

Disclaimer

The information contained in this report is for general information purposes only. The information is provided by USI Insurance Services and while we endeavor to keep the information up to date and correct, we make no representations or warranties of any kind, express or implied, about the completeness, accuracy, reliability, suitability or availability with respect to the report or the information, products, services, or related graphics contained in the report for any purpose. Please refer to the policy contract for specific terms, conditions, limitations and exclusions. Any reliance you place on such information is therefore strictly at your own risk.

In no event will we be liable for any loss or damage including without limitation, indirect or consequential loss or damage, or any loss or damage whatsoever arising from loss of data or profits arising out of, or in connection with, the use of this report.

USI Insurance Services is not a guarantor of the solvency of carriers with which business is placed. Any carrier with an A.M. Best financial rating lower than A- does not meet the minimum financial requirements for USI's Errors & Omissions insurance. In the absence of a rating by A.M. Best, or in the case of an NR designation, a Standard & Poor Company rating lower than A will apply. A liability waiver must be signed by the client if insurance coverage is placed with a carrier that does not meet the required financial rating.

In this report you may view information which is not under the control of USI Insurance Services. We have no control over the nature, content and availability of that information. The inclusion of information does not necessarily imply a recommendation or endorse the views expressed within them.

Commissions and Fees

As a licensed insurance producer, USI is authorized to confer with or advise our clients and prospective clients concerning substantive benefits, terms or conditions of insurance contracts, to sell insurance and to obtain insurance coverages for our clients. Our compensation for placement of insurance coverage, unless otherwise specifically negotiated and agreed to with our client, is customarily based on commission calculated as a percentage of the premium collected by the insurer and is paid to us by the insurer. We may also receive from insurers and insurance intermediaries (which may include USI affiliated companies) additional compensation (monetary and non-monetary) based in whole or in part on the insurance contract we sell, which is contingent on volume of business and/or profitability of insurance contracts we supply to them and/or other factors pursuant to agreements we may have with them relating to all or part of the business we place with those insurers or through those intermediaries. Some of these agreements with insurers and/or intermediaries include financial incentives for USI to grow its business or otherwise strengthen the distribution relationship with the insurer or intermediary. Such agreements may be in effect with one or more of the insurers with whom your insurance is placed, or with the insurance intermediary we use to place your insurance. You may obtain information about the nature and source of such compensation expected to be received by us, and, if applicable, compensation expected to be received on any alternative quotes pertinent to your placement upon your request.

USI values your feedback regarding compliance with our disclosure policy. You may contact the toll-free USI Compliance Hotline (866-657-0861) at any time, and your call will be referred to applicable company management for further investigation.

USI Insurance Services Copyright

The contents of this USI Insurance Services report are protected by applicable copyright laws. No permission is granted to copy, distribute, modify, post or frame any text, graphics, data, content, design or logos.

All information and content in this USI Insurance Services report is subject to applicable statutes and regulations, furnished "as is," without warranty of any kind, express or implied, including but not limited to implied warranties of merchantability, fitness for a particular purpose, or noninfringement.





Table of Contents

I.	Medical Experience	4
II.	Dental Experience	11



City of Manitowoc
Medical / Rx Plan
Experience Dashboard
Experience Period Ending 05/31/2022

Experience Summary	2021	2022 YTD	2022 Annualized	Δ from Prior
Net Paid Claims	\$2,656,244	\$943,977	\$2,265,544	-14.7%
Actual Net Cost	\$3,138,094	\$1,178,406	\$2,828,174	-9.9%
Budget	\$3,114,318	\$1,255,161	\$3,012,387	-3.3%
Actual Net Cost to Budget	100.8%	93.9%	93.9%	
Gross Rx Claims to Total Net Claims	19.7%	16.2%	16.2%	
Net Claims PEPY	\$13,292	\$4,802	\$11,524	-13.3%
Average Employees	200	197	197	-1.6%

Observations

For the current experience period of Jan 1, 2022 to May 31, 2022, the group is currently

