HAMPSHIRE COUNTY GROUP INSURANCE TRUST

Executive Committee
Meeting Notice and Agenda
January 24, 2024
9:00 A.M.
ZOOM Meeting

Call to Order	RC
Approval of Minutes of December 2023, Jan 2024	RC
Financial Report Month of December 2023 **Income & Expenses & Operating Expenses** **For Trust and Wellness Initiative**	JS
Open Enrollment/Health Fairs	JS
Stop Loss Update	JS
CanaRx Mailing	JS
Spouse Audit/Marital Affidavit/Budget Adjustment (vote)	JS
Rx RFP Update (vote)	JS/JG
Rate Increase (vote)	JS
Other Last Minute Items	JS
Adjournment	RC

<u>Meeting Schedule</u>

Insurance Advisory Committee – January 31, 2024, 10:00 a.m. ZOOM
Executive Committee – February 2024, TBD
Executive Committee – March 20, 2024, 9:00 a.m., ZOOM

Joseph Shea is inviting you to a scheduled Zoom meeting.

Join Zoom Meeting
https://us02web.zoom.us/j/85468444040?pwd=ZVZLamRxTXJ6Z3o4Mk10dS9NaHVHZz09

Meeting ID: 854 6844 4040
Passcode: 768758

One tap mobile
+16465588656,,85468444040#,,,,*768758# US (New York)
+16469313860,,85468444040#,,,,*768758# US

Dial by your location
- +1 646 558 8656 US (New York)
- +1 646 931 3860 US
- +1 301 715 8592 US (Washington DC)
- +1 305 224 1968 US
- +1 309 205 3325 US
- +1 312 626 6799 US (Chicago)
- +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
- +1 669 444 9171 US
- +1 669 900 9128 US (San Jose)
- +1 689 278 1000 US

Meeting ID: 854 6844 4040
Passcode: 768758

Find your local number: https://us02web.zoom.us/u/kd6JxwSv8U

HAMPSHIRE COUNTY GROUP INSURANCE TRUST

88 KING STREET
NORTHAMPTON, MA 01060

TO: All Trust Member Units

RE: **Minutes of January 9, 2024**
Executive Committee Meeting
Via Zoom Teleconference

MEMBERS PRESENT:

Rich Carmignani Jr	Joanne Misiaszek	Emily Russo
Deb Kuhn	Michele Turner	Shelley Poreda
Paula Harrison	Gabriele Voelker	

OTHERS PRESENT:

Joseph Shea	Cynthia Graves	Jessica Hebert

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 9:02 a.m. with a quorum present.

INSURANCE/FINANCIAL/ADMINISTRATIVE OVERVIEW

Joe called a meeting at the request of our new EC members to go over financial reports for the trust, giving new members a better understanding of how the money is being used and invested. The purpose was to help our members make educated decisions regarding the trust financials moving forward.

ADJOURNMENT

Meeting adjourned at 10:04

Respectfully submitted,
Jessica Hebert

Meeting Schedule

Executive Committee – January 24, 2024, 9:00 a.m., via ZOOM
Insurance Advisory Committee – January 31, 2024, 10:00 a.m., via ZOOM
Executive Committee – February 2024, TBD

HAMPSHIRE COUNTY GROUP INSURANCE TRUST

88 KING STREET
NORTHAMPTON, MA 01060

TO: All Trust Member Units

RE: **Minutes of December 20, 2023**
Executive Committee Meeting
Via Zoom Teleconference

MEMBERS PRESENT:

Rich Carmignani Jr	Joanne Misiaszek	Emily Russo
Donna Whitely	Michele Turner	Shelley Poreda
Paula Harrison		

OTHERS PRESENT:

Joseph Shea	Cynthia Graves	Jessica Hebert
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 9:02 a.m. with a quorum present.

APPROVAL OF MINUTES

Chairman Rich Carmignani Jr requested that the minutes of November 15, 2023 be approved by unanimous consent, all were in favor.

FINANCIAL REPORT

Financial Report

The Financial Report for the month of November was presented reflecting a starting balance of $1,895,820.23 with a total monthly income received of $6,760,791.52 and monthly expenses of $7,761,946.42 with a total net monthly income of ($1,001,154.90) and an ending month balance of $1,894,665.33 with accounts receivable of $417,650.60 leaving a total of $28,041,105.28.

Investments and CD's for November 2023

The investments portfolio value was $9,918,430.90 with a market change of $702,529.17 leaving a total of $10,620,960.07. The starting balance in CD's was $11,193,726.96, with interest earned of $45,864.63 leaving a balance of $10,239,591.59.

NOVEMBER EXPENDITURES

The expenditures for the month of November were reviewed.

Chairman Rich Carmignani Jr requested that the full financial report, including the expenditures, be approved by roll call vote which resulted with all in favor.

Rx RFP UPDATE

Update provided by John Garrish who stated the process is still ongoing between CVS & BCBS, Optum and Express Scripts have now been eliminated. Round 2 showed improved quotes, CVS is showing a 24% savings with BCBS showing a 27% savings. John will go back to both CVS and BCBS one more time in the next 2 weeks before making a final proposal by 1/5/24. The final decision will be given at the 1/24/24 meeting.

IT UPDATE

Electronic bills are progressing, we will be testing internally in January and hope to bring electronic vs paper bills to our units starting in February 2024.

CLAIM UPDATE

Joe advised the approximately 1.9-million-dollar claim showed in November 2023. He explained that it should be a 1-time expense but would have an impact on our reinsurance for next year.

HUNTINGTON PERMANENT TRUST ENTRY

The Town of Huntington joined the Trust 1 year ago and were accepted on a 1-year conditional basis. After Joe reviewed 5 months' worth of claims, it was determined that they were minimal risk and he recommended they be brought on permanently.

On a motion by Shelley Poreda, seconded by Emily Russo, it was voted to permanently accept the Town of Huntington into the Trust. A roll call vote was taken with all in favor.

CVS REBATE

Joe advised we would be receiving 1.5 – 1.7 million rebate from CVS in January 2024.

NATUROPATHIC CARE

Joe explained that a member had reached out regarding Naturopathic Care asking if it was covered or could be. After doing some research he determined that it is not a covered expense by BCBS and recommended that we not pursue any further at this time, all were in favor.

MEDICARE BUY-IN

Joe explained that there are several logistics involved with this including numbers that we have been unable to get from BCBS and we do not have enough members impacted at this time to pursue, all were in favor.

PRELIMINARY RATE DISCUSSION

Joe stated that there has been a 6 million dollar loss to the trust after factoring in Stop Loss Insurance. With more than 7 months of claim activity left, the buffer is depleting requiring a sizeable rate increase in the coming year. Rx along with Mental Health care are driving factors

currently and it is expected that claims will continue to trend upward. To help steady our losses, Joe is anticipating an increase of around 10% for the HMO and PPO plans.

ADJOURNMENT

Chairman Rich Carmignani Jr requested to adjourn the meeting by unanimous consent at 10:07 a.m., all were in favor.

Respectfully submitted,
Jessica Hebert

Meeting Schedule

Executive Committee – January 24, 2024, 9:00 a.m., via ZOOM
Insurance Advisory Committee – January 31, 2024, 10:00 a.m., via ZOOM
Executive Committee – February 2024, TBD

HAMPSHIRE COUNTY GROUP INSURANCE TRUST

FISCAL YEAR 2023 OPERATING EXPENSES (July 1, 2023 to June 30, 2024)

ITEM CODE	BUDGET ITEMS	FY-2023 Budgeted	FY-2024 Budgeted													
	WAGES & BENEFI	7-1/6-30	7-1/6-30	July	August	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	YTD
5110	SALARY*	370,000.00	391,000.00	24,522.36	40,072.17	26,195.97	25,879.75	26,512.19	26,195.98							169,378.42
5145	LONGEVITY	6,000.00	6,600.00													-
5130	OVERTIME															-
5120	TEMP. EMPLOYEE SAL															-
481	FICA (.062)															-
5186	MED TAX (.0145)															-
5181	CONTRIBUTORY RET.	106,719.00	111,539.00	114,462.10	4,685.79	3,123.86	3,123.86	3,123.86	3,123.86							131,643.33
5189	EMP. ASST. PROG. EAP															-
5184	HEALTH INSURANCE	61,500.00	56,000.00	6,044.60	6,304.06	6,174.33	6,174.33	6,174.33	6,174.33							37,045.98
5185	LIFE INSURANCE	350.00	350.00	28.40	28.40	28.40	28.40	28.40	28.40							170.40
5189	UNEMP HEALTH INS TAX															-
	TOT. WAGES & BENEFITS	544,569.00	565,489.00	145,057.46	51,090.42	35,522.56	35,206.34	35,838.78	35,522.57	-	-	-	-	-	-	338,238.13
																-
ITEM CODE	BUDGET ITEMS															-
	NON SALARY EXPENSES															-
5300	ADM. CONT. SERVICES (FS&PF)															-
	Rent	16,500.00	14,400.00	1,400.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00							6,400.00
	Parking	500.00	-													-
5305	ADM. CONT. SERVICES (Audit)	16,500.00	21,000.00													-
5320	LEGAL		-													-
5340	TELEPNONE/INTERNET															-
5490	FOOD SUPPLIES	600.00	600.00		47.18		20.46	17.78								85.42
5420	OFFICE & COMPUTER SUPPLI	2,500.00	2,500.00		961.46		610.56	539.99								2,112.01
5580	MISC. EXPENSES	500.00	5,500.00	1,436.95	402.07		417.15	98.96								2,355.13
5580	NEWSPAPER/MAGS/BOOKS															-
5420	POSTAGE (Stamps)	3,500.00	3,500.00													-
5275	POSTAGE METER RENTAL				261.59			1710								1,971.59
5380	MINI GRANTS/WELLNESS	20,000.00	10,000.00													-
5420	STATIONERY & OFF. SUPP.				74.98			876.95								951.93
5780	SURETY BONDS	1,750.00	1,750.00		290.00	100.00										390.00
5340	TELEPHONES															-
5320	TRAINING															-
5710	TRAVEL IN/OUT of STATE	5,000.00	5,000.00													-
5188	UTILITIES	5,500.00	5,500.00	454.56	538.07	228.23	476.75	353.72	354.58							2,405.91
	TOT. Inderect Costs															-
	Total Non-Salary	72,850.00	69,750.00	3,291.51	3,575.35	1,328.23	2,524.92	4,597.40	1,354.58	-	-	-	-	-	-	16,671.99

