2022 Stop Loss Renewal and Marketing Presentation

Presented by:



SAN JOAQUIN VALLEY INSURANCE AUTHORITY (SJ' Table of Contents



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FINAL RESULTS

Effective Date: January 1, 2022

I. Stop Loss Marketing and Renewal Results:

- Stop loss RFP marketed to fourteen (14) stop loss carriers. Six (6) carriers quoted (including the incumbent), the others declined.

II. PartnerRe. Renewal:

- Initial Renewal offer is an approximate +14.2% increase, or an additional \$223,517, in annual premium when compared to current
- **Final** Renewal offer at the current Specific Deductible of \$450,000, is an approximate **+7.0%** increase, or an additional \$110,620, in annual premium and a savings of \$112,898, in annual premium when compared to the initial renewal offer.

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Alternate Renewal Deductible Options:

- Renewal Option 1: -5.0% decrease with a change in Specific Deductible for \$450,000 to \$475,000

Potential Premium Dividend/Refund - Illustrates a potential reward in the amount of \$136,252, based on (SJVIA) year to date loss ratio.

- The dividend projection based paid claims as of 9/30/2021. Claims payments could change by policy end, resulting in a different refund amount.
- Dividend are contingent on renewal with PartnerRe. Groups are not reviewed for a premium refund until 12 months after the contract period.

Proposal Contingencies:

- Includes Mirroring Endorsement
- Includes No New Lasers with a 50% Renewal Cap
- Includes Experience Refund Dividend Eligible Agreement 25% of eligible premium
- Disclosure required

Claim disclosure information provided to date for this account has been reviewed and no further information is needed. Rates effective 01/01/2021 are firm and final if accepted by 12/10/2021. If acceptance is not provided by this date, updated disclosure information will be needed to finalize.



FINAL RESULTS

Effective Date: January 1, 2022



III. Granular Proposed:

- **Proposed** - offer is an approximate -5.8% decrease, or a reduction of \$90,343, in annual premium when compared to current

Alternate Renewal Deductible Options:

- Proposed Option 1: -15.3% decrease with a change in Specific Deductible for \$450,000 to \$475,000

Proposal Contingencies:

- Includes Mirroring Endorsement
- Includes No New Lasers with a Rate cap first year 35% Renewal (2023); Rate cap 40% upon the second renewal (2024)
- Includes Experience Refund Dividend Eligible Agreement 40% of eligible premium
- Disclosure required

Claim disclosure information provided to date for this account has been reviewed and no further information is needed. Rates effective 01/01/2021 are firm and final if accepted by 12/10/2021. If acceptance is not provided by this date, updated disclosure information will be needed to finalize.

SAN JOAQUIN VALLEY INSURANCE AUTHORITY (SJVIA) Stop Loss RFP Analysis Carrier Responses



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Carrier	Financial Rating	Status	Note
American National /IOA Re	A (Excellent)	Quoted	Uncompetitive with proposed renewal 6.0% above current
Anthem	A (Excellent)	Declined	Uncompetitive with current rates
Berkshire Hathaway	A++(Superior)	Quoted	Uncompetitive with proposed renewal 33% above current
Gerber Life/Vista	A (Excellent)	Quoted	Uncompetitive with proposed renewal 36% above current
Granular	A (Excellent)	Quoted	Finalist
Liberty	A (Excellent)	Quoted	Uncompetitive with proposed renewal 6.0% above current
Optum	A (Excellent)	Declined	Uncompetitive with current rates
Pan American/Evolution Risk	A (Excellent)	Declined	Uncompetitive with current rates
PartnerRe (Incumbent)	A+ (Superior)	Quoted	Finalist
QBE	A (Excellent)	Declined	Uncompetitive with current rates
Sun Life	A+ (Superior)	Declined	Uncompetitive with current rates
Symetra	A (Excellent)	Declined	Uncompetitive with current rates
тм нсс	A++ (Superior)	Declined	Uncompetitive with current rates
Voya Financial	A (Excellent)	Declined	Uncompetitive with current rates

Financial Summary

Effective Date: January 1, 2022



<u>PartnerRe.</u>

SPECIFIC DEDUCTIBLE OPTIONS \$450,000 \$450,000 \$475,000

Projected Annual Premium
% Increase/Decrease over Current
\$ Increase/Decrease over Current

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Current Premium	Final Renewal
\$1,571,138	\$1,681,758
	7.0%
	\$110,620

	Renewal Option 1								
	\$1,492,910								
	-5.0%								
l	(\$78,229)								