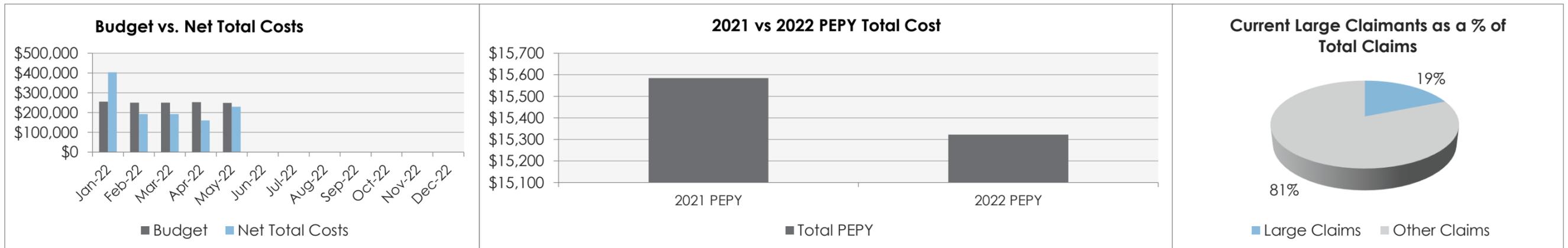
- There are several large claimants over \$50,000, making up 18.9% of the total claims. Typically, high cost claimants make up 20% to 35% of total claims.
- Prescription drug claims currently account for 16.2% of total claims.

Large Claimants	2021	2022 YTD
Number of Large Claimants (>\$50,000)	6	3
Total Paid for Large Claimants (>\$50,000)	\$1,118,260	\$178,176
Claimants Over SSL (>\$100,000)	6	0
Total Paid Over SSL (>\$100,000)	\$518,260	\$0

Actual Net Cost to Budget: 93.9%



Note: Information is currently being pulled from the Large Claims By Month tabs

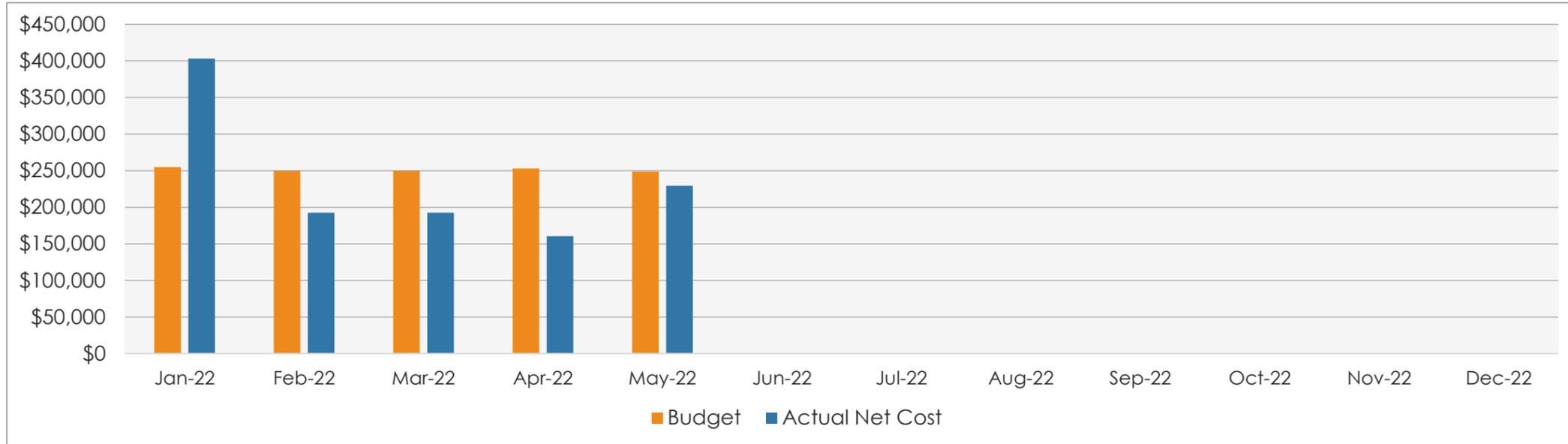


Notes

1. PEPY = Per Employee Per Year



City of Manitowoc
Medical / Rx Plan - Health Partners
Current Plan Year Cost Summary
January 2022 through December 2022



