

San Joaquin Valley Insurance Authority (SJVIA)

2025 Stop Loss Renewal and Marketing Presentation

Presented by:

Keenan

Table of Contents

Executive Summary.....	Page 1
Carrier Responses.....	Page 2
Financial Summary and Proposal Contingencies.....	Pages 3-4
Stop Loss Renewal & Marketing Analysis - Current/Proposed.....	Pages 5-7
Large Claims Summary (PAID) 1/1/24 - 9/30/24.....	Page 8
Large Claims Summary (PAID) 1/1/23 - 6/30/24.....	Page 9
Large Claims Summary (PAID) 1/1/22 - 6/30/23.....	Page 10
Aggregating Specific Deductible (ASD) Scenario.....	Page 11

San Joaquin Valley Insurance Authority (SJVIA)

Executive Summary

FINAL RESULTS

Effective Date: January 1, 2025

Keenan

I. Stop Loss Marketing and Renewal Results:

- Stop loss RFP marketed to twenty-three (23), stop loss carriers and MGU's

II. Granular:

- **Initial** - Renewal offer at the current \$475,000 Specific Deductible, is an approximate +38.0% increase, or an additional \$912,259, in estimated annual premium.
- **Final** - Renewal offer at the current \$475,000 Specific Deductible, is an approximate **+29.4%** increase, or an additional \$706,476, in estimated annual premium.

Alternate Deductible Options:

- Renewal Option 1 : **+25.7%** increase holding the current Specific Deductible of \$475,000 with a **\$200,000** Aggregating Specific Deductible (ASD).
- Renewal Option 2 : **+22.6%** increase holding the current Specific Deductible of \$475,000 with a **\$300,000** (ASD).
- Renewal Option 3 : **+21.6%** increase with a change in Specific Deductible from \$475,000 to **\$490,000 w/ \$200,000** (ASD).
- Renewal Option 4 : **+18.7%** increase with a change in Specific Deductible from \$475,000 to **\$490,000 w/ \$300,000** (ASD).
- Renewal Option 5 : **+19.1%** increase with a change in Specific Deductible from \$475,000 to **\$500,000 w/ \$200,000** (ASD).
- Renewal Option 6 : **+16.2%** increase with a change in Specific Deductible from \$475,000 to **\$500,000 w/ \$300,000** (ASD).

Proposal Contingencies:

- Includes Mirroring Endorsement
- Includes No New Laser
- Includes 40%, Renewal Rate Cap
- Includes Experience credit refunding
- Includes Specific Advance Funding

San Joaquin Valley Insurance Auth

Stop Loss RFP Analysis

Carrier Responses

Keenan

Carrier	Financial Rating	Status	Note
Carrier 1	A (Excellent)	Declined	Uncompetitive with renewal rates
Carrier 2	A- (Excellent)	Declined	Uncompetitive with renewal rates
Carrier 3	A (Excellent)	Declined	Uncompetitive with renewal rates
Carrier 4	A+ (Superior)	Declined	Loss History
Carrier 5	A++(Superior)	Declined	Group Structure
Carrier 6	A+ (Superior)	Declined	Uncompetitive with renewal rates
Carrier 7	A++ (Superior)	Declined	Large Claimant Conditions
Carrier 8	A (Excellent)	Declined	Uncompetitive with renewal rates
Carrier 9	A+ (Superior)	Declined	Uncompetitive with renewal rates
Carrier 10	A- (Excellent)	Incumbant	Quoted
Carrier 11	A++(Superior)	Quoted	Quoted, uncompetitive
Carrier 12	A (Excellent)	Declined	Uncompetitive with renewal rates
Carrier 13	A (Excellent)	Quoted	Quoted, uncompetitive, will not match terms
Carrier 14	A+ (Superior)	Declined	Uncompetitive with renewal rates
Carrier 15	A+ (Superior)	Declined	Unwilling to match terms
Carrier 16	A (Excellent)	Declined	Uncompetitive with renewal rates
Carrier 17	A (Excellent)	Declined	Group Structure
Carrier 18	A (Excellent)	Declined	Ongoing risk
Carrier 19	A- (Excellent)	Declined	Uncompetitive with renewal rates
Carrier 20	A+ (Superior)	Declined	Uncompetitive with renewal rates
Carrier 21	A+ (Superior)	Declined	Group Structure
Carrier 22	A (Excellent)	Declined	Uncompetitive with renewal rates
Carrier 23	A (Excellent)	Declined	Uncompetitive with renewal rates

