HAMPSHIRE COUNTY GROUP INSURANCE TRUST

Executive Committee
Meeting Notice and Agenda
June 18, 2025
9:00 A.M.
ZOOM Meeting

Call to Order	RC
Approval of Minutes of May 2024	RC
Financial Report Month of May 2025 **Income & Expenses & Operating Expenses** **For Trust and Wellness Initiative**	JS
Wellness Update	MK
Weight Loss Drug Activity	JS
GLP-1 Benefit Change, Letters, CVS Caremark	JS
Stop Loss Update	JS
Stop Loss FY 26 (vote)	JS
FY26 Budget (vote)	JS
Other Last Minute Items	JS
Adjournment	RC

<u>Meeting Schedule</u>

Insurance Advisory Committee – July 16, 2025,10:00 a.m. ZOOM
Executive Committee – August 27, 2025, 9:00 a.m. ZOOM
Executive Committee – September 24, 2025, 9:00 a.m. ZOOM

Joseph Shea is inviting you to a scheduled Zoom meeting.

Topic: Executive Committee
Time: Jun 18, 2025 09:00 AM Eastern Time (US and Canada)
Join Zoom Meeting
https://us02web.zoom.us/j/85789923407?pwd=fHtorb6cZvbWHmasTHUo7n1rSK9ax1.1

Meeting ID: 857 8992 3407
Passcode: 677391

One tap mobile
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Dial by your location
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• +1 301 715 8592 US (Washington DC)
• +1 719 359 4580 US
• +1 253 205 0468 US
• +1 253 215 8782 US (Tacoma)
• +1 346 248 7799 US (Houston)
• +1 360 209 5623 US
• +1 386 347 5053 US
• +1 507 473 4847 US
• +1 564 217 2000 US
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Meeting ID: 857 8992 3407
Passcode: 677391

Find your local number: https://us02web.zoom.us/u/kyAnqDdQe

HAMPSHIRE COUNTY GROUP INSURANCE TRUST
88 KING STREET
NORTHAMPTON, MA 01060

TO: All Trust Member Units

RE: **Minutes of May 21, 2025**
Executive Committee Meeting
Via Zoom Teleconference

MEMBERS PRESENT:

Rich Carmignani, Jr.	Shelley Poreda	Emily Russo
Paula Harrison	Joanne Misiaszek	

OTHERS PRESENT:

Joseph Shea	Cynthia Graves	Jessica Hebert
Michele Komosa	John Garrish	

CALL TO ORDER

In compliance with the Governor's orders suspending certain provisions of the open meeting laws due to Covid-19, this meeting was held via Zoom telephone/video conference.

Chairman Rich Carmignani Jr, called the meeting to order at 9:04 a.m. with no quorum present. With the lack of quorum, he stated the meeting was to continue for information only and no voting. The Chairman then officially opened the meeting at 9:07am when a quorum was present.

APPROVAL OF MINUTES

Rich Carmignani Jr requested that the minutes of March 19, 2025, be approved, motion made by Emily Russo & seconded by Joanne Misiaszek, approved by unanimous consent.

FINANCIAL REPORT FOR APRIL

The Financial Report for the month of April was presented reflecting a starting balance of $2,585,805.86 with a total monthly income received of $5,736,757.38 and monthly expenses of $9,633,613.34 with a total net monthly income of ($3,896,855.96) and an ending month balance of ($1,211,050.10) with accounts receivable of $1,900,280.17 leaving a total of $16,264,423.75.

Investments and CD's for April 2025

The investments portfolio value was $6,953,131.67 with a market change of ($101,139.83) leaving a total of $6,851,991.84. The starting balance in CD's was $3,923,230.27, with interest earned of $15,821.49 leaving a balance of $3,839,051.76.

April Expenditures
The expenditures for the months of April were reviewed.

Joe stated our claims continue to rise, and our reserves continue to deplete as we draw down money from our CD and Investments. We've been averaging $8 million in expenses and only $7 million in premiums. Approximately $9 million of our bottom line is for our own OPEB and claim reserves from unit deposits.

Chairman Rich Carmignani Jr requested that the full financial report, including the expenditures be approved, motion made by Paula, seconded by Emily, this report was approved by unanimous consent.

Wellness Update:
Per Michele, the Wellness Initiative has:

- Coordinated 11 onsite events
- Attended 6 benefits and health fairs
- Hosted 6 challenges (2 through Wellable and 4 through A Healthy Me)
- Learn to Live utilization is at 4%
- Has been awarded 50,000 wellness credits for FY 2026

Weight Loss Drug Activity
Per Joe, these drugs are running in excess of $400,000 per month for just over 300 users. The numbers continue to increase at a steady pace. BCBS went on record stating they will not be covering WLD effective 1/1/26. CVS Caremark will no longer be covering Zepbound and will only be covering Wegovy effective 7/1/2025. Joe mentioned he was unsure why they would choose to cover the higher cost Zepbound over Wegovy. The WLD activity/coverage continues to change week after week and will be monitored.

Discussion on GLP-1 Benefit Change
Joe has been in discussions with CVS Caremark & John Garrish regarding carving out the WLD all together while allowing continued coverage for type 2 diabetes diagnosis only. Joe had a meeting a few weeks ago with CVS Caremark for our semi-annual review. Much of the discussion was regarding the ongoing WLD spend, noting that all of the WLD have skyrocketed to the top of the top 25 list.

Removing these drugs should save the Trust $5.4 million, but CVS Caremark is adjusting our rebates by $2.6 million which means a net savings to the Trust of about $2.8 million dollars. Joe has gone back and forth with CVS Caremark regarding the loss of these rebates, and they are adamant that when we committed to our current 3-year contract (in late 2023), they projected this significant growth, and the rebates were already built into the contract accordingly. Joe argued this point saying there is no way they could have projected this at that time but was unsuccessful. CVS Caremark is willing to make this change for us as early as 7/1/25. Joe stated the sooner we do so the sooner the savings can begin and that was his recommendation. We would follow BCBS and CVS Caremark's lead making this a formulary change.

Given the pullback of our rebates Joe has advised that we would like to put prescription coverage back out to bid for 7/1/26 as CVS Caremark is not willing to negotiate these rebates. Joe has asked that we vote to make formulary change to not cover the WLD except for type 2 diabetes diagnoses starting 7/1/2025.

A motion was made by Shelley Poreda to approve a GLP1 formulary change effective 7/1/2025 seconded by Paula Harrison. A roll call vote was taken; all were in favor.

Stop Loss Update
Joe is waiting on claim details from BCBS, final numbers should be in within a few weeks, Joe hopes to discuss this further in our June meeting.

Claim Data Requests
Joe deferred this discussion to a later date.

FY26 Budget
Joe presented a draft budget for FY 2026 stating there are a few things he needs to finalize. He is waiting for the contribution amount for Hampshire County Retirement and we still need to do our audit for FY24 & FY25. Joe has reached out about the audits but has not heard back as of yet. IT will also be cut in half moving forward based on our current cash flow. The draft shows a 5.6% reduction compared to the current year.

Other Last Minute Items
No last-minute items

ADJOURNMENT
Chairman Rich Carmignani, Jr. adjourned the meeting at 9:55 a.m.

Respectfully submitted,
Jessica Hebert

Meeting Schedule

Insurance Advisory Committee – May 28, 2025 10:00 a.m., via ZOOM
Executive Committee – June 18, 2025, 9:00 a.m., via ZOOM
Insurance Advisory Committee – July 16, 2025, 10:00 a.m., via ZOOM

HAMPSHIRE COUNTY GROUP INSURANCE TRUST
88 KING STREET
NORTHAMPTON, MA 01060

TO: All Trust Member Units

RE: **Minutes of April 30, 2025**
Executive Committee Meeting
Via Zoom Teleconference

MEMBERS PRESENT:

Rich Carmignani, Jr.	Jessalyn Zaykoski	Shelley Poreda
Emily Russo	Donna Whiteley	Michele Turner

OTHERS PRESENT:

Joseph Shea	Cynthia Graves	Jessica Hebert
Michele Komosa		

CALL TO ORDER

In compliance with the Governor's orders suspending certain provisions of the open meeting laws due to Covid-19, this meeting was held via Zoom telephone/video conference.

Chairman Rich Carmignani Jr, called the meeting to order at 9:01 a.m. with a quorum present.

DISCUSSION ON GLP-1 FORMULARY CHANGE

Joe discussed following suit with BCBS's recent announcement in making a formulary change for the GLP-1 drugs, focusing on excluding them for weight loss while maintaining coverage for medically necessary type 2 diabetes treatment. Joe believes this change could save the trust over $4 million annually. He is still waiting for CVS Caremark's rebate impact assessment. Joe stated there is an annual meeting already scheduled with our CVS Caremark account representatives on May 8th where we hope to get this information. Joe stated BCBS is calling this a formulary change, not a benefit change, which will be beneficial for units so this would not fall to 32B sec 21-23 negotiations.

