WINDSOR
BENEFIT SOLUTIONS

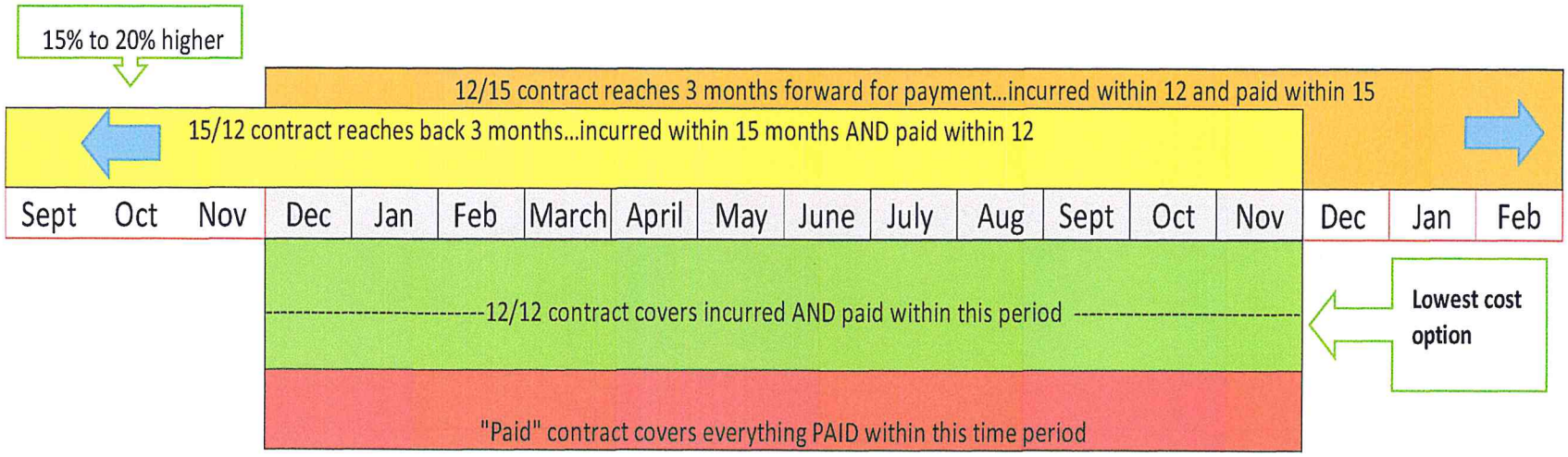
Jackson County Government

Health Insurance Renewal Information

October 12, 2016

WINDSOR
BENEFIT SOLUTIONS

Types of Reinsurance (Stop Loss) Contracts



WINDSOR
BENEFIT SOLUTIONS

Renewal Quotes (Current Carrier)

