

City of Manitowoc - Medical Funding Analysis Report

Plan Name:

Medical Plan

Prepared By: Associated Financial Group

Date Prepared: 04/28/20

Plan Year: 01/01/20 - 12/31/20

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	\$8.56	\$23.97
Specific Stop Loss (\$100,000)	\$56.39	\$157.89
Aggregate Stop Loss	\$3.38	\$9.46
Robin Fiduciary Fee	\$0.42	\$0.42
Go365 Platform and Incentives	\$10.51	\$10.51
Sum of Total Monthly Fixed Costs	\$100.75	\$244.58

Monthly Enrollment	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Total
Single	52	51	52										155
Family	143	142	143										428
Total	195	193	195										583

Total Funding	Jan-20	Feb-20	Mar-20	Total
Single	32,258.72	31,638.36	32,258.72	\$96,155.80
Family	224,824.60	223,252.40	224,824.60	\$672,901.60
Sum of Total Funding	\$257,083.32	\$254,890.76	\$257,083.32	\$769,057.40

Fixed Costs	Jan-20	Feb-20	Mar-20	Total
Single	5,239.00	5,138.25	5,239.00	\$15,616.25
Family	34,974.94	34,730.36	34,974.94	\$104,680.24
AFG Consulting Fee	\$3,500.00	\$3,500.00	\$3,500.00	\$10,500.00
Sum of Total Fixed Costs	\$43,713.94	\$43,368.61	\$43,713.94	\$130,796.49

Claims Costs	Jan-20	Feb-20	Mar-20	Total
Medical Claims	10,525.60	181,083.05	185,771.00	\$377,379.65
Prescription Drug Claims	9,369.49	17,615.13	18,850.62	\$45,835.24
Anthem Med Run Out	52,402.00	27,298.00	-57.00	\$79,643.00
Anthem Rx Run Out	-616.00	0.00	0.00	(\$616.00)
Shared Savings	0.00	295.95	174.95	\$470.90
Clinic Expenses	4,646.66	4,069.68	0.00	\$8,716.34
Discount Share	0.00	48.82	0.00	\$48.82
Sum of Total Claims Costs	\$76,327.75	\$230,410.63	\$204,739.57	\$511,477.95

Reimbursements	Jan-20	Feb-20	Mar-20	Total
Specific Excess Loss	0.00	(25,032.25)	(250.23)	(\$25,282.48)
Prescription Drug Rebate	0.00	0.00	0.00	\$0.00
Sum of Reimbursements	\$0.00	(\$25,032.25)	(\$250.23)	(\$25,282.48)

Total Costs	\$120,041.69	\$248,746.99	\$248,203.28	\$616,991.96
--------------------	---------------------	---------------------	---------------------	---------------------

Funding Less Costs	\$137,041.63	\$6,143.77	\$8,880.04	\$152,065.44
---------------------------	---------------------	-------------------	-------------------	---------------------

YTD Plan Performance	\$137,041.63	\$143,185.40	\$152,065.44	
-----------------------------	---------------------	---------------------	---------------------	--

YTD % of Total Costs to Funding				80.23%
--	--	--	--	--------

YTD Average Monthly Cost Per Employee	\$615.60	\$950.49	\$1,058.31	\$1,058.31
--	----------	----------	------------	------------

City of Manitowoc - Dental Funding Analysis Report

Plan Name:
Dental Plan

Prepared By: Associated Financial Group
Date Prepared: 04/28/20
Plan Year: 01/01/20 - 12/31/20

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
Sum of Total Monthly Fixed Costs	\$4.50	\$4.50

Monthly Enrollment	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Total
Single	57	57	59										173
Family	136	135	136										407
Total	193	192	195										580

Total Funding	Jan-20	Feb-20	Mar-20	Total
Single	2,285.70	2,285.70	2,365.90	\$6,937.30
Family	15,347.60	15,234.75	15,347.60	\$45,929.95
Sum of Total Funding	\$17,633.30	\$17,520.45	\$17,713.50	\$52,867.25

Fixed Costs	Jan-20	Feb-20	Mar-20	Total
Single	256.50	256.50	265.50	\$778.50
Family	612.00	607.50	612.00	\$1,831.50
Sum of Total Fixed Costs	\$868.50	\$864.00	\$877.50	\$2,610.00

Claims Costs	Jan-20	Feb-20	Mar-20	Total
Dental Claims	10,426.00	14,024.00	9,027.00	\$33,477.00
Anthem Run Out Claims	8,235.28	593.37	316.00	\$9,144.65
Sum of Total Claims Costs	\$18,661.28	\$14,617.37	\$9,343.00	\$42,621.65

Total Costs	\$19,529.78	\$15,481.37	\$10,220.50	\$45,231.65
--------------------	--------------------	--------------------	--------------------	--------------------

Funding Less Costs	(\$1,896.48)	\$2,039.08	\$7,493.00	\$7,635.60
---------------------------	---------------------	-------------------	-------------------	-------------------

YTD Plan Performance	(\$1,896.48)	\$142.60	\$7,635.60	
-----------------------------	---------------------	-----------------	-------------------	--

YTD % of Total Costs to Funding				85.56%
--	--	--	--	---------------

YTD Average Monthly Cost Per Employee	Jan-20	Feb-20	Mar-20	Total
	\$101.19	\$90.94	\$77.99	\$77.99