

A Self-Funded Evaluation

YTD CLAIM ANALYSIS PREPARED EXCLUSIVELY FOR:

OKHEEI

January 1, 2023 - December 31, 2023

July 2023



Carrier: BCBS OK

Specific Deductible: \$300,000 Plan Year: 1/1/2023 - 12/31/2023 Executive Analysis Reporting as of July 31, 2023

Executive Analysis

- 1) The medical plan expense for the month of July is \$2,493,958 or \$841.13 per employee per month (PEPM)
- 2) The YTD medical plan expense through July is \$17,752,723 or \$845.57 PEPM
- 3) Actual results YTD are -0.9% below projected budget on a gross PEPM basis
- 4) The projected budget results yield a \$156,192 surplus YTD, which equates to \$7.44 PEPM
- 5) Large claims (individuals with claims > \$150,000) represent 10.1% of total YTD medical/rx claim expense
- 6) 1 Individual exceeded the \$300,000 specific deductible with estimated reimbursements of \$29,341

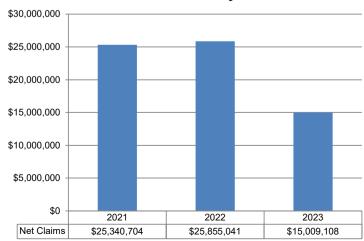
^{**}As of September 7th, OKHEEI is set to receive a Rebate Reconciliation of \$246,112 under an audit completed for plan year 1/22 - 12/22. Will be included in August FMR

Total Medical/Rx Claims

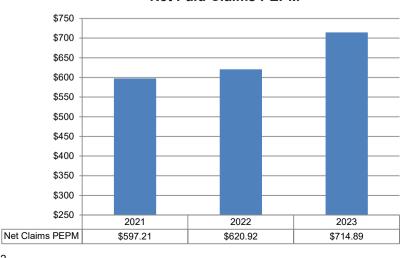
February \$1,662,993 \$1,602,920 \$ March \$2,637,523 \$2,099,917 \$ April \$1,677,736 \$2,207,150 \$ May \$2,146,191 \$1,813,185 \$ June \$2,095,973 \$2,127,589 \$	2023
March \$2,637,523 \$2,099,917 \$3 April \$1,677,736 \$2,207,150 \$ May \$2,146,191 \$1,813,185 \$3 June \$2,095,973 \$2,127,589 \$3 July \$2,140,083 \$2,052,138 \$3 August \$1,648,196 \$2,231,305 September \$2,171,884 \$2,156,815 October \$2,623,395 \$2,227,620 November \$2,108,987 \$2,610,164	2,045,804
April \$1,677,736 \$2,207,150 \$ May \$2,146,191 \$1,813,185 \$ June \$2,095,973 \$2,127,589 \$ July \$2,140,083 \$2,052,138 \$ August \$1,648,196 \$2,231,305 September \$2,171,884 \$2,156,815 October \$2,623,395 \$2,227,620 November \$2,108,987 \$2,610,164	,762,304
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June \$2,095,973 \$2,127,589 \$3 July \$2,140,083 \$2,052,138 \$3 August \$1,648,196 \$2,231,305 September \$2,171,884 \$2,156,815 October \$2,623,395 \$2,227,620 November \$2,108,987 \$2,610,164	,770,065
July \$2,140,083 \$2,052,138 \$3 August \$1,648,196 \$2,231,305 September \$2,171,884 \$2,156,815 October \$2,623,395 \$2,227,620 November \$2,108,987 \$2,610,164	2,755,920
August \$1,648,196 \$2,231,305 September \$2,171,884 \$2,156,815 October \$2,623,395 \$2,227,620 November \$2,108,987 \$2,610,164	2,525,205
September \$2,171,884 \$2,156,815 October \$2,623,395 \$2,227,620 November \$2,108,987 \$2,610,164	2,049,804
October \$2,623,395 \$2,227,620 November \$2,108,987 \$2,610,164	
November \$2,108,987 \$2,610,164	
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December \$2,097,838 \$2,588,317	
Net Claims \$25,340,704 \$25,855,041 \$	5,009,108

Net Claims	\$25,340,704	\$25,855,041	\$15,009,108
Average Monthly Enrollment	3536	3470	2999
Net Claims PEPM	\$597.21	\$620.92	\$714.89
% Increase/Decrease from Prior	N/A	3.97%	15.13%
Admin Fees	N/A	N/A	-\$636,778
Stop Loss Fees	N/A	N/A	\$1,125,962
Total Fixed Costs	N/A	N/A	\$489,184
Total Fixed Costs PEPM	N/A	N/A	\$23.30

