491,270,449
B. Fixed Costs			
Medical Administration	\$10,209,788	\$11,043,426	\$11,165,666
Prescription Drug Rebates	(\$46,242,659)	(\$51,355,927)	(\$55,382,624)
COBRA Fees	\$102,193	\$110,537	\$110,145
Billing and Enrollment Services	\$579,886	\$627,234	\$625,011
6055/6056 Reporting	\$52,285	\$56,554	\$56,353
PCORI	\$111,699	\$143,955	\$155,583
Member Rewards	\$225,775	\$244,210	\$243,344
BVA	\$475,316	\$514,126	\$512,304
Pre-Funded Member Rewards	\$39,610	\$43,701	\$170,000
GBS Fees	\$2,729,942	\$3,061,646	\$3,199,551
Specific Stop Loss Premium	\$3,434,158	\$4,038,460	\$3,217,269
Aggregating Specific Claim Liability	\$0	\$473,565	\$475,000
Fiduciary Policy Fees	\$2,377	\$2,571	\$5,899
Wellness (Vaccines/Screenings)		\$843,167	\$925,529
Wellness incentive rebate		\$976,839	\$1,123,856
Teladoc		\$480,708	\$502,430
Cooperative Administration Charges		\$280,199	\$287,575
Dependent Audit		\$205,650	\$82,632
C. Total PPO Fixed Costs	(\$28,279,631)	(\$30,995,942)	(\$32,524,475)
D. Total PPO Plan Costs (A+C)	\$353,849,832	\$426,322,134	\$458,745,974
Medical Funding	\$379,429,110	\$427,875,358	\$458,745,974
E. Total PPO Funding	\$379,429,110	\$427,875,358	\$458,745,974
F. Funding Variance - Surplus/(Deficit)	\$25,579,278	\$1,553,224	\$0

Medical and Prescription Drug PEPM Costs

	Actual 7/1/2023 through 6/30/2024	Projected 7/1/2024 through 6/30/2025	Projected 7/1/2025 through 6/30/2026
Average PPO Employees for Period	19,805	21,422	21,346
Paid PPO and Prescription Drug Claims	\$1,612.49	\$1,773.97	\$1,925.69
Claims over Excess	-\$4.59	\$0.00	\$0.00
Net Paid Medical Claims	\$1,607.90	\$1,773.97	\$1,925.69
Medical Reserve Adjustment for New Groups	\$0.00	\$5.05	\$0.00
A. Total PPO Net Paid Claims	\$1,607.90	\$1,779.01	\$1,917.89
B. Fixed Costs			
Medical Administration	\$42.96	\$42.96	\$43.59
Drug Card Administration	\$0.00	\$0.00	\$0.00
Prescription Drug Rebates	-\$194.58	-\$199.78	-\$216.21
COBRA Fees	\$0.43	\$0.43	\$0.43
Billing and Enrollment Services	\$2.44	\$2.44	\$2.44
6055/6056 Reporting	\$0.22	\$0.22	\$0.22
HMO Managed Care Fee			
PCORI	\$0.47	\$0.56	\$0.61
Member Rewards	\$0.95	\$0.95	\$0.95
BVA	\$2.00	\$2.00	\$2.00
Pre-Funded Member Rewards	\$0.17	\$0.17	\$0.66
HMO Allocated Taxes/Fees			
GBS Fees	\$11.49	\$11.91	\$12.49
Specific Stop Loss Premium	\$14.45	\$15.71	\$12.56
Aggregating Specific Claim Liability	\$0.00	\$1.84	\$1.85
Aggregate Stop Loss Premium			
Fiduciary Policy Fees	\$0.01	\$0.01	\$0.02
Wellness (Vaccines/Screenings)		\$3.28	\$3.61
Wellness incentive rebate		\$3.80	\$4.39
Teladoc		\$1.87	\$1.96
Cooperative Administration Charges		\$1.09	\$1.12
Dependent Audit		\$0.80	\$0.32
C. Total PPO Fixed Costs	-\$118.99	-\$120.58	-\$126.97
D. Total PPO Plan Costs (A+C)	\$1,488.90	\$1,658.43	\$1,790.91
Medical Funding	\$1,596.53	\$1,664.48	\$1,790.91
E. Total PPO Funding	\$1,596.53	\$1,664.48	\$1,790.91
F. Funding Variance - Surplus/(Deficit)	\$107.63	\$6.04	\$0.00

NOTES:

(1) Total Net Paid Medical Claims have been adjusted for stop loss reimbursements. Medical Paid Claims have also been adjusted to mature new groups.

This analysis is for illustrative purposes only, and is not a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. Please see your policy or contact us for specific information or further details in this regard.

EBC
Exhibit 14
HMO Total Plan Costs Summary

	Actual 7/1/2023 through 6/30/2024	Projected 7/1/2024 through 6/30/2025	Projected 7/1/2025 through 6/30/2026
Average HMO Employees for Period	9,941	10,924	10,943
Paid HMO and Prescription Drug Claims	\$145,424,649	\$169,371,015	\$177,125,398
Claims over Excess	(\$5,403,625)	(\$1,021,387)	\$0
Net Paid Medical Claims	\$140,021,024	\$168,349,627	\$177,125,398
Medical Reserve Adjustment for New Groups	\$0	\$417,964	\$0
Claims Fluctuation Margin			\$2,503,510
A. Total HMO Net Paid Claims	\$140,021,024	\$168,767,592	\$179,628,908
B. Fixed Costs			
Medical Administration	\$4,697,561	\$5,260,932	\$5,250,014
Prescription Drug Rebates	(\$9,940,920)	(\$18,680,642)	(\$20,656,007)
COBRA Fees	\$51,294	\$57,445	\$56,466
Billing and Enrollment Services	\$291,063	\$325,969	\$320,411
6055/6056 Reporting	\$26,243	\$29,391	\$28,890
HMO Managed Care Fee	\$1,470,821	\$1,728,706	\$1,821,353
HMO Allocated Taxes/Fees	\$0	\$0	\$0
GBS Fees	\$1,370,422	\$1,557,624	\$1,640,246
Specific Stop Loss Premium	\$3,975,869	\$5,130,010	\$5,391,835
Aggregate Stop Loss Premium	\$9,543	\$12,023	\$12,921
Wellness (Vaccines/Screenings)		\$438,188	\$474,471
Wellness incentive rebate		\$507,657	\$576,144
Teladoc		\$249,821	\$257,570
Cooperative Administration Charges		\$145,617	\$147,425
Dependent Audit		\$106,875	\$42,363
C. Total HMO Fixed Costs	\$1,951,897	(\$4,578,541)	(\$4,635,899)
D. Total HMO Plan Costs (A+C)	\$141,972,920	\$164,189,050	\$174,993,009
Medical Funding	\$143,038,367	\$166,957,238	\$174,993,009
E. Total HMO Funding	\$143,038,367	\$166,957,238	\$174,993,009
F. Funding Variance - Surplus/(Deficit)	\$1,065,447	\$2,768,188	\$0

Medical and Prescription Drug PEPM Costs

	Actual 7/1/2023 through 6/30/2024	Projected 7/1/2024 through 6/30/2025	Projected 7/1/2025 through 6/30/2026
Average HMO Employees for Period	9,941	10,924	10,943
Paid HMO and Prescription Drug Claims	\$1,219.11	\$1,292.06	\$1,348.85
Claims over Excess	-\$45.30	-\$7.79	\$0.00
Net Paid Medical Claims	\$1,173.81	\$1,284.27	\$1,348.85
Medical Reserve Adjustment for New Groups	\$0.00	\$3.19	\$0.00
A. Total HMO Net Paid Claims	\$1,173.81	\$1,287.46	\$1,367.91
B. Fixed Costs			
Medical Administration	\$39.38	\$40.13	\$39.98
Drug Card Administration	\$0.00	\$0.00	\$0.00
Prescription Drug Rebates	-\$83.34	-\$142.51	-\$157.30
COBRA Fees	\$0.43	\$0.44	\$0.43
Billing and Enrollment Services	\$2.44	\$2.49	\$2.44
6055/6056 Reporting	\$0.22	\$0.22	\$0.22
HMO Managed Care Fee	\$12.33	\$13.19	\$13.87
PCORI			
Member Rewards			
BVA			
Pre-Funded Member Rewards			
HMO Allocated Taxes/Fees	\$0.00	\$0.00	\$0.00
GBS Fees	\$11.49	\$11.88	\$12.49
Specific Stop Loss Premium	\$33.33	\$39.13	\$41.06
Aggregating Specific Claim Liability			
Aggregate Stop Loss Premium	\$0.08	\$0.09	\$0.10
Fiduciary Policy Fees		\$0.00	
Wellness (Vaccines/Screenings)		\$3.34	\$3.61
Wellness incentive rebate		\$3.87	\$4.39
Teladoc		\$1.91	\$1.96
Cooperative Administration Charges		\$1.11	\$1.12
Dependent Audit		\$0.82	\$0.32
C. Total HMO Fixed Costs	\$16.36	(\$34.93)	(\$35.30)
D. Total HMO Plan Costs (A+C)	\$1,190.17	\$1,252.53	\$1,332.61
Medical Funding	\$1,199.10	\$1,273.65	\$1,332.61
E. Total HMO Funding	\$1,199.10	\$1,273.65	\$1,332.61
F. Funding Variance - Surplus/(Deficit)	\$8.93	\$21.12	\$0.00

NOTES:

(1) Total Net Paid Medical Claims have been adjusted for stop loss reimbursements. Medical Paid Claims have also been adjusted to mature new groups.

This analysis is for illustrative purposes only, and is not a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. Please see your policy or contact us for specific information or further details in this regard.