San Joaquin Valley Insurance Authority (SJVIA)

Financial Summary

Effective Date: January 1, 2025

Keenan

Granular

SPECIFIC DEDUCTIBLE OPTIONS

\$475,000

\$475,000

\$475,000

\$475,000

AGGREGATING SPECIFIC DEDUCTIBLE (ASD)

N/A

N/A

\$200,000

\$300,000

	Current Premium	Final Renewal	Renewal Option 1	Renewal Option 2
Projected Annual Premium	\$2,401,817	\$3,108,293	\$3,017,918	\$2,945,568
% Increase/Decrease over Current		29.4%	25.7%	22.6%
\$ Increase/Decrease over Current		\$706,476	\$616,101	\$543,751

SPECIFIC DEDUCTIBLE OPTIONS

\$490,000

\$490,000

\$500,000

\$500,000

AGGREGATING SPECIFIC DEDUCTIBLE (ASD)

\$200,000

\$300,000

\$200,000

\$300,000

	Renewal Option 3	Renewal Option 4	Renewal Option 5	Renewal Option 6
Projected Annual Premium	\$2,921,034	\$2,852,064	\$2,859,950	\$2,791,230
% Increase/Decrease over Current	21.6%	18.7%	19.1%	16.2%
\$ Increase/Decrease over Current	\$519,217	\$450,247	\$458,133	\$389,413

San Joaquin Valley Insurance Authority (SJVIA)

Financial Summary

Effective Date: January 1, 2025

Keenan

Granular - Please review Proposal Assumptions and Contingencies:

- Quoted rates include the following:
 - 0% Commission
 - 40% Renewal Rate Cap
 - No New Lasers
 - Plan Mirroring
- We will refund to You a portion of the net profit from the Policy period beginning 01/01/2025 and ending 12/31/2025 if the following conditions are satisfied:
 1. The gross premium due and paid for the Policy year is not less than \$1,909,061; and
 2. The Policy is renewed for a subsequent Policy year by Us; and
 3. 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 30% of the result of the following calculation:
 1. 66% 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.
- Rates and Factors subject to attached Qualifications and Contingencies and Plan Document Assumptions.
- 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 not covered.
- 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.

San Joaquin Valley Insurance Authority (SJVIA)

Effective Date: January 1, 2025

Stop Loss Marketing Analysis - \$475,000 , \$490,000 and \$500,000 SSL Deductible with a \$200,000 and \$300,000 Aggregating Specific Deductible"

Keenan

SPECIFIC STOP LOSS		Current	Initial Renewal	Final Renewal	Renewal Option 1	Renewal Option 2
Carrier Name		Granular			Granular	
Stop Loss Deductible		\$ 475,000	\$ 475,000	\$ 475,000	\$ 475,000	\$ 475,000
Aggregating Specific Deductible (ASD)		N/A	N/A	N/A	\$ 200,000	\$ 300,000
Annual Max Reimbursement		Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Contract Basis		12/18	12/18	12/18	12/18	12/18
Commissions		0%	0%	0%	0%	0%
Covered Expense		Medical, Rx	Medical, Rx	Medical, Rx	Medical, Rx	Medical, Rx
Specific Premium						
Ee	5,224	\$ 21.28	\$ 29.36	\$ 27.54	\$ 26.74	\$ 26.10
Family	2,082	\$ 42.74	\$ 58.98	\$ 55.31	\$ 53.70	\$ 52.41
Composite Rate	7,306	\$ 27.40	\$ 37.80	\$ 35.45	\$ 34.42	\$ 33.60
Monthly		\$ 200,151	\$ 276,173	\$ 259,024	\$ 251,493	\$ 245,464
Annual Premium		\$ 2,401,817	\$ 3,314,076	\$ 3,108,293	\$ 3,017,918	\$ 2,945,568
% Difference			38.0%	29.4%	25.7%	22.6%
\$ Difference			\$ 912,259	\$ 706,476	\$ 616,101	\$ 543,751

San Joaquin Valley Insurance Authority (SJVIA)

Effective Date: January 1, 2025

Stop Loss Marketing Analysis - \$475,000 , \$490,000 and \$500,000 SSL Deductible with a \$200,000 and \$300,000 Aggregating Specific Deductible"