Paid Claims by Plan Year



Net Paid Claims PEPM



Medical Summary - All Plans Reporting as of July 31, 2023

Carrier: BCBS OK

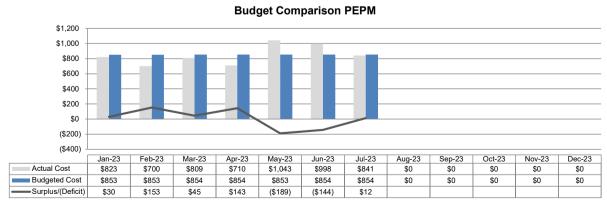
Specific Deductible: \$300,000 Plan Year: 1/1/2023 - 12/31/2023

*Does not include Rx Rebate of \$246,112

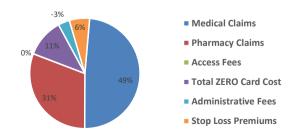
Paid Month	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Year-to Total	o-Date PEPM
Enrollment														
Subscribers	2,994	3,017	3,015	3,017	3,012	2,975	2,965						20,9	995
Members	4,153	4,188	4,194	4,199	4,192	4,151	4,142						29,2	219
Contract Size	1.39	1.39	1.39	1.39	1.39	1.40	1.40						1.3	39
Claim Payments														
Medical Claims	\$1,308,005	\$1,140,978	\$1,117,463	\$1,032,747	\$1,907,985	\$1,490,830	\$1,233,053						\$9,231,062	\$439.68
Pharmacy Claims	\$737,315	\$621,023	\$1,010,376	\$737,195	\$847,298	\$1,063,671	\$816,681						\$5,833,559	\$277.85
Rx Rebates	\$0	\$0	\$0	\$0	\$0	\$0	\$0						\$0	\$0.00
Access Fees	\$483	\$303	\$1,509	\$123	\$637	\$45	\$69						\$3,169	\$0.15
Claims Over Specific	\$0	\$0	\$0	\$0	\$0	(\$29,341)	\$0						(\$29,341)	(\$1.40)
Total Claim Payments	\$2,045,804	\$1,762,304	\$2,129,348	\$1,770,065	\$2,755,920	\$2,525,205	\$2,049,804						\$15,038,449	\$716.29
Total Claim Payments PEPM	\$683.30	\$584.12	\$706.25	\$586.70	\$914.98	\$848.81	\$691.33							
ZERO Card														
Claims	\$312,379	\$245,445	\$205,181	\$268,163	\$279,165	\$338,179	\$329,070						\$1,977,583	\$94.19
Fee	\$24,406	\$22,248	\$21,100	\$22,975	\$23,290	\$24,890	\$24,597						\$163,507	\$7.79
Total ZERO Card Cost	\$336,786	\$267,693	\$226,282	\$291,138	\$302,455	\$363,070	\$363,070						\$2,141,091	\$101.98
Fixed Costs														
Administrative Fees	(\$90,808)	(\$91,506)	(\$91,445)	(\$91,506)	(\$91,354)	(\$90,232)	(\$89,928)						(\$636,778)	(\$30.33)
Consulting Fee	\$12,000	\$12,000	\$12,000	\$12,000	\$12,000	\$12,000	\$12,000						\$84,000	\$4.00
Stop Loss Premiums	\$160,568	\$161,802	\$161,694	\$161,802	\$161,534	\$159,549	\$159,013						\$1,125,962	\$53.63
Total Fixed Costs	\$81,760	\$82,296	\$82,250	\$82,296	\$82,180	\$81,318	\$81,085						\$573,184	\$27.30
Total Plan Cost	\$2,464,350	\$2,112,293	\$2,437,879	\$2,143,500	\$3,140,554	\$2.969.592	\$2,493,958						\$17.752.723	\$845.57
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Employee Contributions (1)	\$25,806	\$27,245	\$28,554	\$27,918	\$28,471	\$26,903	\$27,285						\$192,182	\$9.15
Employer Cost	\$2,438,543	\$2,085,049	\$2,409,325	\$2,115,582	\$3,112,084	\$2,942,688	\$2,466,673						\$17,569,944	\$836.86
Budget Comparison														
Budgeted Cost (1)	\$2,553,326	\$2,573,048	\$2,575,034	\$2,575,863	\$2,570,053	\$2,540,333	\$2,530,660						\$17,918,318	\$853.46
Actual Cost	\$2,464,350	\$2,112,293	\$2,437,879	\$2,143,500	\$3,140,554	\$2,969,592	\$2,493,958						\$17,762,126	\$846.02
Surplus/(Deficit)	\$88,977	\$460,755	\$137,155	\$432,364	(\$570,502)	(\$429,259)	\$36,702						\$156,192	\$7.44

(1) Estimated based on enrollment and monthly employee contributions and fully insured equivalent rates. Employee contributions assume all employees contribute at the wellness rate.

⁽²⁾ Based on carrier reported Allowed vs. Covered claims.