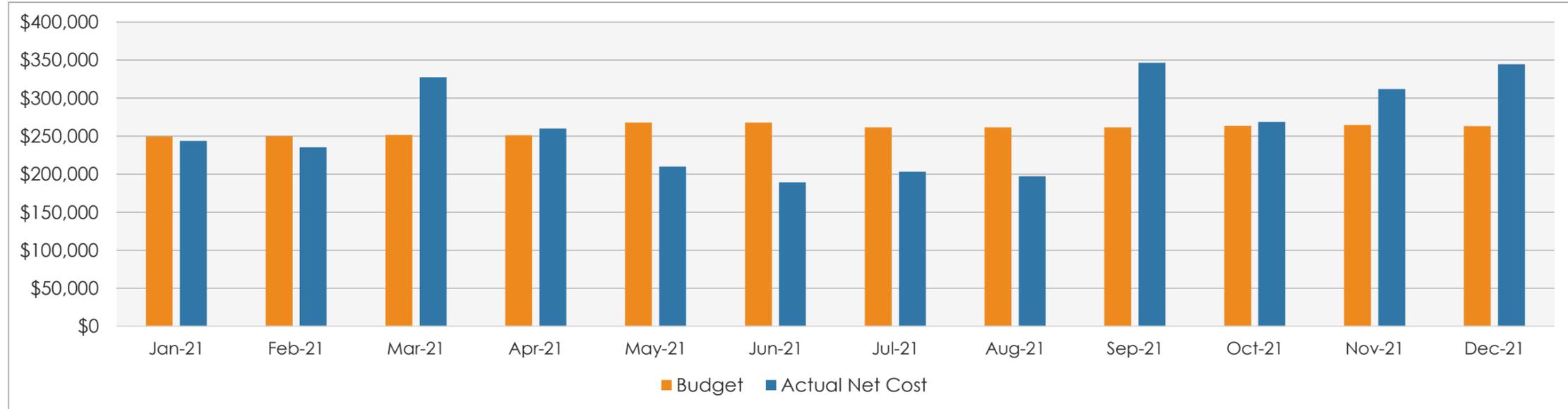
	Enrollment	Fixed Costs			Paid Claims						Total Plan Costs		Position	
	(1)	(2)	(3)	(4) = 2+3	(5)	(6)	(7)	(8)	(9) = 5+6+7+8	(10) = 9/1	(11) = 4+9	(12)	(13) = 11/12	(19) = 12-11
	Total Ees	Admin Fees	Stop Loss Premium	Total	Medical Claims	Rx Claims	Misc*	Over SSL	Net Total Claims	Claims / Ee	Actual Net Cost	Budget	Net Cost / Budget	Budget - Net Cost
Jan-22	199	\$10,227	\$37,312	\$47,539	\$295,664	\$17,285	\$42,835	\$0	\$355,784	\$1,788	\$403,323	\$254,806	158.3%	(\$148,518)
Feb-22	195	\$10,088	\$36,528	\$46,616	\$107,389	\$30,335	\$8,002	\$0	\$145,726	\$747	\$192,342	\$249,469	77.1%	\$57,126
Mar-22	195	\$10,088	\$36,528	\$46,616	\$103,377	\$33,368	\$9,258	\$0	\$146,002	\$749	\$192,619	\$249,469	77.2%	\$56,850
Apr-22	199	\$10,196	\$37,012	\$47,207	\$73,619	\$31,983	\$7,781	\$0	\$113,383	\$570	\$160,590	\$252,902	63.5%	\$92,312
May-22	195	\$10,073	\$36,378	\$46,450	\$134,643	\$40,304	\$8,134	\$0	\$183,082	\$939	\$229,532	\$248,517	92.4%	\$18,985
Jun-22														
Jul-22														
Aug-22														
Sep-22														
Oct-22														
Nov-22														
Dec-22														
Totals	983	\$50,672	\$183,757	\$234,429	\$714,692	\$153,275	\$76,009	\$0	\$943,977	\$960	\$1,178,406	\$1,255,161	93.9%	\$76,756