Joe would like to schedule an EC meeting on May 21st at 9am to discuss and vote on this change. From there he'd like to schedule an IAC meeting on May 28th at 10am for a final vote on this.

Other Last Minute Items

None

ADJOURNMENT

Chairman Rich Carmignani, Jr. adjourned the meeting at 9:17 a.m.

Respectfully submitted,
Jessica Hebert

Meeting Schedule

Insurance Advisory Committee – May 21, 2025, 10:00 a.m., via ZOOM
Executive Committee – May 28, 2025, 9:00 a.m., via ZOOM
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Insurance Advisory Committee – July 16, 2025, 10:00 a.m., via ZOOM

HAMPSHIRE COUNTY GROUP INSURANCE TRUST

FISCAL YEAR 2025 OPERATING EXPENSES (July 1, 2024 to June 30, 2025)

ITEM CODE	BUDGET ITEMS	FY-2024 Budgeted 7-1/6-30	FY-2025 Budgeted 7-1/6-30	July	August	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	YTD
	WAGES & BENEFI															
5110	SALARY*	391,000.00	410,000.00	46,804.25	28,155.19	27,312.23	27,314.56	27,314.57	41,137.83	28,369.41	27,500.12	27,346.17	26,799.39	27,333.74		335,387.46
5145	LONGEVITY	6,600.00	6,600.00													-
5130	OVERTIME															-
5120	TEMP. EMPLOYEE SAL															-
481	FICA (.062)															-
5186	MED TAX (.0145)															-
5181	CONTRIBUTORY RET.	111,539.00	125,624.00	125,624.00	3,276.16	3,276.16	3,276.16	3,276.16	3,276.16	4,914.24	3,276.16	3,276.16	3,276.16	3,276.16		160,023.68
5189	EMP. ASST. PROG. EAP															-
5184	HEALTH INSURANCE	56,000.00	80,000.00	6,647.33	6,647.33	6,647.33	6,647.33	6,647.33	6,647.33	5,703.33	5,703.33	5,703.33	5,703.33	5,703.33		68,400.63
5185	LIFE INSURANCE	350.00	350.00	28.40	28.40	28.40	28.40	28.40	28.40	28.40	28.40	28.40	28.40	28.40		312.40
5189	UNEMP HEALTH INS TAX															-
	TOT. WAGES & BENEFITS	565,489.00	622,574.00	179,103.98	38,107.08	37,264.12	37,266.45	37,266.46	51,089.72	39,015.38	36,508.01	36,354.06	35,807.28	36,341.63	-	564,124.17
																-
ITEM CODE	BUDGET ITEMS															-
																-
	NON SALARY EXPENSES															-
5300	ADM. CONT. SERVICES (FS&PF)															-
	Rent	14,400.00	14,400.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00		11,000.00
	Parking	-														-
5305	ADM. CONT. SERVICES (Audit)	21,000.00	22,000.00		2,900.00											2,900.00
5320	LEGAL	-					1,324.80									1,324.80
5340	TELEPNONE/INTERNET															-
5490	FOOD SUPPLIES	600.00	600.00	112.81	28.47		43.94	7.98		56.60			32.66			282.46
5420	OFFICE & COMPUTER SUPPLI	2,500.00								232.44			74.99			307.43
5580	MISC. EXPENSES	5,500.00	5,000.00		134.66	20.00		121.92		79.44			330.16			686.18
5580	NEWSPAPER/MAGS/BOOKS						39.72									39.72
5420	POSTAGE (Stamps)	8,500.00	8,500.00				21.24	1,450.00		42.48						1,513.72
5275	POSTAGE METER RENTAL															-
5380	MINI GRANTS/WELLNESS	10,000.00	7,500.00				27.65				5,500.00					5,527.65
5420	STATIONERY & OFF. SUPP.			16.44			1,147.18	160.08								1,323.70
5780	SURETY BONDS	1,750.00	1,250.00			100.00	404.00						455.00			959.00
5340	TELEPHONES															-
5320	TRAINING															-
5710	TRAVEL IN/OUT of STATE	5,000.00	5,000.00					89.78		49.58			39.20	337.9		516.46
5188	UTILITIES	5,500.00	6,000.00	231.41	639.21	376.60	390.79	380.19	383.34	153.17	626.66	390.30	391.39	366.19		4,329.25
	TOT. Inderect Costs															-
	Total Non-Salary	74,750.00	70,250.00	1,360.66	4,702.34	1,496.60	4,399.32	3,209.95	1,383.34	1,613.71	7,126.66	1,390.30	2,323.40	1,704.09	-	30,710.37

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ITEM CODE	BUDGET ITEMS															
	I.T.	7-1/6-30														
6000	COMPUTER HARDWARE	3,000.00	7,500.00				6,466.84									6,466.84
5420	COMPUTER SOFTWARE															-
5420	COMPUTER SUPPLIES	2,000.00	1,000.00													-
5850	DESK TOP PCs															-
5300	MISC PROF & TECH SERV.**	195,000.00	175,000.00	5,079.00	5,377.86	26,526.00	13,966.50	14,029.50	13,892.00	13,892.00	13,892.00	13,889.00	29,129.85	13,946.00		163,619.71
	TOTAL DATA PROCESSING	200,000.00	183,500.00	5,079.00	5,377.86	26,526.00	20,433.34	14,029.50	13,892.00	13,892.00	13,892.00	13,889.00	29,129.85	13,946.00	-	170,086.55
																-
	TOTALS	840,239.00	876,324.00	185,543.64	48,187.28	65,286.72	62,099.11	54,505.91	66,365.06	54,521.09	57,526.67	51,633.36	67,260.53	51,991.72	-	764,921.09

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HAMPSHIRE COUNTY GROUP INSURANCE TRUST

INCOME AND EXPENSE REPORT

ITEMS	JUNE	JULY	AUGUST	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY
Starting Cash Balance	$3,855,553.49	-$1,073,311.96	$1,328,670.73	$608,933.38	$4,796,853.49	$483,072.00	-$534,684.82	$2,823,338.94	$769,509.74	$1,374,868.15	$2,585,805.86	-$1,211,050.10
Adjustments												
Total Starting Balance	$3,855,553.49	-$1,073,311.96	$1,328,670.73	$608,933.38	$4,796,853.49	$483,072.00	-$534,684.82	$2,823,338.94	$769,509.74	$1,374,868.15	$2,585,805.86	-$1,211,050.10
MONTHLY INCOME												
Total Premium Collected	3,980,735.29	9,575,493.41	7,204,188.69	7,590,509.79	5,561,151.39	7,102,933.28	7,901,004.69	7,696,995.22	6,971,549.48	7,113,861.16	5,733,876.86	8,662,499.92
Interest Income (MMDT)	7,767.36	8,905.18	5,379.50	6,694.77	7,121.39	3,415.77	5,416.00	3,963.56	4,244.57	4,915.06	2,880.52	5,955.54
Other Income or Adjustments						2.38						
BCBS SR Premium Collected												
TOTAL MONTHLY INCOME	3,988,502.65	9,584,398.59	7,209,568.19	7,597,204.56	5,568,272.78	7,106,351.43	7,906,420.69	7,700,958.78	6,975,794.05	7,118,776.22	5,736,757.38	8,668,455.46
MONTHLY EXPENSES												
BCBS Admin Cost (estimate)												
Claim Deposit	6,505,090.32	6,507,291.77	5,187,988.40	5,222,269.83	6,806,599.00	5,108,803.72	5,370,401.93	6,571,461.25	4,925,167.78	6,453,754.80	6,057,531.86	5,962,534.78
Reinsurance (Ind.&Agg.)	53,834.80	(85,426.39)	14,196.06	(483,370.78)	181,567.63	181,964.85	182,121.12	88,606.68	108,354.27	(3,407.47)	55,503.18	28,970.51
BCBS Settlement												
Recon adjust w/Finance												
BCBS Sr Premium Paid												
Other Exp. & Claim Settlement	2,295,033.60	575,006.88	2,678,933.80	1,105,098.68	2,831,788.53	2,778,833.77	929,508.82	3,040,238.96	2,979,386.92	1,055,857.82	3,453,317.77	3,487,583.52
Total Plan Expenses	8,853,958.72	6,996,872.26	7,881,118.26	5,843,997.73	9,819,955.16	8,069,602.34	6,482,031.87	9,700,306.89	8,012,908.97	7,506,205.15	9,566,352.81	9,479,088.81
Total Unit Operating Expenses	63,409.38	185,543.64	48,187.28	65,286.72	62,099.11	54,505.91	66,365.06	54,521.09	57,526.67	51,633.36	67,260.53	51,991.72
TOTAL MONTHLY EXPENSES	8,917,368.10	7,182,415.90	7,929,305.54	5,909,284.45	9,882,054.27	8,124,108.25	6,548,396.93	9,754,827.98	8,070,435.64	7,557,838.51	9,633,613.34	9,531,080.53
TOTAL NET MONTHLY INCOME	(4,928,865.45)	2,401,982.69	(719,737.35)	1,687,920.11	(4,313,781.49)	(1,017,756.82)	1,358,023.76	(2,053,869.20)	(1,094,641.59)	(439,062.29)	(3,896,855.96)	(862,625.07)
BALANCE												
Cash Balance	(1,073,311.96)	1,328,670.73	608,933.38	2,296,853.49	483,072.00	(534,684.82)	823,338.94	769,469.74	(325,131.85)	935,805.86	(1,311,050.10)	(2,073,675.17)
Adjustments				2,500,000.00			2,000,000.00	40.00	1,700,000.00	1,650,000.00	100,000.00	3,800,000.00
ENDING MONTHLY BALANCE	(1,073,311.96)	1,328,670.73	608,933.38	4,796,853.49	483,072.00	(534,684.82)	2,823,338.94	769,509.74	1,374,868.15	2,585,805.86	(1,211,050.10)	1,726,324.83

