



Monthly Medical & Dental Reporting

City of Manitowoc

November 2025

Medical Summary

Monthly Funding	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
Total Funding	\$337,721.16	\$333,799.71	\$333,799.71	\$330,742.92	\$330,742.92	\$333,397.86	\$331,205.73	\$329,878.26	\$332,131.35	\$329,939.22	\$323,362.83		\$3,646,721.67
Enrollment	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
Total Enrollment	191	188	188	186	186	186	185	185	183	182	179		2,039
Total Membership	498	492	492	488	488	492	489	485	492	490	482		5,388
Monthly Fixed Costs	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
*Total Fixed Costs	\$76,204.08	\$76,242.17	\$76,217.17	\$75,197.54	\$75,036.19	\$76,081.18	\$75,583.28	\$74,778.01	\$76,618.56	\$77,192.28	\$75,561.43		\$834,711.89
Paid Claims	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
Medical	\$226,852.54	\$161,695.95	\$364,066.47	\$518,659.10	\$984,693.69	\$1,216,304.95	\$792,263.61	\$232,417.66	\$166,400.59	\$619,215.93	\$753,092.20		\$6,035,662.69
Prescription	\$44,786.32	\$52,845.12	\$50,749.13	\$113,950.06	\$80,370.19	\$60,718.25	\$95,339.98	\$123,837.12	\$118,097.93	\$138,154.30	\$125,576.93		\$1,004,425.33
Total Paid Claims	\$271,638.86	\$214,541.07	\$414,815.60	\$632,609.16	\$1,065,063.88	\$1,277,023.20	\$887,603.59	\$356,254.78	\$284,498.52	\$757,370.23	\$878,669.13		\$7,040,088.02
Adjustments	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
Prior Year SL Reimbursements	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00
Current Year SL Reimbursements	\$0.00	\$0.00	(\$22,557.54)	(\$5,758.39)	\$0.00	(\$699,266.89)	(\$1,142,362.47)	\$138,137.87	(\$513,244.38)	(\$244,939.57)	(\$31,607.92)		(\$2,521,599.29)
Total SL Reimbursements	\$0.00	\$0.00	(\$22,557.54)	(\$5,758.39)	\$0.00	(\$699,266.89)	(\$1,142,362.47)	\$138,137.87	(\$513,244.38)	(\$244,939.57)	(\$31,607.92)		(\$2,521,599.29)
Prescription Rebates	(\$20,532.50)	(\$20,210.00)	(\$20,210.00)	(\$19,995.00)	(\$19,995.00)	(\$19,995.00)	(\$19,987.50)	(\$19,987.50)	(\$19,672.50)	(\$19,565.00)	(\$19,242.50)		(\$219,192.50)
Shared Savings Fees	\$2,292.33	\$3,353.28	\$4,582.82	\$5,478.10	\$4,453.64	\$5,425.46	\$3,731.81	\$1,900.50	\$1,257.63	\$7,189.73	\$1,835.04		\$41,500.34
Total Cost of Care Fees	\$123.54	\$56.17	\$19.97	\$94.14	\$165.22	\$452.27	\$178.71	\$35.96	\$199.87	\$97.98	\$100.11		\$1,523.94
PaydHealth Savings Fees	\$3,157.41	\$1,555.98	\$4,325.67	\$339.87	\$3,839.48	\$1,121.72	\$3,182.42	\$2,599.70	\$2,202.29	\$3,989.40	\$4,354.31		\$30,668.25
Manty Clinic Fees	\$11,040.50	\$7,385.60	\$7,374.50	\$9,468.24	\$7,055.75	\$7,848.95	\$8,274.27	\$6,654.77	\$8,255.30	\$8,984.39	\$7,303.75		\$89,646.02
HSA Contributions	\$0.00	\$0.00	\$160,800.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$160,800.00
Consulting Contract	\$3,087.50	\$3,087.50	\$3,087.50	\$3,087.50	\$3,087.50	\$3,087.50	\$3,187.50	\$3,187.50	\$3,187.50	\$3,187.50	\$3,187.50		\$34,462.50
Total Adjustments	(\$831.22)	(\$4,771.47)	\$137,422.92	(\$7,285.54)	(\$1,393.41)	(\$701,325.99)	(\$1,143,695.26)	\$132,628.80	(\$517,814.29)	(\$241,055.57)	(\$34,069.71)		(\$2,382,190.74)
Plan Summary	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
Total Monthly Costs	\$347,011.72	\$286,011.77	\$628,455.69	\$700,521.16	\$1,138,706.66	\$651,778.39	(\$180,508.39)	\$563,661.59	(\$156,697.21)	\$593,506.94	\$920,160.85		\$5,492,609.17
Total Funding Less Total Costs	(\$9,290.56)	\$47,787.94	(\$294,655.98)	(\$369,778.24)	(\$807,963.74)	(\$318,380.53)	\$511,714.12	(\$233,783.33)	\$488,828.56	(\$263,567.72)	(\$596,798.02)		(\$1,845,887.50)
Total Year to Date Reserves	(\$9,290.56)	\$38,497.38	(\$256,158.60)	(\$625,936.84)	(\$1,433,900.58)	(\$1,752,281.11)	(\$1,240,566.99)	(\$1,474,350.32)	(\$985,521.76)	(\$1,249,089.48)	(\$1,845,887.50)		(\$1,845,887.50)
Monthly Loss Ratio	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	CUMULATIVE
	102.75%	85.68%	188.27%	211.80%	344.29%	195.50%	-54.50%	170.87%	-47.18%	179.88%	284.56%		150.62%
Cost PEPM	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	CUMULATIVE
	\$1,816.82	\$1,521.34	\$3,342.85	\$3,766.24	\$6,122.08	\$3,504.18	(\$975.72)	\$3,046.82	(\$856.27)	\$3,261.03	\$5,140.56		\$2,693.78