Notes

- 1. Aggregate corridor is 125%. Specific Stop Loss is \$100,000.
- 2*. Misc Paid Claims includes Shared Savings, Clinic and ER HSA Contributions



City of Manitowoc
Medical / Rx Plan - Health Partners
Prior Plan Year Cost Summary
January 2021 through December 2021



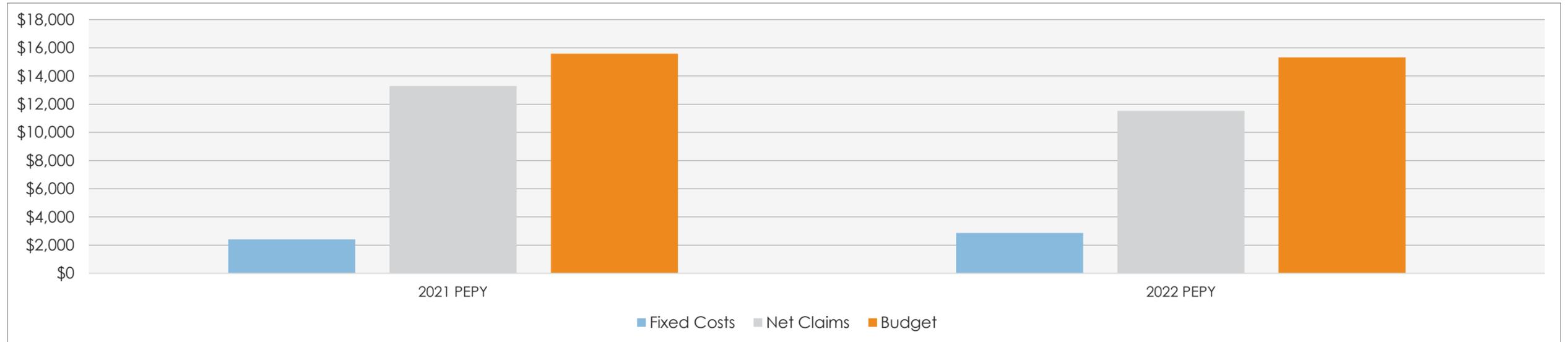
	Enrollment	Fixed Costs			Paid Claims						Total Plan Costs		Position	
	(1)	(2)	(3)	(4) = 2+3	(5)	(6)	(7)	(8)	(9) = 5+6+7+8	(10) = 9/1	(11) = 4+9	(12)	(13) = 11/12	(14) = 12-11
	Total Ees	Admin Fees	Stop Loss Premium	Total	Medical Claims	Rx Claims	Misc*	Over SSL	Net Total Claims	Claims / Ee	Actual Net Cost	Budget	Net Cost / Budget	Budget - Net Cost
Jan-21	192	\$10,052	\$28,688	\$38,740	\$133,429	\$17,021	\$54,512	\$0	\$204,961	\$1,068	\$243,701	\$249,511	97.7%	\$5,811
Feb-21	193	\$10,075	\$28,753	\$38,828	\$174,569	\$13,957	\$8,164	\$0	\$196,690	\$1,019	\$235,517	\$250,132	94.2%	\$14,614
Mar-21	194	\$10,113	\$28,936	\$39,050	\$268,675	\$31,299	\$7,726	(\$19,406)	\$288,294	\$1,486	\$327,343	\$251,704	130.1%	(\$75,639)
Apr-21	193	\$10,090	\$28,871	\$38,961	\$217,063	\$41,800	\$7,327	(\$45,136)	\$221,054	\$1,145	\$260,016	\$251,083	103.6%	(\$8,932)
May-21	205	\$10,523	\$30,833	\$41,356	\$154,681	\$47,484	\$6,652	(\$40,212)	\$168,605	\$822	\$209,961	\$268,046	78.3%	\$58,085
Jun-21	205	\$10,523	\$30,833	\$41,356	\$138,004	\$46,495	\$6,593	(\$43,110)	\$147,982	\$722	\$189,338	\$268,046	70.6%	\$78,708
Jul-21	202	\$10,375	\$30,048	\$40,423	\$108,479	\$40,259	\$56,728	(\$42,653)	\$162,813	\$806	\$203,236	\$261,426	77.7%	\$58,190
Aug-21	202	\$10,375	\$30,048	\$40,423	\$132,388	\$57,338	\$6,744	(\$39,810)	\$156,660	\$776	\$197,084	\$261,426	75.4%	\$64,342
Sep-21	202	\$10,375	\$30,048	\$40,423	\$303,211	\$40,204	\$6,453	(\$43,614)	\$306,254	\$1,516	\$346,677	\$261,426	132.6%	(\$85,252)
Oct-21	204	\$10,436	\$30,297	\$40,733	\$292,950	\$40,680	\$6,730	(\$112,436)	\$227,924	\$1,117	\$268,657	\$263,618	101.9%	(\$5,039)
Nov-21	204	\$10,452	\$30,414	\$40,867	\$250,141	\$58,138	\$6,815	(\$43,830)	\$271,263	\$1,330	\$312,130	\$264,570	118.0%	(\$47,560)
Dec-21	202	\$10,407	\$30,284	\$40,690	\$295,977	\$89,213	\$6,609	(\$88,054)	\$303,744	\$1,504	\$344,434	\$263,330	130.8%	(\$81,105)
Totals	2,398	\$123,796	\$358,054	\$481,850	\$2,469,565	\$523,886	\$181,054	(\$518,260)	\$2,656,244	\$1,108	\$3,138,094	\$3,114,318	100.8%	(\$23,776)