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ITEM CODE	BUDGET ITEMS	FY-2023 Budgeted														
	I.T.	7-1/6-30	7-1/6-30													
6000	COMPUTER HARDWARE		3,000.00													-
5420	COMPUTER SOFTWARE															-
5420	COMPUTER SUPPLIES	5,000.00	2,000.00													-
5850	DESK TOP PCs															-
5300	MISC PROF & TECH SERV.**	136,800.00	145,000.00	1,824.25	63,682.74	1,545.25	33,615.25	5,019.75	33,978.00							139,665.24
	TOTAL DATA PROCESSING	141,800.00	150,000.00	1,824.25	63,682.74	1,545.25	33,615.25	5,019.75	33,978.00	-	-	-	-	-	-	139,665.24
																-
	TOTALS	759,219.00	785,239.00	150,173.22	118,348.51	38,396.04	71,346.51	45,455.93	70,855.15	-	-	-	-	-	-	494,575.36

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HAMPSHIRE COUNTY GROUP INSURANCE TRUST

INCOME AND EXPENSE REPORT

2023

ITEMS	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUGUST	SEPT	OCT	NOV	DEC
Starting Cash Balance	$1,831,141.70	$549,488.42	$274,380.59	$2,156,135.28	$450,905.99	$597,120.20	-$103,285.87	$1,431,427.23	$931,638.22	$2,331,461.69	$1,895,820.23	$1,894,665.33
Adjustments												
Total Starting Balance	$1,831,141.70	$549,488.42	$274,380.59	$2,156,135.28	$450,905.99	$597,120.20	-$103,285.87	$1,431,427.23	$931,638.22	$2,331,461.69	$1,895,820.23	$1,894,665.33
MONTHLY INCOME												
Total Premium Collected	4,832,641.57	6,535,063.12	6,476,474.34	5,587,514.39	6,218,987.39	3,185,030.93	8,831,831.86	7,275,673.64	5,382,467.37	7,226,436.62	6,755,313.27	5,996,972.36
Interest Income (MMDT)	551.24	1,412.52	2,759.32	4,072.45	3,549.87	4,502.28	5,264.71	3,663.91	4,875.98	7,745.63	5,478.25	7,136.90
Other Income or Adjustments	1,000,000.00		1,000,000.00		2,000,000.00			400,000.00		1,205.62		
BCBS SR Premium Collected												
TOTAL MONTHLY INCOME	5,833,192.81	6,536,475.64	7,479,233.66	5,591,586.84	8,222,537.26	3,189,533.21	8,837,096.57	7,679,337.55	5,387,343.35	7,235,387.87	6,760,791.52	6,004,109.26
MONTHLY EXPENSES												
BCBS Admin Cost (estimate)												
Claim Deposit	4,839,000.00	4,668,938.75	4,839,000.00	4,839,000.00	5,845,673.45	4,839,000.00	5,212,600.00	5,212,600.00	5,212,600.00	5,212,600.00	5,212,600.00	5,212,600.00
Reinsurance (Ind.&Agg.)	162,795.72	17,850.80	160,375.91	161,173.56	(96,437.83)	(37,355.54)	65,735.45	82,453.43	(368,119.05)	176,486.70	174,988.75	(1,049,013.79)
BCBS Settlement								627,408.62				
Recon adjust w/Finance												
BCBS Sr Premium Paid												
Other Exp. & Claim Settlement	2,077,399.12	2,072,989.96	550,999.43	2,221,934.00	2,289,316.12	544,563.36	1,873,874.80	2,138,316.00	715,280.99	2,210,596.12	2,328,901.74	337,167.29
Total Plan Expenses	7,079,194.84	6,759,779.51	5,550,375.34	7,222,107.56	8,038,551.74	5,346,207.82	7,152,210.25	8,060,778.05	5,559,761.94	7,599,682.82	7,716,490.49	4,500,753.50
Total Unit Operating Expenses	35,651.25	51,803.96	47,103.63	74,708.57	37,771.31	43,731.46	150,173.22	118,348.51	38,396.04	71,346.51	45,455.93	70,855.15
TOTAL MONTHLY EXPENSES	7,114,846.09	6,811,583.47	5,597,478.97	7,296,816.13	8,076,323.05	5,389,939.28	7,302,383.47	8,179,126.56	5,598,157.98	7,671,029.33	7,761,946.42	4,571,608.65
TOTAL NET MONTHLY INCOME	(1,281,653.28)	(275,107.83)	1,881,754.69	(1,705,229.29)	146,214.21	(2,200,406.07)	1,534,713.10	(499,789.01)	(210,814.63)	(435,641.46)	(1,001,154.90)	1,432,500.61
BALANCE												
Cash Balance	549,488.42	274,380.59	2,156,135.28	450,905.99	597,120.20	(1,603,285.87)	1,431,427.23	931,638.22	720,823.59	1,895,820.23	894,665.33	3,327,165.94
Adjustments						1,500,000.00			1,610,638.10		1,000,000.00	500,000.00
ENDING MONTHLY BALANCE	549,488.42	274,380.59	2,156,135.28	450,905.99	597,120.20	(103,285.87)	1,431,427.23	931,638.22	2,331,461.69	1,895,820.23	1,894,665.33	3,827,165.94

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HAMPSHIRE COUNTY GROUP INSURANCE TRUST

Fund And Investme 2023

FUNDS	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUGUST	SEPT	OCT	NOV	DEC
Post Employee Ben. S.B.	82,977.05	83,098.43	82,224.65	81,350.87	80,477.09	79,603.31	78,729.53	77,855.75	76,981.97	76,108.19	75,234.41	74,360.63
Funding	1,990.32	995.16	995.16	995.16	995.16	995.16	985.02	985.02	985.02	985.02	985.02	
Expenses	1,868.94	1,868.94	1,868.94	1,868.94	1,868.94	1,868.94	1,858.80	1,858.80	1,858.80	1,858.80	1,858.80	1,948.80
Total	83,098.43	82,224.65	81,350.87	80,477.09	79,603.31	78,729.53	77,855.75	76,981.97	76,108.19	75,234.41	74,360.63	72,411.83
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	4,444,801.96	4,444,801.96	4,444,801.96	4,444,801.96	4,444,801.96	4,445,801.96	4,445,801.96	4,448,301.96	4,449,551.96	4,449,551.96	4,450,801.96	4,452,051.96
Deposits					1,000.00		2,500.00	1,250.00		1,250.00	1,250.00	1,250.00
Total Member Deposits	4,444,801.96	4,444,801.96	4,444,801.96	4,444,801.96	4,445,801.96	4,445,801.96	4,448,301.96	4,449,551.96	4,449,551.96	4,450,801.96	4,452,051.96	4,453,301.96
OPEB Trust	300,932.53	301,460.19	301,922.70	302,435.56	302,899.57	303,592.88	304,715.76	305,880.36	307,049.41	308,147.22	309,362.92	310,507.14
Interest	527.66	462.51	512.86	464.01	693.31	1,122.88	1,164.60	1,169.05	1,097.81	1,215.70	1,144.22	1,110.17
OPEB Trust	301,460.19	301,922.70	302,435.56	302,899.57	303,592.88	304,715.76	305,880.36	307,049.41	308,147.22	309,362.92	310,507.14	311,617.31
Investments												
CD's	16,276,207.12	15,308,190.32	15,334,612.68	15,363,916.49	15,390,435.03	13,417,921.05	12,440,947.34	12,464,721.48	12,100,773.76	11,144,872.72	11,193,726.96	10,239,591.59
Deposit	(1,000,000.00)				(2,000,000.00)	(1,000,000.00)		(400,000.00)	(1,000,000.00)		(1,000,000.00)	
Interest	31,983.20	26,422.36	29,303.81	26,518.54	27,486.02	23,026.29	23,774.14	36,052.28	44,098.96	48,854.24	45,864.63	40,677.83
Balance	15,308,190.32	15,334,612.68	15,363,916.49	15,390,435.03	13,417,921.05	12,440,947.34	12,464,721.48	12,100,773.76	11,144,872.72	11,193,726.96	10,239,591.59	10,280,269.42
Portfolio Value	11,633,224.37	12,300,262.40	10,926,429.52	11,164,369.30	11,286,821.97	11,109,640.88	11,120,611.17	11,430,984.12	11,149,531.17	10,159,560.51	9,918,430.90	10,620,960.07
Deposit						(500,000.00)			(600,000.00)			(500,000.00)
Interest	667,038.03	(373,832.88)	237,939.78	122,452.67	(177,181.09)	510,970.29	310,372.95	(281,452.95)	(389,970.66)	(241,129.61)	702,529.17	432,208.35
Market Change		(1,000,000.00)										
Total	12,300,262.40	10,926,429.52	11,164,369.30	11,286,821.97	11,109,640.88	11,120,611.17	11,430,984.12	11,149,531.17	10,159,560.51	9,918,430.90	10,620,960.07	10,553,168.42
Accounts Receivable	1,467,151.16	944,774.21	500,626.01	917,955.04	670,123.34	3,902,453.05	1,428,366.26	519,568.60	1,592,828.71	820,662.27	417,650.60	873,419.61
Total With Accounts Receivable	34,485,770.84	32,340,464.27	34,044,953.43	32,905,614.61	30,655,121.58	32,221,290.90	31,618,855.12	29,566,413.05	30,093,848.96	28,695,357.61	28,041,105.28	30,402,672.45