Keenan

SPECIFIC STOP LOSS				Renewal Option 3	Renewal Option 4
Carrier Name	Current	Initial Renewal	Final Renewal	Granular	
Stop Loss Deductible	\$ 475,000	\$ 475,000	\$ 475,000	\$ 490,000	\$ 490,000
Aggregating Specific Deductible (ASD)	N/A	N/A	N/A	\$ 200,000	\$ 300,000
Annual Max Reimbursement	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Contract Basis	12/18	12/18	12/18	12/18	12/18
Commissions	0%	0%	0%	0%	0%
Covered Expense	Medical, Rx	Medical, Rx	Medical, Rx	Medical, Rx	Medical, Rx
Specific Premium					
Ee	5,224	\$ 21.28	\$ 29.36	\$ 25.88	\$ 25.27
Family	2,082	\$ 42.74	\$ 58.98	\$ 51.98	\$ 50.75
Composite Rate	7,306	\$ 27.40	\$ 37.80	\$ 33.32	\$ 32.53
Monthly		\$ 200,151	\$ 276,173	\$ 243,419	\$ 237,672
Annual Premium	\$ 2,401,817	\$ 3,314,076	\$ 3,108,293	\$ 2,921,034	\$ 2,852,064
% Difference		38.0%	29.4%	21.6%	18.7%
\$ Difference		\$ 912,259	\$ 706,476	\$ 519,217	\$ 450,247

San Joaquin Valley Insurance Authority (SJVIA)

Effective Date: January 1, 2025

Stop Loss Marketing Analysis - \$475,000 , \$490,000 and \$500,000 SSL Deductible with a \$200,000 and \$300,000 Aggregating Specific Deductible"

Keenan

SPECIFIC STOP LOSS		Current	Initial Renewal	Final Renewal	Renewal Option 5	Renewal Option 6
Carrier Name		Granular			Granular	
Stop Loss Deductible		\$ 475,000	\$ 475,000	\$ 475,000	\$ 500,000	\$ 500,000
Aggregating Specific Deductible (ASD)		N/A	N/A	N/A	\$ 200,000	\$ 300,000
Annual Max Reimbursement		Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Contract Basis		12/18	12/18	12/18	12/18	12/18
Commissions		0%	0%	0%	0%	0%
Covered Expense		Medical, Rx	Medical, Rx	Medical, Rx	Medical, Rx	Medical, Rx
Specific Premium						
Ee	5,224	\$ 21.28	\$ 29.36	\$ 27.54	\$ 25.34	\$ 24.73
Family	2,082	\$ 42.74	\$ 58.98	\$ 55.31	\$ 50.89	\$ 49.67
Composite Rate	7,306	\$ 27.40	\$ 37.80	\$ 35.45	\$ 32.62	\$ 31.84
Monthly		\$ 200,151	\$ 276,173	\$ 259,024	\$ 238,329	\$ 232,602
Annual Premium		\$ 2,401,817	\$ 3,314,076	\$ 3,108,293	\$ 2,859,950	\$ 2,791,230
% Difference			38.0%	29.4%	19.1%	16.2%
\$ Difference			\$ 912,259	\$ 706,476	\$ 458,133	\$ 389,413

San Joaquin Valley Insurance Authority (SJVIA)*Keenan*

Total Claims Paid

Exceeding \$225,000

Incurred Date Range: 1/1/2024 To 9/30/2024

Paid Date Range: 1/1/2024 To 9/30/2024

# of Claimant	Relation	County	Medical Plan	Med Amount Paid	RX Amount Paid	Total Amount Paid
1	Employee/Self	COF	EPO	\$ 970,566	\$ 24,718	\$ 995,284
2	Child/Dependent	COT	PPO	\$ 687,149	\$ 52	\$ 687,201
3	Child/Dependent	COF	EPO	\$ 538,724	\$ 32,199	\$ 570,922
4	Employee/Self	COF	EPO	\$ 349,492	\$ 181,791	\$ 531,283
5	Spouse/Partner	COT	PPO	\$ 9,781	\$ 392,145	\$ 401,926
6	Child/Dependent	COT	PPO	\$ 300,768	\$ -	\$ 300,768
7	Employee/Self	COF	EPO	\$ 257,930	\$ 28,046	\$ 285,976
8	Employee/Self	COF	EPO	\$ 272,906	\$ 50	\$ 272,955
9	Child/Dependent	COT	PPO	\$ 1,108	\$ 246,423	\$ 247,532
10	Spouse/Partner	COF	EPO	\$ 227,584	\$ 13,352	\$ 240,936
11	Employee/Self	COF	EPO	\$ 237,162	\$ 1,073	\$ 238,235
12	Employee/Self	COF	EPO	\$ 236,397	\$ 1,161	\$ 237,558
13	Employee/Self	COT	PPO	\$ 228,599	\$ -	\$ 228,599
Total				\$ 4,318,167	\$ 921,008	\$ 5,239,175

