

2016 Stop Loss Proposal 11/30/15



**City of Foley  
Self-Funded Administration Cost Analysis**

| Carrier                                      |                                               | Optum<br>Current      | Optum<br>Renewal      | Ironshore             | BCS                   | ABS                   | Symetra               |
|----------------------------------------------|-----------------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Specific Stop Loss Deductible                |                                               | \$50,000              | \$50,000              | \$50,000              | \$50,000              | \$50,000              | \$50,000              |
| Contract Type                                |                                               | 84/12                 | 96/12                 | 24/12                 | 24/12                 | 24/12                 | 24/12                 |
| Agg Spec                                     |                                               |                       | \$50,000              |                       |                       |                       |                       |
| <u>Specific Premium</u>                      |                                               |                       |                       |                       |                       |                       |                       |
| 90                                           | Single                                        | \$64.33               | \$58.56               | \$71.05               | \$83.55               | \$96.01               | \$92.67               |
| 180                                          | Family                                        | \$161.12              | \$146.61              | \$177.63              | \$163.98              | \$205.63              | \$189.46              |
|                                              | <b>NO LASER Renewal</b>                       | <b>Yes</b>            | <b>Yes</b>            |                       |                       |                       |                       |
| Monthly Specific Premium                     |                                               | \$34,791.30           | \$31,660.20           | \$38,367.90           | \$37,035.90           | \$45,654.30           | \$42,443.10           |
| Annual Specific Premium                      |                                               | \$417,495.60          | \$379,922.40          | \$460,414.80          | \$444,430.80          | \$547,851.60          | \$509,317.20          |
| Aggregate Premium Per Employee per Month     |                                               | \$6.32                | \$1.50                | \$6.48                | \$6.48                | \$5.48                | \$4.94                |
| <b>270 Annual Aggregate Premium</b>          |                                               | <b>\$20,476.80</b>    | <b>\$4,860.00</b>     | <b>\$20,995.20</b>    | <b>\$20,995.20</b>    | <b>\$17,755.20</b>    | <b>\$16,005.60</b>    |
| <b>A.</b>                                    | <b>Total Annual Fixed Costs</b>               | <b>\$437,972.40</b>   | <b>\$384,782.40</b>   | <b>\$481,410.00</b>   | <b>\$465,426.00</b>   | <b>\$565,606.80</b>   | <b>\$525,322.80</b>   |
| <b>Aggregate Factors (Includes)</b>          |                                               |                       |                       |                       |                       |                       |                       |
| Contract Type                                |                                               | 84/12                 | 96/12                 | 24/12                 | 24/12                 | 24/12                 | 24/12                 |
| 112                                          | Single                                        | \$478.40              | \$459.26              | \$476.51              | \$496.29              | \$471.36              | \$525.42              |
| 180                                          | Family                                        | \$1,267.75            | \$1,217.04            | \$1,262.75            | \$1,338.77            | \$1,281.70            | \$1,225.77            |
| <b>B.</b>                                    | <b>Est. Aggregate Attachment Point (125%)</b> | <b>\$3,381,309.60</b> | <b>\$3,246,051.84</b> | <b>\$3,367,969.44</b> | <b>\$3,558,756.96</b> | <b>\$3,401,979.84</b> | <b>\$3,353,827.68</b> |
| <b>C.</b>                                    | <b>Expected Claims (100%)</b>                 | <b>\$2,705,047.68</b> | <b>\$2,596,841.47</b> | <b>\$2,694,375.55</b> | <b>\$2,847,005.57</b> | <b>\$2,721,583.87</b> | <b>\$2,683,062.14</b> |
| <b>Total Annualized Maximum Costs (A+B)</b>  |                                               | <b>\$3,819,282.00</b> | <b>\$3,630,834.24</b> | <b>\$3,849,379.44</b> | <b>\$4,024,182.96</b> | <b>\$3,967,586.64</b> | <b>\$3,879,150.48</b> |
| <b>Total Annualized Expected Costs (A+C)</b> |                                               | <b>\$3,143,020.08</b> | <b>\$2,981,623.87</b> | <b>\$3,175,785.55</b> | <b>\$3,312,431.57</b> | <b>\$3,287,190.67</b> | <b>\$3,208,384.94</b> |

Note: Rates are rounded to the third decimal place and all other figures to the second decimal place. This accounts for any small discrepancy in cost calculations.  
Actual rates and contract provisions will be determined by the specific carrier after completion of underwriting.