EBC
Exhibit 15
Dental Total Plan Costs Summary

	Actual 7/1/2023 through 6/30/2024	Projected 7/1/2024 through 6/30/2025	Projected 7/1/2025 through 6/30/2026
Average Dental Employees for Period	16,566	17,068	17,339
Paid Dental Claims	\$13,200,449	\$13,676,179	\$15,164,776
Dental Reserve Adjustment for New Groups	\$0	\$0	\$0
A. Total Dental Net Paid Claims	\$13,200,449	\$13,676,179	\$15,164,776
B. Fixed Costs			
Dental Administration	\$713,642	\$591,907	\$601,317
GBS Fees	\$0	\$0	\$0
C. Total Dental Fixed Costs	\$713,642	\$591,907	\$601,317
D. Total Dental Plan Costs (A+C)	\$13,914,090	\$14,268,086	\$15,766,093
Dental Funding	\$13,958,380	\$15,050,179	\$15,766,093
E. Total Dental Funding	\$13,958,380	\$15,050,179	\$15,766,093
F. Funding Variance - Surplus/(Deficit)	\$44,290	\$782,093	\$0

Dental PEPM Costs

	Actual 7/1/2023 through 6/30/2024	Projected 7/1/2024 through 6/30/2025	Projected 7/1/2025 through 6/30/2026
Average Dental Employees for Period	16,566	17,068	17,339
Paid Dental Claims	\$66.41	\$66.77	\$72.88
Dental Reserve Adjustment for New Groups	\$0.00	\$0.00	\$0.00
A. Total Dental Net Paid Claims	\$66.41	\$66.77	\$72.88
B. Fixed Costs			
Dental Administration	\$3.59	\$2.89	\$2.89
GBS Fees	\$0.00	\$0.00	\$0.00
C. Total Dental Fixed Costs	\$3.59	\$2.89	\$2.89
D. Total Dental Plan Costs (A+C)	\$70.00	\$69.66	\$75.77
Dental Funding	\$70.22	\$73.48	\$75.77
E. Total Dental Funding	\$70.22	\$73.48	\$75.77
F. Funding Variance - Surplus/(Deficit)	\$0.22	\$3.82	\$0.00

NOTES:

(1) Total Net Paid Medical Claims have been adjusted for stop loss reimbursements. Medical Paid Claims have also been adjusted to mature new groups.

This analysis is for illustrative purposes only, and is not a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. Please see your policy or contact us for specific information or further details in this regard.



EBC

Exhibit 16

PPO Medical Experience - By District - Including Adjustment for Claims between \$75,000 and \$1,000,000

Experience Period: January 1, 2024 to December 31, 2024

District	Paid Premium	Net Paid Claims (I)	12/31/2024 Loss Ratio	Rate Adjustment
A.E.R.O. Special Education Cooperative	\$1,560,230	\$1,606,687	103.0%	6.9%
Addison SD 4	\$1,542,275	\$1,481,976	96.1%	5.9%
Beach Park SD #3	\$2,115,271	\$2,102,466	99.4%	5.9%
Beecher CUSD #200U	\$763,590	\$922,674	120.8%	8.9%
Bensenville SD #2	\$2,319,561	\$2,545,193	109.7%	7.9%
Berkeley SD #87	\$1,038,945	\$1,251,468	120.5%	8.9%
Brookfield SD #95	\$1,186,696	\$1,231,432	103.8%	6.9%
Brookwood SD #167	\$1,786,063	\$1,856,216	103.9%	6.9%
Burbank HSD #111	\$7,745,224	\$7,380,509	95.3%	5.9%
Burr Ridge CCSD #180	\$780,933	\$912,181	116.8%	8.9%
Byron SD 226	\$3,291,704	\$4,054,911	123.2%	9.9%
Calumet Public SD #132	\$440,731	\$434,399	98.6%	5.9%
Cary SD #26	\$3,031,467	\$3,107,873	102.5%	6.9%
CASE	\$2,037,858	\$1,953,637	95.9%	5.9%
CCSD #89	\$3,532,569	\$3,723,212	105.4%	6.9%
Coal City CUSD #1	\$3,683,337	\$3,897,349	105.8%	6.9%
Crete-Monee SD #201-U	---	---	---	6.9%
Decatur SD #61	\$15,814,444	\$18,395,470	116.3%	8.9%
Deerfield SD #109	\$6,433,684	\$5,951,428	92.5%	4.9%
District 45, DuPage County	\$2,330,847	\$2,008,410	86.2%	3.9%
Dolton SD #148	\$2,735,502	\$2,578,361	94.3%	5.9%
Dolton SD #149	\$2,972,032	\$2,872,088	96.6%	5.9%
DuPage HSD #88	\$5,523,870	\$5,585,100	101.1%	6.9%
East Maine SD #63	\$1,453,323	\$1,079,365	74.3%	2.9%
East Prairie SD #73	\$536,217	\$580,278	108.2%	7.9%
ECHO	\$3,072,205	\$3,051,096	99.3%	5.9%
Edmund Lindop SD #92	\$535,480	\$519,035	96.9%	5.9%
Elmwood Park SD #401	\$3,480,360	\$3,232,114	92.9%	4.9%
Evanston Skokie SD #65	\$3,367,328	\$2,726,278	81.0%	3.9%
Evergreen Park Elementary SD 124	\$2,547,144	\$3,111,387	122.2%	9.9%
Fairview SD #72	\$1,471,423	\$1,695,523	115.2%	8.9%
Fenton Community High SD #100	\$2,212,184	\$1,912,913	86.5%	3.9%
Forest Park SD #91	\$1,714,387	\$1,781,702	103.9%	6.9%
Franklin Park SD #84	\$2,717,443	\$2,316,699	85.3%	3.9%
Genoa Kingston SD #424	\$1,402,822	\$1,554,035	110.8%	7.9%
Glen Ellyn #41	\$5,078,644	\$5,537,909	109.0%	7.9%
Golf SD #67	\$441,783	\$664,928	150.5%	11.9%
Grayslake CCSD #46	\$2,106,828	\$2,340,527	111.1%	7.9%
Grayslake SD #127	\$4,547,001	\$5,006,942	110.1%	7.9%
Herschler SD #2	\$2,079,749	\$2,319,926	111.5%	7.9%
Hillside SD #93	\$1,261,555	\$1,149,449	91.1%	4.9%
Itasca SD#10	\$1,396,522	\$1,433,260	102.6%	6.9%
Kankakee SD #111	\$9,474,411	\$9,935,222	104.9%	6.9%
Keeneyville SD #20	\$1,855,543	\$1,861,003	100.3%	6.9%
La Grange SD #102	\$5,442,617	\$5,639,487	103.6%	6.9%
Lake Park SD #108	\$4,694,670	\$4,692,917	100.0%	5.9%
LaSalle-Peru Township HSD #120	\$2,305,793	\$2,892,814	125.5%	9.9%
Lemont-Bromberek CSD #113A	\$2,963,142	\$2,906,922	98.1%	5.9%
Lincoln SD #156	\$1,270,382	\$1,614,155	127.1%	9.9%

District	Paid Premium	Net Paid Claims (I)	12/31/2024 Loss Ratio	Rate Adjustment
Lincolnwood SD #74	\$2,398,766	\$2,468,042	102.9%	6.9%
Lisle SD #202	\$3,771,257	\$4,228,126	112.1%	7.9%
Lombard SD #44	\$3,029,182	\$2,927,176	96.6%	5.9%
Maercker SD #60	\$1,386,873	\$1,051,676	75.8%	2.9%
Mannheim SD #83	\$7,159,510	\$7,451,939	104.1%	6.9%
Manteno CUSD #5	\$2,789,427	\$2,838,181	101.7%	6.9%
Marengo CSD #165	\$669,391	\$678,330	101.3%	6.9%
Marquardt SD #15	\$4,616,845	\$5,156,735	111.7%	7.9%
Matteson SD #159	\$4,032,172	\$4,451,437	110.4%	7.9%
Medinah SD #11	\$1,193,207	\$1,116,538	93.6%	4.9%
Midlothian SD #143	\$3,146,246	\$2,405,576	76.5%	2.9%
Mt. Prospect SD #57	\$3,568,433	\$4,011,991	112.4%	7.9%
Mundelein SD #120	\$4,370,379	\$4,638,819	106.1%	6.9%
NDSEC	\$1,258,259	\$1,404,400	111.6%	7.9%
Niles SD #71	\$1,466,420	\$984,436	67.1%	1.9%
Niles Special Ed #807	\$2,466,440	\$2,798,465	113.5%	7.9%
Niles THSD #219	\$16,130,458	\$17,368,258	107.7%	6.9%
Norridge SD #80	\$934,845	\$1,012,986	108.4%	7.9%
North Chicago SD #187	\$3,551,212	\$3,139,409	88.4%	4.9%
North Palos SD #117	\$6,614,452	\$6,393,360	96.7%	5.9%
Northbrook SD #28	\$6,783,269	\$7,013,791	103.4%	6.9%
Northbrook SD #30	\$2,389,586	\$2,595,144	108.6%	7.9%
NSSEO	\$4,089,202	\$4,229,092	103.4%	6.9%
Oak Lawn Hometown SD #123	\$4,793,310	\$4,753,804	99.2%	5.9%
Oak Park SD #97	\$4,797,419	\$4,607,322	96.0%	5.9%
Oswego CUSD #308	\$21,189,858	\$25,310,266	119.4%	8.9%
PALC	\$2,049,820	\$1,951,980	95.2%	5.9%
Palos SD #118	\$4,906,404	\$5,103,457	104.0%	6.9%
Park Forest-Chicago Heights SD #163	\$872,231	\$1,362,156	156.2%	11.9%
Posen-Robbins SD 143.5	\$1,546,563	\$1,608,058	104.0%	6.9%
Prairie Grove CSD #46	\$1,615,077	\$1,815,232	112.4%	7.9%
Prospect Hts SD #23	\$3,179,876	\$3,485,572	109.6%	7.9%
Queen Bee SD #16	\$1,854,586	\$1,649,789	89.0%	4.9%
Reavis HS Dist 220	\$3,017,442	\$2,924,891	96.9%	5.9%
Rhodes SD #84.5	\$1,264,363	\$1,399,807	110.7%	7.9%
Rich Township HSD #227	\$6,126,780	\$6,620,393	108.1%	6.9%
Ridgeland SD #122	\$2,600,572	\$2,558,920	98.4%	5.9%
River Forest SD #90	\$2,952,926	\$3,527,538	119.5%	8.9%
River Trails SD #26	\$494,179	\$530,996	107.5%	6.9%
Riverside Brookfield HSD #208	\$2,680,807	\$2,416,475	90.1%	4.9%
Riverside SD #96	\$2,818,815	\$2,813,001	99.8%	5.9%
Roselle SD #12	\$999,321	\$1,232,646	123.3%	9.9%
Salt Creek SD #48	---	---	---	6.9%
Sauk Village CCSD #168	\$1,248,350	\$1,252,248	100.3%	6.9%
Seneca Grade School District #170	\$772,910	\$1,077,372	139.4%	11.9%
Seneca Township HSD #160	\$1,157,899	\$1,140,590	98.5%	5.9%
Skokie SD #68	\$2,472,614	\$1,731,341	70.0%	1.9%
Skokie SD #69	\$1,928,956	\$1,927,110	99.9%	5.9%
Skokie SD #73 1/2	\$1,470,915	\$1,021,830	69.5%	1.9%

