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GROUP BENEFITS EXPERIENCE REPORT

City of Manitowoc

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Section I

Medical Experience



**City of Manitowoc
Medical / Rx Plan
Experience Dashboard
Experience Period Ending 08/31/2024**

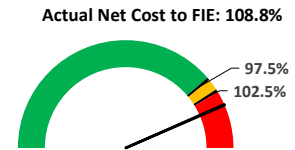
Experience Summary	2023	2024 YTD	2024 Annualized	Δ from Prior
Net Paid Claims	\$2,899,180	\$2,116,623	\$3,174,935	9.5%
Actual Net Cost	\$3,459,691	\$2,523,733	\$3,785,600	9.4%
Actual Net Cost to FIE	108.7%	108.8%	108.8%	
Gross Rx Claims to Total Net Claims	20.3%	23.8%	23.8%	
Net Claims PEPY	\$15,538	\$10,960	\$16,440	5.8%
Average Employees	187	193	193	3.5%

Observations

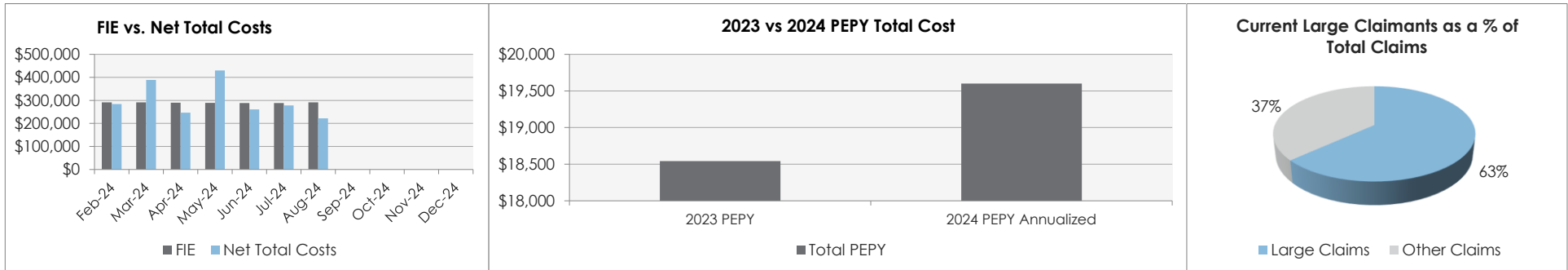
For the current experience period Jan 1, 2024 to Aug 31, 2024, the group is currently performing favorably based on the following:

- There are several large claimants over \$50,000, making up 63.2% of the total claims. Typically, high cost claimants make up 20% to 35% of total claims.
- Prescription drug claims currently account for 23.8% of total claims.
- Average number of employees has increased by 3.5% compared to the prior year.

Large Claimants	2023	2024 YTD
Number of Large Claimants (>\$50,000)	12	10
Total Paid for Large Claimants (>\$50,000)	\$1,685,733	\$2,220,789
Claimants Over SSL (>\$100,000)	6	3
Total Paid Over SSL (>\$100,000)	\$645,607	\$1,395,330