San Joaquin Valley Insurance Authority (SJVIA)

Total Claims Paid

Exceeding \$225,000

Keenan

Incurred Date Range: 1/1/2023 To 12/31/2023

Paid Date Range: 1/1/2023 To 6/30/2024

# of Claimant	Relation	County	Medical Plan	Med Amount Paid	RX Amount Paid	Total Amount Paid
1	Child/Dependent	COT	PPO	\$ 715,596	\$ 32	\$ 715,627
2	Child/Dependent	COF	EPO	\$ 666,711	\$ 540	\$ 667,250
3	Child/Dependent	COF	EPO	\$ 548,040	\$ 141	\$ 548,180
4	Child/Dependent	COF	EPO	\$ 466,276	\$ 37,132	\$ 503,408
5	Child/Dependent	COT	PPO	\$ 5,028	\$ 492,631	\$ 497,659
6	Employee/Self	COF	H S A	\$ 429,660	\$ 1,268	\$ 430,928
7	Employee/Self	COT	PPO	\$ 400,519	\$ 218	\$ 400,737
8	Employee/Self	COF	EPO	\$ 373,901	\$ 83	\$ 373,984
9	Employee/Self	COF	EPO	\$ 332,341	\$ 7,363	\$ 339,704
10	Employee/Self	COF	EPO	\$ 319,304	\$ 15,805	\$ 335,109
11	Employee/Self	COF	EPO	\$ 310,180	\$ 11,201	\$ 321,381
12	Employee/Self	COT	PPO	\$ 279,606	\$ 18,053	\$ 297,659
13	Employee/Self	COF	EPO	\$ 280,271	\$ 3,493	\$ 283,764
14	Employee/Self	COT	PPO	\$ 275,510	\$ 7,704	\$ 283,214
15	Employee/Self	COF	EPO	\$ 264,523	\$ 11,371	\$ 275,894
16	Spouse/Partner	COF	EPO	\$ 261,314	\$ 9,021	\$ 270,335
17	Spouse/Partner	COF	H S A	\$ 264,093	\$ 5,632	\$ 269,725
18	Spouse/Partner	COF	EPO	\$ 228,635	\$ 37,358	\$ 265,994
19	Employee/Self	COT	PPO	\$ 264,644	\$ 572	\$ 265,217
20	Spouse/Partner	COT	PPO	\$ 245,267	\$ 15,071	\$ 260,338
Total				\$ 6,931,419	\$ 674,689	\$ 7,606,108

San Joaquin Valley Insurance Authority (SJVIA)