Hampshire County Group Insurance Trust

TRANSACTION REPORT DEC 2023 (FY24)

STARTING BALANCE GENERAL FUND **(M&T BANK)**				$ 1,675,400.91
2023	TRANSACTION	A/P DEBIT	A/R CREDIT	
DEC	**M&T BANK**			
1	BLUE CROSS BLUE SHIELD	5,212,600.00		$ (3,537,199.09)
1	STEALTH/STOP LOSS		1,227,368.43	$ (2,309,830.66)
4	M&T BANK		44,321.50	$ (2,265,509.16)
15	M&T BANK		292,348.34	$ (1,973,160.82)
18	M&T BANK		314,500.04	$ (1,658,660.78)
18	M&T BANK (FROM WF INVEST)		500,000.00	$ (1,158,660.78)
19	M&T BANK		108,156.00	$ (1,050,504.78)
21	M&T BANK		278,286.30	$ (772,218.48)
27	M&T BANK		1,219,401.44	$ 447,182.96
29	M&T BANK (FROM ESB)		3,000,000.00	$ 3,447,182.96
29	CVS CAREMARK	1,649,323.86	1,787,006.67	$ 3,584,865.77
29	PAYROLL	26,195.98		$ 3,558,669.79
29	ACCOUNTS PAYABLE	431.00		$ 3,558,238.79
29	INTEREST		4,360.01	$ 3,562,598.80
				$ 3,562,598.80
				$ 3,562,598.80
				$ 3,562,598.80
				$ 3,562,598.80
STARTING BALANCE GENERAL FUND **(EASTHAMPTON SAVINGS BANK)**				$ 219,264.42
2023	TRANSACTION	A/P DEBIT	A/R CREDIT	
DEC	**EASTHAMPTON SAVINGS BANK**			
				$ 219,264.42
1	STEALTH/STOP LOSS	178,354.64		$ 40,909.78
1	ESB		102,527.94	$ 143,437.72
1	ESB		60,581.00	$ 204,018.72
1	ESB		4,778.00	$ 208,796.72
1	ESB		187,228.01	$ 396,024.73
4	ESB		12,096.00	$ 408,120.73
12	ESB		60,624.06	$ 468,744.79
13	ESB (TO MTB)		31,192.00	$ 499,936.79
14	ESB		179,166.53	$ 679,103.32
18	ESB		96,728.90	$ 775,832.22
18	ESB		51,966.60	$ 827,798.82
18	ESB		52,748.30	$ 880,547.12
18	ESB		227,627.60	$ 1,108,174.72
20	ESB		107,271.84	$ 1,215,446.56
20	ESB		9,690.00	$ 1,225,136.56
21	ESB		642,728.80	$ 1,867,865.36
21	ESB		12,605.00	$ 1,880,470.36
21	ESB		182,652.00	$ 2,063,122.36
21	ESB		198,013.68	$ 2,261,136.04
22	ESB		7,146.00	$ 2,268,282.04
22	ESB		40,698.24	$ 2,308,980.28
22	ESB		5,902.00	$ 2,314,882.28
27	ESB		131,589.60	$ 2,446,471.88
27	ESB		50,773.00	$ 2,497,244.88
27	ESB		6,726.00	$ 2,503,970.88
28	ESB		129,835.16	$ 2,633,806.04
28	ESB		55,937.76	$ 2,689,743.80
28	ESB		140,565.00	$ 2,830,308.80

28	ESB		78,524.05	$ 2,908,832.85
28	ESB		639,890.07	$ 3,548,722.92
29	ESB		14,936.00	$ 3,563,658.92
29	ESB		10,506.00	$ 3,574,164.92
29	ESB		11,261.00	$ 3,585,425.92
29	ESB		190,646.60	$ 3,776,072.52
29	ESB		4,796.00	$ 3,780,868.52
29	ESB (TO MTB)	3,000,000.00		$ 780,868.52
29	CANARX	12,744.90		$ 768,123.62
29	BLUE MEDICARE RX (NOV)	462,105.20		$ 306,018.42
29	PAYROLL	9,326.59		$ 296,691.83
29	ACCOUNTS PAYABLE	34,901.58		$ 261,790.25
29	INTEREST		2,776.89	$ 264,567.14
				$ 264,567.14
				$ 264,567.14
				$ 264,567.14
				$ 264,567.14
				$ 264,567.14
				$ 264,567.14
	MEMBER UNIT DEPOSITS ON HAND			
DEC		Starting Balance>>>>>>>>>>>>>>>		$ 4,452,051.96
27	HUNTINGTON		1,250.00	$ 4,453,301.96
31	Total			**$ 4,453,301.96**
	M&T BANK			
DEC	Post Employee Benefits Fund	Starting Balance>>>>>>>>>>>>>>>		$ 74,360.63
31	Retiree Health & Life Ins.	1,948.80		$ 72,411.83
31	Total			**$ 72,411.83**
	M&T BANK			
DEC	Accrued Vacation & Sick Time Fund	Starting Balance>>>>>>>>>>>>>>>		$ 31,317.96
				$ 31,317.96
31	Total			**$ 31,317.96**
	OPEB			
DEC	CD-Easthampton Savings			$ 310,507.14
31	12 mos.@ 4.50% (matures 5/24/24) x1851		1,110.17	$ 311,617.31
	Total			**$ 311,617.31**
	INVESTMENTS			
DEC	CD-Easthampton Savings			$ 10,239,591.59
	TO ESB GENERAL FUND			$ 10,239,591.59
31	12 mos.@ 5.00% (matures 8/17/24) x7499		40,677.83	$ 10,280,269.42
31	Total			**$ 10,280,269.42**
DEC	Portfolio Value DEC 1, 2023			$ 10,620,960.07
31	TO MTB GENERAL FUND	500,000.00		$ 10,120,960.07
31	Investment Earnings/Loss		432,208.35	**$ 10,553,168.42**
	Total			**$ 29,529,252.84**

MONTHLY ACCOUNTS RECEIVABLE

HAMPSHIRE COUNTY GROUP INSURANCE TRUST

FOR JANUARY 2024 PREMIUMS

JANUARY PREMIUMS NOT PAID *AS OF DECEMBER 31, 2023*		TO AVOID LATE ASSESSMENT FEE INVOICE MUST BE PAID **BEFORE**: ***January 1, 2024***
CHESTERFIELD/GOSHEN RSD	32,187.77	**1/3/2024**
GOSHEN	2,252.00	**1/4/2024**
GRANBY	190,442.40	**1/2/2024**
HADLEY	185,146.72	**1/3/2024**
HAMPSHIRE COUNTY RETIREMENT	8,930.00	**1/2/2024**
HAMPSHIRE REGIONAL SCHOOL DIST	219,191.20	**1/3/2024**
PLAINFIELD	5,443.79	**1/3/2024**
CHARLEMONT	11,692.00	**1/3/2024**
FRANKLIN CTY SOLID WASTE	4,536.00	**1/2/2024**
FRANKLIN REGIONAL COG	60,879.06	**1/2/2024**
FRANKLIN REG RETIREMENT SYS	8,127.00	**1/2/2024**
FRANKLIN REG TRANSIT AUTH	3,722.00	**1/2/2024**
LEYDEN	3,205.00	**1/3/2024**
MONROE	4,436.00	**1/3/2024**
NEW SALEM/WENDELL	65,634.60	**LATE FEE ASSESSED (1/11)**
ROWE	57,136.90	**LATE FEE ASSESSED (1/8)**
SO DEERFIELD WATER SUPPLY DIST	6,274.00	**1/3/2024**
SUNDERLAND WATER DIST	1,532.00	**1/2/2024**
WARWICK	2,651.17	**1/4/2024**
	$ 873,419.61	