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

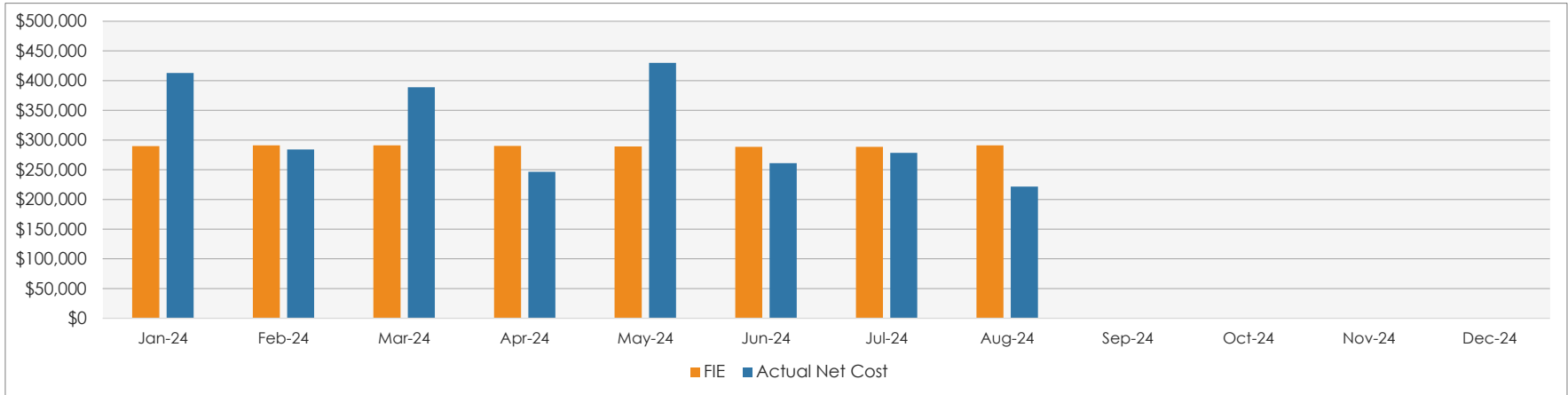


Notes

1. PEPY = Per Employee Per Year
2. FIE = Fully Insured Equivalent (Budget)



City of Manitowoc
 Medical / Rx Plan - Health Partners
 Current Plan Year Cost Summary
 January 2024 through December 2024



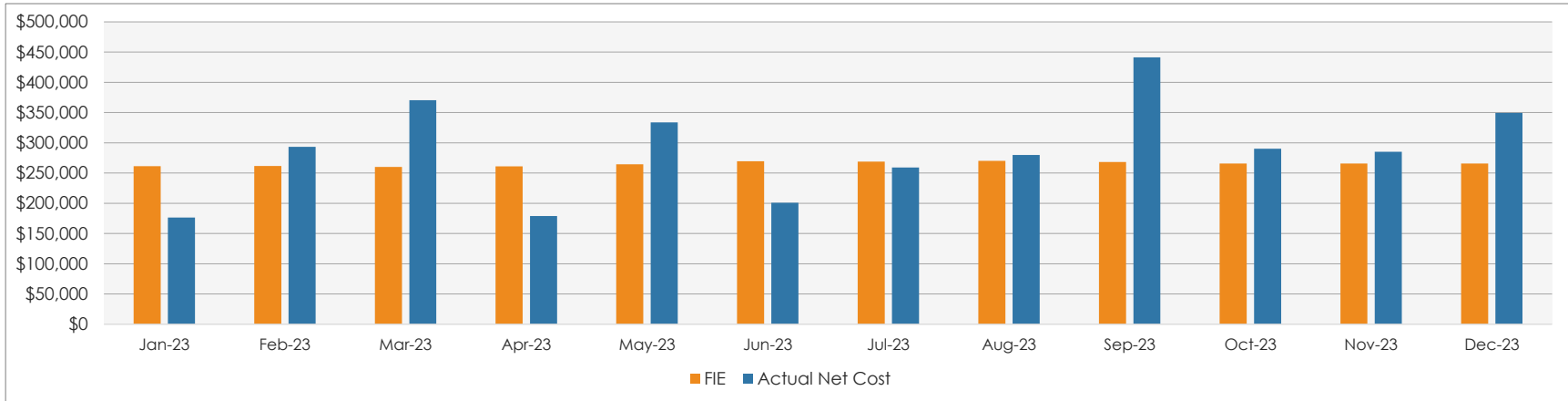
	Enrollment	Fixed Costs			Paid Claims						Total Plan Costs		Position		Miscellaneous
	(1)	(2)	(3)	(4) = 2+3	(5)	(6)	(7)	(8)	(9) = 5+6+7+8	(10) = 9/1	(11) = 4+9	(12)	(13) = 11/12	(19) = 12-11	(20)
	Total Ees	Admin Fees*	Stop Loss Premium	Total	Medical Claims	Rx Claims	Misc**	Over SSL	Net Total Claims	Claims / Ee	Actual Net Cost	FIE	Net Cost / FIE	FIE - Net Cost	ER HSA Contribution
Jan-24	192	\$8,372	\$42,490	\$50,862	\$1,201,704	\$36,155	\$11,653	(\$887,327)	\$362,184	\$1,886	\$413,046	\$289,734	142.6%	(\$123,312)	\$0
Feb-24	194	\$8,387	\$42,688	\$51,075	\$184,835	\$39,255	\$8,958	\$0	\$233,048	\$1,201	\$284,123	\$291,208	97.6%	\$7,085	\$0