District	Paid Premium	Net Paid Claims (I)	12/31/2024 Loss Ratio	Rate Adjustment
South Berwyn SD #100	\$3,377,151	\$3,578,867	106.0%	6.9%
South Holland SD #150	\$625,401	\$620,850	99.3%	5.9%
SPEED SEJA	\$337,919	\$370,756	109.7%	7.9%
Sterling CUSD #5	\$5,150,017	\$4,705,455	91.4%	4.9%
Summit Hill SD #161	\$4,359,154	\$4,380,045	100.5%	6.9%
SWCCCASE	\$1,063,371	\$1,096,425	103.1%	6.9%
Thornton #205	\$10,331,091	\$10,723,741	103.8%	6.9%
Thornton Fractional #215	\$7,036,392	\$7,077,244	100.6%	6.9%
Tinley Park SD #146	\$5,702,433	\$5,594,391	98.1%	5.9%
Union Ridge SD #86	\$482,588	\$445,286	92.3%	4.9%
Warren Township HS #121	\$5,696,528	\$6,280,799	110.3%	7.9%
West Chicago SD #94	\$2,802,537	\$3,036,096	108.3%	7.9%
West Northfield SD #31	\$2,152,088	\$2,154,329	100.1%	5.9%
Westchester SD #92.5	\$1,440,413	\$1,317,006	91.4%	4.9%
Westmont CUSD #201	\$2,498,075	\$2,535,212	101.5%	6.9%
Westville CUSD #2	\$1,602,131	\$1,624,620	101.4%	6.9%
Wilmington CUSD #209U	---	---	---	6.9%
Wood Dale SD #7	\$1,641,626	\$1,880,209	114.5%	7.9%
Woodland SD #50	\$11,863,082	\$11,990,862	101.1%	6.9%
Woodridge SD #68	\$4,328,245	\$4,823,389	111.4%	7.9%
Zion Elementary SD #6	\$3,619,365	\$3,670,374	101.4%	6.9%

NEW DISTRICTS				
SASED				
Butler SD #53				

Sub-Pool	Paid Premium	Net Paid Claims (I)	Date End Loss Ratio	Rate Adjustment
EPAA	\$5,663,447	\$5,589,806	98.7%	5.9%
NSBC	\$14,586,882	\$16,789,553	115.1%	8.9%
WPH	\$2,368,568	\$2,396,790	101.2%	6.9%

	Total Paid Premium	Total Net Paid Claims	Pool Average Loss Ratio
Pool Total	\$407,452,115	\$424,277,733	104.1%

NOTES:

(1) Net Claims include all claims under \$75,000 per individual plus the shared amount of claim liability between \$75,000 and \$1,000,000 per individual. The shared amount is distributed based on enrollment for each member.

This analysis is for illustrative purposes only, and is not a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. Please see your policy or contact us for specific information or further details in this regard.



EBC

Exhibit 17

HMO Medical Experience - By District - Including Adjustment for Claims between \$75,000 and \$350,000

Experience Period: January 1, 2024 to December 31, 2024

District	Paid Premium	Net Paid Claims (1)	12/31/2024 Loss Ratio	Rate Adjustment
A.E.R.O. Special Education Cooperative	\$1,749,088	\$1,685,195	96.3%	5.2%
Addison SD 4	\$3,104,082	\$2,893,951	93.2%	4.2%
Beach Park SD #3	\$916,101	\$1,185,357	129.4%	9.2%
Beecher CUSD #200U	\$540,665	\$538,933	99.7%	5.2%
Bensenville SD #2	\$2,416,953	\$2,617,733	108.3%	6.2%
Berkeley SD #87	\$3,095,444	\$3,581,097	115.7%	7.2%
Brookfield SD #95	\$415,700	\$270,215	65.0%	0.2%
Brookwood SD #167	\$211,040	\$171,978	81.5%	2.2%
Burr Ridge CCSD #180	\$275,938	\$246,127	89.2%	3.2%
Calumet Public SD #132	\$684,862	\$755,536	110.3%	6.2%
Cary SD #26	\$873,504	\$1,052,939	120.5%	8.2%
CASE	\$852,463	\$875,573	102.7%	5.2%
CCSD #89	\$1,466,113	\$1,340,668	91.4%	4.2%
Crete-Monroe SD #201-U	---	---	---	5.2%
Deerfield SD #109	\$1,121,181	\$1,125,605	100.4%	5.2%
District 45, DuPage County	\$3,671,055	\$3,443,833	93.8%	4.2%
Dolton SD #148	\$1,049,041	\$1,337,466	127.5%	9.2%
Dolton SD #149	\$316,213	\$215,075	68.0%	0.2%
DuPage HSD #88	\$3,467,692	\$3,382,493	97.5%	5.2%
East Maine SD #63	\$4,197,534	\$4,266,636	101.6%	5.2%
East Prairie SD #73	\$487,111	\$525,690	107.9%	6.2%
ECHO	\$1,242,389	\$1,181,329	95.1%	4.2%
Edmund Lindop SD #92	\$333,455	\$314,760	94.4%	4.2%
Elmwood Park SD #401	\$1,118,289	\$893,180	79.9%	2.2%
Evanston Skokie SD #65	\$13,874,334	\$14,429,220	104.0%	5.2%
Evergreen Park Elementary SD 124	\$886,243	\$1,076,390	121.5%	8.2%
Fairview SD #72	\$658,681	\$568,189	86.3%	3.2%
Fenton Community High SD #100	\$1,098,831	\$1,072,639	97.6%	5.2%
Forest Park SD #91	\$260,057	\$283,839	109.1%	6.2%
Franklin Park SD #84	\$522,568	\$528,914	101.2%	5.2%
Genoa Kingston SD #424	\$675,531	\$523,137	77.4%	2.2%
Glen Ellyn #41	\$2,648,665	\$2,552,008	96.4%	5.2%
Golf SD #67	\$772,322	\$558,925	72.4%	1.2%
Grayslake CCSD #46	\$896,352	\$996,186	111.1%	7.2%
Grayslake CHSD #127	\$1,364,941	\$1,663,039	121.8%	8.2%
Hillside SD #93	\$102,400	\$80,784	78.9%	2.2%
Itasca SD#10	\$331,967	\$249,391	75.1%	1.2%
Keeneyville SD #20	\$523,745	\$549,910	105.0%	6.2%
La Grange SD #102	\$1,057,155	\$1,191,108	112.7%	7.2%
Lake Park SD #108	\$1,926,142	\$2,016,542	104.7%	6.2%
Lemont-Bromberek CSD #113A	\$740,979	\$912,616	123.2%	8.2%
Lincolnwood SD #74	\$882,289	\$744,797	84.4%	3.2%
Lisle SD #202	\$1,580,245	\$1,824,848	115.5%	7.2%
Lombard SD #44	\$3,540,093	\$3,263,429	92.2%	4.2%
Maercker SD #60	\$935,038	\$1,005,897	107.6%	6.2%
Mannheim SD #83	\$2,040,841	\$1,846,481	90.5%	4.2%
Marengo CSD #165	\$984,043	\$1,037,237	105.4%	6.2%
Marquardt SD #15	\$1,545,820	\$1,193,224	77.2%	2.2%
Matteson SD #159	\$1,036,596	\$1,215,362	117.2%	8.2%

District	Paid Premium	Net Paid Claims (1)	12/31/2024 Loss Ratio	Rate Adjustment
Medinah SD #11	\$126,898	\$95,042	74.9%	1.2%
Midlothian SD #143	\$496,186	\$550,592	111.0%	7.2%
Mt. Prospect SD #57	\$418,271	\$432,386	103.4%	5.2%
Mundelein SD #120	\$1,145,878	\$1,291,207	112.7%	7.2%
NDSEC	\$316,368	\$314,752	99.5%	5.2%
Niles Special Ed #807	\$947,788	\$981,343	103.5%	5.2%
Niles THSD #219	\$2,449,768	\$2,264,480	92.4%	4.2%
Norridge SD #80	\$407,132	\$302,029	74.2%	1.2%
North Chicago SD #187	\$1,391,684	\$1,124,550	80.8%	2.2%
North Palos SD #117	\$1,412,576	\$1,414,431	100.1%	5.2%
Northbrook SD #28	\$1,287,639	\$1,545,436	120.0%	8.2%
Northbrook SD #30	\$797,273	\$1,085,415	136.1%	10.2%
NSSEO	\$1,520,773	\$1,309,229	86.1%	3.2%
Oak Lawn Hometown SD #123	\$2,107,003	\$2,427,826	115.2%	7.2%
Oak Park SD #97	\$7,551,028	\$6,775,731	89.7%	4.2%
Oswego CUSD #308	\$7,812,215	\$8,298,882	106.2%	6.2%
PAEC	\$950,490	\$1,072,601	112.8%	7.2%
Palos SD #118	\$625,196	\$651,636	104.2%	6.2%
Park Forest-Chicago Heights SD #163	\$1,382,629	\$1,588,304	114.9%	7.2%
Posen-Robbins SD 143.5	\$689,886	\$534,669	77.5%	2.2%
Prairie Grove CSD #46	\$81,015	\$55,302	68.3%	0.2%
Prospect Hts SD #23	\$692,180	\$326,447	47.2%	0.2%
Queen Bee SD #16	\$1,237,530	\$1,176,799	95.1%	4.2%
Reavis HS Dist 220	\$580,637	\$512,515	88.3%	3.2%
Rhodes SD #84.5	\$262,349	\$228,128	87.0%	3.2%
Rich Township HSD #227	\$2,072,573	\$1,893,142	91.3%	4.2%
Ridgeland SD #122	\$1,790,852	\$1,545,772	86.3%	3.2%
River Forest SD #90	\$344,709	\$234,628	68.1%	0.2%
River Trails SD #26	\$2,301,958	\$2,295,132	99.7%	5.2%
Riverside Brookfield HSD #208	\$449,374	\$552,601	123.0%	8.2%
Riverside SD #96	\$1,201,669	\$1,269,812	105.7%	6.2%
Roselle SD #12	\$230,037	\$209,642	91.1%	4.2%
Salt Creek SD #48	---	---	---	5.2%
Sauk Village CCSD #168	\$636,631	\$706,719	111.0%	7.2%
Skokie SD #68	\$1,483,301	\$1,703,499	114.8%	7.2%
Skokie SD #69	\$1,333,412	\$1,276,793	95.8%	4.2%
Skokie SD #73 1/2	\$1,285,919	\$1,359,967	105.8%	6.2%
South Berwyn SD #100	\$2,419,714	\$2,751,636	113.7%	7.2%
South Holland SD #150	\$432,186	\$337,427	78.1%	2.2%
SPEED SE A	\$893,860	\$928,686	103.9%	5.2%
Summit Hill SD #161	\$279,459	\$179,689	64.3%	0.2%
SWCCCASE	\$2,937,138	\$2,901,794	98.8%	5.2%
Thornton #205	\$2,299,214	\$2,180,461	94.8%	4.2%
Thornton Fractional #215	\$975,720	\$891,643	91.4%	4.2%
Tinley Park SD #146	\$923,622	\$977,291	105.8%	6.2%
Union Ridge SD #86	\$226,160	\$208,943	92.4%	4.2%
Warren Township HS #121	\$1,120,066	\$1,454,970	129.9%	9.2%
West Chicago SD #94	\$1,317,986	\$1,279,199	97.1%	5.2%
West Northfield SD #31	\$523,010	\$542,854	103.8%	5.2%