HAMPSHIRE COUNTY GROUP INSURANCE TRUST
Fund And Investment Information

FUNDS	JUNE	JULY	AUGUST	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY
Post Employee Ben. S.B.	68,847.95	67,929.17	67,010.39	66,091.61	65,172.83	64,254.05	62,305.25	62,276.49	61,217.71	58,988.91	57,930.13	56,871.35
Funding	1,030.02	1,030.02	1,030.02	1,030.02	1,030.02		2,200.04	1,170.02		1,170.02	1,170.02	2,340.04
Expenses	1,948.80	1,948.80	1,948.80	1,948.80	1,948.80	1,948.80	2,228.80	2,228.80	2,228.80	2,228.80	2,228.80	2,228.80
Total	67,929.17	67,010.39	66,091.61	65,172.83	64,254.05	62,305.25	62,276.49	61,217.71	58,988.91	57,930.13	56,871.35	56,982.59
Accurued Vac & Sick Time	31,317.96	31,317.96	31,317.96	31,317.96	31,317.96	31,317.96	31,317.96	31,317.96	31,317.96	31,317.96	31,317.96	31,317.96
Income												
Expenses												
Total	31,317.96	31,317.96	31,317.96	31,317.96	31,317.96	31,317.96	31,317.96	31,317.96	31,317.96	31,317.96	31,317.96	31,317.96
Member Deposits	4,458,551.96	4,458,551.96	4,463,551.96	4,463,551.96	4,463,551.96	4,463,551.96	4,463,551.96	4,463,551.96	4,463,551.96	4,463,551.96	4,463,551.96	4,463,551.96
Deposits		5,000.00										
Total Member Deposits	4,458,551.96	4,463,551.96	4,463,551.96	4,463,551.96	4,463,551.96	4,463,551.96	4,463,551.96	4,463,551.96	4,463,551.96	4,463,551.96	4,463,551.96	4,463,551.96
OPEB Trust	317,598.19	318,813.05	320,250.32	321,562.82	322,924.63	324,292.21	325,576.97	327,000.26	328,388.89	329,648.46	331,048.34	332,408.81
Interest	1,214.86	1,437.27	1,312.50	1,361.81	1,367.58	1,284.76	1,423.29	1,388.63	1,259.57	1,399.88	1,360.47	1,312.71
OPEB Trust	318,813.05	320,250.32	321,562.82	322,924.63	324,292.21	325,576.97	327,000.26	328,388.89	329,648.46	331,048.34	332,408.81	333,721.52
Investments												
CD's	7,497,972.77	7,526,653.54	7,560,585.17	7,591,602.78	7,121,840.44	7,152,001.24	7,180,335.67	6,207,626.75	6,233,987.90	5,555,405.94	3,923,230.27	3,839,051.76
Deposit				(500,000.00)			(1,000,000.00)		(700,000.00)	(1,650,000.00)	(100,000.00)	(1,800,000.00)
Interest	28,680.77	33,931.63	31,017.61	30,237.66	30,160.80	28,334.43	27,291.08	26,361.15	21,418.04	17,824.33	15,821.49	8,379.66
Balance	7,526,653.54	7,560,585.17	7,591,602.78	7,121,840.44	7,152,001.24	7,180,335.67	6,207,626.75	6,233,987.90	5,555,405.94	3,923,230.27	3,839,051.76	2,047,431.42
Portfolio Value	10,309,763.23	10,479,835.60	10,650,294.36	10,916,130.10	9,009,142.30	8,897,102.48	9,300,329.19	7,950,739.57	8,224,068.06	7,228,416.19	6,953,131.67	6,851,991.84
Deposit				(2,000,000.00)			(1,000,000.00)		(1,000,000.00)			(2,000,000.00)
Interest	170,072.37	170,458.76	265,835.74	93,012.20	(112,039.82)	403,226.71	(349,589.62)	273,328.49	4,348.13	(275,284.52)	(101,139.83)	302,774.89
Market Change												
Total	10,479,835.60	10,650,294.36	10,916,130.10	9,009,142.30	8,897,102.48	9,300,329.19	7,950,739.57	8,224,068.06	7,228,416.19	6,953,131.67	6,851,991.84	5,154,766.73
Accounts Receivable	3,862,456.86	1,257,535.01	1,002,342.19	440,210.22	1,887,452.55	1,730,237.24	973,065.29	394,750.51	518,891.07	534,150.97	1,900,280.17	328,596.28
Total With Accounts Receivable	25,672,246.18	25,679,215.90	25,001,532.80	26,251,013.83	23,303,044.45	22,558,969.42	22,838,917.22	20,506,792.73	19,561,088.64	18,880,167.16	16,264,423.75	14,142,693.29

MONTHLY ACCOUNTS RECEIVABLE

HAMPSHIRE COUNTY GROUP INSURANCE TRUST

FOR JUNE 2025 PREMIUMS

JUNE PREMIUMS NOT PAID *AS OF MAY 31, 2025*		TO AVOID LATE ASSESSMENT FEE INVOICE MUST BE PAID **BEFORE**: ***June 4, 2025***
CUMMINGTON	5,207.00	**6/3/2025**
GOSHEN	3,198.00	**LATE FEE ASSESSED (6/5/2025)**
HADLEY	213,631.28	**6/2/2025**
SHFD #2	26,316.00	**6/2/2025**
WASHINGTON	3,892.00	**6/3/2025**
NEW SALEM/WENDELL USD	76,352.00	**6/3/2025**
	$ 328,596.28	

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Hampshire County Group Insurance Trust

TRANSACTION REPORT MAY 2025 (FY25)

STARTING BALANCE GENERAL FUND **(M&T BANK)**				$ (3,050,386.89)
2025	TRANSACTION	A/P DEBIT	A/R CREDIT	
MAY	**M&T BANK**			
1	BLUE CROSS BLUE SHIELD	5,962,534.78		$ (9,012,921.67)
1	STEALTH/STOP LOSS		152,294.13	$ (8,860,627.54)
2	M&T BANK		6,271.00	$ (8,854,356.54)
2	M&T BANK (FROM ESB)		5,200,000.00	$ (3,654,356.54)
7	M&T BANK (FROM WF)		2,000,000.00	$ (1,654,356.54)
15	M&T BANK		169,410.00	$ (1,484,946.54)
19	M&T BANK		333,806.68	$ (1,151,139.86)
20	M&T BANK		566,335.30	$ (584,804.56)
23	M&T BANK		1,009,905.10	$ 425,100.54
27	M&T BANK		543,400.56	$ 968,501.10
30	M&T BANK		15,782.00	$ 984,283.10
30	CVS CAREMARK	2,841,767.31		$ (1,857,484.21)
30	PAYROLL	27,333.74		$ (1,884,817.95)
30	INTEREST		3,305.50	$ (1,881,512.45)
				$ (1,881,512.45)
				$ (1,881,512.45)
				$ (1,881,512.45)
				$ (1,881,512.45)
				$ (1,881,512.45)
				$ (1,881,512.45)