Mar-24	194	\$8,387	\$42,688	\$51,075	\$335,364	\$59,695	\$141,402	(\$198,656)	\$337,805	\$1,741	\$388,880	\$291,208	133.5%	(\$97,671)	\$132,000
Apr-24	194	\$8,380	\$42,509	\$50,889	\$174,638	\$59,981	\$9,522	(\$48,467)	\$195,674	\$1,009	\$246,564	\$290,077	85.0%	\$43,513	\$0
May-24	193	\$8,372	\$42,410	\$50,783	\$324,861	\$115,566	\$7,028	(\$68,260)	\$379,196	\$1,965	\$429,978	\$289,340	148.6%	(\$140,638)	\$0
Jun-24	192	\$8,365	\$42,311	\$50,676	\$172,105	\$51,919	\$10,964	(\$24,616)	\$210,372	\$1,096	\$261,048	\$288,603	90.5%	\$27,555	\$0
Jul-24	192	\$8,365	\$42,311	\$50,676	\$271,911	\$67,935	\$7,240	(\$119,356)	\$227,730	\$1,186	\$278,406	\$288,603	96.5%	\$10,197	\$0
Aug-24	194	\$8,387	\$42,688	\$51,075	\$136,078	\$72,538	\$10,615	(\$48,618)	\$170,614	\$879	\$221,689	\$291,208	76.1%	\$69,520	\$0
Sep-24															
Oct-24															
Nov-24															
Dec-24															
Totals	1,545	\$67,015	\$340,096	\$407,110	\$2,801,496	\$503,044	\$207,383	(\$1,395,300)	\$2,116,623	\$1,370	\$2,523,733	\$2,319,982	108.8%	(\$203,751)	\$132,000

