



Renewal Proposal

for Alachua County Board of
County Commissioners



TOKIO MARINE
HCC



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HCC

7950 Legacy Drive, Suite 600
Plano, TX 75024
Telephone: (214) 387-5400
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Stop Loss Proposal for: Alachua County Board of
County Commissioners

Effective Dates: 10/01/2024 – 09/30/2025

Quoted for: Keenan & Associates

Proposal Number: 5-1374782

FINAL

Underwriter:
Tom Sumney
TSumney@tmhcc.com

Sales Representative:
John Kelbel
jkelbel@tmhcc.com

INDIVIDUAL STOP LOSS COVERAGE

Plan Description	Option 1	Option 2	Option 3
Coverages	Medical, Rx Card	Medical, Rx Card	Medical, Rx Card
Annual Specific Deductible per Individual	\$ 400,000	\$ 425,000	\$ 450,000
Contract Basis	24/12	24/12	24/12
Contract Advantage	Included	Included	Included
Lifetime Reimbursement	Unlimited	Unlimited	Unlimited
Maximum Contract Period Reimbursement	Unlimited	Unlimited	Unlimited
Rate(s) Per Month	Enrollment		
Composite	2,083	\$ 41.56	\$ 38.27
Estimated Contract Period Premium	\$ 1,038,834	\$ 956,597	\$ 882,109
Rate(s) include Commission of	3.00 %	3.00 %	3.00 %

OVERALL COST SUMMARY

Plan Description	Option 1	Option 2	Option 3
Total Annual Fixed Cost	\$ 1,038,834	\$ 956,597	\$ 882,109
Maximum Annual Liability	\$ 1,038,834	\$ 956,597	\$ 882,109



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INDIVIDUAL STOP LOSS COVERAGE

Plan Description	Option 4	Option 5	Option 6
Coverages	Medical, Rx Card	Medical, Rx Card	Medical, Rx Card
Annual Specific Deductible per Individual	\$ 600,000	\$ 800,000	\$ 1,000,000
Contract Basis	24/12	24/12	24/12
Contract Advantage	Included	Included	Included
Lifetime Reimbursement	Unlimited	Unlimited	Unlimited
Maximum Contract Period Reimbursement	Unlimited	Unlimited	Unlimited
Rate(s) Per Month	Enrollment		
Composite	2,083	\$ 25.55	\$ 15.12
Estimated Contract Period Premium	\$ 638,648	\$ 377,940	\$ 258,959
Rate(s) include Commission of	3.00 %	3.00 %	3.00 %

OVERALL COST SUMMARY

Plan Description	Option 4	Option 5	Option 6
Total Annual Fixed Cost	\$ 638,648	\$ 377,940	\$ 258,959
Maximum Annual Liability	\$ 638,648	\$ 377,940	\$ 258,959



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PROPOSAL QUALIFICATIONS AND CONTINGENCIES

Quoted terms and conditions are subject to possible revision based upon the receipt and review of the following Items:

- Paid claims experience to the effective date including monthly enrollment figures.
- Updated shock loss information to the date HCC Life Insurance Company has been notified that the proposal has been accepted by the group. Shock loss information should include injuries, illnesses, diseases, diagnoses, or other losses of the type, which are reasonably likely to result in a significant medical expense claim or disability, regardless of current claim dollar amount. In addition, shock loss information should include any claimant that has incurred claim dollars in excess of \$ 200,000, regardless of diagnosis. Information is also needed on any claims processed and unpaid, pending or denied for any reason. Please refer to our Trigger Diagnosis Disclosure List, which provides examples of some, but not all, types of shock losses.
- We will accept final shock loss disclosure no earlier than 30 days prior to the effective date.
- Please see the attached exhibit for plan document assumptions and requirements.
- Should a large claim(s) (non-reoccurring and/or ongoing) become known and the initial date of service is prior to the date of written acceptance by HCC Life Insurance Company, we reserve the right to re-underwrite the case.
- In the event there is a greater than 10% change in enrollment between the submitted initial enrollment data and the final enrollment data, rates and factors may be recalculated.
- Minimum participation level of 75% of all eligible employees is required.
- Our proposal includes Simultaneous Funding on Specific reimbursements.
- Rates and Factors are calculated with the plan anniversary date and the Policy effective date as the same date. Should the plan anniversary date and the stop loss policy effective date be different we reserve the right to modify our rates, factors and terms of coverage to accommodate for additional liabilities incurred by the plan due to state and/or federal mandates during the stop loss contract period.
- Quote rated with retirees covered. Quote rated with no COBRAs being covered based on the census information provided.
- Contract Advantage Plan - A charge has been added to the indicated specific rates for a no new laser guarantee renewal rating action of no more than 67%, regardless of the ongoing claim liability at renewal.