Granular/Point6

SPECIFIC DEDUCTIBLE OPTIONS

Projected Annual Premium
% Increase/Decrease over Current
\$ Increase/Decrease over Current

\$450,000 \$475,000

Proposed Option	Proposed Option 1
\$1,480,796	\$1,331,314
-5.8%	-15.3%
(\$90,343)	(\$239,825)

SAN JOAQUIN VALLEY INSURANCE AUTHORITY (SJVIA) Financial Summary



Effective Date: January 1, 2022

PartnerRe - Please review Proposal Assumptions and Contingencies:

- For inclusion of prescription drug (Rx) coverage under the Specific and/or Aggregate coverage(s) when there is a separate PBM, PartnerRe requires written documentation for underwriting purposes that all Rx experience reports have been received. Otherwise, Rx will not be a covered expense under the stop loss policy. PartnerRe is not responsible for aggregating medical and Rx claims data during quotation or policy
- Current copies of the Plan Document, all Amendments and Restatements of the Plan Document are required to be submitted and approved by PartnerRe prior to the effective date of coverage.
- All claim reporting submitted from the selected Administrator should be provided to PartnerRe in sortable Microsoft Excel format throughout the Policy and Proof of Loss Periods. Failure to do so could result in a delay of claim reimbursements.
- Quotation based on Retirees over 65 are Medicare Primary.
- Actively at Work is waived with receipt and acceptance of the PartnerRe Claim Disclosure Statement.
- This Quotation assumes that the Agent/Broker is operating under the appropriate license in which the risk is domiciled. The Agent/Broker license and appointment with PartnerRe will be required prior to binding coverage.
- This Quotation is subject to cancellation or revision prior to the binding of coverage.
- The statements herein may vary from the final Policy wording. The final Policy wording along with the Excess Loss Insurance Application and Claims Disclosure Statement shall govern over any inconsistency with the wording herein.
- If the Excess Loss Insurance Policy is renewed, We guarantee that Your Premium rate(s) (and Aggregated Specific Deductible if applicable) as shown on the [initial] Schedule of Insurance will not be increased more than the indicated percentage, provided that there are no Material Changes that alter the risk under the current Excess Loss Insurance Policy. See Policy Endorsement for complete benefit details.
- Upon renewal, We guarantee no new lasers for the options shown above in which No New Lasers at Next Renewal is Guaranteed.
- The Company will pay the Policyholder 25% of the NET profit for this Policy after both parties have agreed to commute the Policy for the specific policy period. Net profit means 60% of gross premium, minus 100% of the total amount reimbursed by Company and any deficit carry-forward from prior policy year(s). Experience refund is payable only if the gross premium is not less than \$1,000,000, the results of the refund calculation are a positive balance, and the Policyholder renews coverage with the Company for a subsequent Policy Period beginning 1/1/23.

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SAN JOAQUIN VALLEY INSURANCE AUTHORITY (SJVIA) Financial Summary



Effective Date: January 1, 2022

Granular - Please review Proposal Assumptions and Contingencies:

- All claims are reported/paid in U.S. dollars.
- The proposal is based on the data provided. The proposal may be modified if data changes or under other conditions as specified in this document.
- This proposal is based on the continuation of the current plan(s) of benefits.
- If the number of covered employees or the percentage of family participants change by more than 15% this proposal may be revised.
- If this proposal includes an offer of aggregate coverage, the monthly aggregate factor cannot be finalized more than 90 days from the effective date.
- Advance Funding is included.
- Retirees are covered under the Granular Insurance Policy. It is the responsibility of the employer to identify to Granular Insurance all retirees to be covered under the Granular Insurance Policy. If a group does not have retirees, their rate will not be impacted.
- This proposal is valid only if presented by a licensed insurance agent or broker who is appointed by Granular Insurance Company.
- The agent/broker does not have the authority to bind or modify the terms of his offer without prior approval of Granular.
- We require notification 30 days prior to the acquisition date of any employer completed merger or acquisition.
- Underwriting serves the right to modify coverage terms when a new division is added or deleted from coverage or when plan and/or network changes occur.
- Granular agrees to accept for claims reimbursement the employer's plan document.
- If the aggregate is quoted, then the minimum annual aggregate total is 90% of the first month's enrollment times monthly aggregate attachment points.