Notes

- Aggregate corridor is 125%. Specific Stop Loss is \$100,000.
- *. Admin Fees include Wellness FIE/Incentives (\$2,861 Monthly) & Broker Fee (\$3,187.50 Monthly)
- ***. 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 2023 through December 2023



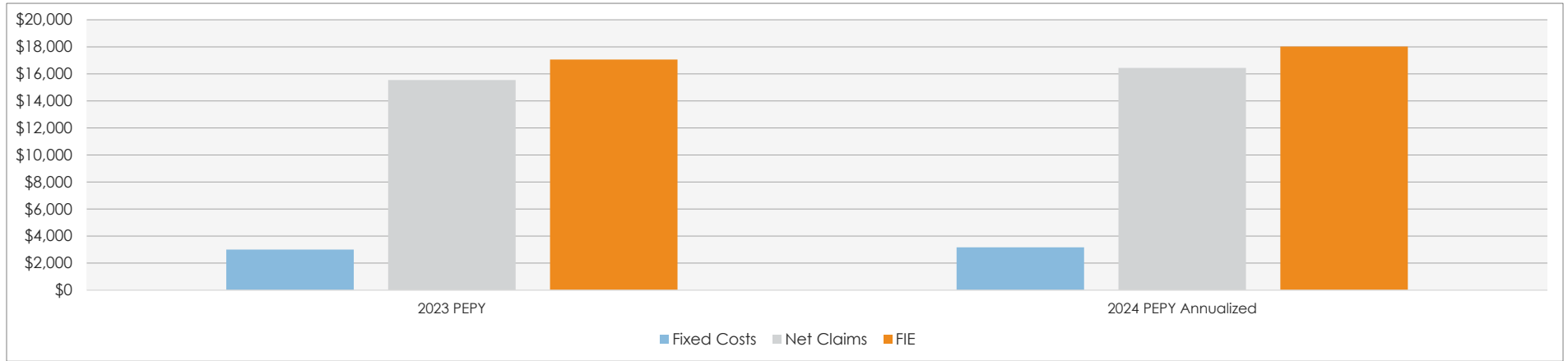
Enrollment (1)	Fixed Costs			Paid Claims						Total Plan Costs		Position		Miscellaneous (20)	
	(2)	(3)	(4) = 2+3	(5)	(6)	(7)	(8)	(9) = 5+6+7+8	(10) = 9/1	(11) = 4+9	(12)	(13) = 11/12	(14) = 12-11		
Total Ees	Admin Fees	Stop Loss Premium	Total	Medical Claims	Rx Claims	Misc*	Over SSL	Net Total Claims	Claims / Ee	Actual Net Cost	FIE	Net Cost / FIE	FIE - Net Cost	ER HSA Contribution	
Jan-23	185	\$8,293	\$37,803	\$46,096	\$95,952	\$25,861	\$8,542	\$0	\$130,356	\$705	\$176,451	\$261,383	67.5%	\$84,931	\$0
Feb-23	184	\$8,292	\$37,876	\$46,168	\$213,008	\$26,631	\$7,601	\$0	\$247,240	\$1,344	\$293,408	\$261,750	112.1%	(\$31,658)	\$0
Mar-23	183	\$8,278	\$37,620	\$45,898	\$129,223	\$28,666	\$166,848	\$0	\$324,737	\$1,775	\$370,635	\$260,006	142.5%	(\$110,629)	\$159,200
Apr-23	183	\$8,285	\$37,785	\$46,070	\$90,162	\$36,487	\$7,178	(\$866)	\$132,961	\$727	\$179,030	\$261,062	68.6%	\$82,032	\$0
May-23	185	\$8,313	\$38,297	\$46,610	\$241,284	\$54,477	\$7,761	(\$16,440)	\$287,081	\$1,552	\$333,691	\$264,550	126.1%	(\$69,142)	\$0
Jun-23	189	\$8,357	\$38,991	\$47,348	\$176,731	\$43,689	\$7,824	(\$74,659)	\$153,584	\$813	\$200,932	\$269,414	74.6%	\$68,482	\$0
Jul-23	190	\$8,357	\$38,918	\$47,275	\$206,385	\$40,343	\$7,074	(\$41,853)	\$211,949	\$1,116	\$259,224	\$269,046	96.3%	\$9,822	\$0
Aug-23	190	\$8,364	\$39,083	\$47,447	\$191,438	\$37,788	\$6,486	(\$3,095)	\$232,617	\$1,224	\$280,064	\$270,102	103.7%	(\$9,962)	\$0
Sep-23	189	\$8,350	\$38,827	\$47,177	\$422,091	\$43,788	\$4,862	(\$76,649)	\$394,091	\$2,085	\$441,267	\$268,358	164.4%	(\$172,909)	\$0
Oct-23	187	\$8,328	\$38,479	\$46,808	\$297,533	\$57,664	\$7,039	(\$118,788)	\$243,448	\$1,302	\$290,255	\$265,926	109.1%	(\$24,329)	\$0
Nov-23	187	\$8,328	\$38,479	\$46,808	\$234,598	\$112,368	\$8,097	(\$116,560)	\$238,503	\$1,275	\$285,311	\$265,926	107.3%	(\$19,385)	\$0
Dec-23	187	\$8,328	\$38,479	\$46,808	\$411,880	\$79,355	\$8,076	(\$196,698)	\$302,613	\$1,618	\$349,421	\$265,926	131.4%	(\$83,495)	\$0
Totals	2,239	\$99,873	\$460,638	\$560,511	\$2,710,284	\$587,116	\$247,388	(\$645,607)	\$2,899,180	\$1,295	\$3,459,691	\$3,183,450	108.7%	(\$276,241)	\$159,200

Notes

- Aggregate corridor is 125%. Specific Stop Loss is \$100,000.
- 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	FIE	Net Cost/FIE
2023 Plan Year	187	\$99,873	\$460,638	\$560,511	\$2,710,284	\$587,116	\$247,388	(\$645,607)	\$2,899,180	\$3,459,691	\$3,183,450	108.7%
2024 YTD Annualized	193	\$100,522	\$510,144	\$610,665	\$4,202,245	\$754,566	\$311,074	(\$2,092,950)	\$3,174,935	\$3,785,600	\$3,479,973	108.8%

Time Period	Fixed Costs	Change from Prior Year	Net Claims	Change from Prior Year	FIE	Change from Prior Year
2023 PEPY	\$3,004	5.9%	\$15,538	10.8%	\$17,062	12.4%
2024 PEPY Annualized	\$3,162	5.3%	\$16,440	5.8%	\$18,019	5.6%