- Quote Rated with the following UR Vendors: Blue Cross and Blue Shield of Florida, Inc., dba Florida Blue.
- Quote Rated with the following Cost Containment Program(s): Blue Cross/Blue Shield of Florida, Blue Card.



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- All ongoing claimants must be reviewed by HCCL Medical Underwriting staff before coverage terms can be determined. Written approval from HCCL accepting all claimants at the group's specific deductible level is required. Higher Individual Specific Deductible(s) may apply.

Claim disclosure information provided to date for this account has been reviewed and no further information is needed. Rates effective 10/01/2024 are firm and final if acceptance by 09/27/2024. If acceptance is not provided by this date, updated disclosure information will be needed to finalize.

Initial the selected proposal option (please initial both the selected Specific and Aggregate option):

Option	Specific	Aggregate
1	\$ 400,000 / 24/12	
2	\$ 425,000 / 24/12	
3	\$ 450,000 / 24/12	
4	\$ 600,000 / 24/12	
5	\$ 800,000 / 24/12	
6	\$ 1,000,000 / 24/12	

The Premium and Aggregate Deductibles are based on the data submitted. Any inaccurate or incomplete data submitted may require changes at final underwriting. We will not be bound by any typographical errors or omissions contained herein.

Date: _____

By: _____

Agent of Record or Administrator

This proposal expires if applications are not requested before the valid through date.

Plan Document Assumptions

This proposal for stop loss coverage assumes the Plan Sponsor's plan document includes certain standard clauses, exclusions and limitations. These exclusions and limitations include, but are not limited to the following:

1. **Eligibility, Effective Date, and Enrollment Date** provisions, which include definitions of eligible employees (including definitions of full-time and part-time), dependents, and retirees, if applicable.
2. **Termination Provisions** which clearly define when eligibility and benefits cease. The Termination Provisions should include specific wording regarding extension of coverage (also known as "extension of active service") during a period of inactive service due to disability, layoff or leave of absence. The plan should include COBRA wording consistent with federal requirements.
3. **Transplant** benefit wording that identifies any benefits applicable to the donor (particularly the non-participating donor), the recipient, organ procurement, and any covered transportation, lodging and companion charges.
4. The Plan is expected to contain provisions that preserve its ability to seek a right of recovery, to recover funds via subrogation, to enforce coordination of benefit clauses with other plans and where able, to be secondary to Medicare and other public programs (subject to the Plan's compliance with Medicare Secondary Payer rules).
5. Exclude expenses resulting from losses which are due to any act of war, whether declared or not.
6. Exclude expenses for any injury or illness arising out of or in the course of any occupation or employment for wage or profit.
7. Exclude expenses related to Alternative Treatment, except when deemed both medically necessary and cost effective when compared to a normal course of treatment.
8. All HCC Life policies contain an Experimental and Investigative definition and exclusion along with coverage requirements for clinical trials that complies with the Affordable Care Act (ACA).

We Will be There for You

Tokio Marine HCC - Stop Loss Group



Financial Strength

- A++ (Superior) by A.M. Best Company
- AA- (Very Strong) by Fitch Ratings
- A+(Strong) by S&P Global



Claim Management

- To ensure you only pay what you owe
- Neonatal care, oncology, dialysis, transplants, cell and gene therapy, and other high-dollar medical claims



Experience

Over 50 years in the stop loss business



Stability

- \$2.2 Billion in annual premium
- Responsible for all underwriting, claims and administrative decisions



Regional Commitment

Four strategically placed regional offices across the United States



Solutions

TMHCC's stop loss product portfolio is focused solely on managing the financial impact of catastrophic claims on a policyholder's self-funded medical plan.



Accountability

Direct access to decision-making personnel for prompt and thorough service



Partnership

- Open communication
- Seamless licensing & appointment process
- Consistently competitive rates



Thank You

Thank you for the opportunity to serve you!