Hampshire County Group Insurance Trust
Claim Payments

	CLAIMS		AMOUNT PAID		VARIANCE	CUMULATIVE VAR.
Jan-21	$ 5,094,645.16	A	$ 5,072,300.00	A	$ 22,345.16	**$ (270,393.51)**
February	$ 4,866,097.70	A	$ 5,072,300.00	A	$ (206,202.30)	**$ (476,595.81)**
March	$ 5,055,328.42	A	$ 5,072,300.00	A	$ (16,971.58)	**$ (493,567.39)**
April	$ 6,209,756.93	A	$ 5,072,300.00	A	$ 1,137,456.93	**$ 643,889.54**
May	$ 5,272,497.71	A	$ 5,072,300.00	A	$ 200,197.71	**$ 844,087.25**
June	$ 5,201,232.55		$ 5,072,300.00		$ 128,932.55	**$ 973,019.80**
July	$ 4,233,942.93		$ 4,956,200.00		$ (722,257.07)	**$ 250,762.73**
August	$ 4,199,688.21		$ 4,503,600.00		$ (303,911.79)	**$ (53,149.06)**
September	$ 4,013,790.09		$ 4,503,600.00		$ (489,809.91)	**$ (542,958.97)**
October	$ 4,857,186.73		$ 4,503,600.00		$ 353,586.73	**$ (189,372.24)**
November	$ 4,665,928.58		$ 4,503,600.00		$ 162,328.58	**$ (27,043.66)**
December	$ 5,328,234.25		$ 4,503,600.00		$ 824,634.25	**$ 797,590.59**
January 22	$ 3,186,088.18		$ 4,519,500.00		$ (1,333,411.82)	**$ (535,821.23)**
Feb	$ 4,253,200.86		$ 4,519,500.00		$ (266,299.14)	**$ (802,120.37)**
Mar	$ 4,606,467.78		$ 4,519,500.00		$ 86,967.78	**$ (715,152.59)**
Apr	$ 5,304,201.27		$ 4,519,500.00		$ 784,701.27	**$ 69,548.68**
May	$ 5,169,315.53		$ 4,519,500.00		$ 649,815.53	**$ 719,364.21**
June	$ 4,278,176.10		$ 4,519,500.00		$ (241,323.90)	**$ 478,040.31**
July	$ 4,422,904.17		$ 4,839,000.00		$ (416,095.83)	**$ 61,944.48**
August	$ 4,942,118.09		$ 4,839,000.00		$ 103,118.09	**$ 165,062.57**
September	$ 5,412,928.05		$ 4,839,000.00		$ 573,928.05	**$ 738,990.62**
October	$ 3,481,954.17		$ 4,839,000.00		$ (1,357,045.83)	**$ (618,055.21)**
November	$ 4,997,187.15		$ 4,839,000.00		$ 158,187.15	**$ (459,868.06)**
December	$ 5,128,806.81		$ 4,839,000.00		$ 289,806.81	**$ (170,061.25)**
January 2023	$ 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**

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

Hampshire County Group Insurance Trust
IY-2023-2024 Plan Count

PLAN	2023												2024		
HMO BLUE	**DEC**	**JAN**	**FEB**	**MAR**	**APR**	**MAY**	**JUNE**	**JULY**	**AUGUST**	**SEPT**	**OCT**	**NOV**	**DEC**	**JAN**	**FEB**
H-Employee Only	581	574	580	581	579	578	584	591	598	599	596	591	599	604	605
H-Employee + 1	359	365	362	360	356	356	357	356	348	337	339	338	337	331	330
H-Family	558	562	556	557	559	554	548	555	553	549	546	544	544	543	544
Total H HMO	1498	1501	1498	1498	1494	1488	1489	1502	1499	1485	1481	1473	1480	1478	1479
F-Employee Only	700	701	698	696	699	698	700	704	702	695	702	707	713	714	709
F-Employee + 1	389	389	389	387	387	381	376	386	380	382	381	385	389	391	395
F-Family	656	652	650	641	638	638	637	632	629	624	623	631	628	630	630
Total F HMO	1745	1742	1737	1724	1724	1717	1713	1722	1711	1701	1706	1723	1730	1735	1734
Total Employee Plans	1281	1275	1278	1277	1278	1276	1284	1295	1300	1294	1298	1298	1312	1318	1314
Total Employee + 1	748	754	751	747	743	737	733	742	728	719	720	723	726	722	725
Total Family Plans	1214	1214	1206	1198	1197	1192	1185	1187	1182	1173	1169	1175	1172	1173	1174
Total H&F HMO Plans	**3243**	**3243**	**3235**	**3222**	**3218**	**3205**	**3202**	**3224**	**3210**	**3186**	**3187**	**3196**	**3210**	**3213**	**3213**
BLUE CARE ELECT PREFERRED (PPO)															
H-Employee Only	198	194	192	191	189	188	188	194	194	199	200	204	202	201	201
H-Family	263	263	260	260	262	264	261	272	269	271	271	271	273	272	269
Total H PPO	461	457	452	451	451	452	449	466	463	470	471	475	475	473	470
F-Employee Only	155	155	151	154	149	151	153	166	168	174	175	179	173	170	171
F-Family	182	180	177	175	176	173	172	196	195	192	191	192	192	194	192
Total F PPO	337	335	328	329	325	324	325	362	363	366	366	371	365	364	363
Total Employee Plans	353	349	343	345	338	339	341	360	362	373	375	383	375	371	372
Total Family Plans	445	443	437	435	438	437	433	468	464	463	462	463	465	466	461
Total H&F PPO Plans	**798**	**792**	**780**	**780**	**776**	**776**	**774**	**828**	**826**	**836**	**837**	**846**	**840**	**837**	**833**
MEDEX															
H-Employee Only	1328	1331	1329	1332	1339	1343	1347	1359	1362	1362	1364	1370	1370	1376	1379
F-Employee Only	1337	1346	1353	1353	1357	1363	1364	1363	1371	1369	1374	1380	1382	1386	1384
Total MEDEX Plans	**2665**	**2677**	**2682**	**2685**	**2696**	**2706**	**2711**	**2722**	**2733**	**2731**	**2738**	**2750**	**2752**	**2762**	**2763**
TOTAL - All Plans	**6706**	**6712**	**6697**	**6687**	**6690**	**6687**	**6687**	**6774**	**6769**	**6753**	**6762**	**6792**	**6802**	**6812**	**6809**

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12/1/2023	wire		5,212,600.00	BCBS	xxx	Yes	Monthly Claim prefunding
12/1/2023	wire		178,354.64	Stealth Partner Group			Reinsurance- DEC
12/1/2023		6558	1,000.00	M&B Holdings			Rent, DEC
12/1/2023		6560	49.25	Boston Mutual			Life Ins
12/1/2023		6561	409.28	ACSA			Dental Ins
12/1/2023		6557	22.09	verizon			phone
12/1/2023		6559	9,354.40	CanaRx			Rx expense
12/5/2023	ACH		(8,056.75)	Unum			Reinsurance Reimbursement
12/5/2023	ACH		431,445.57	CVS Funding			Rx expense
12/6/2023	ACH		13,091.07	Checkwriters			payroll 12/07
12/12/2023	ACH		442,741.89	CVS Funding			Rx expense
12/15/2023	ach		431.00	Paragus IT			IT expense
12/15/2023		6562	1,547.00	Netlogix			IT vendor
12/15/2023		6563	32,000.00	Edward Haber			System upgrade
12/15/2023		6564	206.14	Comcast			Internet
12/19/2023		6565	3,123.86	Hamp Retirement			DEC deductions
12/19/2023		6566	7,693.00	HCGIT			Health prem
12/19/2023		6567	126.35	CMS LLC			pHONE
12/19/2023		6568	3,390.50	CanaRx			Rx expense
12/20/2023	ACH		(56,945.64)	Unum			Reinsurance Reimbursement
12/20/2023	ACH		13,104.91	Checkwriters			payroll 12/21
12/20/2023	ACH		452,896.98	CVS Funding			Rx expense
12/28/2023	ACH		(162,366.04)	Unum			Reinsurance Reimbursement
12/28/2023	ACH		322,239.42	CVS Funding			Rx expense
12/29/2023	ACH		(1,787,006.67)	CVS Caremark			Q3 Rx Rebate
12/29/2023	ACH		(1,000,000.00)	Unum			Reinsurance Reimbursement
12/29/2023	ACH		462,105.20	Blue Medicare Rx			Medicare rx
			4,573,557.45				

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1/11/24

stealth PARTNER GROUP
An Amwins Company

Group Reimbursement Report
Hampshire County Group Insurance Trust
Policy Dates 7/1/2022 to 6/30/2023