Effective Date					
12/1/2016					
Plan options	Single	204	204	204	204
Traditional Proposal	Family	51	51	51	51
FIRM through 11/1/2016	Total	255	255	255	255
Proposal Date					
September 2nd, 2014					
10/10/2016			Option 1	Option 2	Option 3
TPA		Consociate Group	Consociate Group	Consociate Group	Consociate Group
Carrier		Excess Risk/Companion	Grosvenor/ Lloyd's Underwriter	Grosvenor/ Lloyd's Underwriter	Grosvenor/ Lloyd's Underwriter
AM Best Rating		A+	A	A	A
PPO		Healthlink Open Access III	Healthlink Open Access III	Healthlink Open Access III	Healthlink Open Access III
		Current	**Renewal**	**Proposed**	**Proposed**
SPECIFIC STOP LOSS					
Annual Maximum		Unlimited	Unlimited	Unlimited	Unlimited
Specific Lifetime Maximum		Unlimited	Unlimited	Unlimited	Unlimited
Covered Benefits		*Medical/Rx*	*Medical/Rx*	*Medical/Rx*	*Medical/Rx*
Specific Deductible		$50,000	$50,000	$60,000	$75,000
Aggregating Specific Deductible		$50,000	$50,000	$50,000	$50,000
Contract Basis		12/12	12/12	12/12	12/12
FIXED COSTS					
Specific Premium	Single	96.06	103.44	86.68	70.14
	Family	240.88	266.16	231.60	187.42
Annualized Specific Premiums		382,573.44	416,111.04	353,931.84	286,403.76
Claims Administration (See Financial Exhibit)		16.25	17.75	17.75	17.75
UR / Precert (AIMM)		5.50	5.50	5.50	5.50
PPO Access		8.00	8.00	8.00	8.00
Total Administration PEPM		29.75	31.25	31.25	31.25
Annualized Administration Costs		91,035.00	95,625.00	95,625.00	95,625.00
Projected Fixed Costs(based upon Initial Enrollment)					
	Monthly	39,467.37	42,644.67	37,463.07	31,835.73
	Annual	473,608.44	511,736.04	449,556.84	382,028.76
Additional Liability(lasers & Aggregating Specific Deductible(if Applicable)					
Aggregating Deductible		50,000.00	50,000.00	50,000.00	50,000.00
Individual Laser 1 (currently $300k)	**$475,000.00**	**250,000.00**	**425,000.00**	**415,000.00**	**400,000.00**
Individual Laser 2 (currently $75k)	**$85,000.00**	**25,000.00**	**35,000.00**	**25,000.00**	**10,000.00**
Individual Laser 3	**$110,000.00**	**0.00**	**60,000.00**	**50,000.00**	**35,000.00**
Individual Laser 4	**$100,000.00**	**0.00**	**50,000.00**	**40,000.00**	**25,000.00**
Individual Laser 5	**$80,000.00**	**0.00**	**30,000.00**	**20,000.00**	**5,000.00**
Individual Laser 6	**$75,000.00**	**0.00**	**15,000.00**	**15,000.00**	**0.00**
Individual Laser 7	**$75,000.00**	**0.00**	**25,000.00**	**15,000.00**	**0.00**
Individual Laser 8--Current	**$75,000.00**	**25,000.00**	**0.00**	**0.00**	**0.00**
TOTAL ADDITIONAL LIABILITY		350,000.00	690,000.00	630,000.00	525,000.00
Summary of Costs and % of increase/decrease					
Administrative Costs		91,035.00	95,625.00	95,625.00	95,625.00
% of Change over Current			5.0%	5.0%	5.0%
Stop Loss Premiums		382,573.44	416,111.04	353,931.84	286,403.76
% of Change over Current			8.8%	-7.5%	-25.1%