District	Paid Premium	Net Paid Claims (1)	Date End Loss Ratio	Rate Adjustment
Westchester SD #92.5	\$503,618	\$508,025	100.9%	5.2%
Westmont CUSD #201	\$1,259,880	\$1,357,782	107.8%	6.2%
Wilmington CUSD #209U	---	---	---	5.2%
Wood Dale SD #7	\$573,757	\$566,549	98.7%	5.2%
Woodland SD #50	\$947,111	\$1,021,320	107.8%	6.2%
Woodridge SD #68	\$1,931,629	\$1,912,258	99.0%	5.2%
Zion Elementary SD #6	\$1,852,170	\$1,214,282	65.6%	0.2%

NEW DISTRICTS				
SASED				
Butler SD #53				

Sub-Pool	Paid Premium	Net Paid Claims (1)	Date End Loss Ratio	Rate Adjustment
EPAA	\$2,177,958	\$2,328,546	106.9%	6.2%
NSBC	\$6,393,913	\$6,037,177	94.4%	4.2%
WPH	\$1,731,897	\$1,719,301	99.3%	5.2%

	Total Paid Premium	Total Net Paid Claims	Pool Average Loss Ratio
Pool Total	\$156,032,686	\$155,992,755	100.0%

NOTES:

(1) Net Claims include all claims under \$75,000 per individual plus the shared amount of claim liability between \$75,000 and \$350,000 per individual. The shared amount is distributed based on enrollment for each member.

This analysis is for illustrative purposes only, and is not a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. Please see your policy or contact us for specific information or further details in this regard.



EBC
Exhibit 18
Dental Experience - By District
Experience Period: January 1, 2024 to December 31, 2024

District	Paid Premium	Net Paid Claims (1)	12/31/2024 Loss Ratio	Rate Adjustment
Addison SD 4	\$267,011	\$213,793	80.1%	4.0%
Beach Park SD #3	\$183,241	\$218,698	119.4%	6.5%
Bensenville SD #2	\$216,452	\$174,409	80.6%	4.0%
Berkeley SD #87	\$186,726	\$173,488	92.9%	4.0%
Burbank HSD #111	\$330,812	\$304,546	92.1%	4.0%
Byron CUSD #226	\$175,875	\$166,612	94.7%	4.0%
Calumet Public SD #132	\$53,148	\$60,760	114.3%	6.5%
Cary SD #26	\$189,608	\$148,428	78.3%	1.5%
CASE	\$139,541	\$124,080	88.9%	4.0%
CCSD #89	\$257,324	\$275,242	107.0%	4.0%
Deerfield SD #109	\$279,202	\$284,199	101.8%	4.0%
District 45, DuPage County	\$357,842	\$349,108	97.6%	4.0%
Dolton SD #148	\$154,700	\$150,357	97.2%	4.0%
East Prairie SD #73	\$47,374	\$52,801	111.5%	6.5%
ECHO	\$157,330	\$152,044	96.6%	4.0%
Elmwood Park SD #401	\$220,993	\$194,563	88.0%	4.0%
Fairview SD #72	\$95,005	\$88,226	92.9%	4.0%
Fenton Community High SD #100	\$180,975	\$188,795	104.3%	4.0%
Franklin Park SD #84	\$153,633	\$149,880	97.6%	4.0%
Genoa Kingston SD #424	\$99,445	\$84,800	85.3%	4.0%
Glen Ellyn #41	\$355,801	\$294,133	82.7%	4.0%
Golf SD #67	\$54,389	\$59,546	109.5%	6.5%
Grayslake SD #127	\$341,731	\$310,219	90.8%	4.0%
Itasca SD#10	\$63,815	\$46,128	72.3%	1.5%
Keeneyville SD #20	\$97,838	\$78,968	80.7%	4.0%
Lincoln SD #156	\$51,933	\$41,128	79.2%	1.5%
Lincolnwood SD #74	\$157,045	\$141,217	89.9%	4.0%
Lisle SD #202	\$265,914	\$267,172	100.5%	4.0%
Lombard SD #44	\$377,966	\$354,596	93.8%	4.0%
Mannheim SD #83	\$312,903	\$233,686	74.7%	1.5%
Marquardt SD #15	\$205,263	\$220,132	107.2%	4.0%
Matteson SD #159	\$187,610	\$186,189	99.2%	4.0%
Midlothian SD #143	\$144,862	\$152,659	105.4%	4.0%
Mt. Prospect SD #57	\$160,274	\$178,005	111.1%	6.5%
Mundelein SD #120	\$280,061	\$289,933	103.5%	4.0%
Niles SD #71	\$74,028	\$74,788	101.0%	4.0%
Niles Special Ed #807	\$157,681	\$133,992	85.0%	4.0%
Niles THSD #219	\$830,690	\$825,027	99.3%	4.0%
Norridge SD #80	\$58,828	\$57,241	97.3%	4.0%
North Palos SD #117	\$303,369	\$299,356	98.7%	4.0%
Northbrook SD #28	\$388,657	\$419,069	107.8%	4.0%
PAEC	\$67,200	\$47,022	70.0%	1.5%
Palos SD #118	\$233,734	\$251,586	107.6%	4.0%
Prairie Grove CSD #46	\$101,666	\$87,659	86.2%	4.0%
Prospect Hts SD #23	\$186,414	\$180,965	97.1%	4.0%
Queen Bee SD #16	\$115,816	\$114,431	98.8%	4.0%
Reavis HS Dist 220	\$237,640	\$201,111	84.6%	4.0%
Rhodes SD #84.5	\$76,985	\$70,306	91.3%	4.0%
Ridgeland SD #122	\$182,246	\$166,593	91.4%	4.0%