*Includes Vitality Costs

The monthly and cumulative loss ratio percentages provided INCLUDE reimbursements and rebates.

The Funding Analysis Report (FAR) provided to clients of McClone is not a full representation of total costs incurred. The information provided in the FAR is meant to offer a general overview of the overall plan performance based on the information McClone is provided by the plan's vendor partners. For specifics on the exact costs incurred, clients should refer to the billing invoices provided by their vendor partners.



General City & Library

Medical TPA:
Stop Loss:
Specific Deductible:
PBM:
Organ Transplant:

Health Partners
Symetra
\$100,000
MedImpact
N/A

Total Funding: **EE** **FAM**

\$864.66 \$2,192.13

Plan Year: 1/1/2025-12/31/2025
Date Updated: 12/8/2025



Fixed Costs:	
Admin Fees:	\$7.52
Specific	\$168.97
Aggregate	\$13.14
Total Fixed Cost:	\$189.63
	\$490.90

Monthly Funding	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
EE	\$25,075.14	\$23,345.82	\$24,210.48	\$24,210.48	\$24,210.48	\$23,345.82	\$23,345.82	\$22,481.16	\$19,022.52	\$19,022.52	\$19,022.52	\$19,022.52	\$247,292.76
FAM	\$166,601.88	\$166,601.88	\$166,601.88	\$164,409.75	\$164,409.75	\$166,601.88	\$166,601.88	\$164,409.75	\$170,986.14	\$170,986.14	\$170,986.14	\$170,986.14	\$1,837,004.94
Total Funding	\$191,677.02	\$189,947.70	\$190,812.36	\$188,620.23	\$188,620.23	\$189,947.70	\$189,947.70	\$186,890.91	\$190,008.66	\$190,008.66	\$187,816.53	\$187,816.53	\$2,084,297.70
Enrollment	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
EE	29	27	28	28	28	27	27	26	22	22	22	22	286
FAM	76	76	76	75	75	76	76	75	78	78	78	77	838
Total Enrollment	105	103	104	103	103	103	103	101	100	100	99	99	1,124
Monthly Fixed Costs	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
EE	\$5,499.27	\$5,120.01	\$5,309.64	\$5,309.64	\$5,309.64	\$5,120.01	\$5,120.01	\$4,930.38	\$4,171.86	\$4,171.86	\$4,171.86	\$4,171.86	\$54,234.18
FAM	\$37,308.40	\$37,308.40	\$37,308.40	\$36,817.50	\$36,817.50	\$37,308.40	\$37,308.40	\$36,817.50	\$38,290.20	\$38,290.20	\$37,799.30	\$37,799.30	\$411,374.20
Total Fixed Costs	\$42,807.67	\$42,428.41	\$42,618.04	\$42,127.14	\$42,127.14	\$42,428.41	\$42,428.41	\$41,747.88	\$42,462.06	\$42,462.06	\$41,971.16	\$41,971.16	\$465,608.38
Paid Claims	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
Medical	\$104,446.06	\$129,856.55	\$219,118.78	\$117,584.41	\$74,874.92	\$86,033.24	\$106,613.36	\$81,304.74	\$58,569.37	\$352,355.38	\$329,761.83	\$329,761.83	\$1,660,518.64
Prescription	\$6,116.29	\$8,018.58	\$5,745.97	\$18,453.57	\$20,431.86	\$13,792.47	\$14,894.56	\$21,643.88	\$15,200.39	\$28,021.51	\$28,019.25	\$28,019.25	\$180,338.33
Total Paid Claims	\$110,562.35	\$137,875.13	\$224,864.75	\$136,037.98	\$95,306.78	\$99,825.71	\$121,507.92	\$102,948.62	\$73,769.76	\$380,376.89	\$357,781.08	\$357,781.08	\$1,840,856.97
Adjustments	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
Prior Year SL Reimbursements	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Current Year SL Reimbursements	\$0.00	\$0.00	(\$22,557.54)	(\$5,758.39)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$28,315.93)
Total Adjustments	\$0.00	\$0.00	(\$22,557.54)	(\$5,758.39)	\$0.00	\$0.00	(\$28,315.93)						
Plan Summary	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
Total Monthly Costs	\$153,370.02	\$180,303.54	\$244,925.25	\$172,406.73	\$137,433.92	\$142,254.12	\$163,936.33	\$144,696.50	\$116,231.82	\$422,838.95	\$399,752.24	\$399,752.24	\$2,278,149.42
Total Funding Less Total Costs	\$38,307.00	\$9,644.16	(\$54,112.89)	\$16,213.50	\$51,186.31	\$47,693.58	\$26,011.37	\$42,194.41	\$73,776.84	(\$232,830.29)	(\$211,935.71)	(\$211,935.71)	(\$193,851.72)
Total Year to Date Reserves	\$38,307.00	\$47,951.16	(\$6,161.73)	\$10,051.77	\$61,238.08	\$108,931.66	\$134,943.03	\$177,137.44	\$250,914.28	\$18,083.99	(\$193,851.72)	(\$193,851.72)	(\$193,851.72)
Monthly Loss Ratio	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	CUMULATIVE
	80.01%	94.92%	128.36%	91.40%	72.86%	74.89%	86.31%	77.42%	61.17%	222.54%	212.84%		109.30%
Cost PEPM	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	CUMULATIVE
	\$1,460.67	\$1,750.52	\$2,355.05	\$1,673.85	\$1,334.31	\$1,381.11	\$1,591.61	\$1,432.64	\$1,162.32	\$4,228.39	\$4,037.90	\$4,037.90	\$2,026.82

The monthly and cumulative loss ratio percentages provided INCLUDE specific reimbursements and gene therapy reimbursements.

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Total Funding: **EE** **FAM**