Notes

1. PEPY = Per Employee Per Year
2. FIE = Fully Insured Equivalent

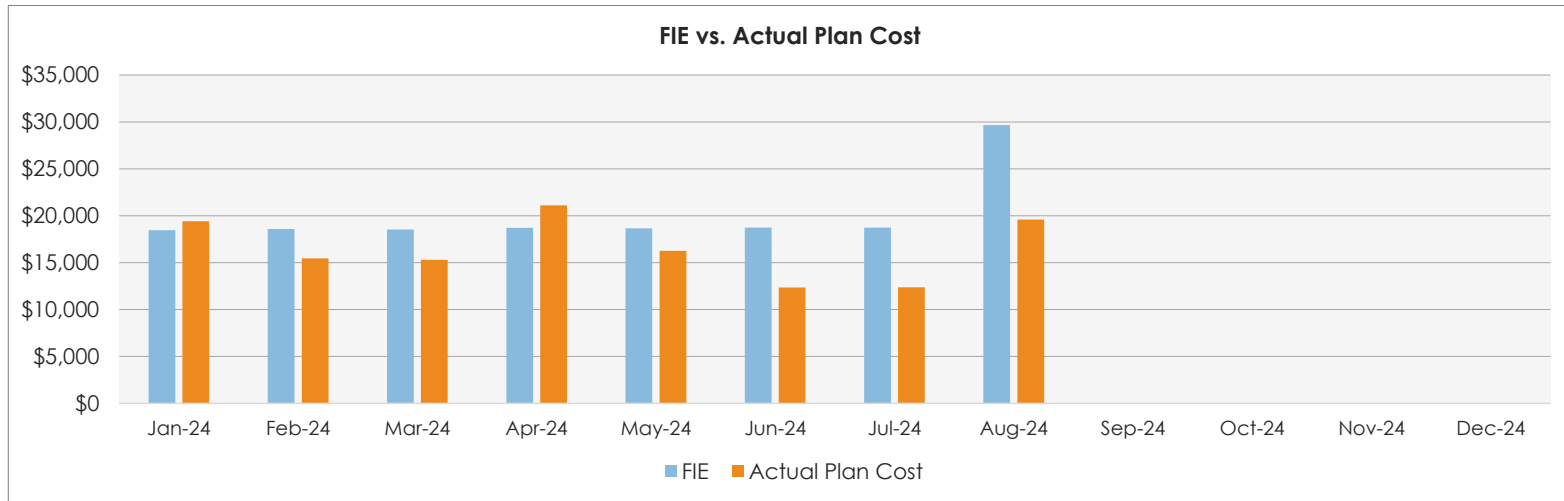


Section II

Dental Experience



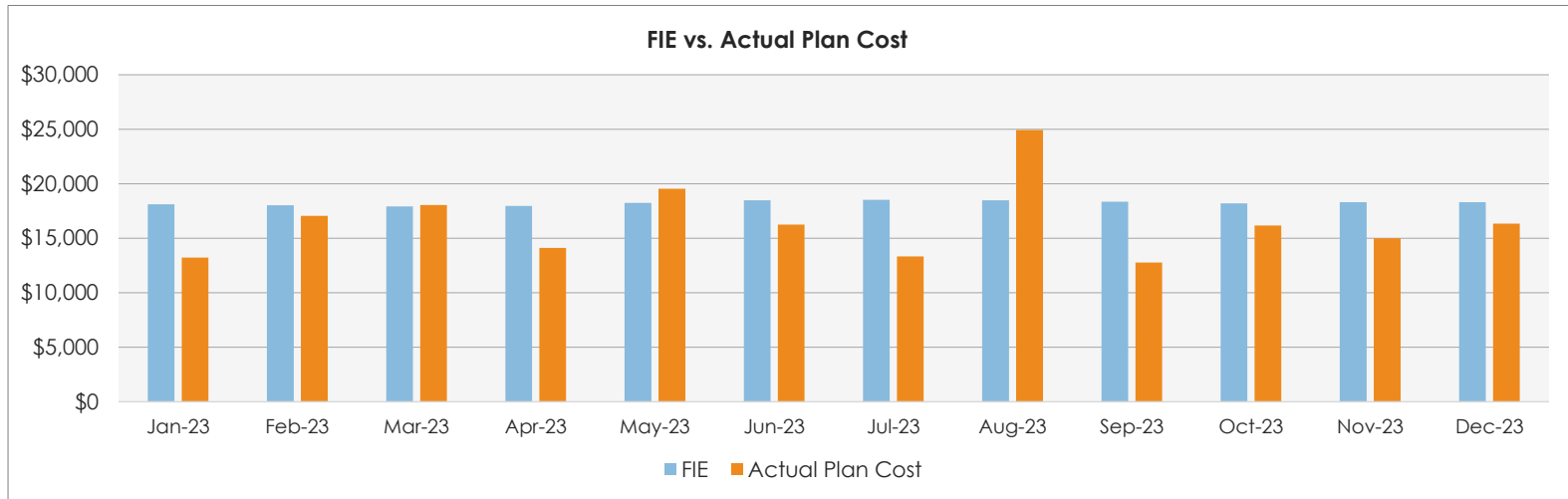
**City of Manitowoc
Dental Plan - Delta Dental
2024 Cost Summary**



