

First CarolinaCare

INSURANCE COMPANY

Renewal Proposal for County of Moore

EXHIBIT A

Monthly Administrative Fees

Medical (includes Prescription Drug) and Dental

Administrative Fees Effective: 7-1-2022 to 6-30-2023

Medical Administration Fee	\$34.00
Dental Administration Fees	\$3.50
COBRA Administration Fee	included
FirstHealth EAP Services	included
Biometric Screenings and Flu Shot Fees	included
HIPAA Certificates of Coverage	included
Nurse line/Rosebud Maternity Program	included
Pharmacy Network Access Fee	included
Provider Network Access Fee	included
Subrogation Services	included
Utilization Management Fee	included
Total Administrative Fee Per Employee Per Month	\$37.50

All fees are based on a per-employee-per-month (PEPM) basis.

Date:

4-21-2022

Signature:

J. Wayne Vest

County of Moore

Coverage Period:

7-1-2022 to 6-30-2023

Quote Status:

Final

Benefits Quoted

Same As Current

First CarolinaCare
INSURANCE COMPANY

per 4/21/22

Stop-Loss Carrier		Current	Option 1	Option 2	Option 3
Stop-Loss Parameters Specific					
Aggregate	Contract Type	12/12	12/12	12/12	12/12
	Covers	Medical Only	Medical Only	Medical Only	Medical Only
	Deductible	\$80,000	\$80,000	\$80,000	\$80,000
Aggregating Specific	Contract Type	12/12	12/12	12/12	12/12
	Covers	Medical Only	Medical Only	Medical Only	Medical Only
	Corridor	115%	115%	115%	115%
Number of Employees					
Single		461	461	461	461
	E+Spouse	37	37	37	37
	E+Child(ren)	153	153	153	153
	Family	72	72	72	72
	Total Contracts	723	723	723	723
Administrative Fees					
PEPM		\$34.00	\$34.00	\$34.00	\$34.00
	Monthly Costs	\$24,582	\$24,582	\$24,582	\$24,582
	Annual Costs	\$294,984	\$294,984	\$294,984	\$294,984
Commission to Broker		0%	0%	0%	0%
Specific Premium					
Composite		\$87.83	\$104.52	\$98.76	\$92.99
	Monthly Costs	\$63,501	\$75,568	\$71,403	\$67,232
	Annual Costs	\$762,013	\$906,816	\$856,842	\$806,781
Increase from Current			19.00%	12.44%	5.87%
Aggregate Premium					
PEPM		\$10.85	\$11.40	\$11.40	\$11.40
	Monthly Costs	\$7,845	\$8,242	\$8,242	\$8,242
	Annual Costs	\$94,135	\$98,906	\$98,906	\$98,906
Increase from Current			5.07%	5.07%	5.07%
Total Monthly Fixed Costs		\$95,928	\$108,392	\$104,228	\$100,056
Total Annual Fixed Costs		\$1,151,132	\$1,300,706	\$1,250,732	\$1,200,672
Increase from Current			12.99%	8.65%	4.30%
EXPECTED LIABILITY					
Expected Annual Medical Claims		\$6,168,564	\$6,582,770	\$6,056,149	\$6,056,149
Increase from Current			6.71%	-1.82%	-1.82%
MAXIMUM PLAN LIABILITY					
Aggregate Factors					
Single		\$616.33	\$650.33	\$650.33	\$650.33
	E+Spouse	\$1,386.75	\$1,461.75	\$1,461.75	\$1,461.75
	E+Child(ren)	\$801.23	\$921.23	\$921.23	\$921.23
	Family	\$1,849.00	\$1,889.08	\$1,889.08	\$1,889.08
Minimum Aggregate Deductible		\$7,093,849	\$7,570,186	\$7,570,186	\$7,570,186
Increase from Current			6.71%	6.71%	6.71%
Maximum Annual Liability		\$8,244,981	\$8,870,892	\$8,820,918	\$8,770,858
Increase from Current			7.59%	6.99%	6.38%