STARTING BALANCE GENERAL FUND **(EASTHAMPTON SAVINGS BANK x5596)**				$ 1,839,336.79
2025	TRANSACTION	A/P DEBIT	A/R CREDIT	
MAY	**EASTHAMPTON SAVINGS BANK**			
				$ 1,839,336.79
1	STEALTH/STOP LOSS	181,264.64		$ 1,658,072.15
1	ESB		198,430.20	$ 1,856,502.35
1	ESB		217,777.20	$ 2,074,279.55
1	ESB		638,199.60	$ 2,712,479.15
1	ESB		6,442.00	$ 2,718,921.15
1	ESB (FROM CD)		1,800,000.00	$ 4,518,921.15
2	ESB (TO MTB)	5,200,000.00		$ (681,078.85)
2	ESB		1,352.00	$ (679,726.85)
2	ESB		75,000.00	$ (604,726.85)
2	ESB		694,640.40	$ 89,913.55
5	ESB		62,167.77	$ 152,081.32
14	ESB		59,294.80	$ 211,376.12
15	ESB		53,594.00	$ 264,970.12
15	ESB		63,092.00	$ 328,062.12
15	ESB		110,466.73	$ 438,528.85
15	ESB		9,724.00	$ 448,252.85
15	ESB		34,784.00	$ 483,036.85
15	ESB		60,653.20	$ 543,690.05
15	ESB		233,632.34	$ 777,322.39
15	ESB		199,628.47	$ 976,950.86
19	ESB		6,442.00	$ 983,392.86
20	ESB		10,265.00	$ 993,657.86
22	ESB		688,580.73	$ 1,682,238.59
22	ESB		194,300.35	$ 1,876,538.94
22	ESB		60,296.00	$ 1,936,834.94
22	ESB		51,543.00	$ 1,988,377.94

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22	ESB		11,263.00	$ 1,999,640.94
22	ESB		84,864.00	$ 2,084,504.94
23	ESB		156,250.83	$ 2,240,755.77
23	ESB		14,645.00	$ 2,255,400.77
23	ESB		7,402.00	$ 2,262,802.77
27	ESB		8,566.00	$ 2,271,368.77
27	ESB		167,894.13	$ 2,439,262.90
28	ESB		4,406.00	$ 2,443,668.90
28	ESB		18,103.00	$ 2,461,771.90
28	ESB		11,127.83	$ 2,472,899.73
28	ESB		203,035.80	$ 2,675,935.53
29	ESB		146,853.00	$ 2,822,788.53
29	ESB		12,838.00	$ 2,835,626.53
29	ESB		196,101.70	$ 3,031,728.23
29	ESB		116,540.40	$ 3,148,268.63
29	ESB		26,780.00	$ 3,175,048.63
29	ESB		86,937.52	$ 3,261,986.15
30	ESB		14,904.00	$ 3,276,890.15
30	ESB		187,856.98	$ 3,464,747.13
30	ESB		689,991.90	$ 4,154,739.03
30	ESB		120,922.40	$ 4,275,661.43
30	CANARX	9,281.00		$ 4,266,380.43
30	BLUE MEDICARE RX (APR)	636,535.21		$ 3,629,845.22
30	PAYROLL	9,007.89		$ 3,620,837.33
30	ACCOUNTS PAYABLE	15,650.09		$ 3,605,187.24
30	INTEREST		2,650.04	$ 3,607,837.28
				$ 3,607,837.28
				$ 3,607,837.28
				$ 3,607,837.28
				$ 3,607,837.28
	MEMBER UNIT DEPOSITS ON HAND			
MAY		Starting Balance>>>>>>>>>>>>>>>		$ 4,463,551.96
				$ 4,463,551.96
31	Total			**$ 4,463,551.96**
	M&T BANK			
MAY	Post Employee Benefits Fund	Starting Balance>>>>>>>>>>>>>>>		$ 56,871.35
31	Retiree Health & Life Ins.	2,228.80	2,340.04	$ 56,982.59
31	Total			**$ 56,982.59**
	M&T BANK			
MAY	Accrued Vacation & Sick Time Fund	Starting Balance>>>>>>>>>>>>>>>		$ 31,317.96
				$ 31,317.96
31	Total			**$ 31,317.96**
	OPEB			
MAY	CD-Easthampton Savings			$ 332,408.81
31	3 mos.@ 4.150% (matures 8/23/25) x1851		1,312.71	$ 333,721.52
	Total			**$ 333,721.52**
	INVESTMENTS - CD			
MAY	CD-Easthampton Savings			$ 3,839,051.76
				$ 3,839,051.76
1	TO ESB GENERAL FUND	1,800,000.00		$ 2,039,051.76
31	12 mos.@ 5.00% (matures 8/17/25) x7499		8,379.66	$ 2,047,431.42
	Total			**$ 2,047,431.42**
	INVESTMENTS - WF			
MAY	Portfolio Value MAY 1, 2025			$ 6,851,991.84
7	TO MTB GENERAL FUND	2,000,000.00		$ 4,851,991.84
31	Investment Earnings/Loss		302,774.89	**$ 5,154,766.73**
	Total			**$ 13,814,097.01**

Hampshire County Group Insurance Trust
Claim Payments

	CLAIMS	AMOUNT PAID	VARIANCE	CUMULATIVE VAR.
January 202:	$ 4,941,510.44	$ 4,839,000.00	$ 102,510.44	**$ (67,550.81)**
February	$ 5,145,447.69	$ 4,839,000.00	$ 306,447.69	**$ 238,896.88**
March	$ 5,606,776.57	$ 4,839,000.00	$ 767,776.57	**$ 1,006,673.45**
April	$ 3,656,013.51	$ 4,839,000.00	$ (1,182,986.49)	**$ (176,313.04)**
May	$ 4,968,758.05	$ 4,839,000.00	$ 129,758.05	**$ (46,554.99)**
June	$ 5,512,963.61	$ 4,839,000.00	$ 673,963.61	**$ 627,408.62**
July	$ 4,844,980.28	$ 5,212,600.00	$ (367,619.72)	**$ 259,788.90**
August	$ 5,210,044.34	$ 5,840,008.62	$ (629,964.28)	**$ (370,175.38)**
September	$ 5,504,553.19	$ 5,212,600.00	$ 291,953.19	**$ (78,222.19)**
October	$ 4,834,161.59	$ 5,212,600.00	$ (378,438.41)	**$ (456,660.60)**
November	$ 6,293,210.34	$ 5,212,600.00	$ 1,080,610.34	**$ 623,949.74**
December	$ 4,801,040.95	$ 5,212,600.00	$ (411,559.05)	**$ 212,390.69**
January	$ 4,958,805.42	$ 5,284,300.00	$ (325,494.58)	**$ (113,103.89)**
February	$ 5,183,440.21	$ 5,284,300.00	$ (100,859.79)	**$ (213,963.68)**
March	$ 6,030,065.36	$ 5,284,300.00	$ 745,765.36	**$ 531,801.68**
April	$ 6,505,090.32	$ 5,816,101.68	$ 688,988.64	**$ 1,220,790.32**
May	$ 6,507,291.77	$ 6,505,090.32	$ 2,201.45	**$ 1,222,991.77**
June	$ 4,698,588.40	$ 5,284,300.00	$ (585,711.60)	**$ (585,711.60)**
July	$ 5,222,269.83	$ 5,529,000.00	$ (306,730.17)	**$ (306,730.17)**
August	$ 6,806,599.00	$ 5,529,000.00	$ 1,277,599.00	**$ 1,277,599.00**
September	$ 5,108,803.72	$ 5,529,000.00	$ (420,196.28)	**$ (420,196.28)**
October	$ 5,370,401.93	$ 5,529,000.00	$ (158,598.07)	**$ (158,598.07)**
November	$ 6,530,861.25	$ 5,529,000.00	$ 1,001,861.25	**$ 1,001,861.25**
December	$ 4,884,567.78	$ 5,529,000.00	$ (644,432.22)	**$ (644,432.22)**
January	$ 6,453,754.80	$ 5,569,600.00	$ 884,154.80	**$ 884,154.80**
February	$ 6,057,531.86	$ 5,569,600.00	$ 487,931.86	**$ 487,931.86**
March	$ 5,962,534.78	$ 5,569,600.00	$ 392,934.78	**$ 392,934.78**
April	$ 5,786,383.98	$ 5,569,600.00	$ 216,783.98	**$ 216,783.98**
May	$ 8,443,910.34	$ 5,569,600.00	$ 2,874,310.34	**$ 2,874,310.34**

P = Acturial Projection of Claims or Anticipated Payments, A = Actual Info. E = Estimate based on some actual information

5/1/2025	ACH		5,962,534.78	BCBS	Monthly Claim prefunding & settlement
5/1/2025	ACH		181,264.64	Stealth Partner Group	Reinsurance- APR
5/1/2025		7140	49.25	Boston Mutual	Life Ins
5/1/2025		7141	409.28	ACSA	Dental Ins
5/1/2025		7138	1,000.00	M&B Holdings	Rent APR
5/1/2025		7137	119.42	Michele Komosa	mileage
5/1/2025		7139	179.00	Cindy Graves	mileage
5/5/2025	ACH		235.40	Comcast	Internet
5/5/2025	ACH		1,446.00	NetLogix	IT expense
5/5/2025		7143	4,366.90	CanaRx	Rx expense
5/5/2025		7142	39.48	Jess Hebert	Mileage
5/5/2025	ACH		739,346.89	CVS	Rx Expense
5/7/2025	ACH		13,659.67	Checkwriters	payroll 5/8/25
5/12/2025	ACH		616,616.79	CVS	Rx Expense
5/15/2025	ACH		(65,964.85)	UNUM	Stop Loss Reimb
5/20/2025		7144	12,500.00	Edward Haber	IT expense
5/20/2025		7145	130.79	CMS	phone bill
5/20/2025		7146	4,914.10	CanaRx	Rx expense
5/20/2025	ACH		750,787.66	CVS	Rx Expense
5/20/2025	ACH		(26,264.85)		
5/21/2025	ACH		13,674.07	Checkwriters	payroll 5/22/25
5/22/2025	ACH		(25,201.11)	UNUM	Stop Loss Reimb
5/29/2025	ACH		(34,863.32)	UNUM	Stop Loss Reimb
5/29/2025	ACH		735,015.97	CVS	Rx Expense
5/29/2025		7147	3,276.16	Hamp Retirement	APR deductions
5/29/2025		7148	7,502.00	HCGIT	Health Ins Premium
5/30/2025	ACH		636,535.21	Blue Medicare Rx	Medicare rx
			9,533,309.33		