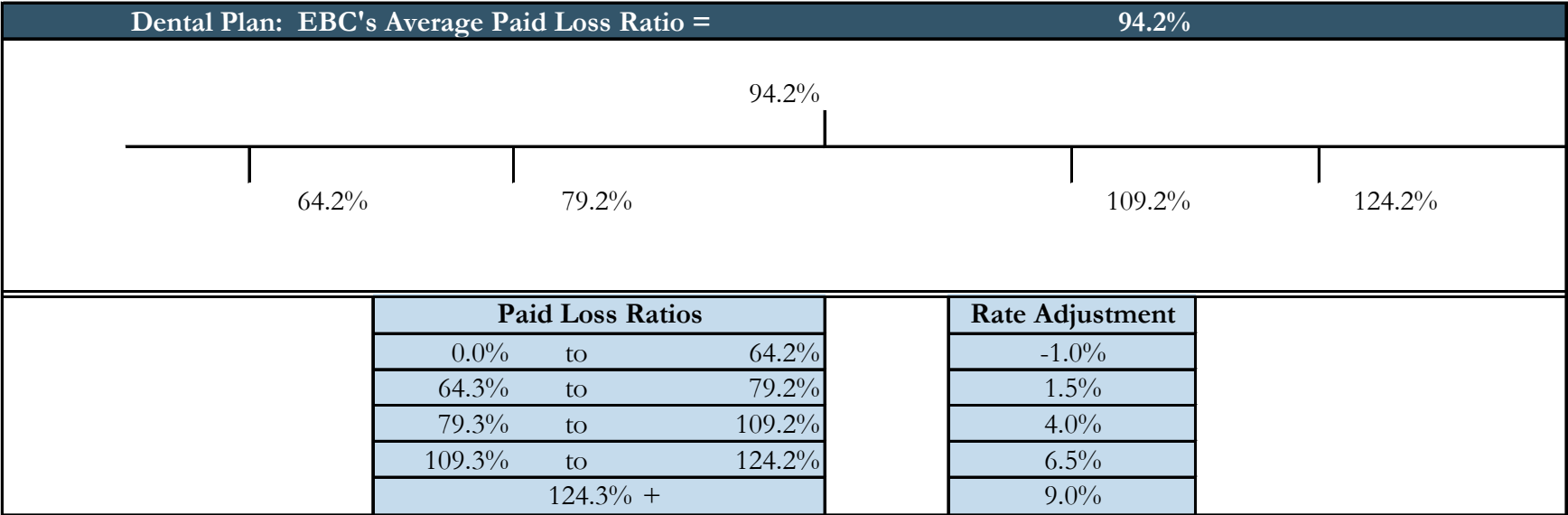
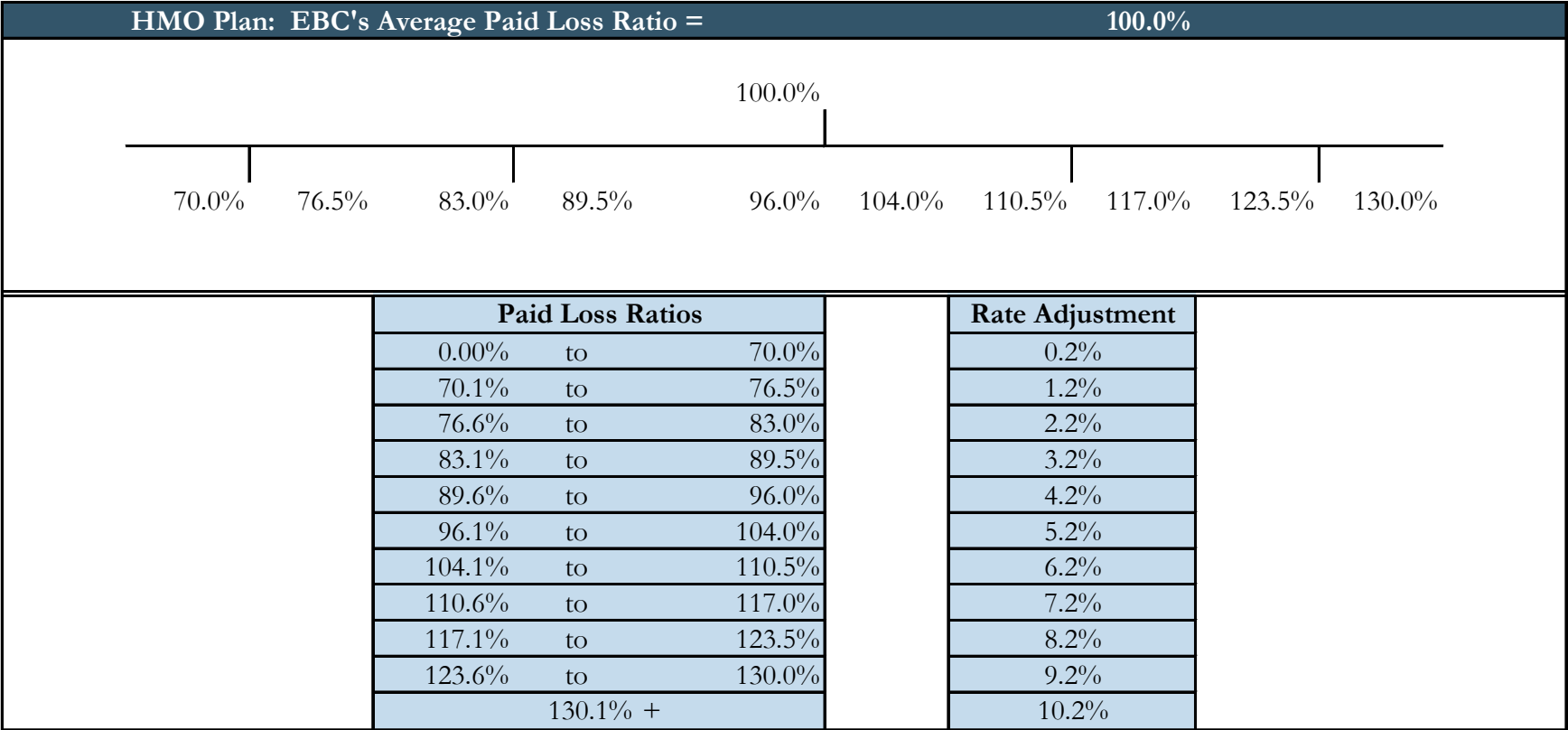
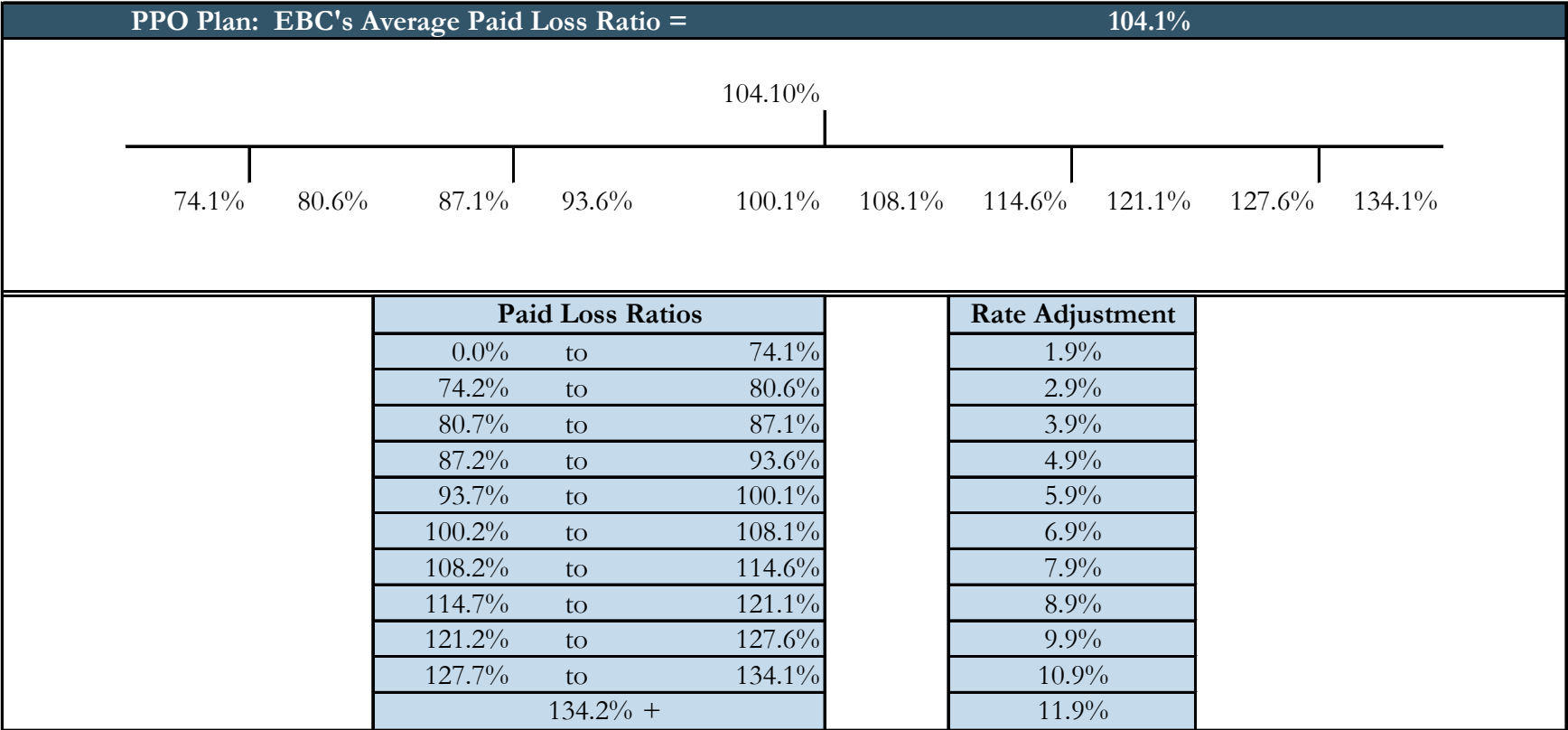
District	Paid Premium	Net Paid Claims (1)	12/31/2024 Loss Ratio	Rate Adjustment
River Forest SD #90	\$193,388	\$164,641	85.1%	4.0%
River Trails SD #26	\$173,345	\$176,935	102.1%	4.0%
Riverside Brookfield HSD #208	\$185,525	\$191,838	103.4%	4.0%
Riverside SD #96	\$234,621	\$171,386	73.0%	1.5%
Sauk Village CCSD #168	\$113,755	\$108,366	95.3%	4.0%
Skokie SD #68	\$200,772	\$189,146	94.2%	4.0%
Skokie SD #69	\$127,209	\$113,387	89.1%	4.0%
Skokie SD #73 1/2	\$121,029	\$112,210	92.7%	4.0%
South Berwyn SD #100	\$212,689	\$207,460	97.5%	4.0%
Sterling CUSD #5	\$260,227	\$273,162	105.0%	4.0%
Summit Hill SD #161	\$168,003	\$178,237	106.1%	4.0%
SWCCCASE	\$255,915	\$215,367	84.2%	4.0%
Tinley Park SD #146	\$359,567	\$328,138	91.3%	4.0%
Union Ridge SD #86	\$31,595	\$30,843	97.6%	4.0%
Warren Township HS #121	\$394,858	\$347,071	87.9%	4.0%
West Chicago SD #94	\$226,075	\$192,937	85.3%	4.0%
Westchester SD #92.5	\$104,850	\$93,332	89.0%	4.0%
Woodland SD #50	\$556,242	\$515,497	92.7%	4.0%
Woodridge SD #68	\$231,126	\$211,799	91.6%	4.0%
	\$0	\$0	0%	-1.0%
	\$0	\$0	0%	-1.0%

Sub-Pool	Paid Premium	Net Paid Claims (1)	Date End Loss Ratio	Rate Adjustment
EPAA	\$121,772	\$104,054	85.4%	4.0%
NSBC	\$370,537	\$359,055	96.9%	4.0%
WPH	\$43,762	\$39,238	89.7%	4.0%

	Total Paid Premium	Total Net Paid Claims	Pool Average Loss Ratio
Pool Total	\$14,505,462	\$13,661,781	94.2%

This analysis is for illustrative purposes only, and is not a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. Please see your policy or contact us for specific information or further details in this regard.

EBC
Exhibit 19
Estimated District Rate Adjustments
Banding Formula - Average Increase Plus/Minus 5%



This analysis is for illustrative purposes only, and is not a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. Please see your policy or contact us for specific information or further details in this regard.

EBC
Exhibit 20
Historical Rate Adjustments

Plan Year	PPO Average		HMO Average		Dental Average	
	Calculated Adjustments	Final Adjustments With Working Cash Release	Calculated Adjustments	Final Adjustments With Working Cash Release	Calculated Adjustments	Final Adjustments With Working Cash Release
7/1/11 to 7/1/12	6.6%	6.6%	13.0%	13.0%	0.0%	0.0%
7/1/12 to 7/1/13	5.9%	3.8%	4.6%	3.8%	-1.0%	-1.0%
7/1/13 to 7/1/14	3.4%	1.3%	7.2%	5.1%	3.9%	1.8%
7/1/14 to 7/1/15	3.5%	0.0%	0.4%	0.0%	0.6%	0.0%
7/1/15 to 7/1/16	7.2%	5.7%	5.7%	5.7%	-2.8%	-2.8%
7/1/16 to 7/1/17	7.1%	5.5%	-0.3%	-0.3%	1.1%	1.1%
7/1/17 to 7/1/18	8.5%	8.5%	0.1%	0.1%	0.8%	0.8%
7/1/18 to 7/1/19	-0.1%	-0.1%	-4.0%	-4.0%	-0.3%	-0.3%
7/1/19 to 7/1/20	2.8%	2.8%	3.3%	3.3%	3.7%	3.7%
7/1/20 to 7/1/21	5.7%	5.7%	4.3%	4.3%	1.3%	1.3%
7/1/21 to 7/1/22	1.1%	-0.1%	-2.2%	-2.9%	0.3%	-4.1%
7/1/22 to 7/1/23	7.5%	7.5%	9.7%	9.7%	3.7%	3.7%
7/1/23 to 7/1/24	10.4%	10.4%	7.5%	7.5%	2.6%	2.6%
7/1/24 to 7/1/25	7.3%	7.3%	8.8%	8.8%	6.3%	6.3%
7/1/25 to 7/1/26 Final	6.9%	6.9%	5.2%	5.2%	4.0%	4.0%
5 Year Average	6.6%	6.4%	5.8%	5.7%	3.4%	2.5%
15 Year Average	5.6%	4.8%	4.2%	3.9%	1.6%	1.1%

This analysis is for illustrative purposes only, and is not a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. Please see your policy or contact us for specific information or further details in this regard.



BlueCross BlueShield
of Illinois



EBC Final Renewal Meeting

March 19, 2025

2025 Legislative Updates

This communication is intended for informational purposes only. It is not intended to provide, does not constitute, and cannot be relied upon as legal, tax or compliance advice. Furthermore, this communication is not intended to provide tax advice, and any tax-related statements that may be contained herein is not intended or written to be used, and cannot be used, for the purposes of (i) avoiding penalties under the Internal Revenue Code or (ii) promoting, marketing, or recommending to another party any transaction or matters herein. Please consult with your legal, compliance and tax professionals to understand your legal, compliance and tax obligations under the law.