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Fixed Costs:	
Admin Fees:	\$7.52
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Aggregate	\$13.14
Total Fixed Cost:	\$189.63
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Monthly Funding	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
EE	\$27,669.12	\$27,669.12	\$26,804.46	\$25,939.80	\$25,939.80	\$25,075.14	\$25,075.14	\$26,804.46	\$25,939.80	\$25,939.80	\$25,939.80		\$288,796.44
FAM	\$118,375.02	\$116,182.89	\$116,182.89	\$116,182.89	\$116,182.89	\$118,375.02	\$116,182.89	\$116,182.89	\$116,182.89	\$113,990.76	\$109,606.50		\$1,273,627.53
Total Funding	\$146,044.14	\$143,852.01	\$142,987.35	\$142,122.69	\$142,122.69	\$143,450.16	\$141,258.03	\$142,987.35	\$142,122.69	\$139,930.56	\$135,546.30		\$1,562,423.97
Enrollment	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
EE	32	32	31	30	30	29	29	31	30	30	30		334
FAM	54	53	53	53	53	54	53	53	53	52	50		581
Total Enrollment	86	85	84	83	83	83	82	84	83	82	80		915
Monthly Fixed Costs	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
EE	\$6,068.16	\$6,068.16	\$5,878.53	\$5,688.90	\$5,688.90	\$5,499.27	\$5,499.27	\$5,878.53	\$5,688.90	\$5,688.90	\$5,688.90		\$63,336.42
FAM	\$26,508.60	\$26,017.70	\$26,017.70	\$26,017.70	\$26,017.70	\$26,508.60	\$26,017.70	\$26,017.70	\$26,017.70	\$25,526.80	\$24,545.00		\$285,212.90
Total Fixed Costs	\$32,576.76	\$32,085.86	\$31,896.23	\$31,706.60	\$31,706.60	\$32,007.87	\$31,516.97	\$31,896.23	\$31,706.60	\$31,215.70	\$30,233.90		\$348,549.32
Paid Claims	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
Medical	\$122,406.48	\$31,839.40	\$144,947.69	\$401,074.69	\$909,818.77	\$1,130,271.71	\$685,650.25	\$151,112.92	\$107,831.22	\$266,860.55	\$423,330.37		\$4,375,144.05
Prescription	\$38,670.03	\$44,826.54	\$45,003.16	\$95,496.49	\$59,938.33	\$46,925.78	\$80,445.42	\$102,193.24	\$102,897.54	\$110,132.79	\$97,557.68		\$824,087.00
Total Paid Claims	\$161,076.51	\$76,665.94	\$189,950.85	\$496,571.18	\$969,757.10	\$1,177,197.49	\$766,095.67	\$253,306.16	\$210,728.76	\$376,993.34	\$520,888.05		\$5,199,231.05
Adjustments	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
Prior Year SL Reimbursements	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00
Current Year SL Reimbursements	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$699,266.89)	(\$1,142,362.47)	\$138,137.87	(\$513,244.38)	(\$244,939.57)	(\$31,607.92)		(\$2,493,283.36)
Total Adjustments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$699,266.89)	(\$1,142,362.47)	\$138,137.87	(\$513,244.38)	(\$244,939.57)	(\$31,607.92)		(\$2,493,283.36)
Plan Summary	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
Total Monthly Costs	\$193,653.27	\$108,751.80	\$221,847.08	\$528,277.78	\$1,001,463.70	\$509,938.47	(\$344,749.83)	\$423,340.26	(\$270,809.02)	\$163,269.47	\$519,514.03		\$3,054,497.01
Total Funding Less Total Costs	(\$47,609.13)	\$35,100.21	(\$78,859.73)	(\$386,155.09)	(\$859,341.01)	(\$366,488.31)	\$486,007.86	(\$280,352.91)	\$412,931.71	(\$23,338.91)	(\$383,967.73)		(\$1,492,073.04)
Total Year to Date Reserves	(\$47,609.13)	(\$12,508.92)	(\$91,368.65)	(\$477,523.74)	(\$1,336,864.75)	(\$1,703,353.06)	(\$1,217,345.20)	(\$1,497,698.11)	(\$1,084,766.40)	(\$1,108,105.31)	(\$1,492,073.04)		(\$1,492,073.04)
Monthly Loss Ratio	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	CUMULATIVE
	132.60%	75.60%	155.15%	371.71%	704.65%	355.48%	-244.06%	296.07%	-190.55%	116.68%	383.27%		195.50%
Cost PEPM	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	CUMULATIVE
	\$2,251.78	\$1,279.43	\$2,641.04	\$6,364.79	\$12,065.83	\$6,143.84	(\$4,204.27)	\$5,039.77	(\$3,262.76)	\$1,991.09	\$6,493.93		\$3,338.25

The monthly and cumulative loss ratio percentages provided INCLUDE specific reimbursements and gene therapy reimbursements.