Keenan

Total Claims Paid

Exceeding \$225,000

Incurred Date Range: 1/1/2022 To 12/31/2022

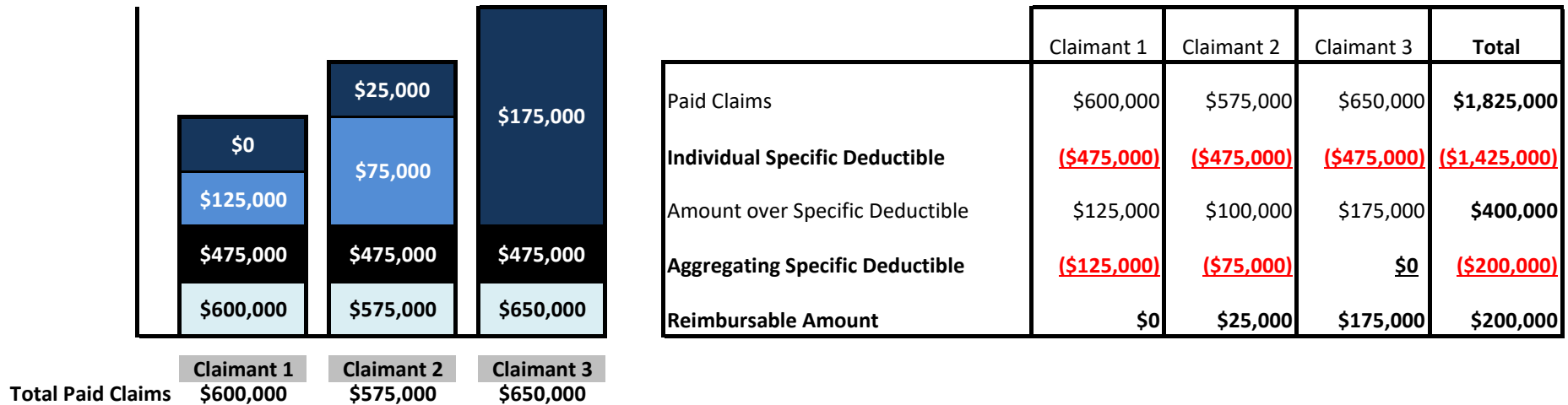
Paid Date Range: 1/1/2022 To 6/30/2023

# of Claimant	Relation	County	Medical Plan	Med Amount Paid	RX Amount Paid	Total Amount Paid
1	Child/Dependent	COF	EPO	\$ 1,234,426	\$ 22,967	\$ 1,257,393
2	Child/Dependent	COF	EPO	\$ 689,559	\$ -	\$ 689,559
3	Child/Dependent	COF	EPO	\$ 495,724	\$ 32,064	\$ 527,788
4	Child/Dependent	COF	EPO	\$ 526,572	\$ 438	\$ 527,010
5	Child/Dependent	COF	EPO	\$ 526,479	\$ 353	\$ 526,832
6	Child/Dependent	COF	EPO	\$ 497,988	\$ -	\$ 497,988
7	Child/Dependent	COF	HSA	\$ 477,482	\$ -	\$ 477,482
8	Child/Dependent	COT	PPO	\$ 451,026	\$ 9,502	\$ 460,528
9	Child/Dependent	COF	EPO	\$ 420,795	\$ 85	\$ 420,880
10	Child/Dependent	COF	EPO	\$ 388,451	\$ 25,064	\$ 413,515
11	Child/Dependent	COT	PPO	\$ 404,162	\$ 165	\$ 404,327
12	Employee/Self	COF	EPO	\$ 379,425	\$ -	\$ 379,425
13	Employee/Self	COF	EPO	\$ 346,725	\$ 22,030	\$ 368,755
14	Employee/Self	COF	EPO	\$ 266,018	\$ 47,822	\$ 313,839
15	Employee/Self	COF	EPO	\$ 304,730	\$ 931	\$ 305,661
16	Employee/Self	COF	PPO	\$ 302,221	\$ 91	\$ 302,312
17	Employee/Self	COF	EPO	\$ 296,306	\$ 1,154	\$ 297,459
18	Employee/Self	COF	EPO	\$ 288,649	\$ 4,082	\$ 292,731
19	Employee/Self	COF	EPO	\$ 255,275	\$ 1,409	\$ 256,684
20	Spouse/Partner	COF	EPO	\$ 245,145	\$ 10,666	\$ 255,811
21	Employee/Self	COT	PPO	\$ 253,243	\$ 1,560	\$ 254,803
22	Employee/Self	COT	PPO	\$ 245,464	\$ 4,673	\$ 250,138
23	Employee/Self	COF	EPO	\$ 242,534	\$ -	\$ 242,534
24	Spouse/Partner	COT	PPO	\$ 245,458	\$ 848	\$ 246,306
25	Spouse/Partner	COT	PPO	\$ 237,384	\$ 646	\$ 238,030
Total				\$ 10,021,242	\$ 186,550	\$ 10,207,791

San Joaquin Valley Insurance Authority (SJVIA)

Stop Loss - Sample Aggregating Specific Deductible Scenario

Keenan



In this example the \$200K Aggregating Specific Deductible (ASD) was satisfied by claimant 1 & 2. After satisfying the aggregating specific deductible all eligible claims are now subject to **only** the \$475K individual specific deductible level.

- Policyholder (SJVIA) Claim Liability (applied to Specific Deductible)
- Policyholder (SJVIA) Specific Deductible
- Policyholder (SJVIA) Claim Liability (applied to Aggregating Specific Deductible)
- Stop Loss Carrier Liability

Scenario: Based on \$475K Specific Deductible with an \$200K Aggregating Specific Deductible

Note: Potential future renewal increases could be applied to the in-force premium rates as well as the Aggregating Specific Deductible.