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6/11/25

MEDEX 2025

January	458,689.24	74,801.44	631,650.16	1,165,140.84	1,182,272	17,131.16	
February	698,551.49	75,064.64	633,570.68	1,407,186.81	1,186,432	(220,754.81)	
March	441,275.30	75,196.24	634,410.50	1,150,882.04	1,188,512	37,629.96	
April	573,704.74	75,459.44	636,535.21	1,285,699.39	1,192,672	(93,027.39)	
May	600,562.26	75,380.48	640,000.00	1,315,942.74	1,191,424	(124,518.74)	
							(383,539.82)

Premium	100,168,104	
BCBS Monthly	(72,830,400)	
CVS claims Q1	(8,700,000)	+GLP-1
CVS claims Q2-4	(18,900,000)	-GLP-1
CVS rebates	8,200,000	
Stop Loss Premium	(2,184,000)	flat
HCIT Budget	(850,000)	
CanaRx	(125,000)	
PCORI Fee	(40,000)	
Blue Medicare Rx (6 months)	(3,840,000)	
Blue Medicare Rx (6 months)	(4,147,200)	8% increase
New Medex 2 premium (6 Months)	1,152,000	15% increase
Stop Loss Reimb	750,000	
	(1,346,496)	

Wells Fargo	3,248,220
ESB	1,247,431

GLP-1 Monthly Spend Tracker Fill Year to date

Carrier ID	Carrier Name	Claim Fill Month		GPI 4 Class Name Desc	Total Utilizers	Member Rx Cost	Total Gross Cost	Total Net Cost	
21AT	HAMPSHIRE COUNTY GROUP	2025-06	JUNE 2025	ANTI-OBESITY AGENTS	36	$1,243.07	$47,010.05	$45,766.98	
21AT	HAMPSHIRE COUNTY GROUP	2025-06	JUNE 2025	INCRETIN MIMETIC AGENTS	21	$705.00	$24,273.50	$23,568.50	
21AT	HAMPSHIRE COUNTY GROUP	2025-05	MAY 2025	ANTI-OBESITY AGENTS	363	$14,881.50	$531,969.63	$517,088.13	505
21AT	HAMPSHIRE COUNTY GROUP	2025-05	MAY 2025	INCRETIN MIMETIC AGENTS	142	$5,724.84	$180,900.85	$175,176.01	$692,264.14
21AT	HAMPSHIRE COUNTY GROUP	2025-04	APRIL 2025	ANTI-OBESITY AGENTS	333	$12,388.45	$468,399.81	$456,011.36	476
21AT	HAMPSHIRE COUNTY GROUP	2025-04	APRIL 2025	INCRETIN MIMETIC AGENTS	143	$5,494.97	$176,019.62	$170,524.65	$626,536.01
21AT	HAMPSHIRE COUNTY GROUP	2025-03	MARCH 2025	ANTI-OBESITY AGENTS	311	$11,597.10	$412,742.89	$401,145.79	459
21AT	HAMPSHIRE COUNTY GROUP	2025-03	MARCH 2025	INCRETIN MIMETIC AGENTS	148	$6,016.73	$192,347.15	$186,330.42	$587,476.21
21AT	HAMPSHIRE COUNTY GROUP	2025-02	FEBRUARY 2025	ANTI-OBESITY AGENTS	297	$11,452.67	$399,463.48	$388,010.81	420
21AT	HAMPSHIRE COUNTY GROUP	2025-02	FEBRUARY 2025	INCRETIN MIMETIC AGENTS	123	$4,435.26	$143,188.99	$138,753.73	$526,764.54
21AT	HAMPSHIRE COUNTY GROUP	2025-01	JANUARY 2025	ANTI-OBESITY AGENTS	280	$12,505.29	$435,470.73	$422,965.44	423
21AT	HAMPSHIRE COUNTY GROUP	2025-01	JANUARY 2025	INCRETIN MIMETIC AGENTS	143	$6,127.59	$194,234.59	$188,107.00	$611,072.44

Group Reimbursement Report
Hampshire County Group Insurance Trust
Policy Dates 7/1/2024 to 6/30/2025

stealth PARTNER GROUP
An Amwins Company

Benefits

Specific Contract:	12/24
Gapless:	No
Spec Deductible:	$400,000
Agg Specific Deductible:	N/A
Covered Benefits:	Medical & RX
Domestic Reimbursement:	N/A

Specific Contract Parameters

Incurred Date Range:	7/1/2024	to	6/30/2025
Paid Date Range:	7/1/2024	to	6/30/2026