Benefits

Specific Contract:	12/24
Spec Deductible:	$300,000
Agg Specific Deductible:	N/A
Covered Benefits:	Medical & RX
Domestic Reimbursement:	N/A

Specific Contract Parameters

Incurred Date Range:	7/1/2022	to	6/30/2023
Paid Date Range:	7/1/2022	to	6/30/2024

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 YTD	Spec Deductible	Reimbursement Requested	Filed to Carrier	Amount Reimbursed	Reimbursement Date	Carrier Pend	Carrier Denied	Overpayment +/-	Carrier Approved YTD	Notes
[illegible]		Initial	Dec	$ 2,026.10	$ 400,659.97	$ 402,686.07	$ 300,000.00	$ 102,686.07	2/1/2023	$ 102,686.07	2/7/2023	$ -	$ -	$ -	$ 402,686.07	
		Supp	Jan	[illegible]	$ 442,270.15	$ 444,296.25		$ 41,610.18	2/13/2023	$ 41,610.18	2/21/2023	$ -	$ -	$ -	$ 444,296.25	
		Supp	Jan	$ 2,471.99	[illegible]	$ 444,742.14		$ 445.89	3/3/2023	$ 445.89	3/8/2023	$ -	$ -	$ -	$ 444,742.14	
		Supp	Feb	$ 2,608.67	[illegible]	$ 444,878.82		$ 136.68	3/16/2023	$ 136.68	3/17/2023	$ -	$ -	$ -	$ 444,878.82	
		Supp	Mar	$ 2,762.30	[illegible]	$ 445,032.45		$ 153.63	4/26/2023	$ 153.63	5/1/2023	$ -	$ -	$ -	$ 445,032.45	
		Supp	Mar	[illegible]	$ 560,736.90	$ 563,499.20		$ 118,466.75	5/2/2023	$ 59,387.08	5/3/2023	$ 17,548.90	$ 41,530.77	$ -	$ 521,968.43	$17,548.90 Pended for possible duplicate sub - $41,530.77 Denied for duplicate sub
										$ 17,548.90	6/14/2023	$ (17,548.90)	$ -	$ -	$ 521,968.43	Release of above pended amount
										$ 41,530.77	6/22/2023	$ -	$ (41,530.77)	$ -	$ 563,499.20	Release of above denied amount
		Supp	Apr	[illegible]	$ 604,560.37	$ 607,322.67		$ 43,823.47	5/9/2023	$ 43,823.47	5/11/2023	$ -	$ -	$ -	$ 607,322.67	
		Supp	Apr	$ 3,032.33	[illegible]	$ 607,592.70		$ 270.03	5/26/2023	$ 270.03	6/1/2023	$ -	$ -	$ -	$ 607,592.70	
		Supp	May	[illegible]	$ 661,554.01	$ 664,586.34		$ 56,993.64	6/14/2023	$ 56,993.64	6/20/2023	$ -	$ -	$ -	$ 664,586.34	
		Supp	May	$ 3,322.64	[illegible]	$ 664,876.65		$ 290.31	6/28/2023	$ 290.31	7/3/2023	$ -	$ -	$ -	$ 664,876.65	
		Supp	Jun	[illegible]	$ 720,884.80	$ 724,207.44		$ 59,330.79	7/13/2023	$ 59,330.79	7/25/2023	$ -	$ -	$ -	$ 724,207.44	
		Supp	July	$ 4,170.10	[illegible]	$ 725,054.90		$ 847.46	9/28/2023	$ 847.46	10/11/2023	$ -	$ -	$ -	$ 725,054.90	
		Supp	September	$ 4,181.53	[illegible]	$ 725,066.33		$ 11.43	11/1/2023	$ 11.43	11/1/2023	$ -	$ -	$ -	$ 725,066.33	
		Supp	November	$ 4,114.72	[illegible]	$ 724,999.52		$ (66.81)	12/20/2023						$ 724,999.52	
		Reported totals		**$ 4,114.72**	**$ 720,884.80**	**$ 724,999.52**	**$ 300,000.00**	**$ 424,999.52**		**$ 425,066.33**		**$ -**	**$ -**		**$ 724,999.52**	
	Self	Initial	Mar	$ 451,111.78	$ 1,745.67	$ 452,857.45	$ 300,000.00	$ 152,857.45	5/5/2023	$ 152,857.45	5/12/2023	$ -	$ -	$ -	$ 452,857.45	
		Supp	Apr	[illegible]	$ 2,457.26	$ 453,569.04		$ 711.59	5/9/2023	$ 711.59	5/16/2023	$ -	$ -	$ -	$ 453,569.04	
		Supp	Apr	$ 531,728.82	[illegible]	$ 534,186.08		$ 80,617.04	5/26/2023	$ 80,617.04	6/1/2023	$ -	$ -	$ -	$ 534,186.08	
		Supp	May	[illegible]	$ 2,712.61	$ 534,441.43		$ 255.35	6/15/2023	$ 255.35	6/16/2023	$ -	$ -	$ -	$ 534,441.43	
		Supp	May	$ 549,683.32	[illegible]	$ 552,395.93		$ 17,954.50	6/28/2023	$ 17,954.50	7/3/2023	$ -	$ -	$ -	$ 552,395.93	
		Supp	Jun	[illegible]	$ 2,714.05	$ 552,397.37		$ 1.44	7/13/2023	$ 1.44	7/25/2023	$ -	$ -	$ -	$ 552,397.37	
		Supp	July	$ 1,011,231.43	[illegible]	$ 1,013,945.48		$ 461,548.11	8/29/2023	$ 461,548.11	9/13/2023	$ -	$ -	$ -	$ 1,013,945.48	
		Supp	September	$ 1,011,854.36	[illegible]	$ 1,014,568.41		$ 622.93	11/1/2023	$ 622.93	11/2/2023	$ -	$ -	$ -	$ 1,014,568.41	
		Reported totals		**$ 1,011,854.36**	**$ 2,714.05**	**$ 1,014,568.41**	**$ 300,000.00**	**$ 714,568.41**		**$ 714,568.41**		**$ -**	**$ -**		**$ 1,014,568.41**	
		Initial	May	$ 396,037.61	$ -	$ 396,037.61	$ 300,000.00	$ 96,037.61	7/5/2023	$ 96,037.61	8/21/2023	$ -	$ -	$ -	$ 396,037.61	
		Supp	July	$ 400,229.28	$ -	$ 400,229.28		$ 4,191.67	8/29/2023	$ 4,191.67	9/12/2023	$ -	$ -	$ -	$ 400,229.28	
		Supp	September	$ 399,075.38	$ -	$ 399,075.38		$ (1,153.90)	11/1/2023	$ -	11/1/2023	$ -	$ -	$ -	$ 399,075.38	
								$ -		$ -	12/1/2023	$ -	$ -	$ 1,153.90	$ 399,075.38	OP satisfied fr
		Supp	November	$ 400,826.99	$ -	$ 400,826.99		$ 1,751.61	12/20/2023	$ 1,751.61	1/2/2023	$ -	$ -	$ -	$ 400,826.99	
		Reported totals		**$ 400,826.99**	**$ -**	**$ 400,826.99**	**$ 300,000.00**	**$ 100,826.99**		**$ 101,980.89**		**$ -**	**$ -**		**$ 400,826.99**	
	Self	Initial	May	$ 335,993.84	$ 7.75	$ 336,001.59	$ 300,000.00	$ 36,001.59	7/5/2023	$ 36,001.59	7/11/2023	$ -	$ -	$ -	$ 336,001.59	
		Supp	July	$ 339,397.19	[illegible]	$ 339,404.94		$ 3,403.35	8/29/2023	$ 3,403.35	9/12/2023	$ -	$ -	$ -	$ 339,404.94	
		Supp	October	$ 346,903.25	[illegible]	$ 346,911.00		$ 7,506.06	11/28/2023	$ 6,352.16	12/1/2023	$ -	$ -	$ (1,153.90)	$ 346,911.00	OP applied to '
		Reported totals		**$ 346,903.25**	**$ 7.75**	**$ 346,911.00**	**$ 300,000.00**	**$ 46,911.00**		**$ 45,757.10**		**$ -**	**$ -**		**$ 346,911.00**	
	Self	Initial	July	$ 376,424.96	$ -	$ 376,424.96	$ 300,000.00	$ 76,424.96	9/7/2023	$ 76,424.96	9/20/2023	$ -	$ -	$ -	$ 376,424.96	
		Supp	September	$ 378,908.97	$ -	$ 378,908.97		$ 2,484.01	11/1/2023	$ 2,484.01	11/1/2023	$ -	$ -	$ -	$ 378,908.97	
		Reported totals		**$ 378,908.97**	**$ -**	**$ 378,908.97**	**$ 300,000.00**	**$ 78,908.97**		**$ 78,908.97**		**$ -**	**$ -**		**$ 378,908.97**	
		Initial	September	$ 395,633.61	$ 1,483.08	$ 397,116.69	$ 300,000.00	$ 97,116.69	11/3/2023	$ -	11/6/2023	$ 97,116.69	$ -	$ -	$ 397,116.69	$97,116.69 pend [illegible] injury dtls if applicable.
								$ -		$ 56,945.64	12/18/2023	$ (97,116.69)	$ -	$ (40,171.05)	$ 397,116.69	$40,171.05 appl[illegible]
		Reported totals		**$ 395,633.61**	**$ 1,483.08**	**$ 397,116.69**	**$ 300,000.00**	**$ 97,116.69**		**$ 56,945.64**		**$ -**	**$ -**		**$ 397,116.69**	
	Self	Initial	September	$ 231,650.88	$ 230,715.16	$ 462,366.04	$ 300,000.00	$ 162,366.04	11/21/2023	$ 162,366.04	12/21/2023	$ -	$ -	$ -	$ 462,366.04	
		Supp	October	$ 191,479.83	[illegible]	$ 422,194.99		$ (40,171.05)	12/1/2023	$ -	12/18/2023	$ -	$ -	$ 40,171.05	$ 422,194.99	OP satisfie