WINDSOR
BENEFIT SOLUTIONS

Alternative Quote

Effective Date						
12/1/2016						
Plan options	Single	204	204	204	204	204
Traditional Proposal	Family	51	51	51	51	51
FIRM through 10/21/2016	Total	255	255	255	255	255
Proposal Date						
September 2nd, 2014						
10/10/2016			Option 7	Option 8	Option 9	Option 10
TPA		Consociate Group	Consociate Group	Consociate Group	Consociate Group	Consociate Group
Carrier		Grosvenor/Lloyd's	Excess Risk/Ironshore Indemnity	Excess Risk/Ironshore Indemnity	Excess Risk/Ironshore Indemnity	Excess Risk/Ironshore Indemnity
AM Best Rating		A	A	A	A	A
PPO		Healthlink Open Access III	Healthlink Open Access III	Healthlink Open Access III	Healthlink Open Access III	Healthlink Open Access III
		Current	**Proposed**	**Proposed**	**Proposed**	**Proposed**
SPECIFIC STOP LOSS						
Annual Maximum		Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Specific Lifetime Maximum		Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Covered Benefits		*Medical/Rx*	*Medical/Rx*	*Medical/Rx*	*Medical/Rx*	*Medical/Rx*
Specific Deductible		$50,000	$40,000	$50,000	$60,000	$75,000
Aggregating Specific Deductible		$50,000	$50,000	$50,000	$50,000	$50,000
Contract Basis		12/12	12/12	12/12	12/12	12/12
FIXED COSTS						
Specific Premium	Single	96.06	124.03	104.44	92.23	74.98
	Family	240.88	310.08	261.10	230.58	187.45
Annualized Specific Premiums		382,573.44	493,394.40	415,462.32	366,894.00	298,270.44
Claims Administration (See Financial Exhibit)		16.25	17.75	17.75	17.75	17.75
UR / Precert (AIMM)		5.50	5.50	5.50	5.50	5.50
PPO Access		8.00	8.00	8.00	8.00	8.00
Total Administration PEPM		29.75	31.25	31.25	31.25	31.25
Annualized Administration Costs		91,035.00	95,625.00	95,625.00	95,625.00	95,625.00
Projected Fixed Costs(based upon Initial Enrollment)						
	Monthly	39,467.37	49,084.95	42,590.61	38,543.25	32,824.62
	Annual	473,608.44	589,019.40	511,087.32	462,519.00	393,895.44
Additional Liability(lasers & Aggregating Specific Deductible(if Applicable)						
Aggregating Deductible		50,000.00	50,000.00	50,000.00	50,000.00	50,000.00
Individual Laser 1	$300,000.00	250,000.00	260,000.00	250,000.00	240,000.00	225,000.00
Current Only Individual 2	$75,000.00	25,000.00	0.00	0.00	0.00	0.00
Current Only Individual 3	$75,000.00	25,000.00	0.00	0.00	0.00	0.00
TOTAL ADDITIONAL LIABILITY		350,000.00	310,000.00	300,000.00	290,000.00	275,000.00
Summary of Costs and % of increase/decrease						
Administrative Costs		91,035.00	95,625.00	95,625.00	95,625.00	95,625.00
% of Change over Current			5.0%	5.0%	5.0%	5.0%
Stop Loss Premiums		382,573.44	493,394.40	415,462.32	366,894.00	298,270.44
% of Change over Current			29.0%	8.6%	-4.1%	-22.0%

WINDSOR
BENEFIT SOLUTIONS

Additional Quotes a 15 Month Contract to Reset Renewal

15/15 Contract paying premium from 12/1/2016 through 2/28/2018--Contract does not include run in or run out.

Effective Date		*15/15 Contract paying premium from 12/1/2016 through 2/28/2018--Contract does not include run in or run out.*				
12/1/2016	Single	204	204	204	204	204
Plan options	Family	51	51	51	51	51
Firm Proposal date	Total	255	255	255	255	255
FIRM through 11/11/2016						
Proposal Date						
September 2nd, 2014			15 months premium			
10/11/2016		12 months premium	Option 1	Option 2	Option 3	Option 4
TPA		Consociate Group	Consociate Group	Consociate Group	Consociate Group	Consociate Group
Carrier		Grosvenor/Lloyd's	Excess Risk/Ironshore Indemnity	Excess Risk/Ironshore Indemnity	Excess Risk/Ironshore Indemnity	Excess Risk/Ironshore Indemnity
AM Best Rating		A	A	A	A	A
PPO		Healthlink Open Access III	Healthlink Open Access III	Healthlink Open Access III	Healthlink Open Access III	Healthlink Open Access III
		Current	**Proposed**	**Proposed**	**Proposed**	**Proposed**
SPECIFIC STOP LOSS						
Annual Maximum		Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Specific Lifetime Maximum		Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Covered Benefits		*Medical/Rx*	*Medical/Rx*	*Medical/Rx*	*Medical/Rx*	*Medical/Rx*
Specific Deductible		$50,000	$40,000	$50,000	$60,000	$75,000
Aggregating Specific Deductible		$50,000	$50,000	$50,000	$50,000	$50,000
Contract Basis		12/12	15/15	15/15	15/15	15/15
FIXED COSTS						
Specific Premium	Single	96.06	169.43	144.84	128.55	106.55
	Family	240.88	423.58	362.10	321.38	266.38
Annualized Specific Premiums		382,573.44	842,494.50	720,216.90	639,218.70	529,823.70

Notes:

1) Specific exposure is for the 15 months of this contract

2) Laser exposure on the one individual increases by $75,000 because of the additional 3 months.