Current Laser / Limits

Full Name	DOB, EE/SP/Dep, Claimant #	Type	Amount	Notes/Specifics
None				

**Grayed out totals listed below indicate no changes in YTD from prior filing

Employee	Claimant Rel	Filing Type	Reporting Month	Reported Medical YTD	Reported Rx YTD	Reported Bolt On YTD	Reported YTD	Spec Deductible	Reimbursement Requested	Filed to Carrier	Amount Reimbursed	Reimbursement Date	Carrier Pend	Carrier Denied	Overpayment +/-	Carrier Approved YTD	Notes
															$ 4,737.91		OverPayment Rolled over from Prior Policy Year
		Reported Totals		$ -	$ -	$ -	$ -	$ -	$ -		$ -		$ -	$ -		$ -	
	d	Initial	November	$ 401,094.18	$ 4,027.26	$ -	$ 405,121.44	$ 400,000.00	$ 5,121.44	12/26/2024	$ -	1/8/2025	$ 5,121.44	$ -	$ -	$ 400,000.00	Pended for additional eligibility documents.
				$ 401,094.18	$ 4,027.26	$ -	$ 405,121.44		$ - -		$ 5,121.44	1/14/2025	$ (5,121.44)	$ -	$ -	$ 405,121.44	Release of abo ~~~ded amount.
		Supp	December	$ 488,400.84	$ 4,602.53	$ -	$ 493,003.37		$ 87,881.93	1/16/2025	$ 87,077.09	1/29/2025	$ -	$ -	$ (804.84)	$ 493,003.37	$804.84 appli ~~~ :r's overpayment for the 7/1/2023 PY.
		Supp	January	$ 488,400.84	$ 5,317.54	$ -	$ 493,718.38		$ 715.01	2/12/2025	$ 715.01	2/17/2025	$ -	$ -	$ -	$ 493,718.38	
		Supp	January	$ 564,945.85	$ 5,317.54	$ -	$ 570,263.39		$ 76,545.01	2/18/2025	$ 72,955.06	2/24/2025	$ -	$ -	$ (3,589.95)	$ 570,263.39	$3,589.95 applied ~~~ yment for the 7/1/2023 PY.
		Supp	February	$ 564,945.85	$ 5,328.23	$ -	$ 570,274.08		$ 10.69	3/12/2025	$ 10.69	3/12/2025	$ -	$ -	$ -	$ 570,274.08	
		Supp	February	$ 640,066.53	$ 5,328.23	$ -	$ 645,394.76		$ 75,120.68	3/18/2025	$ 75,120.68	3/24/2025	$ -	$ -	$ -	$ 645,394.76	
		Supp	March	$ 640,066.53	$ 6,506.01	$ -	$ 646,572.54		$ 1,177.78	4/11/2025	$ 1,177.78	4/14/2025	$ -	$ -	$ -	$ 646,572.54	
		Supp	March	$ 688,128.32	$ 6,506.01	$ -	$ 694,634.33		$ 48,061.79	4/16/2025	$ 48,061.79	4/18/2025	$ -	$ -	$ -	$ 694,634.33	
		Supp	April	$ 688,128.32	$ 6,518.65	$ -	$ 694,646.97		$ 12.64	5/13/2025	$ 12.64	5/14/2025	$ -	$ -	$ -	$ 694,646.97	
		Supp	April	$ 714,427.29	$ 6,518.65	$ -	$ 720,945.94		$ 26,298.97	5/16/2025	$ 26,264.85	5/19/2025	$ -	$ -	$ (34.12)	$ 720,945.94	$34.12 applied to 7/1/2023 PY
		Reported totals		$ 714,427.29	$ 6,518.65	$ -	$ 720,945.94	$ 400,000.00	$ 320,945.94		$ 316,517.03		$ -	$ -		$ 720,945.94	
n		Initial	January	$ -	$ 439,890.32	$ -	$ 439,890.32	$ 400,000.00	$ 39,890.32	2/13/2025	$ 39,890.32	3/10/2025	$ -	$ -	$ -	$ 439,890.32	
		Supp	January	$ 973.96	$ 439,890.32	$ -	$ 440,864.28		$ 973.96	2/19/2025	$ 973.96	3/10/2025	$ -	$ -	$ -	$ 440,864.28	
		Supp	February	$ 973.96	$ 505,732.13	$ -	$ 506,706.09		$ 65,841.81	3/12/2025	$ 65,841.81	3/12/2025	$ -	$ -	$ -	$ 506,706.09	
		Supp	February	$ 1,569.57	$ 505,732.13	$ -	$ 507,301.70		$ 595.61	3/18/2025	$ 525.61	3/19/2025	$ -	$ -	$ (70.00)	$ 507,301.70	$70.00 applied ~~~ oayment for the 7/1/2023 PY.
		Supp	March	$ 1,569.57	$ 571,583.81	$ -	$ 573,153.38		$ 65,851.68	4/11/2025	$ 65,851.68	4/14/2025	$ -	$ -	$ -	$ 573,153.38	
		Supp	March	$ 2,138.43	$ 571,583.81	$ -	$ 573,722.24		$ 568.86	4/16/2025	$ 568.86	4/18/2025	$ -	$ -	$ -	$ 573,722.24	
		Supp	April	$ 2,138.43	$ 637,430.12	$ -	$ 639,568.55		$ 65,846.31	5/13/2025	$ 65,846.31	5/14/2025	$ -	$ -	$ -	$ 639,568.55	
		Supp	April	$ 2,377.43	$ 637,430.12	$ -	$ 639,807.55		$ 239.00	5/16/2025	$ -	5/19/2025	$ -	$ -	$ (239.00)	$ 639,807.55	Full amount applied to 7/1/2023 F
		Reported totals		$ 2,377.43	$ 637,430.12	$ -	$ 639,807.55	$ 400,000.00	$ 239,807.55		$ 239,498.55		$ -	$ -		$ 639,807.55	
		Initial	February	$ 401,316.49	$ 1,261.19	$ -	$ 402,577.68	$ 400,000.00	$ 2,577.68	3/20/2025	$ 2,577.68	3/28/2025	$ -	$ -	$ -	$ 402,577.68	
		Supp	March	$ 401,316.49	$ 2,437.74	$ -	$ 403,754.23		$ 1,176.55	4/11/2025	$ 1,176.55	4/14/2025	$ -	$ -	$ -	$ 403,754.23	
		Supp	March	$ 410,482.01	$ 2,437.74	$ -	$ 412,919.75		$ 9,165.52	4/16/2025	$ 9,165.52	4/18/2025	$ -	$ -	$ -	$ 412,919.75	
		Supp	April	$ 410,482.01	$ 2,543.64	$ -	$ 413,025.65		$ 105.90	5/13/2025	$ 105.90	5/14/2025	$ -	$ -	$ -	$ 413,025.65	
		Supp	April	$ 435,683.12	$ 2,543.64	$ -	$ 438,226.76		$ 25,201.11	5/16/2025	$ 25,201.11	5/21/2025	$ -	$ -	$ -	$ 438,226.76	
		Reported totals		$ 435,683.12	$ 2,543.64	$ -	$ 438,226.76	$ 400,000.00	$ 38,226.76		$ 38,226.76		$ -	$ -		$ 438,226.76	
	Self	Initial	April	$ 342,266.52	$ 62,141.96	$ -	$ 404,408.48	$ 400,000.00	$ 4,408.48	5/22/2025	$ -	5/28/2025	$ 4,408.48	$ -	$ -	$ 400,000.00	Full amount pended for precert/CM for medicine & 1st date of diagnosis for C79.51 & C61.
				$ 342,266.52	$ 62,141.96	$ -	$ 404,408.48		$ - -		$ 4,408.48	6/11/2025	$ (4,408.48)	$ -	$ -	$ 404,408.48	Above pended amount released.
		Reported totals		$ 342,266.52	$ 62,141.96	$ -	$ 404,408.48	$ 400,000.00	$ 4,408.48		$ 4,408.48		$ -	$ -		$ 404,408.48	
	Self	Initial	April	$ 154,461.20	$ 280,402.12	$ -	$ 434,863.32	$ 400,000.00	$ 34,863.32	5/23/2025	$ 34,863.32	5/28/2025	$ -	$ -	$ -	$ 434,863.32	
		Reported totals		$ 154,461.20	$ 280,402.12	$ -	$ 434,863.32	$ 400,000.00	$ 34,863.32		$ 34,863.32		$ -	$ -		$ 434,863.32	

Total Reimbursement Requested	Total Amount Reimbursed	Total Amount Pended	Total Amount Denied	Total Overpayment (If Applicable)	Outstanding Balance
$ 638,252.05	$ 633,514.14	$ -	$ -	$ (0.00)	$ 0.00

** All claims data reported by Stealth Partner Group/Amwins is based upon the accuracy of data received from plan administrators.
Stealth Partner Group/Amwins is not responsible for inaccuracies or errors in administrator data.

6/12/2025

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FY-2024 Budgeted 7-1/6-30	FY-2025 Budgeted 7-1/6-30	BUDGET ITEMS WAGES & BENEFITS	FY-2026
391,000.00	410,000.00	SALARY*	426,000.00
6,600.00	6,600.00	LONGEVITY	6,600.00
		OVERTIME	
		TEMP. EMPLOYEE SAL	
		FICA (.062)	
		MED TAX (.0145)	
111,539.00	125,624.00	CONTRIBUTORY RET.	130,358.00
		EMP. ASST. PROG. EAP	
56,000.00	80,000.00	HEALTH INSURANCE	94,400.00
350.00	350.00	LIFE INSURANCE	350.00
		UNEMP HEALTH INS TAX	
565,489.00	622,574.00	**TOT. WAGES & BENEFITS**	657,708.00

		BUDGET ITEMS NON SALARY EXPENSES	
		ADM. CONT. SERVICES (FS&PF)	
14,400.00	14,400.00	Rent	13,200.00
-		Parking	
21,000.00	22,000.00	ADM. CONT. SERVICES (Audit)	45,000.00
-		LEGAL	
		TELEPNONE/INTERNET	
600.00	600.00	FOOD SUPPLIES	500.00
2,500.00		OFFICE & COMPUTER SUPPLIES	
5,500.00	5,000.00	MISC. EXPENSES	5,000.00
		NEWSPAPER/MAGS/BOOKS	
8,500.00	8,500.00	POSTAGE (Stamps)	6,000.00
		POSTAGE METER RENTAL	
10,000.00	7,500.00	MINI GRANTS/WELLNESS	7,500.00
		STATIONERY & OFF. SUPP.	
1,750.00	1,250.00	SURETY BONDS	1,250.00
		TELEPHONES	
		TRAINING	
5,000.00	5,000.00	TRAVEL IN/OUT of STATE	3,000.00
5,500.00	6,000.00	UTILITIES	6,000.00
		TOT. Inderect Costs	
74,750.00	70,250.00	**Total Non-Salary**	87,450.00

7-1/6-30		BUDGET ITEMS I.T.		
3,000.00	7,500.00	COMPUTER HARDWARE	2,500.00	
		COMPUTER SOFTWARE		
2,000.00	1,000.00	COMPUTER SUPPLIES	1,000.00	
		DESK TOP PCs		
195,000.00	175,000.00	MISC PROF & TECH SERV.**	80,000.00	
200,000.00	183,500.00	**TOTAL DATA PROCESSING**	83,500.00	
840,239.00	876,324.00	**TOTALS**	828,658.00	**-5.4%**

Stealth Partner Group
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An Amwins Company