Experience Refund as described below:

- We will refund to You a portion of the net profit from the Policy period beginning 01/01/2022 and ending 12/31/2022 if the following conditions are satisfied:
- The gross premium due and paid for the Policy year is not less than \$400,000; and The Policy is renewed for a subsequent Policy year by Us; and The results of the refund calculation are in a positive balance. If the refund calculation results in a negative balance, no refund will be paid.
- The amount of the refund will be 40% of the result of the following calculation:
 - 1. 70% of gross premium due and paid by You for the Policy year shown above,
 - 2. Minus 100% of the Losses for the Policy year, minus the amount of the Deficit Carry Forward.
- The calculation of the Experience Refund will be completed on the later of 12 months after the end of the Policy year shown above, or the date when the Losses for that Policy year are finally determined and the Policyholder and the Company have agreed to settle and commute their interests and liabilities under the Policy.



Effective Date: January 1, 2022

STOP LOSS MARKETING ANALYSIS - \$450,000 or \$475,000 SSL Deductible

SPECIFIC STOP LOSS		Current			Initial Renewal		Final Renewal		Renewal Option 1		Proposed Option	Proposed Option 1	
Carrier Name			PartnerRe.							Granular/Point6			
Stop Loss Deductible		\$	450,000	\$	450,000	\$	450,000	\$	475,000	\$	450,000	\$	475,000
Annual Max Reimbursement			Unlimited		Unlimited		Unlimited		Unlimited		Unlimited		Unlimited
Contract Basis			12/18		12/18		12/18		12/18		12/18		12/18
Covered Expense			Medical, Rx		Medical, Rx		Medical, Rx		Medical, Rx		Medical, Rx		Medical, Rx
Specific Premium													
Ee	4,798	\$	13.33	\$	15.42	\$	14.45	\$	12.82	\$	13.79	\$	12.40
Family	<u>2,067</u>	\$	32.40	\$	36.56	\$	34.26	\$	30.43	\$	27.69	\$	24.89
Composite Rate	6,865	\$	19.07	\$	21.79	\$	20.41	\$	18.12	\$	17.98	\$	16.16
Monthly		\$	130,928	\$	149,555	\$	140,146.52	\$	124,409.17	\$	123,399.65	\$	110,943
Annual Premium		\$	1,571,138	\$	1,794,656	\$	1,681,758	\$	1,492,910	\$	1,480,796	\$	1,331,314
% Difference					14.2%		7.0%		-5.0%		-5.8%		-15.3%
\$ Difference				\$	223,517	\$	110,620	\$	(78,229)	\$	(90,343)	\$	(239,825)
2021 Estimated Experience Credit Refund*					\$136	5,252	2						
Overall Cost Summary			Current		Initial Renewal		Final Renewal	R	Renewal Option 1	F	Proposed Option	Pr	oposed Option 1
Maximum Annual Liability		\$	1,571,138	\$	1,794,656	\$	1,681,758	\$	1,492,910	\$	1,480,796	\$	1,331,314
Max Annual Lability after Experience Refund		\$	1,571,138	\$	1,658,404	\$	1,545,507	\$	1,356,658	\$	1,480,796	\$	1,331,314
% Increase/Decrease over Current					5.6%		-1.6%		-13.7%		-5.8%		-15.3%
\$ Increase/Decrease over Current				\$	87,267	\$	(25,631)	\$	(214,479)	\$	(90,342)	\$	(239,824)

^{*} Please note that this is a preliminary calculation, and the final calculation will be completed on the later of twelve (12) months after the end of the Policy Period or when Our (PartnerRe) Liability for the Policy Period is finally determined and both parties have agreed to settle and commute their interests and liabilities under this Policy.

SAN JOAQUIN VALLEY INSURANCE AUTHORITY (SJVIA) Total Claims Paid Exceeding \$100,000



Paid Date Range: 1/1/2021 To 9/30/2021

# of		Med	RX	Total
Claimant	County	Amount Paid	Amount Paid	Amount Paid
1	COF	\$ 598,012	\$ 4,825	\$ 602,837
2	COF	\$ 455,572	\$ -	\$ 455,572
3	COF	\$ 392,159	\$ 1,569	\$ 393,728
4	COF	\$ 302,487	\$ 28,093	\$ 330,580
5	COF	\$ 283,188	\$ 81	\$ 283,270
Total		\$ 2,031,419	\$ 34,568	\$ 2,065,987

SAN JOAQUIN VALLEY INSURANCE AUTHORITY (SJVIA) Loss History



Effective	Carrier	Specific Deductible Basis		Covg.	Premium Paid	Paid Claims	Stop Loss Recovery	
2021-YTD -9/30/21	PartnerRe.	\$ 450,000	12/18	MED/RX	\$ 1,171,483	\$ 157,883	13.5%	

\$ 1,171,483 \$ 157,883 13.5%