Illinois House Bill 3639 Epinephrine Injectors (EpiPen) Cap Mandate

Effective 1/1/2025 regardless of renewal date

Applies to:

PPO and HMO, Grandfathered and Non-Grandfathered

What you need to know: sets a cap on how much a member can pay for covered epinephrine injectors, such as EpiPens®. Member cost-sharing cannot be more than **\$60 for a twin-pack**.

The cost-sharing cap is per twin-pack, not per prescription. For example, a member filling a prescription for two twin-packs would pay no more than \$120.

Members of high-deductible health plans must meet their deductible before the cost-sharing cap applies.

What's the impact to our plans?

Impacted plans whose members currently pay more than \$60 will have benefits adjusted to limit the member cost-sharing to \$60 per twin-pack. Plans that impose a lower cost-share than the \$60 cap will not require a benefit change – the cap is the most a member can pay, not the least. The cap applies regardless of whether a plan has a copay or coinsurance – either way, members cannot pay more than \$60.

Members must fill the prescription at an **in-network pharmacy** to have their cost-sharing capped.

Illinois House Bill 2189 Insulin Cap Mandate

Effective 7/1/2025 regardless of renewal date

Applies to:

PPO and HMO, Grandfathered and Non-Grandfathered

What you need to know: sets a cap on how much a member can pay for insulin.

Member cost-sharing for covered prescription insulin cannot be more than **\$35 for a 30-day supply**.

This mandate replaced the previous cap of \$100.

What's the impact to our plans?

Impacted plans will have benefits adjusted to limit the member cost-sharing to \$35 per 30-day prescription.

Members of high-deductible health plans **do not** have to meet their deductible before the cost-sharing cap applies.

Illinois House Bill 2443/5493 Hearing Aid Changes

Effective with 7/1/2025 renewal

Applies to:

PPO and HMO, Grandfathered and Non-Grandfathered

What you need to know:

Illinois House Bill 2443 requires coverage of medically necessary hearing instruments and related services when prescribed by a hearing care professional. The mandate also **removes the age limit** on hearing aid coverage, requiring coverage for all impacted members, not just those under 18.

Illinois House Bill 5493 is an omnibus bill that amends multiple provisions of the Illinois insurance code, including the repeal of a requirement for certain insurance policies to offer optional coverage for hearing instruments and related services.

What's the impact to our plans?

Medically necessary hearing aids and related services will be covered (one aid per ear every 24 months) **regardless of age**. Any existing dollar limits for hearing aids and related services **will be removed**.

Illinois House Bill 1565 Vaginal Estrogen Coverage

Effective 1/1/2025 regardless of renewal date

Applies to:

PPO and HMO, Grandfathered and Non-Grandfathered

What you need to know: requires plans to cover at least one FDA-approved vaginal estrogen at the same cost-share level as covered prescriptions for erectile dysfunction (ED).

What's the impact to our plans?

Current coverage of vaginal estrogen products is generic Estrace covered at the non-preferred generic Tier 2 cost share. This bill mandated that we move that product to Tier 1 preferred generic to match the ED cost share

Preferred and Non-Preferred generics with the same member share; No member impact

Illinois House Bill 1527 Compression Sleeves

Effective with 7/1/2025 renewal

Applies to:

PPO and HMO, Grandfathered and Non-Grandfathered

What you need to know: requires coverage of medically necessary compression sleeves to prevent or mitigate lymphedema.

What's the impact to our plans?

- Compression sleeves will be covered to prevent or mitigate lymphedema when medically necessary.
- Benefit booklets were updated to include mitigating lymphedema as a medical necessity.
- All applicable CPT codes for mitigating lymphoma have been flagged for medical necessity review.

Illinois House Bill 1282 Liver Disease Screening

Effective with 7/1/2025 renewal

Applies to:

PPO and HMO, Grandfathered and Non-Grandfathered

What you need to know: requires coverage of preventive liver screenings for individuals 35-65 years old who are at high risk for liver disease, without cost sharing.

- Members of high-deductible health plans must meet their deductible before the screenings are covered without cost sharing.

What's the impact to our plans?

Liver ultrasounds and alpha-fetoprotein blood tests will be covered for members who are at high risk for liver disease.

Illinois House Bill 3202 Home Saliva Cancer Screening

Effective with 7/1/2025 renewal

Applies to:

PPO and HMO, Grandfathered and Non-Grandfathered

What you need to know: requires coverage of medically necessary home saliva cancer screening every 24 months for individuals who are asymptomatic and at risk for or who show symptoms of the cancer being screened. (detects oral, throat and potential prostate cancer)

What's the impact to our plans?

Home saliva cancer screenings will be covered every 24 months for members who are asymptomatic and at risk for, or show symptoms of, the cancer being screened.

Illinois House Bill 2350 Pap Test and Prostrate Cancer Screenings

Already in place

Applies to:

PPO, Grandfathered and Non-Grandfathered

What you need to know: this is an expansion of a previously implemented house bill (HB 5318 (PA 102-1073) and amends existing language to remove gender references from requirements around pap tests and prostate cancer screenings.

What's the impact to our plans?

There are no benefit changes to BCBSIL plans as a result of this mandate.

Illinois House Bill 2847 Mental Health Equity Access and Prevention Act

Applies to:

PPO effective 7/1/2025

HMO plans are effective January 1, 2025 regardless of renewal date.

Grandfathered and Non-Grandfathered plans

What you need to know: requires coverage without cost sharing for an annual mental health preventive and wellness visit for children and adults.

- Only mental health screening services recommended by the United States Preventive Services Task Force or by the Bright Futures Guidelines will be eligible for coverage without cost sharing under this law.
- The visit is in addition to an annual preventive physical exam/well-child visit.
- Members of high-deductible plans must meet their deductible to have this visit covered without cost sharing if such coverage would disqualify their plan from HSA eligibility.

What's the impact to our plans?

- For non-grandfathered plans, this is a benefit booklet change. The Affordable Care Act already requires coverage for mental health screenings without cost sharing.
- Note that ACA Preventive Services are covered without cost sharing pre-deductible, even for HDHP plans. Because this benefit is covered under ACA as a preventive service, members of a high-deductible plan **don't** need to meet their deductible first to have the benefit covered without cost sharing



■ EBC Stop Loss Analysis

Chuck Bertolina, Division Vice President, Stop Loss & Captives
March 19, 2025



Gallagher

Insurance | Risk Management | Consulting

[AJG.com](https://www.AJG.com)

©2024 ARTHUR J. GALLAGHER & CO.

Gallagher's Stop Loss Center of Excellence

Redefining excellence in managing Stop Loss coverage

Stop-loss optimization is a key strategy in designing and maintaining an effective and sustainable self-funded healthcare benefit program. Gallagher brings enhanced resources and expertise in stop loss, including:

- Stop Loss Subject Matter Experts
- Consulting (Client Education and Strategy)
- Actuaries
- Clinicians
- Financial Consultants
- Underwriters
- Reporting and Claim Specialists

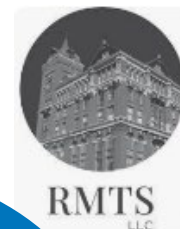


We have more than \$1.5 billion of in-force stop loss premiums across 2,500+ self-funded clients.

Gallagher Stop Loss Panel Carriers

Standalone Carriers (unbundled)

MGUs (Currently <200 Lives)



Panel Partners

BUCAs (bundled)



Other (Captives, Consortiums)



About the Gallagher/Symetra Relationship

**Gallagher is a top 3
broker partner to Symetra**

**With recent M&A activity,
Gallagher will likely be #1**

\$165 Million
premium with Symetra

175,000+
Covered lives
from 274 self funded
employers

**Gallagher is a member of
Symetra's broker panel**

**Direct relationships with
key decision makers**

- Stop loss underwriting
- Claims/Clinical

About the Gallagher/HCSC Relationship

**Gallagher is a Top 3
Broker Partner to HCSC**

**With Recent M&A
Activity, Gallagher Will
Likely Be #1**

\$188 Million
premium with HCSC

200,000+
Subscribers
From 201 Self Funded
Employers

**Gallagher Is A Member Of
HCSC Broker Panel**

**Direct Relationships With
Key Decision Makers**

- Stop loss underwriting
- Claims/Clinical
- Administration

Current Deductible: Specific Stop Loss Marketing



		Firm Quote Expires 02/21/25	Firm Quote Expires 03/07/25	Firm Quote Expires 03/24/25	Firm Quote Expires 04/10/25	Illustrative Quote Expires No date shown	Firm Quote Expires 03/20/25	Illustrative Quote Expires No date shown	Illustrative Quote Expires No date shown
EBC (21,331 Employees)	Current	Initial Renewal	Renewal LAFO	Option 1	Option 2 BAFO	Option 3 Preliminary	Option 4 BAFO	Option 5	Option 6
	Symetra	Symetra	Symetra	BCBSIL (24/12)	BCBSIL (Paid)	Voya (24/12)	Voya (24/12)	Sun Life (24/12)	Wellpoint (24/12)
Specific Individual Stop Loss									
Contract Basis	Paid	Paid	Paid	24/12	Paid	24/12	24/12	24/12	24/12
Run-in Limit	No	No	No	No	No	No	No	No	No
Contract Includes	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx
Specific Deductible	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000
Renewal Rate Cap	60%	60%	50%	45%	45%	50%	50%	50%	60%
No New Laser	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Proposed Lasers	No	No	No	No	No	No	No	No	No
Specific Annual Maximum	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Specific Lifetime Maximum Liability	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Aggregating Specific Stop Loss (\$)	\$473,565	\$473,565	\$473,565	\$475,000	\$475,000	\$473,565	\$473,565	\$473,565	\$473,565
REINSURANCE COSTS									
Specific Premium									
Employee (12000)	\$15.71	\$13.88	\$13.03	\$13.35	\$12.56	\$15.09	\$13.87	\$14.82	\$15.71
Employee + Spouse (1104)	\$15.71	\$13.88	\$13.03	\$13.35	\$12.56	\$15.09	\$13.87	\$14.82	\$15.71
Employee + Child(ren) (1237)	\$15.71	\$13.88	\$13.03	\$13.35	\$12.56	\$15.09	\$13.87	\$14.82	\$15.71
Family (6990)	\$15.71	\$13.88	\$13.03	\$13.35	\$12.56	\$15.09	\$13.87	\$14.82	\$15.71
Monthly Reinsurance Total	\$335,110	\$296,074	\$277,943	\$284,769	\$267,917	\$321,885	\$295,861	\$316,125	\$335,110
Annual Reinsurance Total	\$4,021,320	\$3,552,891	\$3,335,315	\$3,417,226	\$3,215,008	\$3,862,617	\$3,550,332	\$3,793,505	\$4,021,320
Dollar Increase From Current	N/A	-\$468,429	-\$686,005	-\$604,094	-\$806,312	-\$158,703	-\$470,988	-\$227,815	\$0
Percentage Increase From Current	N/A	-11.65%	-17.06%	-15.02%	-20.05%	-3.95%	-11.71%	-5.67%	0.00%
ADDITIONAL CLAIMS RISK									
Additional Laser Liability and Agg Spec	\$473,565	\$473,565	\$473,565	\$475,000	\$475,000	\$473,565	\$473,565	\$473,565	\$473,565
Total Dollar Increase From Current	N/A	-\$468,429	-\$686,005	-\$602,659	-\$804,877	-\$158,703	-\$470,988	-\$227,815	\$0
Percentage Increase From Current	N/A	-10.42%	-15.26%	-13.41%	-17.91%	-3.53%	-10.48%	-5.07%	0.00%