Mindi Smith
Phone: 203.258.3889
Email: mindi.smith@amwins.com

Prepared For: Hampshire County Group Insurance Trust
Effective Date: 7/1/2025

Approached: 26
Quoted: 2
Declined: 24
Pending: 0

STEALTH MARKETING SUMMARY

Carrier	Rating	Response	Comments
Amalgamated Life Insurance Company	A	Declined	Underwriting Guidelines - Not Quoting Over BUCA Admin -
Amwins Accident & Health Underwriters, LLC	A++	Declined	Uncompetitive Rates
Amynta	A	**Quoted**	39% over current
Berkley Accident and Health	A+	Declined	Uncompetitive Rates
Berkshire Hathaway Specialty Insurance Company	A++	Declined	Uncompetitive Rates
Crum & Forster	A	Declined	Uncompetitive Rates
Evolution Risk Partners	A+	Declined	Uncompetitive Rates
HCC Life Insurance Company	A++	Declined	Uncompetitive Rates
IISI - Intermediary Insurance Services, Inc.	A+	Declined	Uncompetitive Rates
International Specialty Underwriters, Inc.	A+	Declined	Ongoing Large Claims
IOA Re	A+	Declined	Uncompetitive Rates
IRC	A+	Declined	Uncompetitive Rates
Optum	A+	Declined	Uncompetitive Rates
PACE Underwriters, LLC	A+	Declined	Uncompetitive Rates
PartnerRe	A+	Declined	Uncompetitive Rates
QBE North America	A	Declined	Uncompetitive Rates
Skyward Specialty Insurance Group	A+	Declined	Underwriting Guidelines - Not Quoting Over BUCA Admin
SL Management Partners, LLC	A+	Declined	Uncompetitive Rates
Sun Life	A+	Declined	Uncompetitive Rates
Swiss Re	A+	Declined	Uncompetitive Rates
Symetra	A	Declined	Uncompetitive Rates
ULLICO Inc.	A+	**Quoted**	Ullico: 6% over current
Underwriting Management Experts	A+	Declined	Uncompetitive Rates
Vista One 80 Intermediaries	A+	Declined	Underwriting Guidelines - Not Quoting Over BUCA Admin
Voya Financial, Inc.	A	Declined	Uncompetitive Rates

Wellpoint Stop Loss	A	Declined	Uncompetitive Rates

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GROUP: ***Hampshire County Group Insurance Trust***

EFFECTIVE DATE: ***July 1, 2025***

SPECIFIC STOP LOSS	Current	Renewal	Option 1	Option 2	BROKER QUOTE	BROKER QUOTE
CARRIER:	Unum	Amynta Group	ULLICO	BCBS MA		
Carrier Rating:	A		A			
TPA:	BCBS MA	BCBS MA	BCBS MA	BCBS MA	BCBS MA	BCBS MA
PPO Network:	BCBS MA	BCBS MA	BCBS MA	BCBS MA	BCBS MA	BCBS MA
UR Vendor:	BCBS MA	BCBS MA	BCBS MA	BCBS MA	BCBS MA	BCBS MA
PBM:	CVS with CanaRx	CVS with CanaRx	CVS with CanaRx	CVS with CanaRx	TBD	TBD
Specific Benefits Included:	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx
Plan Lifetime Maximum:	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Specific Lifetime Maximum Reimbursement:	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Individual Specific Deductible:	$ 400,000	$ 400,000	$ 400,000	$ 400,000	$ 400,000	$ 400,000
Specific Contract:	12/24	12/24	12/24	12/18	12/24	12/24
Conditional Laser (I	*N/A*	contingent $1M SCT	$ -	$ -	$ -	$
Laser (J	*N/A*	$ 925,000	$ -	$ -	$ -	$
Laser (	*N/A*	$ 925,000	$ -	$ -	$ -	$
Laser (	*N/A*	$ 765,000	$ -	$ -	$ -	$
1719 EE Only	$ 23.11	$ 38.82	$ 25.70	$ 29.00	$ 27.73	$ 31.11
2362 Family	$ 60.18	$ 78.78	$ 62.86	$ 87.22	$ 72.66	$ 62.30
4081 Composite	$ 44.57	$ 61.95	$ 47.21	$ 62.70	$ 53.73	$ 49.16
Monthly Specific Premium	$ 181,871.25	$ 252,809.94	$ 192,653.62	$ 255,864.64	$ 219,290.79	$ 200,630.69
Annual Specific Premium	$ 2,182,455.00	$ 3,033,719.28	$ 2,311,843.44	$ 3,070,375.68	$ 2,631,489.48	$ 2,407,568.28
% Difference		39%	6%	41%	21%	10%
TOTAL REINSURANCE EXPENSE						
Annual Fixed Premium	$ 2,182,455.00	$ 3,033,719.28	$ 2,311,843.44	$ 3,070,375.68	$ 2,631,489.48	$ 2,407,568.28
% Difference		39%	6%	41%	21%	10%
Maximum Cost Liability	$ 2,182,455.00	$ 4,448,719.28	$ 2,311,843.44	$ 3,070,375.68	$ 2,631,489.48	$ 2,407,568.28
% Difference		104%	6%	41%	21%	10%
Amwins Gene Therapy Solutions						
PEPM Fee:		$ 4.75	$ 4.75			
Annual Fee:		$ 232,617.00	$ 232,617.00			
Annual Fixed Premium (includes GTS)	$ 2,182,455.00	$ 3,266,336.28	$ 2,544,460.44			
% Difference		50%	17%			
Maximum Cost Liability (includes GTS)	$ 2,182,455.00	$ 4,681,336.28	$ 2,544,460.44			
% Difference		114%	17%			
Plan Mirroring	Included	Pending Review of PD	Pending Review of PD			
Amwins Gene Therapy Solutions 15	Not Included	Additional $4.75 PEPM Illustrated Above	Additional $4.75 PEPM Illustrated Above			
Rx Patient Assistance Programs	CanaRx	CanaRx	CanaRx	CanaRx		
Disclosure Status			*Pending Large Claim Review*			

Commissions: 0.0%
0

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Amwins Gene Therapy Solutions 15 -First Dollar Coverage: Luxturna, Zolgensma, Spinraza, Zynteglo, Casgevy, Skysona, Roctavian, Hemgenix, Beqvez, Elevidys, Lyfgenia, Lenmeldy, Abecma, Carvykti, and Rethymic
*Please review the attached Gene Therapy document for additional information
*This program is not commissionable

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GROUP: ***Hampshire County Group Insurance Trust***

EFFECTIVE DATE: ***July 1, 2025***

SPECIFIC STOP LOSS	Current	Renewal	Option 1	Option 2	BROKER QUOTE	BROKER QUOTE
CARRIER:	Unum	Amynta Group	ULLICO	BCBS MA		
Carrier Rating:	A		A			
TPA:	BCBS MA	BCBS MA	BCBS MA	BCBS MA	BCBS MA	BCBS MA
PPO Network:	BCBS MA	BCBS MA	BCBS MA	BCBS MA	BCBS MA	BCBS MA
UR Vendor:	BCBS MA	BCBS MA	BCBS MA	BCBS MA	BCBS MA	BCBS MA
PBM:	CVS with CanaRx	CVS with CanaRx	CVS with CanaRx	CVS with CanaRx	TBD	TBD
Specific Benefits Included:	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx
Plan Lifetime Maximum:	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Specific Lifetime Maximum Reimbursement:	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Individual Specific Deductible:	$ 400,000	$ 425,000	$ 425,000	$ 425,000	$ 425,000	$ 425,000
Specific Contract:	12/24	12/24	12/24	12/18	12/24	12/24
Aggregating Specific:	$ -	$ -	$ -	$ -	$ -	$ 150,000
Conditional Laser	*N/A*	contingent $1M SCT	$ -	$ -	$ -	$
Laser (Jil	*N/A*	$ 925,000	$ -	$ -	$ -	$
Laser ( )	*N/A*	$ 925,000	$ -	$ -	$ -	$
Laser (Je	*N/A*	$ 765,000	$ -	$ -	$ -	$
1719 EE Only	$ 23.11	$ 36.96	$ 24.17	$ 27.09	$ 25.60	$ 28.76
2362 Family	$ 60.18	$ 73.28	$ 58.35	$ 81.88	$ 67.06	$ 54.46
4081 Composite	$ 44.57	$ 57.98	$ 43.95	$ 58.80	$ 49.60	$ 43.63
Monthly Specific Premium	$ 181,871.25	$ 236,621.60	$ 179,370.93	$ 239,968.27	$ 202,402.12	$ 178,072.96
Annual Specific Premium	$ 2,182,455.00	$ 2,839,459.20	$ 2,152,451.16	$ 2,879,619.24	$ 2,428,825.44	$ 2,136,875.52
% Difference		30%	-1%	32%	11%	-2%
TOTAL REINSURANCE EXPENSE						
Annual Fixed Premium	$ 2,182,455.00	$ 2,839,459.20	$ 2,152,451.16	$ 2,879,619.24	$ 2,428,825.44	$ 2,136,875.52
% Difference		30%	-1%	32%	11%	-2%
Maximum Cost Liability	$ 2,182,455.00	$ 4,179,459.20	$ 2,152,451.16	$ 2,879,619.24	$ 2,428,825.44	$ 2,286,875.52
% Difference		92%	-1%	32%	11%	5%
Amwins Gene Therapy Solutions						
PEPM Fee:		$ 4.75	$ 4.75			
Annual Fee:		$ 232,617.00	$ 232,617.00			
Annual Fixed Premium (includes GTS)	$ 2,182,455.00	$ 3,072,076.20	$ 2,385,068.16			
% Difference		41%	9%			
Maximum Cost Liability (includes GTS)	$ 2,182,455.00	$ 4,412,076.20	$ 2,385,068.16			
% Difference		102%	9%			
Plan Mirroring	Included	Pending Review of PD	Pending Review of PD			
Amwins Gene Therapy Solutions 15	Not Included	Additional $4.75 PEPM Illustrated Above	Additional $4.75 PEPM Illustrated Above			
Rx Patient Assistance Programs	CanaRx	CanaRx	CanaRx	CanaRx		
Disclosure Status			*Pending Large Claim Review*			

