

# City of Manitowoc - Medical Funding Analysis Report

## Medical Summary

Prepared By: Associated Financial Group  
 Date Prepared: 03/22/16  
 Plan Year: 01/01/16 - 12/31/16

### Medical & Rx Carriers: Anthem & Anthem

Monthly Enrollment	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Total
Single	47	48											95
Family	135	137											272
<b>Total</b>	<b>182</b>	<b>185</b>											<b>367</b>
<b>Total Members</b>	<b>523</b>	<b>528</b>											<b>1,051</b>
<b>Total Medical Funding</b>													
Single	25,020.45	25,552.80											\$50,573.25
Family	182,736.00	185,443.20											\$368,179.20
<b>Sum of Total Medical Funding</b>	<b>\$207,756.45</b>	<b>\$210,996.00</b>											<b>\$418,752.45</b>
<b>Fixed Medical Costs</b>													
Single	5,411.58	5,526.72											\$10,938.30
Family	30,970.35	31,429.17											\$62,399.52
AFG Consulting Fee	3,500.00	3,500.00											\$7,000.00
<b>Sum of Total Fixed Medical Costs</b>	<b>\$39,881.93</b>	<b>\$40,455.89</b>											<b>\$80,337.82</b>
<b>Total Fixed Costs</b>	<b>\$39,881.93</b>	<b>\$40,455.89</b>											<b>\$80,337.82</b>
<b>Claims Costs</b>													
Medical Claims	18,222.00	53,439.00											\$71,661.00
Prescription Drug Claims	15,810.00	58,292.00											\$74,102.00
Auxiant Run Out	124,727.44	75,669.44											\$200,396.88
Serve You Run Out	15.00	0.00											\$15.00
<b>Sum of Total Claims Costs</b>	<b>\$158,774.44</b>	<b>\$187,400.44</b>											<b>\$346,174.88</b>
<b>Reimbursements</b>													
Specific Excess Loss	0.00	0.00											0.00
Prescription Drug Rebate	0.00	0.00											0.00
<b>Sum of Reimbursements</b>	<b>\$0.00</b>	<b>\$0.00</b>											<b>\$0.00</b>
<b>Total Costs</b>	<b>\$198,656.37</b>	<b>\$227,856.33</b>											<b>\$426,512.70</b>
<b>Funding Less Costs</b>	<b>\$9,100.08</b>	<b>(\$16,860.33)</b>											<b>(\$7,760.25)</b>
<b>YTD Plan Performance</b>	<b>\$9,100.08</b>	<b>(\$7,760.25)</b>											
<b>YTD % of Total Costs to Funding</b>													101.85%
<b>YTD Average Monthly Cost Per Employee</b>	<b>\$1,091.52</b>	<b>\$1,162.16</b>											<b>\$1,162.16</b>

# City of Manitowoc - Medical Funding Analysis Report

**Plan Name:**  
Medical Plan

**Prepared By:** Associated Financial Group  
**Date Prepared:** 03/22/16  
**Plan Year:** 01/01/16 - 12/31/16

**Medical & Rx Carriers:**  
Anthem & Anthem

Total Monthly Funding	
Single	Family
\$532.35	\$1,353.60

	Total Monthly Fixed Costs	
	Single	Family
Administration Fee	\$42.55	\$42.55
Specific Stop Loss (\$100,000)	\$59.22	\$165.83
Aggregate Stop Loss	\$9.44	\$9.44
COBRA	\$1.50	\$1.50
PCORI	\$0.18	\$0.51
ACA Reinsurance	\$2.25	\$9.58
<b>Sum of Total Monthly Fixed Costs</b>	<b>\$115.14</b>	<b>\$229.41</b>

Monthly Enrollment	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Total
Single	47	48											95
Family	135	137											272
<b>Total</b>	<b>182</b>	<b>185</b>											<b>367</b>
<b>Total Funding</b>													
Single	25,020.45	25,552.80											\$50,573.25
Family	182,736.00	185,443.20											\$368,179.20
<b>Sum of Total Funding</b>	<b>\$207,756.45</b>	<b>\$210,996.00</b>											<b>\$418,752.45</b>
<b>Fixed Costs</b>													
Single	5,411.58	5,526.72											\$10,938.30
Family	30,970.35	31,429.17											\$62,399.52
AFG Consulting Fee	\$3,500.00	\$3,500.00											\$7,000.00
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<b>Claims Costs</b>													
Medical Claims	18,222.00	53,439.00											\$71,661.00
Prescription Drug Claims	15,810.00	58,292.00											\$74,102.00
Auxiant Run Out	124,727.44	75,669.44											\$200,396.88
Serve You Run Out	15.00	0.00											\$15.00
<b>Sum of Total Claims Costs</b>	<b>\$158,774.44</b>	<b>\$187,400.44</b>											<b>\$346,174.88</b>
<b>Reimbursements</b>													
Specific Excess Loss	0.00	0.00											\$0.00
Prescription Drug Rebate	0.00	0.00											\$0.00
<b>Sum of Reimbursements</b>	<b>\$0.00</b>	<b>\$0.00</b>											<b>\$0.00</b>
<b>Total Costs</b>	<b>\$198,656.37</b>	<b>\$227,856.33</b>											<b>\$426,512.70</b>
<b>Funding Less Costs</b>	<b>\$9,100.08</b>	<b>(\$16,860.33)</b>											<b>(\$7,760.25)</b>
<b>YTD Plan Performance</b>	<b>\$9,100.08</b>	<b>(\$7,760.25)</b>											
<b>YTD % of Total Costs to Funding</b>													101.85%
<b>YTD Average Monthly Cost Per Employee</b>	\$1,091.52	\$1,162.16											\$1,162.16

# City of Manitowoc - Dental Funding Analysis Report

## Dental Summary

Prepared By: Associated Financial Group  
 Date Prepared: 03/22/16  
 Plan Year: 01/01/16 - 12/31/16

## Dental Carriers

Anthem

## Monthly Enrollment

	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Total
Single	51	50											101
Family	134	136											270
<b>Total</b>	<b>185</b>	<b>186</b>											<b>371</b>

## Total Funding

Single	2,322.54	2,277.00											\$4,599.54
Family	14,808.34	15,029.36											\$29,837.70
<b>Sum of Total Funding</b>	<b>\$17,130.88</b>	<b>\$17,306.36</b>											<b>\$34,437.24</b>

## Fixed Costs

Single	136.68	134.00											\$270.68
Family	359.12	364.48											\$723.60
<b>Sum of Total Fixed Costs</b>	<b>\$495.80</b>	<b>\$498.48</b>											<b>\$994.28</b>

## Claims Costs

Dental Claims	6,423.67	14,236.48											\$20,660.15
<b>Sum of Total Claims Costs</b>	<b>\$6,423.67</b>	<b>\$14,236.48</b>											<b>\$20,660.15</b>

## Total Costs

<b>Total Costs</b>	<b>\$6,919.47</b>	<b>\$14,734.96</b>											<b>\$21,654.43</b>
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## Funding Less Costs

<b>Funding Less Costs</b>	<b>\$10,211.41</b>	<b>\$2,571.40</b>											<b>\$12,782.81</b>
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## YTD Plan Performance

<b>YTD Plan Performance</b>	<b>\$10,211.41</b>	<b>\$12,782.81</b>											
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## YTD % of Total Costs to Funding

<b>YTD % of Total Costs to Funding</b>													62.88%
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## YTD Average Monthly Cost

<b>YTD Average Monthly Cost</b>													
<b>Per Employee</b>	<b>\$37.40</b>	<b>\$58.37</b>											<b>\$58.37</b>