Notes

- 1. Aggregate corridor is 125%. Specific Stop Loss is \$100,000.
- 2*. Misc Paid Claims includes Shared Savings, Clinic and ER HSA Contributions



**City of Manitowoc
Medical / Rx Plan
Historical Cost Summary**



Time Period	Average Employees	Admin Fees	Stop Loss Premium	Total Fixed Costs	Gross Medical Claims	Gross Rx Claims	Misc*	Claims Over SSL	Total Net Claims	Total Net Plan Costs	Budget	Net Cost/Budget
2021 Plan Year	200	\$123,796	\$358,054	\$481,850	\$2,469,565	\$523,886	\$181,054	(\$518,260)	\$2,656,244	\$3,138,094	\$3,114,318	100.8%
2022 YTD Annualized	197	\$121,613	\$441,016	\$562,630	\$1,715,261	\$367,860	\$182,423	\$0	\$2,265,544	\$2,828,174	\$3,012,387	93.9%

Time Period	Fixed Costs	Change from Prior Year	Net Claims	Change from Prior Year	Budget	Change from Prior Year
2021 PEPY	\$2,411	n/a	\$13,292	n/a	\$15,585	n/a
2022 PEPY	\$2,862	18.7%	\$11,524	-13.3%	\$15,322	-1.7%