Commissions: 0.0%
0

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Amwins Gene Therapy Solutions 15 -First Dollar Coverage: Luxturna, Zolgensma, Spinraza, Zynteglo, Casgevy, Skysona, Roctavian, Hemgenix, Beqvez, Elevidys, Lyfgenia, Lenmeldy, Abecma, Carvykti, and Rethymic
*Please review the attached Gene Therapy document for additional information
*This program is not commissionable

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GROUP: ***Hampshire County Group Insurance Trust***

EFFECTIVE DATE: ***July 1, 2025***

SPECIFIC STOP LOSS	Current	Renewal	Option 1	Option 2
CARRIER:	Unum	Amynta Group	ULLICO	BCBS MA
Carrier Rating:	A		A	
TPA:	BCBS MA	BCBS MA	BCBS MA	BCBS MA
PPO Network:	BCBS MA	BCBS MA	BCBS MA	BCBS MA
UR Vendor:	BCBS MA	BCBS MA	BCBS MA	BCBS MA
PBM:	CVS with CanaRx	CVS with CanaRx	CVS with CanaRx	CVS with CanaRx
Specific Benefits Included:	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx
Plan Lifetime Maximum:	Unlimited	Unlimited	Unlimited	Unlimited
Specific Lifetime Maximum Reimbursement:	Unlimited	Unlimited	Unlimited	Unlimited
Individual Specific Deductible:	$ 400,000	$ 450,000	$ 450,000	$ 450,000
Specific Contract:	12/24	12/24	12/24	12/18
Conditional Laser (N	*N/A*	contingent $1M SCT	$ -	$ -
Laser (J t)	*N/A*	$ 925,000	$ -	$ -
Laser (T	*N/A*	$ 925,000	$ -	$ -
Laser (J)	*N/A*	$ 765,000	$ -	$ -
1719 EE Only	$ 23.11	$ 35.27	$ 22.79	$ 25.15
2362 Family	$ 60.18	$ 68.32	$ 54.28	$ 76.27
4081 Composite	$ 44.57	$ 54.40	$ 41.02	$ 54.74
Monthly Specific Premium	$ 181,871.25	$ 222,000.97	$ 167,385.37	$ 223,382.59
Annual Specific Premium	$ 2,182,455.00	$ 2,664,011.64	$ 2,008,624.44	$ 2,680,591.08
% Difference		22%	-8%	23%
TOTAL REINSURANCE EXPENSE				
Annual Fixed Premium	$ 2,182,455.00	$ 2,664,011.64	$ 2,008,624.44	$ 2,680,591.08
% Difference		22%	-8%	23%
Maximum Cost Liability	$ 2,182,455.00	$ 3,929,011.64	$ 2,008,624.44	$ 2,680,591.08
% Difference		80%	-8%	23%
Amwins Gene Therapy Solutions				
PEPM Fee:		$ 4.75	$ 4.75	
Annual Fee:		$ 232,617.00	$ 232,617.00	
Annual Fixed Premium (includes GTS)	$ 2,182,455.00	$ 2,896,628.64	$ 2,241,241.44	
% Difference		33%	3%	
Maximum Cost Liability (includes GTS)	$ 2,182,455.00	$ 4,161,628.64	$ 2,241,241.44	
% Difference		91%	3%	

Plan Mirroring	Included	Pending Review of PD	Pending Review of PD	
Amwins Gene Therapy Solutions 15	Not Included	Additional $4.75 PEPM Illustrated Above	Additional $4.75 PEPM Illustrated Above	
Rx Patient Assistance Programs	CanaRx	CanaRx	CanaRx	CanaRx
Disclosure Status			*Pending Large Claim Review*	

Commissions: 0.0%
0

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Amwins Gene Therapy Solutions 15 -First Dollar Coverage: Luxturna, Zolgensma, Spinraza, Zynteglo, Casgevy, Skysona, Roctavian, Hemgenix, Beqvez, Elevidys, Lyfgenia, Lenmeldy, Abecma, Carvykti, and Rethymic
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GROUP: **Hampshire County Group Insurance Trust**

EFFECTIVE DATE: **July 1, 2025**

SPECIFIC STOP LOSS	Current	Renewal	Option 1	Option 2
CARRIER:	Unum	Amynta Group	ULLICO	BCBS MA
Carrier Rating:	A		A	
TPA:	BCBS MA	BCBS MA	BCBS MA	BCBS MA
PPO Network:	BCBS MA	BCBS MA	BCBS MA	BCBS MA
UR Vendor:	BCBS MA	BCBS MA	BCBS MA	BCBS MA
PBM:	CVS with CanaRx	CVS with CanaRx	CVS with CanaRx	CVS with CanaRx
Specific Benefits Included:	Medical & Rx	Medical & Rx	Medical & Rx	Medical & Rx
Plan Lifetime Maximum:	Unlimited	Unlimited	Unlimited	Unlimited
Specific Lifetime Maximum Reimbursement:	Unlimited	Unlimited	Unlimited	Unlimited
Individual Specific Deductible:	$ 400,000	$ 500,000	$ 500,000	$ 500,000
Specific Contract:	12/24	12/24	12/24	12/18
Conditional Laser ( )	N/A	contingent $1M SCT	$ -	$ -
Laser (J	N/A	$ 925,000	$ -	$ -
Laser (T	N/A	$ 925,000	$ -	$ -
Laser (J	N/A	$ 765,000	$ -	$ -
1719 EE Only	$ 23.11	$ 32.62	$ 20.49	$ 21.91
2362 Family	$ 60.18	$ 60.16	$ 47.26	$ 66.63
4081 Composite	$ 44.57	$ 48.56	$ 35.98	$ 47.79
Monthly Specific Premium	$ 181,871.25	$ 198,171.70	$ 146,850.43	$ 195,043.35
Annual Specific Premium	$ 2,182,455.00	$ 2,378,060.40	$ 1,762,205.16	$ 2,340,520.20
% Difference		9%	-19%	7%
TOTAL REINSURANCE EXPENSE				
Annual Fixed Premium	$ 2,182,455.00	$ 2,378,060.40	$ 1,762,205.16	$ 2,340,520.20
% Difference		9%	-19%	7%
Maximum Cost Liability	$ 2,182,455.00	$ 3,493,060.40	$ 1,762,205.16	$ 2,340,520.20
% Difference		60%	-19%	7%
Amwins Gene Therapy Solutions				
PEPM Fee:		$ 4.75	$ 4.75	
Annual Fee:		$ 232,617.00	$ 232,617.00	
Annual Fixed Premium (includes GTS)	$ 2,182,455.00	$ 2,610,677.40	$ 1,994,822.16	
% Difference		20%	-9%	
Maximum Cost Liability (includes GTS)	$ 2,182,455.00	$ 3,725,677.40	$ 1,994,822.16	
% Difference		71%	-9%	
Plan Mirroring	Included	Pending Review of PD	Pending Review of PD	
Amwins Gene Therapy Solutions 15	Not Included	Additional $4.75 PEPM Illustrated Above	Additional $4.75 PEPM Illustrated Above	
Rx Patient Assistance Programs	CanaRx	CanaRx	CanaRx	CanaRx
Disclosure Status			*Pending Large Claim Review*	

Commissions: 0.0%
0

Stealth Partner Group may receive fees or compensation as a result of placing and servicing this business or insurance policy. Compensation may include underwriting and management fees, consulting fees, override commission, or other various forms of remuneration.

For legal terms and disclosures, please visit www.stealthpartnergroup.com/terms-and-conditions

While cost containment programs may provide savings and benefit to the group, Stealth Partner Group, LLC, makes no representations or warranties regarding the effectiveness of such programs. Stealth Partner Group, LLC, further makes no representations or warranties on whether the selected stop-loss carrier will accept or reimburse such a program, unless the stop-loss carrier agrees to or validates the program. Finally, Stealth Partner Group, LLC, can only assist the group with cost containment programs to which it is aware, and expressly disclaims any liability for cost containment programs that it is not aware of.
Amwins Gene Therapy Solutions 15 -First Dollar Coverage: Luxturna, Zolgensma, Spinraza, Zynteglo, Casgevy, Skysona, Roctavian, Hemgenix, Beqvez, Elevidys, Lyfgenia, Lenmeldy, Abecma, Carvykti, and Rethymic
*Please review the attached Gene Therapy document for additional information
*This program is not commissionable

6/17/2025