	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	FIE	Paid Dental Claims	Claims / Ee	Actual	Actual/FIE	FIE to Actual Costs
Jan-24	198	\$931	\$18,453	\$18,484	93	\$19,415	105.2%	(\$962)
Feb-24	201	\$945	\$18,581	\$14,499	72	\$15,444	83.1%	\$3,137
Mar-24	200	\$940	\$18,538	\$14,361	72	\$15,301	82.5%	\$3,237
Apr-24	202	\$949	\$18,700	\$20,156	100	\$21,105	112.9%	(\$2,405)
May-24	201	\$945	\$18,658	\$15,316	76	\$16,261	87.2%	\$2,397
Jun-24	201	\$945	\$18,735	\$11,400	57	\$12,345	65.9%	\$6,390
Jul-24	201	\$945	\$18,735	\$11,436	57	\$12,381	66.1%	\$6,354
Aug-24	204	\$945	\$29,674	\$18,658	91	\$19,603	66.1%	\$10,071
Sep-24								
Oct-24								
Nov-24								
Dec-24								
Totals	1,608	\$7,544	\$160,074	\$124,310	77	\$131,854	82.4%	\$28,220



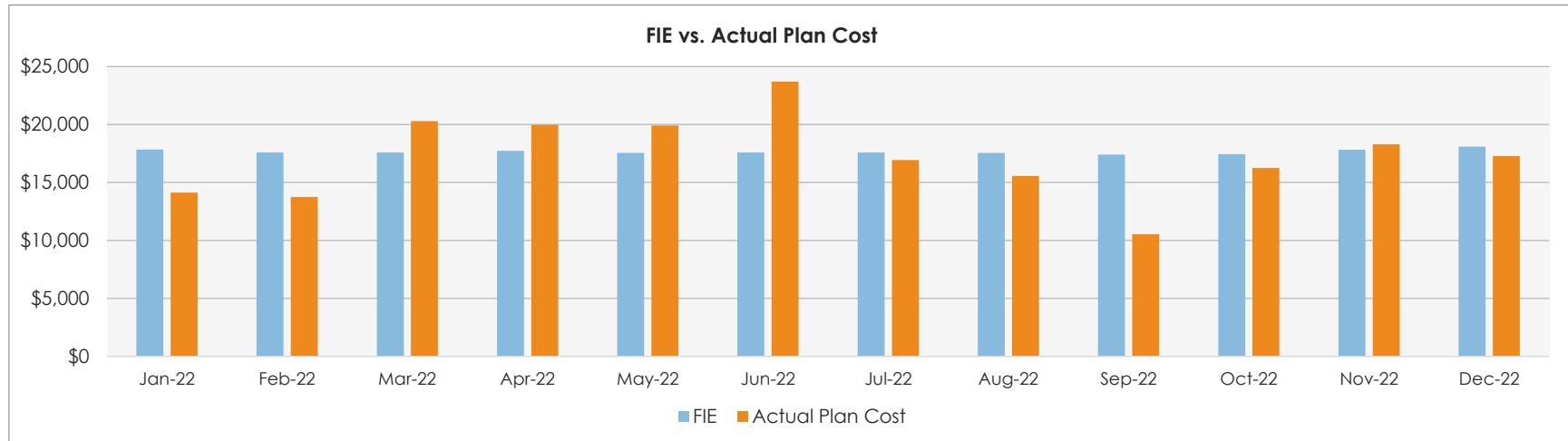
**City of Manitowoc
Dental Plan - Delta Dental
2023 Cost Summary**