** 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.

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stealth PARTNER GROUP
An Amwins Company

Reported totals			**$ 191,479.83**	**$ 230,715.16**	**$ 422,194.99**	**$ 300,000.00**	**$ 122,194.99**		**$ 162,366.04**		**$ -**	**$ -**		**$ 422,194.99**	
Initial	November	$ 1,890,307.20	$ -	$ 1,890,307.20	$ 300,000.00	$ 1,590,307.20	12/21/2023	$ 1,000,000.00	12/21/2023	$ 590,307.20	$ -	$ -	$ 1,890,307.20	590,307.20 withheld for Funding Report
Reported totals		**$ 1,890,307.20**	**$ -**	**$ 1,890,307.20**	**$ 300,000.00**	**$ 1,590,307.20**		**$ 1,000,000.00**		**$ 590,307.20**	**$ -**		**$ 1,890,307.20**	

Total Reimbursement Requested	Total Amount Reimbursed	Total Amount Pended	Total Amount Denied	Total Overpayment (If Applicable)	Outstanding Balance
$ 3,175,833.77	$ 2,585,593.38	$ 590,307.20	$ -	$ -	$ 590,240.39

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Group Reimbursement Report
Hampshire County Group Insurance Trust
Policy Dates 7/1/2023 to 6/30/2024

Benefits

Specific Contract:	12/24
Gapless:	No
Spec Deductible:	$350,000
Agg Specific Deductible:	N/A
Covered Benefits:	Medical & RX
Domestic Reimbursement:	N/A

Specific Contract Parameters

Incurred Date Range:	7/1/2023	to	6/30/2024
Paid Date Range:	7/1/2023	to	6/30/2025

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 YTD	Spec Deductible	Reimbursement Requested	Filed to Carrier	Amount Reimbursed	Reimbursement Date	Carrier Pend	Carrier Denied	Overpayment +/-	Carrier Approved YTD	Notes
		Initial	October	$ 351,704.59	$ -	$ 351,704.59	$ 350,000.00	$ 1,704.59	11/27/2023	$ 1,704.59	12/1/2023	$ -	$ -	$ -	$ 351,704.59	
		Supp	November	$ 447,857.70		$ 447,857.70		$ 96,153.11	12/20/2023	$ 96,153.11	1/2/2024	$ -	$ -	$ -	$ 447,857.70	
		Reported totals		**$ 447,857.70**	**$ -**	**$ 447,857.70**	**$ 350,000.00**	**$ 97,857.70**		**$ 97,857.70**		**$ -**	**$ -**		**$ 447,857.70**	

Total Reimbursement Requested	Total Amount Reimbursed	Total Amount Pended	Total Amount Denied	Total Overpayment (If Applicable)	Outstanding Balance
$ 97,857.70	$ 97,857.70	$ -	$ -	$ -	$ 0.00

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12/29/2023

HAMPSHIRE COUNTY
GROUP INSURANCE TRUST
CANARX
EASY
ONLINE
ENROLLMENT

(20)

Easier Than Ever.

We're thrilled to introduce a game-changing update from CANARX: Online Enrollment, making the process simpler, safer, and smarter than ever before.

Navigating healthcare options can be complex, but CANARX is dedicated to providing you with a hassle-free experience. Our HIPAA-compliant online forms ensure your privacy while streamlining the enrollment journey.

To get started, simply scan the QR code below, find your medication, and enroll online.

Ready to embrace the future of enrollment?

Your WebID Is: HCGIT

As an eligible plan member, you can receive brand-name prescription medications for **FREE** through the CANARX program! We offer some of the most highly prescribed medications today, including ...

- **Advair**
- **Eliquis**
- **Flovent**
- **Januvia**
- **Symbicort**
- **Xarelto**

For a complete list, visit your plan page at **canarx.com** or call **1-866-893-6337**

Contáctenos o visite el sitio web para materiales en español.

HAMPSHIRE COUNTY
GROUP INSURANCE TRUST

PRSRT STD
US POSTAGE
PAID
DETROIT MI
PERMIT # 851

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OLD

HAMPSHIRE COUNTY GROUP INSURANCE TRUST

Subscriber Affidavit of Marital Status

Please print

Subscriber Name: _____

Address: _____ _____

Town/City: _____ State: _____ Zip Code: _____

Best Contact Number: _____

Email Address: _____

Dependent Spouse or Former Spouse:

Name: _____ Date of Birth: _____

Address (If different than above): _____

Are you currently legally married to this dependent? YES / NO

If **YES**, attach a photocopy of the City/Town Clerk's marriage certificate.

If **NO**, attach a copy of signature page of divorce and page relating to health insurance provision.

Are you remarried? NO / YES

If Yes, Date of remarriage: _____

Is your former spouse remarried? YES / NO / Unknown

If YES, Date of marriage: _____

Please initial each after reading:

_____I hereby certify that the information provided above is true and accurate.

_____I understand that I am obligated to inform my employer immediately if there are any changes in my status or that of my spouse/ex-spouse.

_____ I understand that should I or my ex-spouse remarry, my ex-spouse may not continue on my coverage beyond the date of marriage except by court order and must be enrolled in individual coverage for which I will be responsible for 100% of the cost.

_____ I understand that any misrepresentation in the information given may result in termination of benefit eligibility for myself and/or my spouse/ex-spouse.

_____ _____

Subscriber Signature Date

HAMPSHIRE COUNTY GROUP INSURANCE TRUST

New

Subscriber Affidavit of Marital Status

(Please print)

Employee:

Subscriber Name: _____

Address: _____ _____

Town/City: _____ State: _____ Zip Code: _____

Best Contact Phone Number: _____

Spouse or Former Spouse:

Name: _____ Date of Birth: _____

Address (If different than above): _____

Are you currently legally married to this person? YES / NO

If **YES**, attach a photocopy of the City/Town Clerk's marriage certificate.
Proceed to next section.

If **NO**, attach a copy of the divorce decree including the first page, the signature page, and all pages relating to health insurance provision. Answer the following questions:

Are you remarried? YES / NO

If YES, Date of remarriage: _____

Is your former spouse remarried? YES / NO / Unknown

If YES, Date of marriage: _____

Please initial each after reading:

_____ I hereby certify that the information provided above is true and accurate.

_____ I understand that I am obligated to inform my employer immediately if there are any changes in my status or that of my spouse/ex-spouse, including divorce or any remarriage.

_____ I understand that should I or my ex-spouse remarry, my ex-spouse may NOT continue on my coverage beyond the date of remarriage, and I must notify my employer immediately to process a cancellation at such time.

_____ I understand that any misrepresentation in the information given above or failure to provide appropriate timely updates on any status changes may result in termination of benefit eligibility for myself and/or my spouse/ex-spouse.

_____ _____

Subscriber Signature Date

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VOTE

To add $5,000 to the Operating budget for additional postage charges in order to complete a marital affidavit audit for active plans.

BAFO - 3 Year Financial Summary

	Current Incumbent Contract	CVS Health	BCBSMA
Pricing Structure	Traditional	Traditional	Traditional
Type of Formulary	Closed	Closed	Closed
Retail 30 Network	Broad	Broad	Broad
Retail 90 Network	Narrow	Narrow	Narrow
Specialty	Exclusive	Exclusive	Exclusive
Ingredient Cost	$76,229,847	$73,213,206	$71,226,730
Dispensing Fee	$126,603	$102,413	$170,973
Drug Spend	**$76,356,450**	**$73,315,618**	**$71,397,703**
Admin Fees	$0	$0	$0
Rebates	($23,342,778)	($34,945,431)	($31,640,899)
Bid Cost	**$53,013,672**	**$38,370,187**	**$39,756,804**
Current Contract Cost	-	$53,013,672	$53,013,672
Deal Improvements $	-	$14,643,485	$13,256,868
Deal Improvements %	-	27.62%	25.00%

*Truveris and B.R. Fox fees are underwritten for all offers

All financial figures included in this analysis represent projections and should not be used for budgeting purposes

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truveris

RX Proposals

BCBS MA

Pro

- All reporting (medical and Rx) in one location
- Dual input by Trust is eliminated
- Admin Fee (net) is reduced by 3.5% (approx. $125k in savings)

Con

- Rx bid, while strong, is still well off the CVS bid
- Rx bid does not guarantee rebate bid amount
- Will have no access to Rx records
- Ongoing customer service issues with BCBS MA

CVS Caremark

Pro

- Rx bid is better by a sizable amount
- Excellent customer service and established relationships
- Access to Rx detail

Con

- Dual input by Trust staff remains
- Rx and medical are split, more work by Trust to 'combine' all claim activity

VOTE

To award CVS Caremark a contract of three years (7/1/24-6/30/27) to administer the Trust pharmacy benefits for active plan holders.