Current Deductible: Specific Stop Loss Marketing



EBC (21,331 Employees)	Current Symetra	Firm Quote Expires 03/07/25 Renewal LAFO Symetra	Firm Quote Expires 04/10/25 Option 2 BAFO BCBSIL (Paid)
Specific Individual Stop Loss			
Contract Basis	Paid	Paid	Paid
Run-in Limit	No	No	No
Contract Includes	Medical & Rx	Medical & Rx	Medical & Rx
Specific Deductible	\$1,000,000	\$1,000,000	\$1,000,000
Renewal Rate Cap	60%	50%	45%
No New Laser	Yes	Yes	Yes
Proposed Lasers	No	No	No
Specific Annual Maximum	Unlimited	Unlimited	Unlimited
Specific Lifetime Maximum Liability	Unlimited	Unlimited	Unlimited
Aggregating Specific Stop Loss (\$)	\$473,565	\$473,565	\$475,000
REINSURANCE COSTS			
Specific Premium			
Employee (12000)	\$15.71	\$13.03	\$12.56
Employee + Spouse (1104)	\$15.71	\$13.03	\$12.56
Employee + Child(ren) (1237)	\$15.71	\$13.03	\$12.56
Family (6990)	\$15.71	\$13.03	\$12.56
Monthly Reinsurance Total	\$335,110	\$277,943	\$267,917
Annual Reinsurance Total	\$4,021,320	\$3,335,315	\$3,215,008
Dollar Increase From Current	N/A	-\$686,005	-\$806,312
Percentage Increase From Current	N/A	-17.06%	-20.05%
ADDITIONAL CLAIMS RISK			
Additional Laser Liability and Agg Spec	\$473,565	\$473,565	\$475,000
Total Dollar Increase From Current	N/A	-\$686,005	-\$804,877
Percentage Increase From Current	N/A	-15.26%	-17.91%

Stop Loss Executive Summary

Renewal Symetra

Total fixed costs decreasing -17% for approximate annual decrease of \$686,005

- Symetra also offered a potential dividend for a load to renewal of approx. \$41,000
- Potential dividend of approx. \$400,000 (no stop loss reimbursements)
- **Symetra renewal includes:**
 - Aggregating Specific \$473,565
 - No lasers with renewal rate cap at 50%

Market Results & Competitive quote from HCSC (BCBSIL)

- Declined to Quote (DTQ) due to uncompetitive rates: BCS Financial, HM Life Insurance, Tokio Marine, Optum
- Provided proposals: HCSC, Sun Life, Voya and Wellpoint, with HCSC being competitive

HCSC total costs decreasing -20% for approximate annual decrease of \$806,312

- **HCSC quote includes:**
- Aggregating Specific \$475,000
- No lasers with renewal rate cap at 45%

Stop Loss Executive Summary

Rate Histories and Loss Ratios

2021/2022

- **Rate-** \$13.09 with a 25% increase from previous policy year
- **Loss Ratio-** 0% with \$0 in claim reimbursements

2022/2023

- **Rate-** \$13.76 with a 5% increase from previous policy year
- **Loss ratio-** 40% with \$1,228,403 in claim reimbursements

2023/2024

- **Rate-** \$14.45 with a 5% increase previous policy year
- **Loss Ratio-** 31% with \$1,090,674 in claim reimbursements

Current YTD

- **Rate-** \$15.71 with a 9% increase from previous policy year
- **Loss Ratio-** 0% (thru 12/31) with \$0 in claim reimbursements

High-Cost Claim Trends

Top 20 Conditions

- 72% of all stop-loss claims came from the top 10 conditions.
- Cardiovascular has moved to the #2 spot for highest reimbursement over the four-year view: Leukemia, Lymphoma, and Multiple Myeloma is now #3
- During 2019-2022, policy years, 87% of employers experienced a high-cost claim

High-Cost Injectable Drugs

- Five new drugs are on the 20 high-cost injectable drugs list in 2023; 2 are used primarily in the treatment of cancer, 1 for immunodeficiency disorders, one for gout, 1 for blood disorders
- The top 10 injectable drugs all had over \$10M in total spend; Keytruda still at #1 with \$69.7M in spend

\$1.5 Million+ Claims

- Million-dollar claims rose 8% on a claims per million covered employees basis over the past year and are up 50% over the last 4 years
- 32 members had a claim over \$3M; 9 of those claims were over \$4M, with the highest claim over \$11M
- 16 of 32 of our members with a \$3M+ claim were impacted by Congenital Anomalies

Newborn Care And Congenital Anomalies

With The Higher-than-average Female Population, Newborn Care And The Associated Costs Need To Be Monitored And Managed

- In 2023, over 500 members had Newborn/Infant Care claims (avg. cost \$470.8K) and over 400 had Congenital Anomaly claims (avg. cost \$236.2K).
- Newborn/Infant Care had the 5th highest million-dollar+ claims and ranked 3rd in high-cost stop-loss reimbursements.
- Nationally, congenital anomalies affect 3% of babies and 1.4 million adults live with congenital heart defects.
- High-risk births can have significant financial impact but holistic care and services in early years can improve outcomes and help manage long-term costs.

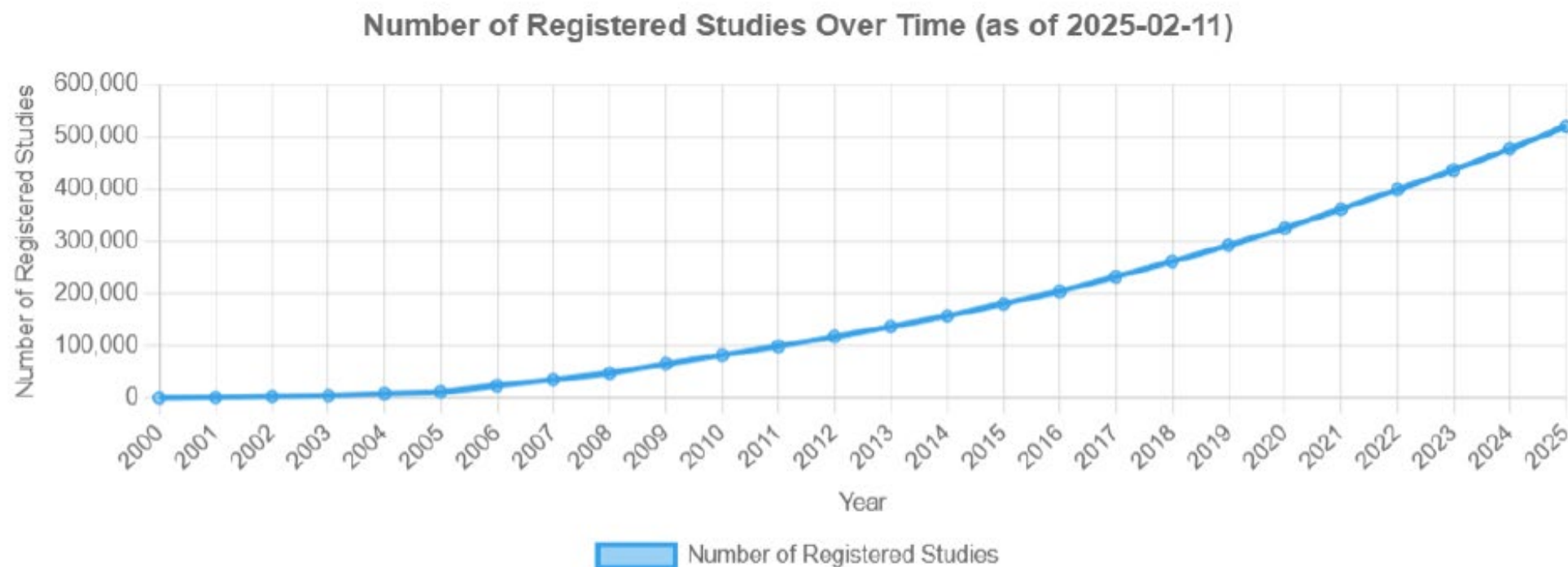
Since 2020, we've seen a:

37.2%
Increase in newborn claims

23.8%
Increase in congenital anomaly claims

What is coming?

Clinical Trials on the Rise



- Approximately 3,900 gene therapy trials ongoing or completed worldwide across 46 countries. The US has the majority at 2,054
- 112,200 studies on cancer (including completed, terminated/withdrawn, active)
- 13,651 in Autoimmune Diseases
- 63,065 in Cardiovascular Diseases

Cell and Gene Therapy Costs

List Prices of Select FDA-Approved Cell and Gene Therapies



A report in *Nature* from April of 2024 concluded that the annual cost of cell and gene therapies averaged \$20.4 billion per year.

Thank you

Chuck Bertolina, Division Vice President, Stop Loss & Captives

©2025 ARTHUR J. GALLAGHER & CO.