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Dental Summary

Monthly Funding	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
Total Funding	\$18,503.46	\$18,221.53	\$18,426.29	\$18,264.06	\$18,264.06	\$18,298.70	\$18,375.87	\$18,341.23	\$18,333.34	\$18,248.28	\$17,889.18		\$201,166.00
Enrollment	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
Total Enrollment	201	198	201	199	199	198	198	199	197	195	192		2,177
Monthly Fixed Costs	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
Total Fixed Costs	\$944.70	\$930.60	\$944.70	\$935.30	\$935.30	\$930.60	\$930.60	\$935.30	\$925.90	\$916.50	\$902.40		\$10,231.90
Paid Claims	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
Total Paid Claims	\$19,797.00	\$18,919.00	\$15,655.00	\$20,960.00	\$13,771.00	\$15,744.00	\$21,319.00	\$18,655.00	\$12,193.00	\$20,491.00	\$18,158.00		\$195,662.00
Plan Summary	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
Total Monthly Costs	\$20,741.70	\$19,849.60	\$16,599.70	\$21,895.30	\$14,706.30	\$16,674.60	\$22,249.60	\$19,590.30	\$13,118.90	\$21,407.50	\$19,060.40		\$205,893.90
Total Funding Less Total Costs	(\$2,238.24)	(\$1,628.07)	\$1,826.59	(\$3,631.24)	\$3,557.76	\$1,624.10	(\$3,873.73)	(\$1,249.07)	\$5,214.44	(\$3,159.22)	(\$1,171.22)		(\$4,727.90)
Total Year to Date Reserves	(\$2,238.24)	(\$3,866.31)	(\$2,039.72)	(\$5,670.96)	(\$2,113.20)	(\$489.10)	(\$4,362.83)	(\$5,611.90)	(\$397.46)	(\$3,556.68)	(\$4,727.90)		(\$4,727.90)
Monthly Loss Ratio	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	CUMULATIVE
	112.10%	108.93%	90.09%	119.88%	80.52%	91.12%	121.08%	106.81%	71.56%	117.31%	106.55%		102.35%
Cost PEPM	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	CUMULATIVE
	\$103.19	\$100.25	\$82.59	\$110.03	\$73.90	\$84.22	\$112.37	\$98.44	\$66.59	\$109.78	\$99.27		\$94.58

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Library & General City

Dental TPA:	Delta Dental	Total Funding	EE	FAM									Plan Year:	1/1/2025-12/31/2025
			\$42.53	\$119.70									Date Updated:	12/8/2025
		Fixed Cost	\$4.70	\$4.70										
Monthly Funding	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL	
EE	\$1,531.08	\$1,446.02	\$1,531.08	\$1,531.08	\$1,531.08	\$1,488.55	\$1,446.02	\$1,446.02	\$1,318.43	\$1,318.43	\$1,318.43	\$1,318.43	\$15,906.22	