	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	FIE	Paid Dental Claims	Claims / Ee	Actual	Actual/FIE	FIE to Actual Costs
Jan-23	192	\$ 902.40	\$ 18,120.69	\$12,315.00	\$64	\$13,217.40	72.9%	\$4,903.29
Feb-23	190	\$ 893.00	\$ 18,035.63	\$16,157.00	\$85	\$17,050.00	94.5%	\$985.63
Mar-23	189	\$ 888.30	\$ 17,915.93	\$17,159.00	\$91	\$18,047.30	100.7%	(\$131.37)
Apr-23	190	\$ 893.00	\$ 17,958.46	\$13,213.00	\$70	\$14,106.00	78.5%	\$3,852.46
May-23	193	\$ 907.10	\$ 18,240.39	\$18,634.00	\$97	\$19,541.10	107.1%	(\$1,300.71)
Jun-23	195	\$ 916.50	\$ 18,479.79	\$15,336.00	\$79	\$16,252.50	87.9%	\$2,227.29
Jul-23	196	\$ 921.20	\$ 18,522.32	\$12,404.00	\$63	\$13,325.20	71.9%	\$5,197.12
Aug-23	195	\$ 916.50	\$ 18,479.79	\$24,022.00	\$123	\$24,938.50	135.0%	(\$6,458.71)
Sep-23	194	\$ 911.80	\$ 18,360.09	\$11,856.00	\$61	\$12,767.80	69.5%	\$5,592.29
Oct-23	192	\$ 902.40	\$ 18,197.86	\$15,276.00	\$80	\$16,178.40	88.9%	\$2,019.46
Nov-23	193	\$ 907.10	\$ 18,317.56	\$14,090.00	\$73	\$14,997.10	81.9%	\$3,320.46
Dec-23	193	\$ 907.10	\$ 18,317.56	\$15,444.00	\$80	\$16,351.10	89.3%	\$1,966.46
Totals	2,312	\$10,866	\$218,946	\$185,906	\$80	\$196,772	89.9%	\$22,174



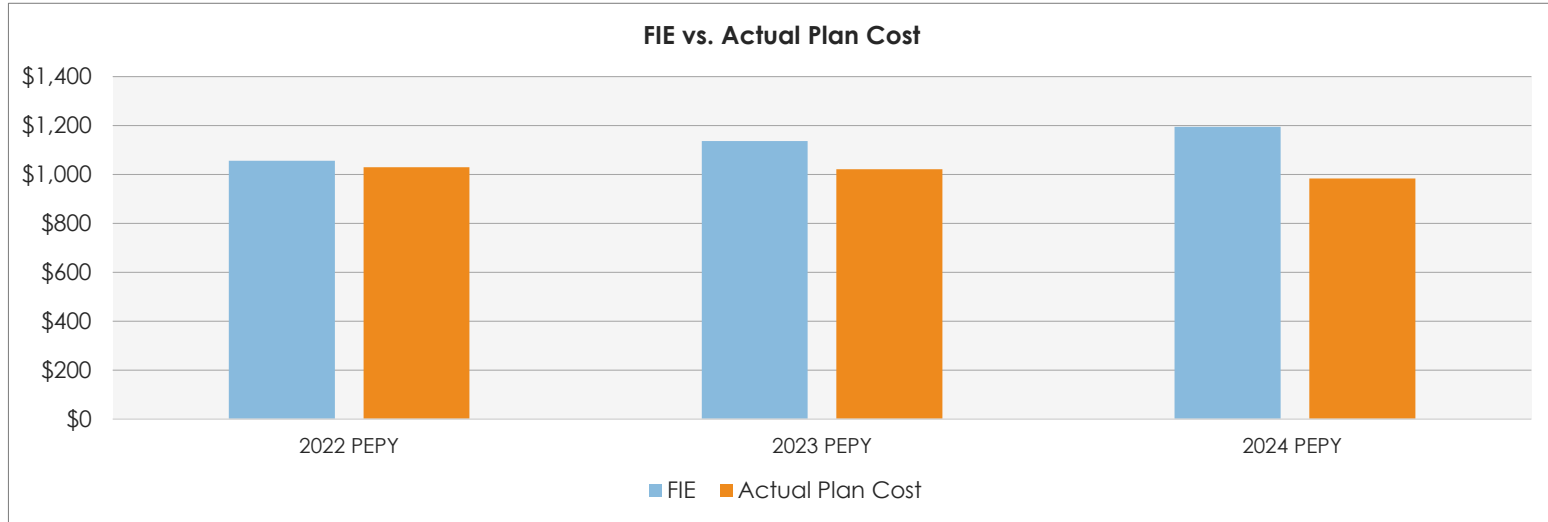
**City of Manitowoc
Dental Plan - Delta Dental
2022 Cost Summary**