Notes

1. PEPY = Per Employee Per Year

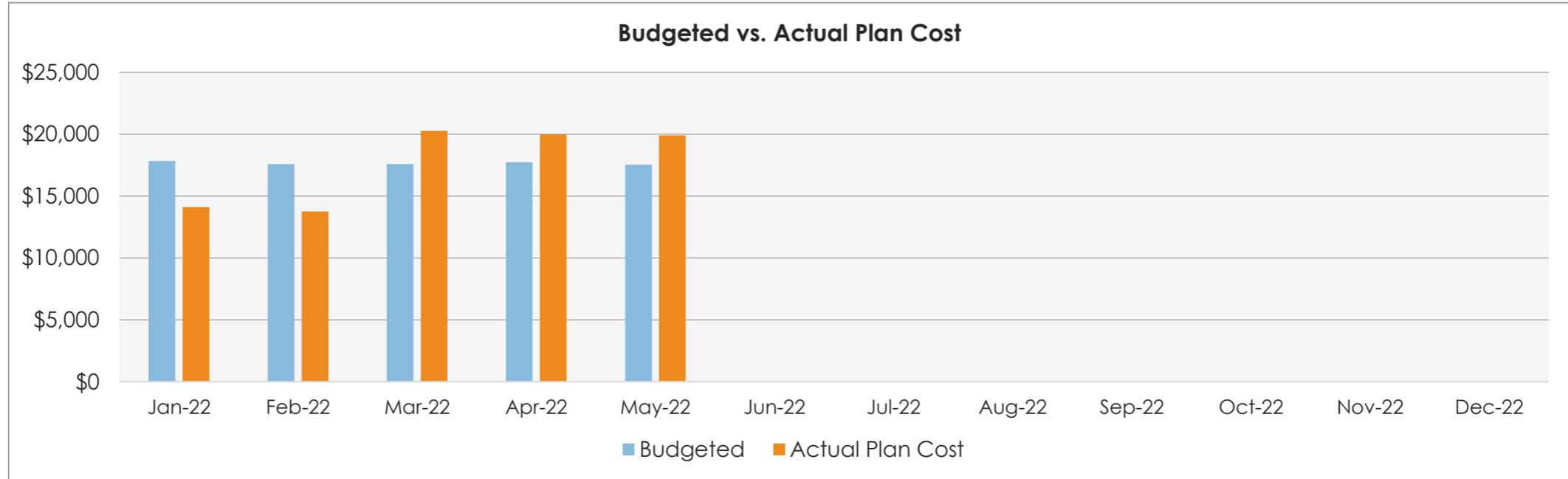


Section II

Dental Experience



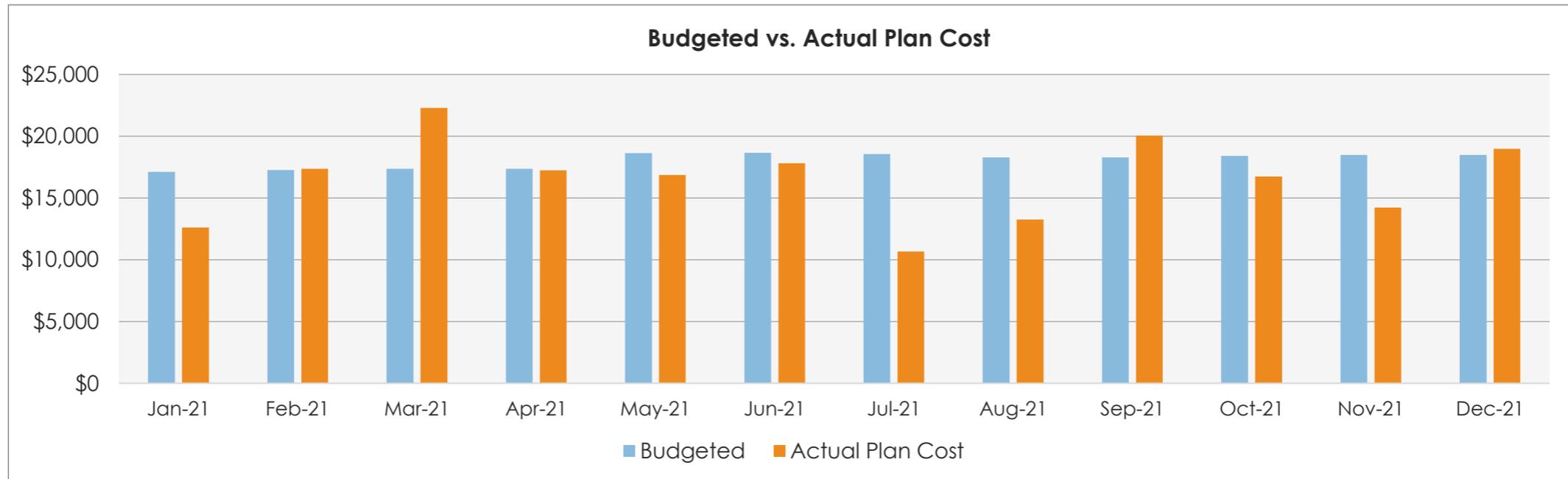
City of Manitowoc
 Dental Plan - Delta Dental
 2022 Cost Summary