	2000 - 2001	% INC	2001 - 2002	% INC	2002 - 2003	% INC	2003 - 2004	% INC	2004 - 2005	% INC	2005 - 2006	% INC
MEDEX	$185.36	4.99%	$218.04		$257.98		$294.10	18.0%	$308.81	5.0%	$332.18	7.6%
MNG BLUE SR.	$186.19	8.26%	$203.71		$225.29		$261.34		$286.70		$316.54	10.4%
HNE Elder	$228.38	59.56%										

	2000 - 2001	% INC	2001 - 2002	% INC	2002 - 2003	% INC	Mid yr. inc. eff 9/1/02	% INC	2003 - 2004	% INC	2004 - 2005	% INC	2005 - 2006	% INC
MHP INDIV	$321.81	6.21%	$411.92		$486.07		$522.27		$522.27	0.0%	$712.90	36.5%		
MHP FAMILY	$800.14	10.67%	$1,024.18		$1,208.53		$1,317.13		$1,317.13	0.0%	$1,797.88	36.5%		
HMO INDIV	$186.55	2.50%	$199.98		$248.00		$284.20		$298.41	5.0%	$337.20	13.0%	$362.30	7.4%
HMO EMP+1	$395.52	3.00%	$427.16		$556.00		$628.40		$695.00	11.0%	$785.35	13.0%	$843.78	7.4%
HMO FAMILY	$531.99	3.50%	$574.55		$718.00		$826.60		$861.60	4.0%	$973.61	13.0%	$1,046.06	7.4%
PPO INDIV	$216.74	-8.80%	$234.51		$267.34		$303.54		$303.54	0.0%	$367.28	21.0%	$423.84	15.4%
PPO FAMILY	$578.78	-8.80%	$634.00		$722.76		$831.36		$831.36	0.0%	$1,005.95	21.0%	$1,160.90	15.4%
HNE INDIV	$227.99	14.75%												
HNE EMP+1	$455.97	14.75%												
HNE FAMILY	$615.57	14.75%												

Discontinued MHP plans eff 4/1/2004. Above was the suggested increase.

	2006 - 2007	% INC	2007	% INC	2008	% INC	2009	% INC	2010	% INC	2011	% INC	2012	% INC
MEDEX	$341.95	2.9%	$363.00	6.2%	$363.00	0.0%	$363.00	0.0%	$363.00	0.0%	$363.00	0.0%	$357.00	-1.7%
MNG BLUE SR.	$325.10	2.7%	$368.33	13.3%	$391.25	6.2%	$391.25	0.0%	$397.97	1.7%	$397.97	0.0%		

No longer offering this plan.

	2006 - 2007	% INC	2007 - 2008	% INC	2008 - 2009	% INC	2009 - 2010	% INC	2010 - 2011	% INC	2011 - 2012	% INC	2012 - 2013	% INC
HMO INDIV	$389.48	7.5%	$418.70	7.5%	$449.28	7.3%	$482.48	7.4%	$510.96	5.9%	$510.96	0.0%	$510.96	0.0%
HMO EMP+1	$907.06	7.5%	$975.10	7.5%	$1,046.28	7.3%	$1,123.58	7.4%	$1,189.88	5.9%	$1,189.88	0.0%	$1,189.88	0.0%
HMO FAMILY	$1,124.52	7.5%	$1,208.86	7.5%	$1,297.12	7.3%	$1,393.04	7.4%	$1,475.24	5.9%	$1,475.24	0.0%	$1,475.24	0.0%
PPO INDIV	$459.88	8.5%	$499.88	8.7%	$542.38	8.5%	$564.06	4.0%	$580.98	3.0%	$580.98	0.0%	$580.98	0.0%
PPO FAMILY	$1,259.58	8.5%	$1,369.16	8.7%	$1,485.54	8.5%	$1,545.00	4.0%	$1,591.36	3.0%	$1,591.36	0.0%	$1,591.36	0.0%

	2013	% INC	2014	% INC	2015	% INC	2016	% INC	2017	% INC	2018	% INC	2019	% INC
MEDEX	$357.00	0.0%	$357.00	0.0%	$294.00	-17.6%	$314.00	6.8%	$340.20	8.6%	$346.00	1.7%	$355.00	2.6%

	2013 - 2014	% INC	2014 - 2015	% INC	2015 - 2016	% INC	2016 - 2017	% INC	2017 - 2018	% INC	2018 - 2019	% INC	2019 - 2020	% INC
HMO INDIV	$510.96	0.0%	$510.96	0.0%	$518.62	1.5%	$552.86	6.6%	$604.84	9.4%	$633.26	4.7%	$633.26	0.0%
HMO EMP+1	$1,189.88	0.0%	$1,189.88	0.0%	$1,207.74	1.5%	$1,287.46	6.6%	$1,408.50	9.4%	$1,474.70	4.7%	$1,474.70	0.0%
HMO FAMILY	$1,475.24	0.0%	$1,475.24	0.0%	$1,497.38	1.5%	$1,596.22	6.6%	$1,746.28	9.4%	$1,817.80	4.1%	$1,817.80	0.0%
PPO INDIV	$580.98	0.0%	$580.98	0.0%	$592.60	2.0%	$637.64	7.6%	$706.52	10.8%	$729.84	3.3%	$729.84	0.0%
PPO FAMILY	$1,591.36	0.0%	$1,591.36	0.0%	$1,623.20	2.0%	$1,746.56	7.6%	$1,935.20	10.8%	$1,993.26	3.0%	$1,993.26	0.0%

	2020	% INC	2021	% INC	2022	% INC	2023	% INC	2024	% INC	2025	% INC	2026	% INC
MEDEX	$337.00	-5.3%	$327.00	-3.0%	$327.00	0.0%	$342.00	4.6%	$360.00					

	2020 - 2021	% INC	2021 - 2022	% INC	2022 - 2023	% INC	2023-2024	% INC	2024-2025	% INC	2025-2026	% INC	2026-2027	% INC
HMO INDIV	$633.26	0.0%	$620.60	-2.0%	$620.60	0.0%	$658.00	6.0%						
HMO EMP+1	$1,474.70	0.0%	$1,445.20	-2.0%	$1,445.20	0.0%	$1,532.00	6.0%						
HMO FAMILY	$1,817.80	0.0%	$1,781.52	-2.0%	$1,781.52	0.0%	$1,889.00	6.0%						
PPO INDIV	$729.84	0.0%	$715.24	-2.0%	$715.24	0.0%	$758.00	6.0%						
PPO FAMILY	$1,993.26	0.0%	$1,953.40	-2.0%	$1,953.40	0.0%	$2,071.00	6.0%						

MEDEX 2 w/PDP

	Claims	Admin	Federal Premium	Total Expenses	Total Premium	Net P/L		
Jan-21	301,283.62	61,375.00	402,374.20	765,032.82	817,500.00	52,467.18	**New premium rates	
February	423,357.44	61,546.85	412,755.13	897,659.42	819,789.00	(77,870.42)		
March	315,137.20	61,620.50	414,284.63	791,042.33	820,770.00	29,727.67		
April	382,934.39	61,816.90	414,679.68	859,430.97	823,386.00	(36,044.97)		
May	315,457.68	61,669.60	415,314.20	792,441.48	821,424.00	28,982.52		
June	291,229.13	61,841.45	414,981.77	768,052.35	823,713.00	55,660.65		
July	330,579.00	62,332.45	415,214.29	808,125.74	830,253.00	22,127.26		
August	345,216.39	62,406.10	418,535.88	826,158.37	831,234.00	5,075.63		
September	249,868.51	62,504.30	419,134.12	731,506.93	832,542.00	101,035.07		
October	331,430.41	62,798.90	419,598.74	813,828.05	836,466.00	22,637.95		
November	313,417.69	62,921.65	421,459.66	797,799.00	838,101.00	40,302.00		
December	357,542.61	63,044.40	422,755.44	843,342.45	839,736.00	(3,606.45)	CalendarYTD21	240,494.09
Jan-22	301,231.52	64,728.40	423,951.31	789,911.23	839,736.00	49,824.77	** no rate change **	
Feb	492,649.80	64,628.24	436,456.55	993,734.59	843,987.00	(149,747.59)		
Mar	335,965.95	64,628.24	435,503.35	836,097.54	843,987.00	7,889.46		
Apr	480,848.13	64,753.44	435,636.65	981,238.22	845,622.00	(135,616.22)		
May	347,101.63	64,978.80	436,552.20	848,632.63	848,565.00	(67.63)		
June	299,946.05	65,229.20	438,149.50	803,324.75	851,835.00	48,510.25		
July	435,988.51	65,930.32	439,540.90	941,459.73	860,991.00	(80,468.73)		
August	402,140.11	66,030.48	443,411.75	911,582.34	862,299.00	(49,283.34)		
September	404,612.62	66,130.64	443,751.25	914,494.51	863,607.00	(50,887.51)		
October	290,350.37	66,506.24	445,042.45	801,899.06	863,607.00	61,707.94		
November	323,459.04	66,706.56	447,722.30	837,887.90	871,128.00	33,240.10		
December	399,233.71	66,731.60	449,083.05	915,048.36	871,455.00	(43,593.36)	Calendar 2022	(308,491.86)
Jan-23	305,700.76	67,574.88	449,080.30	822,355.94	913,824.00	91,468.06		
February	590,467.49	67,777.20	449,742.30	1,107,986.99	916,560.00	(191,426.99)		
March	478,283.59	67,954.23	451,071.90	997,309.72	918,954.00	(78,355.72)		
April	381,417.46	68,207.13	451,982.40	901,606.99	922,374.00	20,767.01		
May	391,160.25	68,409.45	453,543.70	913,113.40	925,110.00	11,996.60		
June	414,300.44	68,486.32	455,238.60	938,025.36	926,136.00	(11,889.36)		
July	338,432.99	68,915.25	455,205.90	862,554.14	931,950.00	69,395.86		
August	352,232.59	69,016.41	458,161.30	879,410.30	933,318.00	53,907.70		
September	413,614.95	69,092.28	458,865.55	941,572.78	934,344.00	(7,228.78)		
October	300,763.92	69,193.44	459,236.95	829,194.31	935,712.00	106,517.69		
November	425,332.50	69,522.21	461,099.80	955,954.51	940,158.00	(15,796.51)		
December	496,025.49	69,648.66	462,105.20	1,027,779.35	941,868.00	(85,911.35)	(36,555.79)	