	Enrollment	Fixed Costs	Claims		Claims PEPM	Total Plan Costs		Position	
	(1)	(2)	(3)	(4)	(5) = 4/1	(6) = 2+3	(6) = 2+4	(7) = 6/3	(8) = 3-6
	Total Ees	Administration	FIE	Paid Dental Claims	Claims / Ee	FIEed + Admin	Actual	Actual/FIE	FIE to Actual Costs
Jan-22	200	\$ 900.00	\$ 17,841.25	\$13,215.00	\$66	\$18,741.25	\$14,115.00	79.1%	\$3,726.25
Feb-22	197	\$ 886.50	\$ 17,575.45	\$12,863.00	\$65	\$18,461.95	\$13,749.50	78.2%	\$3,825.95
Mar-22	197	\$ 886.50	\$ 17,575.45	\$19,396.00	\$98	\$18,461.95	\$20,282.50	115.4%	(\$2,707.05)
Apr-22	201	\$ 904.50	\$ 17,735.85	\$19,061.00	\$95	\$18,640.35	\$19,965.50	112.6%	(\$2,229.65)
May-22	198	\$ 891.00	\$ 17,542.80	\$19,013.00	\$96	\$18,433.80	\$19,904.00	113.5%	(\$2,361.20)
Jun-22	199	\$ 895.50	\$ 17,582.90	\$22,802.00	\$115	\$18,478.40	\$23,697.50	134.8%	(\$6,114.60)
Jul-22	201	\$ 904.50	\$ 17,590.35	\$16,030.00	\$80	\$18,494.85	\$16,934.50	96.3%	\$655.85
Aug-22	200	\$ 900.00	\$ 17,550.25	\$14,661.00	\$73	\$18,450.25	\$15,561.00	88.7%	\$1,989.25
Sep-22	200	\$ 900.00	\$ 17,404.75	\$9,627.00	\$48	\$18,304.75	\$10,527.00	60.5%	\$6,877.75
Oct-22	201	\$ 904.50	\$ 17,444.85	\$15,340.00	\$76	\$18,349.35	\$16,244.50	93.1%	\$1,200.35
Nov-22	205	\$ 922.50	\$ 17,823.50	\$17,369.00	\$85	\$18,746.00	\$18,291.50	102.6%	(\$468.00)
Dec-22	208	\$ 936.00	\$ 18,089.30	\$16,349.00	\$79	\$19,025.30	\$17,285.00	95.6%	\$804.30
Totals	2,407	\$10,831.50	\$211,756.70	\$195,726.00	\$81	\$222,588.20	\$206,557.50	97.5%	\$5,199.20



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



Time Period	Average Employees	Paid Claims	Admin Costs	Actual Plan Costs	FIE Amount	Actual / FIE
2022 Plan Year	201	\$195,726	\$10,832	\$206,558	\$211,757	97.5%
2023 Plan Year	193	\$185,906	\$10,866	\$196,772	\$218,946	89.9%
2024 Annualized	201	\$186,465	\$11,315	\$197,780	\$240,110	82.4%

Time Period	Paid Claims	Admin Costs	Actual Plan Costs	FIE Amount
2022 PEPY	976	\$54	\$1,030	\$1,056
2023 PEPY	965	\$56	\$1,021	\$1,136
2024 PEPY	928	\$56	\$984	\$1,195

Notes

1. The current year is annualized through June
2. PEPY = Per Employee Per Year
3. FIE = Fully Insured Equivalent