	Enrollment (1)	Fixed Costs (2)	Claims (3)	Claims (4)	Claims PEPM (5) = 4/1	Total Plan Costs (6) = 2+4	Position (7) = 6/3 (8) = 3-6	
	Total Ees	Administration	Budgeted	Paid Dental Claims	Claims / Ee	Actual	Actual/Budgeted	Budgeted to Actual Costs
Jan-22	200	\$900	\$17,841	\$13,215	66	\$14,115	79.1%	\$3,726
Feb-22	197	\$887	\$17,575	\$12,863	65	\$13,750	78.2%	\$3,826
Mar-22	197	\$887	\$17,575	\$19,396	98	\$20,283	115.4%	(\$2,707)
Apr-22	201	\$905	\$17,736	\$19,061	95	\$19,966	112.6%	(\$2,230)
May-22	198	\$891	\$17,543	\$19,013	96	\$19,904	113.5%	(\$2,361)
Jun-22								
Jul-22								
Aug-22								
Sep-22								
Oct-22								
Nov-22								
Dec-22								
Totals	993	\$4,469	\$88,271	\$83,548	84	\$88,017	99.7%	\$254



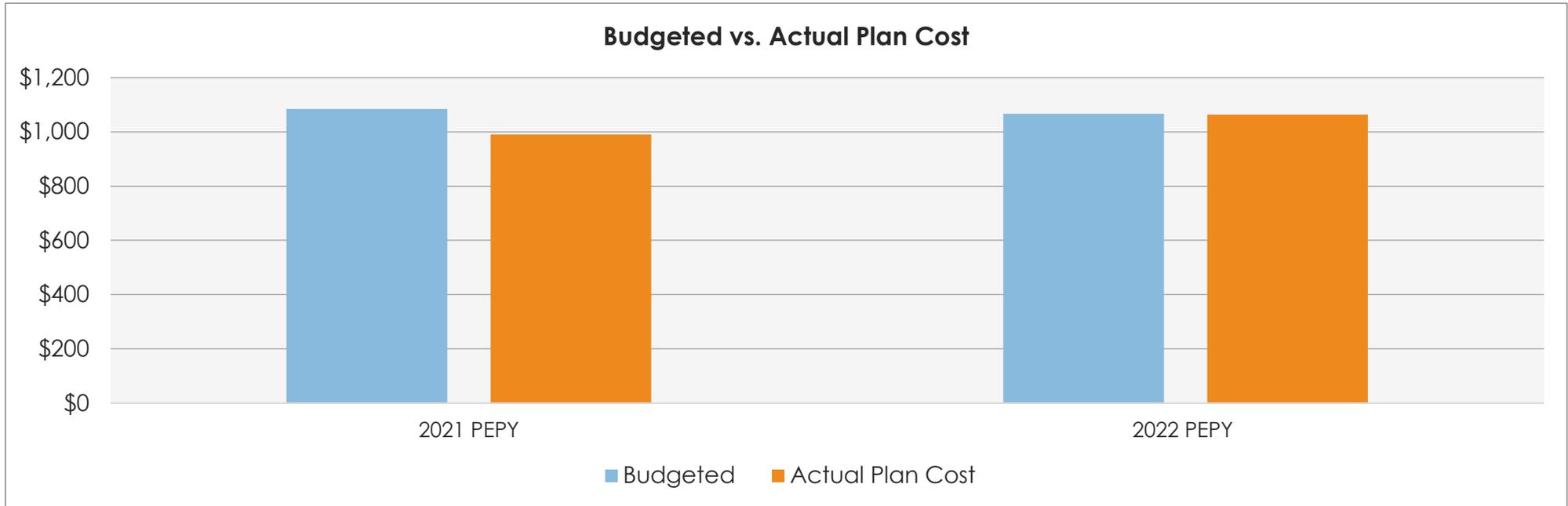
City of Manitowoc
Dental Plan - Delta Dental
2021 Cost Summary



