

# City of Manitowoc - Medical Funding Analysis Report

**Plan Name:**  
Medical Plan

**Prepared By:** USI Insurance Services  
**Date Prepared:** 08/16/21  
**Plan Year:** 01/01/21 - 12/31/21

**Medical & Rx Carriers:**  
Health Partners & Health Partners

Total Monthly Funding	
Single	Family
\$620.36	\$1,572.20

Total Monthly Fixed Costs	
Single	Family
Administration Fee	\$9.25 / \$25.12
Specific Stop Loss (\$100,000)	\$62.03 / \$173.68
Aggregate Stop Loss	\$3.38 / \$9.46
Wellness Platform / Incentives	\$11.04 / \$11.04
COBRA Fee	\$0.66 / \$0.66
HSA Admin	\$1.85 / \$1.85
<b>Sum of Total Monthly Fixed Costs</b>	<b>\$88.21 / \$221.81</b>

Monthly Enrollment	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Total
Single	55	56	56	55	57	57	59						395
Family	137	137	138	138	148	148	143						989
<b>Total</b>	<b>192</b>	<b>193</b>	<b>194</b>	<b>193</b>	<b>205</b>	<b>205</b>	<b>202</b>						<b>1,384</b>
<b>Total Funding</b>													
Single	34,119.80	34,740.16	34,740.16	34,119.80	35,360.52	35,360.52	36,601.24						\$245,042.20
Family	215,391.40	215,391.40	216,963.60	216,963.60	232,685.60	232,685.60	224,824.60						\$1,554,905.80
<b>Sum of Total Funding</b>	<b>\$249,511.20</b>	<b>\$250,131.56</b>	<b>\$251,703.76</b>	<b>\$251,083.40</b>	<b>\$268,046.12</b>	<b>\$268,046.12</b>	<b>\$261,425.84</b>						<b>\$1,799,948.00</b>
<b>Fixed Costs</b>													
Single	4,851.55	4,939.76	4,939.76	4,851.55	5,027.97	5,027.97	5,204.39						\$34,842.95
Family	30,387.97	30,387.97	30,609.78	30,609.78	32,827.88	32,827.88	31,718.83						\$219,370.09
AFG Consulting Fee	\$3,500.00	\$3,500.00	\$3,500.00	\$3,500.00	\$3,500.00	\$3,500.00	\$3,500.00						\$24,500.00
<b>Sum of Total Fixed Costs</b>	<b>\$38,739.52</b>	<b>\$38,827.73</b>	<b>\$39,049.54</b>	<b>\$38,961.33</b>	<b>\$41,355.85</b>	<b>\$41,355.85</b>	<b>\$40,423.22</b>						<b>\$278,713.04</b>
<b>Claims Costs</b>													
Medical Claims	133,428.60	174,568.73	268,674.52	217,063.03	154,680.68	138,003.70	108,478.63						\$1,194,897.89
Prescription Drug Claims	17,020.78	13,956.73	31,298.57	41,799.78	47,484.47	46,494.74	40,259.09						\$238,314.16
Shared Savings	263.95	1,710.03	818.14	904.67	607.97	118.35	161.39						\$4,584.50
Clinic Expenses	6,247.68	6,454.22	6,908.06	6,422.47	6,043.90	6,474.85	5,966.91						\$44,518.09
ER HSA Contribution	48,000.00	0.00	0.00	0.00	0.00	0.00	50,600.00						\$98,600.00
<b>Sum of Total Claims Costs</b>	<b>\$204,961.01</b>	<b>\$196,689.71</b>	<b>\$307,699.29</b>	<b>\$266,189.95</b>	<b>\$208,817.02</b>	<b>\$191,091.64</b>	<b>\$205,466.02</b>						<b>\$1,580,914.64</b>
<b>Reimbursements</b>													
Specific Excess Loss	0.00	0.00	(19,405.73)	(45,135.73)	(40,211.90)	(43,109.60)	(42,653.26)						(\$190,516.22)
Prescription Drug Rebate	0.00	0.00	0.00	0.00	0.00	0.00	0.00						\$0.00
<b>Sum of Reimbursements</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>(\$19,405.73)</b>	<b>(\$45,135.73)</b>	<b>(\$40,211.90)</b>	<b>(\$43,109.60)</b>	<b>(\$42,653.26)</b>						<b>(\$190,516.22)</b>
<b>Total Costs</b>	<b>\$243,700.53</b>	<b>\$235,517.44</b>	<b>\$327,343.10</b>	<b>\$260,015.55</b>	<b>\$209,960.97</b>	<b>\$189,337.89</b>	<b>\$203,235.98</b>						<b>\$1,669,111.46</b>
<b>Funding Less Costs</b>	<b>\$5,810.67</b>	<b>\$14,614.12</b>	<b>(\$75,639.34)</b>	<b>(\$8,932.15)</b>	<b>\$58,085.15</b>	<b>\$78,708.23</b>	<b>\$58,189.86</b>						<b>\$130,836.54</b>
<b>YTD Plan Performance</b>	<b>\$5,810.67</b>	<b>\$20,424.79</b>	<b>(\$55,214.55)</b>	<b>(\$64,146.70)</b>	<b>(\$6,061.55)</b>	<b>\$72,646.68</b>	<b>\$130,836.54</b>						
<b>YTD % of Total Costs to Funding</b>													92.73%
<b>YTD Average Monthly Cost Per Employee</b>	<b>\$1,269.27</b>	<b>\$1,244.72</b>	<b>\$1,393.02</b>	<b>\$1,381.58</b>	<b>\$1,306.59</b>	<b>\$1,240.17</b>	<b>\$1,206.01</b>						<b>\$1,206.01</b>