FAM	\$7,421.40	\$7,421.40	\$7,421.40	\$7,301.70	\$7,301.70	\$7,301.70	\$7,541.10	\$7,421.40	\$7,541.10	\$7,541.10	\$7,541.10	\$7,421.40	\$81,635.40	
Total Funding	\$8,952.48	\$8,867.42	\$8,952.48	\$8,832.78	\$8,832.78	\$8,790.25	\$8,987.12	\$8,867.42	\$8,859.53	\$8,859.53	\$8,739.83		\$97,541.62	
Enrollment	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL	
EE	36	34	36	36	36	35	34	34	31	31	31	31	374	
FAM	62	62	62	61	61	61	63	62	63	63	63	62	682	
Total Enrollment	98	96	98	97	97	96	97	96	94	94	93		1,056	
Monthly Fixed Costs	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL	
EE	\$169.20	\$159.80	\$169.20	\$169.20	\$169.20	\$164.50	\$159.80	\$159.80	\$145.70	\$145.70	\$145.70	\$145.70	\$1,757.80	
FAM	\$291.40	\$291.40	\$291.40	\$286.70	\$286.70	\$286.70	\$296.10	\$291.40	\$296.10	\$296.10	\$296.10	\$291.40	\$3,205.40	
Total Fixed Costs	\$460.60	\$451.20	\$460.60	\$455.90	\$455.90	\$451.20	\$455.90	\$451.20	\$441.80	\$441.80	\$437.10		\$4,963.20	
Paid Claims	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL	
Dental	\$7,935.00	\$8,080.00	\$5,220.00	\$7,386.00	\$6,290.00	\$6,310.00	\$9,762.00	\$11,274.00	\$4,297.00	\$10,835.00	\$5,284.00		\$82,673.00	
Total Paid Claims	\$7,935.00	\$8,080.00	\$5,220.00	\$7,386.00	\$6,290.00	\$6,310.00	\$9,762.00	\$11,274.00	\$4,297.00	\$10,835.00	\$5,284.00		\$82,673.00	
Plan Summary	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL	
Total Monthly Costs	\$8,395.60	\$8,531.20	\$5,680.60	\$7,841.90	\$6,745.90	\$6,761.20	\$10,217.90	\$11,725.20	\$4,738.80	\$11,276.80	\$5,721.10		\$87,636.20	
Total Funding Less Total Costs	\$556.88	\$336.22	\$3,271.88	\$990.88	\$2,086.88	\$2,029.05	(\$1,230.78)	(\$2,857.78)	\$4,120.73	(\$2,417.27)	\$3,018.73		\$9,905.42	
Total Year to Date Reserves	\$556.88	\$893.10	\$4,164.98	\$5,155.86	\$7,242.74	\$9,271.79	\$8,041.01	\$5,183.23	\$9,303.96	\$6,886.69	\$9,905.42		\$9,905.42	
Monthly Loss Ratio	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	CUMULATIVE	
	93.78%	96.21%	63.45%	88.78%	76.37%	76.92%	113.69%	132.23%	53.49%	127.28%	65.46%		89.84%	
Cost PEPM	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	CUMULATIVE	
	\$85.67	\$88.87	\$57.97	\$80.84	\$69.55	\$70.43	\$105.34	\$122.14	\$50.41	\$119.97	\$61.52		\$82.99	