	Enrollment	Fixed Costs	Claims		Claims PEPM	Total Plan Costs	Position	
	(1)	(2)	(3)	(4)	(5) = 4/1	(6) = 2+4	(7) = 6/3	(8) = 3-6
	Total Ees	Administration	Budgeted	Paid Dental Claims	Claims / Ee	Actual	Actual/Budgeted	Budgeted to Actual Costs
Jan-21	189	\$ 850.50	\$ 17,109.15	\$11,756.00	\$62	\$12,606.50	73.7%	\$4,502.65
Feb-21	191	\$ 859.50	\$ 17,262.10	\$16,507.00	\$86	\$17,366.50	100.6%	(\$104.40)
Mar-21	192	\$ 864.00	\$ 17,374.95	\$21,437.00	\$112	\$22,301.00	128.4%	(\$4,926.05)
Apr-21	192	\$ 864.00	\$ 17,374.95	\$16,374.00	\$85	\$17,238.00	99.2%	\$136.95
May-21	205	\$ 922.50	\$ 18,623.75	\$15,946.00	\$78	\$16,868.50	90.6%	\$1,755.25
Jun-21	206	\$ 927.00	\$ 18,663.85	\$16,894.00	\$82	\$17,821.00	95.5%	\$842.85
Jul-21	205	\$ 922.50	\$ 18,551.00	\$9,753.00	\$48	\$10,675.50	57.5%	\$7,875.50
Aug-21	204	\$ 918.00	\$ 18,292.65	\$12,344.00	\$61	\$13,262.00	72.5%	\$5,030.65
Sep-21	204	\$ 918.00	\$ 18,292.65	\$19,141.00	\$94	\$20,059.00	109.7%	(\$1,766.35)
Oct-21	205	\$ 922.50	\$ 18,405.50	\$15,827.00	\$77	\$16,749.50	91.0%	\$1,656.00
Nov-21	205	\$ 922.50	\$ 18,478.25	\$13,304.00	\$65	\$14,226.50	77.0%	\$4,251.75
Dec-21	203	\$ 913.50	\$ 18,470.80	\$18,063.00	\$89	\$18,976.50	102.7%	(\$505.70)
Totals	2,401	\$10,804.50	\$216,899.60	\$187,346.00	\$78	\$198,150.50	91.4%	\$18,749.10



**City of Manitowoc
Dental Plan - Delta Dental
Historical Cost Summary**



Time Period	Average Employees	Paid Claims	Admin Costs	Actual Plan Costs	Budgeted Amount	Actual / Budget
2021 Plan Year	200	\$187,346	\$10,805	\$198,151	\$216,900	91.4%
2022 Annualized	199	\$200,515	\$10,724	\$211,240	\$211,850	99.7%

Time Period	Paid Claims	Admin Costs	Actual Plan Costs	Budgeted Amount
2021 PEY	936	\$54	\$990	\$1,084
2022 PEY	1,010	\$54	\$1,064	\$1,067

Notes

1. The current year is annualized through May.
2. PEY = Per Employee Per Year