Combined Plan Expenses



Aggregate Stop Loss

Reporting as of July 31, 2023

Insurance Risk Management Consulting

Carrier: BCBS OK

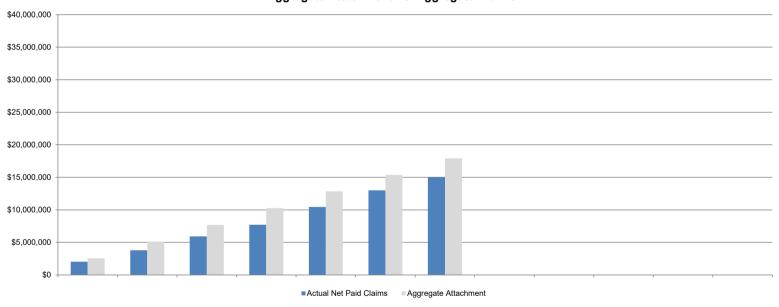
Specific Deductible: \$300,000 Aggregating Specific: \$0,000

Contract Type:

Plan Year: 1/1/2023 - 12/31/2023

Paid Month	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Year-to Total	-Date PEPM
Subscribers	2,994	3,017	3,015	3,017	3,012	2,975	2,965						20,995	2,999
Aggregate Stop Loss														
Actual Net Paid Claims	\$2,045,804	\$1,762,304	\$2,129,348	\$1,770,065	\$2,755,920	\$2,525,205	\$2,049,804						\$15,038,449	\$716.29
Aggregate Attachment	\$2,554,002	\$2,573,622	\$2,571,916	\$2,573,622	\$2,569,356	\$2,537,794	\$2,529,264						\$17,909,575	\$853.04
Aggregate Attachment vs. Aggregate Claims	80.1%	68.5%	82.8%	68.8%	107.3%	99.5%	81.0%						84.0)%

Aggregate Attachment vs. Aggregate Claims



Reporting as of July 31, 2023

Carrier: BCBS OK

Specific Deductible: \$300,000 Plan Year: 1/1/2023 - 12/31/2023

Claimant	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Total ⁽¹⁾	Amount Over Specific
*1	\$77,955	\$244	\$85,278	\$117	\$82,708	\$83,039	\$0						\$329,341	\$29,341
2	\$42,794	\$26,881	\$4,560	\$35,269	\$29,983	\$93,646	\$64,192						\$297,324	\$0
3	\$41,770	\$34,336	\$42,031	\$34,895	\$41,790	\$42,323	\$41,980						\$279,125	\$0
4	\$71,158	\$27,026	\$28,697	\$28,596	\$43,002	\$19,991	\$43,283						\$261,754	\$0
5	\$45,125	\$47,926	\$22,959	\$2,194	\$26,782	\$54,358	\$2,682						\$202,027	\$0
6	\$0	\$0	\$0	\$9,199	\$136,495	\$249	\$7,203						\$153,146	\$0
Total % of Gross Claims Claimants above \$150,000	\$278,802 13.6% 0	\$136,414 7.7% 0	\$183,526 8.6% 1	\$110,271 6.2% 3	\$360,759 13.1% 3	\$293,606 11.5% 5	\$159,340 7.8% 6						\$1,522,717 10.1% 6	\$29,341

otals do not include HCA draft amount.

^{*}Claimant #1 is termed

Carrier: BCBS OK

Specific Deductible: \$300,000 Plan Year: 1/1/2023 - 12/31/2023 Large Claimants Over \$150,000 Reporting as of July 31, 2023

Claimant	Relationship	Plan	Gender	Age Range	Diagnosis	Medical Paid	Pharmacy Paid	Total Paid Claims (YTD) ⁽¹⁾	Expected Reimbursement
* 1	Subscriber	PLAN A	Male	40-49	F63 - Habit and impulse disorders	\$422	\$328,919	\$329,341	\$29,341
2	Subscriber	PLAN B	Female	60-64	Z51 - Other medical care	\$296,535	\$789	\$297,324	\$0
3	Disabled Dependent	PLAN B	Male	30-39	Z01 - Other special examinations and investigations of persons without complaint and reported diagnosis	\$2,299	\$276,826	\$279,125	\$0
4	Spouse	PLAN C	Female	50-59	D61 - Other aplastic anaemias	\$261,424	\$329	\$261,754	\$0
5	Spouse	PLAN B	Female	60-64	C50 - Malignant neoplasm of breast	\$201,529	\$498	\$202,027	\$0
6	Dependent Child	PLAN C	Male	<1-19	Q43 - Other congenital malformations of intestine	\$153,146	\$0	\$153,146	\$0
Total:						\$915,356	\$607,361	\$1,522,717	\$29,341

⁽¹⁾Totals do not include HCA draft amount.

^{*}Claimant #1 is termed



This analysis is for illustrative purposes only, and is not a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health care costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. Please see your policy or contact us for specific information or further details in this regard.