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Fire & Police

Dental TPA:	Delta Dental	Total Funding	EE	FAM											Plan Year:	1/1/2025-12/31/2025
												Date Updated:	12/8/2025			
Monthly Funding	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC				
EE	\$1,403.49	\$1,446.02	\$1,446.02	\$1,403.49	\$1,403.49	\$1,360.96	\$1,360.96	\$1,446.02	\$1,446.02	\$1,360.96	\$1,360.96					
FAM	\$7,541.10	\$7,301.70	\$7,421.40	\$7,421.40	\$7,421.40	\$7,541.10	\$7,421.40	\$7,421.40	\$7,421.40	\$7,421.40	\$7,182.00					
Total Funding	\$8,944.59	\$8,747.72	\$8,867.42	\$8,824.89	\$8,824.89	\$8,902.06	\$8,782.36	\$8,867.42	\$8,867.42	\$8,782.36	\$8,542.96					
Enrollment	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC				
EE	33	34	34	33	33	32	32	34	34	32	32					
FAM	63	61	62	62	62	63	62	62	62	62	60					
Total Enrollment	96	95	96	95	95	95	94	96	96	94	92					
Monthly Fixed Costs	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC				
EE	\$155.10	\$159.80	\$159.80	\$155.10	\$155.10	\$150.40	\$150.40	\$159.80	\$159.80	\$150.40	\$150.40					
FAM	\$296.10	\$286.70	\$291.40	\$291.40	\$291.40	\$296.10	\$291.40	\$291.40	\$291.40	\$291.40	\$282.00					
Total Fixed Costs	\$451.20	\$446.50	\$451.20	\$446.50	\$446.50	\$446.50	\$441.80	\$451.20	\$451.20	\$441.80	\$432.40					
Paid Claims	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC				
Dental	\$11,360.00	\$10,586.00	\$7,950.00	\$12,825.00	\$7,480.00	\$8,566.00	\$9,544.00	\$7,198.00	\$7,707.00	\$8,301.00	\$12,656.00					
Total Paid Claims	\$11,360.00	\$10,586.00	\$7,950.00	\$12,825.00	\$7,480.00	\$8,566.00	\$9,544.00	\$7,198.00	\$7,707.00	\$8,301.00	\$12,656.00					
Plan Summary	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC				
Total Monthly Costs	\$11,811.20	\$11,032.50	\$8,401.20	\$13,271.50	\$7,926.50	\$9,012.50	\$9,985.80	\$7,649.20	\$8,158.20	\$8,742.80	\$13,088.40					
Total Funding Less Total Costs	(\$2,866.61)	(\$2,284.78)	\$466.22	(\$4,446.61)	\$898.39	(\$110.44)	(\$1,203.44)	\$1,218.22	\$709.22	\$39.56	(\$4,545.44)					
Total Year to Date Reserves	(\$2,866.61)	(\$5,151.39)	(\$4,685.17)	(\$9,131.78)	(\$8,233.39)	(\$8,343.83)	(\$9,547.27)	(\$8,329.05)	(\$7,619.83)	(\$7,580.27)	(\$12,125.71)					
Monthly Loss Ratio	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC				
	132.05%	126.12%	94.74%	150.39%	89.82%	101.24%	113.70%	86.26%	92.00%	99.55%	153.21%					
Cost PEPM	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC				
	123.03	116.13	87.51	139.70	83.44	94.87	106.23	79.68	84.98	93.01	142.27					