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# City of Manitowoc - Dental Funding Analysis Report

**Plan Name:**  
Dental Plan

**Prepared By:** USI Insurance Services  
**Date Prepared:** 08/16/21  
**Plan Year:** 01/01/21 - 12/31/21

**Dental Carriers:**  
Delta Dental

Total Monthly Funding	
Single	Family
\$40.10	\$112.85

	Total Monthly Fixed Costs	
	Single	Family
Administration Fee	\$4.50	\$4.50
<b>Sum of Total Monthly Fixed Costs</b>	<b>\$4.50</b>	<b>\$4.50</b>

Monthly Enrollment	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Total
Single	58	59	59	59	62	63	63						423
Family	131	132	133	133	143	143	142						957
<b>Total</b>	<b>189</b>	<b>191</b>	<b>192</b>	<b>192</b>	<b>205</b>	<b>206</b>	<b>205</b>						<b>1,380</b>

Total Funding	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Total
Single	2,325.80	2,365.90	2,365.90	2,365.90	2,486.20	2,526.30	2,526.30						\$16,962.30
Family	14,783.35	14,896.20	15,009.05	15,009.05	16,137.55	16,137.55	16,024.70						\$107,997.45
<b>Sum of Total Funding</b>	<b>\$17,109.15</b>	<b>\$17,262.10</b>	<b>\$17,374.95</b>	<b>\$17,374.95</b>	<b>\$18,623.75</b>	<b>\$18,663.85</b>	<b>\$18,551.00</b>						<b>\$124,959.75</b>

Fixed Costs	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Total
Single	261.00	265.50	265.50	265.50	279.00	283.50	283.50						\$1,903.50
Family	589.50	594.00	598.50	598.50	643.50	643.50	639.00						\$4,306.50
<b>Sum of Total Fixed Costs</b>	<b>\$850.50</b>	<b>\$859.50</b>	<b>\$864.00</b>	<b>\$864.00</b>	<b>\$922.50</b>	<b>\$927.00</b>	<b>\$922.50</b>						<b>\$6,210.00</b>

Claims Costs	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Total
Dental Claims	11,756.00	16,507.00	21,437.00	16,374.00	15,946.00	16,894.00	9,753.00						\$108,667.00
<b>Sum of Total Claims Costs</b>	<b>\$11,756.00</b>	<b>\$16,507.00</b>	<b>\$21,437.00</b>	<b>\$16,374.00</b>	<b>\$15,946.00</b>	<b>\$16,894.00</b>	<b>\$9,753.00</b>						<b>\$108,667.00</b>

<b>Total Costs</b>	<b>\$12,606.50</b>	<b>\$17,366.50</b>	<b>\$22,301.00</b>	<b>\$17,238.00</b>	<b>\$16,868.50</b>	<b>\$17,821.00</b>	<b>\$10,675.50</b>						<b>\$114,877.00</b>
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<b>Funding Less Costs</b>	<b>\$4,502.65</b>	<b>(\$104.40)</b>	<b>(\$4,926.05)</b>	<b>\$136.95</b>	<b>\$1,755.25</b>	<b>\$842.85</b>	<b>\$7,875.50</b>						<b>\$10,082.75</b>
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<b>YTD Plan Performance</b>	<b>\$4,502.65</b>	<b>\$4,398.25</b>	<b>(\$527.80)</b>	<b>(\$390.85)</b>	<b>\$1,364.40</b>	<b>\$2,207.25</b>	<b>\$10,082.75</b>						
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<b>YTD % of Total Costs to Funding</b>													91.93%
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YTD Average Monthly Cost Per Employee	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Total
	\$66.70	\$78.88	\$91.39	\$90.98	\$89.14	\$88.68	\$83.24						\$83.24

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