Gallagher

Insurance | Risk Management | Consulting

EDUCATIONAL BENEFIT COOPERATIVE

Proposed Budget
For the Year Ending June 30, 2026

	Seven Months Ended January 31, 2025	Projected Twelve Months Ending June 30, 2025	Budget Year Ending June 30, 2025	Proposed Budget Year Ending June 30, 2026
Operating revenues				
Member contributions:				
Health - PPO	\$ 249,075,790	\$ 426,987,069	\$ 392,484,369	\$ 458,745,974
Health - HMO	97,990,137	167,983,092	150,455,907	174,993,009
Dental	8,723,714	14,954,938	14,575,360	15,766,093
Life	1,697,681	2,910,310	2,700,000	3,200,000
Total	357,487,322	612,835,409	560,215,636	652,705,076
Wellness credit	250,000	250,000	250,000	1,000,000
Total operating revenues	357,737,322	613,085,409	560,465,636	653,705,076
Operating expenses				
PPO Claims Payments	240,807,416	412,812,713	371,507,450	435,887,826
HMO Claims Payments	64,991,234	111,413,544	97,603,840	116,929,737
HMO Physician service fees	26,918,334	46,145,715	40,821,551	43,864,516
Excess Carrier Stop-Loss Premiums	5,270,173	9,034,582	8,876,563	9,097,025
Total Medical Insurance/Claims	337,987,157	579,406,554	518,809,404	605,779,104
Life Insurance Premiums	1,697,681	2,910,310	2,700,000	3,200,000
Dental Claims Payments	8,107,023	13,897,754	14,008,203	15,164,776
Total Insurance/Claims Disbursements	347,791,861	596,214,618	535,517,607	624,143,880
Administration fees	9,742,804	16,701,950	14,913,652	17,022,894
Healthcare reform fees/reporting	154,486	264,833	269,011	310,826
Member rewards/incentives	238,569	408,975	216,475	413,344
BVA (Benefit Value Advisor)	297,282	509,626	458,901	512,304
Cobra administration	137,977	236,532	222,236	236,360
Consulting/GBS fees	2,734,137	4,738,407	4,195,103	4,839,797
Wellness	1,024,184	1,222,000	1,222,000	1,400,000
Wellness incentive rebate	-	1,413,000	1,413,000	1,700,000
Billing and eligibility administration	750,463	1,286,508	1,237,688	1,317,830
Dependent audit	308,838	308,838	274,828	125,000
Teladoc	388,810	666,531	692,000	760,000
Bank fees	51,319	87,975	90,000	95,000
Accounting fees	145,775	252,150	250,000	265,000
Audit fees	13,800	13,800	14,000	15,000
Legal fees	4,174	7,155	5,000	5,000
Surety/fidelity bond fees	31,680	54,309	50,000	55,000
Total operating expenses	363,816,159	624,387,207	561,041,501	653,217,235
Operating income (loss)	(6,078,837)	(11,301,798)	(575,865)	487,841
Nonoperating revenues (expenses)				
Realized investment income (loss)	2,478,799	4,249,370	3,000,000	4,200,000
Unrealized fair value gain (loss)	1,034,314	1,773,110	-	-
Total nonoperating revenue (expenses)	3,513,113	6,022,480	3,000,000	4,200,000
Net change in net position	(2,565,724)	(5,279,318)	\$ 2,424,135	\$ 4,687,841
Net position, beginning of period	38,482,952	38,482,952		
Net position, end of period	\$ 35,917,228	\$ 33,203,634		

EBC
Analysis of Revenues, Expenses and Net Position
FYE 2016 - 2026 Budget

	<u>2016 *</u>	<u>2017 *</u>	<u>2018 *</u>	<u>2019 *</u>	<u>2020 *</u>	<u>2021 *</u>	<u>2022 *</u>	<u>2023 *</u>	<u>2024*</u>	<u>Projected 2025 @</u>	<u>Budget 2026</u>
Revenues	\$ 284,829,439	\$ 308,377,792	\$ 368,470,124	\$ 377,129,555	\$ 413,508,882	\$ 441,603,087	\$ 437,305,751	\$ 471,563,005	\$ 556,996,565	\$ 619,107,889	\$657,905,076
Expenses	287,061,073	305,543,316	355,434,255	372,639,598	397,794,792	431,844,501	480,081,428	498,188,191	531,746,082	624,387,207	653,217,235
Actual/Projected net income/(loss)	\$ (2,231,634)	\$ 2,834,476	\$ 13,035,869	\$ 4,489,957	\$ 15,714,090	\$ 9,758,586	\$ (42,775,677)	\$ (26,625,186)	\$ 25,250,483	\$ (5,279,318)	N/A
Budgeted net income/(loss)	(4,269,621)	(4,690,185)	(1,164,502)	(1,310,511)	(865,635)	(747,441)	(6,768,182)	(2,369,878)	(1,934,822)	2,424,135	4,687,841
Net position - total	\$ 40,662,239	\$ 43,496,715	\$ 56,532,584	\$ 61,022,541	\$ 76,736,631	\$ 86,495,217	\$ 43,719,540	\$ 17,094,354	\$ 42,344,837	\$ 33,203,634	\$ 37,891,475
Net position - total - as % of expenses	14.17%	14.24%	15.91%	16.38%	19.29%	20.03%	9.11%	3.43%	7.96%	5.32%	5.80%

* - excludes fair value adjustments

@ - projection based upon January 25 financial statements



Annual Approval Motion

Date: March 19, 2025

I move that the following items be approved in the 2025-2026 EBC final renewal:

- Contribution adjustments from the members for the fiscal year beginning July 1, 2025 be set at 6.9% for PPO, 5.2% for HMO, and 4.0% for dental
- Gallagher Five-Year Contract commencing 7/1/2025
- Hinge Health commencing 7/1/2025
- Stop Loss contract with BCBS (HCSC) commencing 7/1/2025
- Proposed budget for 2025-2026

That no funds be allocated this fiscal year from reserve funds (working cash), and that contribution fees be collected from each Member in accordance with this motion.



Gallagher

Insurance | Risk Management | Consulting



DISCLOSURES

Reliance Standard Life Insurance Company

Coverage	Life, AD&D, Dependent Life and AD&D, Supplemental Life and AD&D, and LTD
Funding Type	Insured
Insurer	Reliance Standard Life Insurance Company
AM Best Rating	A++ (Superior)

Blue Cross Blue Shield of Illinois, Symetra, and Metropolitan Life Insurance Company

Symetra - Stop-Loss Policy Provisions

Symetra has agreed the employer's plan document will be used for claim determination purposes.

While Gallagher does not guarantee the financial viability of any health insurance carrier or market, it is an area we recommend that clients closely scrutinize when selecting a health insurance carrier. There are a number of rating agencies that can be referred to including, A.M. Best, Fitch, Moody's, Standard & Poor's, and Weiss Ratings (The Street.com). Generally, agencies that provide ratings of Health Insurers, including traditional insurance companies and other managed care organizations, reflect their opinion based on a comprehensive quantitative and qualitative evaluation of a company's financial strength, operating performance and market profile. However, these ratings are not a warranty of an insurer's current or future ability to meet its contractual obligations.

This analysis is for illustrative purposes only, and is not a proposal for coverage or a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future healthcare costs including utilization patterns, catastrophic claims, changes in plan design, healthcare trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. See your policy or contact us for specific information or further details in this regard.

Gallagher may receive supplemental compensation from insurance carriers and vendors, normally calculated at the end of each calendar year, that are contingent on a number of factors including the overall number of employer plans represented, plan retention rates, and overall premium growth. Historically, supplemental compensation has ranged, on average, between 0-3% based on specific carrier programs. These plans have no effect on premiums. Further, Gallagher may receive non-cash compensation from plan vendors or service providers that are not in connection with any particular client. If you have any questions regarding direct or indirect compensation received by Gallagher, please contact your dedicated Gallagher advisor or refer to the Gallagher Global Standards of Business Conduct (<https://www.ajg.com/us/about-us/global-standards>).



Gallagher

Insurance | Risk Management | Consulting

Gallagher Benefit Services Contact	Role	Phone	Email
John Araujo Area President, Illinois Branch	Executive Contact	630-353-2308	john_araujo@ajg.com
Dania Aviles Sr. Account Manager	Account Management	847-378-2921	danialaviles@ajg.com
Miriam Bates Benefit Consultant	Account Management	630-694-5350	miriam_bates@ajg.com
Nancy Bellosa Sr. Benefit Consultant	Account Management	630-285-3991	nancy_bellosa@ajg.com
Alyssa De Long Sr. Account Manager	Account Management	630-239-2337	alyssa_delong@ajg.com
Mel Diaz Area Exec. Vice President	Strategic Lead Account Management	630-285-4195	mel_diaz@ajg.com
Victoria Dowling Area Sr. Vice President	Manager Account Management	630-285-3604	victoria_dowling@ajg.com
Allison Evors Sr. Benefit Consultant	Account Management	630-228-6759	allison_evors@ajg.com
Brian Franz Account Manager	Account Management	847-378-5920	brian_franz@ajg.com
Brian Lomas Regional President, Great Lakes	Executive Contact	630-694-5256	brian_lomas@ajg.com
Cindy Maloberti Benefit Consultant	Account Management	847-378-5849	cindy_maloberti@ajg.com
Erica Mendoza Sr. Benefit Consultant	Account Management	630-647-3086	erica_mendoza@ajg.com
Lesley Pasillas Account Manager	Account Management	630-285-4240	lesley_pasillas@ajg.com
Amna Siddiqui Account Manager	Account Management	630-228-6770	amna_siddiqui@ajg.com
Kelsey Smith Benefit Consultant	Account Management	630-647-3074	kelsey_smith@ajg.com

EBC Executive Committee March 2025

Executive Committee Member	Contact Info	Term	Comment
Jeff Feyerer <i>Chairperson</i> Fairview SD 72	Email: jfeyerer@fairview.k12.il.us Phone: 847-929-1050	7/1/17 - 6/30/18 7/1/18 – 6/30/20 7/1/18 – 6/30/19 7/1/19 – 6/30/21 7/1/21 – 6/30/23 7/1/23 – 6/30/25	Appointed (At-Large) Re-elected (At-Large) Appointed (Vice-Chair) Re-elected (Vice-Chair) Elected (Chair) Re-elected (Chair)
Jessica Donato <i>Vice-Chairperson</i> Northbrook SD 28	Email: jdonato@northbrook.net Phone: 847-504-3403	1/1/22– 6/30/22 7/1/22 – 6/30/24 7/1/24 – 6/30/25	Appointed (At-Large) Re-elected (At-Large) Appointed (Vice-Chair)
Tage Shumway <i>Treasurer</i> SWCCCASE	Email: tshumway@swcccase.org Phone: 708-342-5336	7/1/16 – 6/30/18 7/1/18 – 6/30/20 7/1/18 – 6/30/19 7/1/19 – 6/30/21 7/1/21 – 6/30/23 7/1/23 – 6/30/25	Elected (At-Large) Re-elected (At-Large) Appointed (Treasurer) Re-elected (Treasurer) Re-elected (Treasurer) Re-elected (Treasurer)
Jordi Camps <i>At-Large Member</i> East Maine SD 63	Email: jcamps@emsd63.org Phone: 847-493-8402	7/1/20– 6/30/22 7/1/22 – 6/30/24 7/1/24 – 6/30/26	Elected (At-Large) Re-elected (At-Large) Re-elected (At-Large)
Mike Loftin <i>At-Large Member</i> Oak Lawn-Hometown SD 123	Email: mloftin@d123.org Phone: 708-952-4284	8/1/23– 6/30/24 7/1/24 – 6/30/26	Appointed (At-Large) Re-elected (At-Large)
Barbara Germany <i>At-Large Member</i> Lemont-Bromberek SD 113A	Email: bgermany@sd113a.org Phone: 630-257-2286	7/1/24– 6/30/26	Elected (At-Large)
Abe Singh <i>At-Large Member</i> Grayslake HSD 127	Email: asingh@d127.org Phone: 847-986-3445	7/1/24– 6/30/26	Appointed (At-Large)