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COBRA & Retiree

Dental TPA:	Delta Dental	Total Funding	EE	FAM									Plan Year:	1/1/2025-12/31/2025
			\$42.53	\$119.70									Date Updated:	12/8/2025
		Fixed Cost	\$4.70	\$4.70										
Monthly Funding	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC		
EE	\$127.59	\$127.59	\$127.59	\$127.59	\$127.59	\$127.59	\$127.59	\$127.59	\$127.59	\$127.59	\$127.59	\$127.59	\$1,403.49	
FAM	\$478.80	\$478.80	\$478.80	\$478.80	\$478.80	\$478.80	\$478.80	\$478.80	\$478.80	\$478.80	\$478.80	\$478.80	\$5,266.80	
Total Funding	\$606.39	\$606.39	\$606.39	\$606.39	\$606.39	\$606.39	\$606.39	\$606.39	\$606.39	\$606.39	\$606.39	\$606.39	\$6,670.29	
Enrollment	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC		
EE	3	3	3	3	3	3	3	3	3	3	3	3	33	
FAM	4	4	4	4	4	4	4	4	4	4	4	4	44	
Total Enrollment	7	7	7	7	7	7	7	7	7	7	7	7	77	
Monthly Fixed Costs	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC		
EE	\$14.10	\$14.10	\$14.10	\$14.10	\$14.10	\$14.10	\$14.10	\$14.10	\$14.10	\$14.10	\$14.10	\$14.10	\$155.10	
FAM	\$18.80	\$18.80	\$18.80	\$18.80	\$18.80	\$18.80	\$18.80	\$18.80	\$18.80	\$18.80	\$18.80	\$18.80	\$206.80	
Total Fixed Costs	\$32.90	\$32.90	\$32.90	\$32.90	\$32.90	\$32.90	\$32.90	\$32.90	\$32.90	\$32.90	\$32.90	\$32.90	\$361.90	
Paid Claims	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC		
Dental	\$502.00	\$253.00	\$2,485.00	\$749.00	\$1.00	\$868.00	\$2,013.00	\$183.00	\$189.00	\$1,355.00	\$218.00	\$218.00	\$8,816.00	
Total Paid Claims	\$502.00	\$253.00	\$2,485.00	\$749.00	\$1.00	\$868.00	\$2,013.00	\$183.00	\$189.00	\$1,355.00	\$218.00	\$218.00	\$8,816.00	
Plan Summary	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC		
Total Monthly Costs	\$534.90	\$285.90	\$2,517.90	\$781.90	\$33.90	\$900.90	\$2,045.90	\$215.90	\$221.90	\$1,387.90	\$250.90	\$250.90	\$9,177.90	
Total Funding Less Total Costs	\$71.49	\$320.49	(\$1,911.51)	(\$175.51)	\$572.49	(\$294.51)	(\$1,439.51)	\$390.49	\$384.49	(\$781.51)	\$355.49	\$355.49	(\$2,507.61)	
Total Year to Date Reserves	\$71.49	\$391.98	(\$1,519.53)	(\$1,695.04)	(\$1,122.55)	(\$1,417.06)	(\$2,856.57)	(\$2,466.08)	(\$2,081.59)	(\$2,863.10)	(\$2,507.61)	(\$2,507.61)		
Monthly Loss Ratio	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	CUMULATIVE	
	88.21%	47.15%	415.23%	128.94%	5.59%	148.57%	337.39%	35.60%	36.59%	228.88%	41.38%		137.59%	
Cost PEPM	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	CUMULATIVE	
	76.41	40.84	359.70	111.70	4.84	128.70	292.27	30.84	31.70	198.27	35.84		119.19	

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