HMO

	Claims	Admin	Reins	Total Expenses	Estimated Premium	Net P/L			
Jan 2021	3,655,571.83	166,002.89	146,850.97	3,968,425.69	4,130,933.08	162,507.39			
February	3,419,273.65	165,694.43	146,135.69	3,731,103.77	4,112,951.10	381,847.33			
March	3,743,333.14	166,208.53	146,585.09	4,056,126.76	4,126,048.24	69,921.48			
April	4,799,107.82	166,516.99	146,786.17	5,112,410.98	4,129,471.60	(982,939.38)			
May	3,843,200.50	166,362.76	146,771.33	4,156,334.59	4,128,070.08	(28,264.51)			
June	3,955,319.12	165,848.66	146,450.48	4,267,618.26	4,117,840.44	(149,777.82)			
July	4,590,681.61	182,939.25	155,685.47	4,929,306.33	4,038,258.00	(891,048.33)	**IY-21 YTD 2021**		
August	3,606,764.28	182,430.30	155,586.43	3,944,781.01	4,037,012.36	92,231.35		**195,580.30**	
September	3,765,131.78	184,126.80	156,482.89	4,105,741.47	4,061,586.92	(44,154.55)			
						930,342.80	CVS Rebate	**87,371.27**	
October	4,672,318.82	185,031.60	155,685.47	5,013,035.89	4,071,028.24	(942,007.65)			
November	4,443,212.39	185,879.85	157,176.74	4,786,268.98	4,082,322.76	(703,946.22)			
December	4,839,233.86	186,275.70	157,457.45	5,182,967.01	4,090,149.72	(1,092,817.29)			
						1,041,192.30	CVS Rebate	**(1,697,578.86)**	
January	3,712,727.04	184,975.05	156,662.86	4,054,364.95	4,067,413.16	13,048.21			
February	4,043,036.71	184,353.00	156,030.13	4,383,419.84	4,050,138.28	(333,281.56)			
March	4,236,808.95	184,239.90	155,854.12	4,576,902.97	4,047,432.24	(529,470.73)			
						1,051,931.68	CVS Rebate	**202,227.60**	
April	4,446,284.55	184,070.25	155,701.88	4,786,056.68	4,043,921.24	(742,135.44)			
May	4,734,398.50	183,561.30	155,245.16	5,073,204.96	4,031,370.32	(1,041,834.64)			
June	4,205,326.43	182,260.65	153,914.05	4,541,501.13	3,997,393.28	(544,107.85)			
						1,071,347.65	CVS Rebate	**(1,256,730.28)**	
July	4,372,690.22	182,939.25	131,442.70	4,687,072.17	4,022,373.84	(664,698.33)			
August	4,444,300.89	182,317.20	131,126.76	4,757,744.85	4,013,073.44	(744,671.41)			
September	4,726,398.04	182,882.70	131,784.31	5,041,065.05	4,033,026.12	(1,008,038.93)			
						1,159,713.50	CVS Rebate	**(1,257,695.17)**	
October	4,218,166.95	183,617.85	132,065.93	4,533,850.73	4,041,582.20	(492,268.53)			
November	4,847,281.49	184,013.70	132,342.36	5,163,637.55	4,049,897.44	(1,113,740.11)			
December	4,681,797.51	184,183.35	132,615.33	4,998,596.19	4,056,706.84	(941,889.35)			
						1,187,014.92	CVS Rebate	**(1,360,883.07)**	**Reins Reimb**
Jan-23	4,551,265.39	175,327.04	132,156.92	4,858,749.35	4,043,179.36	(815,569.99)			
February	4,568,184.32	174,625.30	131,298.50	4,874,108.12	4,018,739.12	(855,369.00)			144,296.25
March	4,958,278.93	174,247.44	131,094.17	5,263,620.54	4,011,064.12	(1,252,556.42)			582.57
						1,232,526.51	CVS Rebate	**(1,690,968.90)**	**(1,546,090.08)**
April	4,547,760.69	173,599.68	130,434.89	4,851,795.26	3,991,367.48	(860,427.78)			
May	4,940,428.61	173,599.68	130,074.39	5,244,102.68	3,981,439.88	(1,262,662.80)			396,476.30
June	5,061,157.62	173,491.72	130,000.56	5,364,649.90	3,978,365.12	(1,386,284.78)			75,473.52
						1,214,315.28	CVS Rebate	**(2,295,060.08)**	**(1,823,110.26)**
July	4,625,165.72	176,752.54	143,707.84	4,945,626.10	4,232,178.00	(713,448.10)			181,661.74
August	5,060,398.85	176,697.75	143,254.64	5,380,351.24	4,218,128.00	(1,162,223.24)			469,143.13
September	5,156,287.60	176,423.80	143,109.76	5,475,821.16	4,213,250.00	(1,262,571.16)			76,424.96
						1,409,506.34	CVS Rebate	**(1,728,736.16)**	**(1,001,506.33)**
October	4,319,105.01	176,204.64	142,750.32	4,638,059.97	4,202,001.00	(436,058.97)			847.46
November	6,314,406.94	176,369.01	142,813.68	6,633,589.63	4,203,975.00	(2,429,614.63)			125,313.36
December	4,345,680.61	176,862.12	142,925.20	4,665,467.93	4,208,149.00	(457,318.93)			1,008,654.46
					Est	**1,400,000.00**	CVS Rebate	**(1,922,992.53)**	**(788,177.25)**
							12 months	**(7,637,757.67)**	**(5,158,883.92)**

MO

PPO

	Claims	Admin	Reins	Total Expenses	Estimated Premium		Net P/L		
Jan-21	869,088.69	37,432.90	28,738.60	935,260.19	956,458.20		21,198.01		
February	751,278.13	37,488.77	28,800.68	817,567.58	958,451.46		140,883.88		
March	796,151.62	37,377.03	28,719.37	862,248.02	955,728.36		93,480.34		
April	881,797.31	37,153.55	28,599.60	947,550.46	951,545.58		3,995.12		
May	911,202.45	37,153.55	28,513.90	976,869.90	949,018.74		(27,851.16)		
June	787,268.84	36,985.94	28,370.51	852,625.29	944,302.38		91,677.09	**IY-YTD 2021**	**892,344.59**
July	933,672.64	43,015.00	31,737.22	1,008,424.86	973,645.12		(34,779.74)		
August	1,154,732.99	43,076.45	31,847.58	1,229,657.02	976,836.68		(252,820.34)		
September	917,950.92	42,707.75	31,587.81	992,246.48	968,830.76		(23,415.72)		
							293,786.61	CVS Rebate	(17,229.19)
October	929,495.55	43,629.50	32,438.43	1,005,563.48	994,417.28		(11,146.20)		
November	1,041,146.16	43,690.95	32,414.66	1,117,251.77	993,894.36		(123,357.41)		
December	1,120,894.17	43,383.70	32,309.96	1,196,587.83	990,318.16		(206,269.67)	**2021 YTD**	**(34,619.19)**
							323,870.94	CVS Rebate	**(16,902.34)**
January '202	993,618.48	43,322.25	32,333.73	1,069,274.46	990,841.08		(78,433.38)		
February	878,920.91	43,936.75	32,811.39	955,669.05	1,005,422.44		49,753.39		
March	1,040,154.54	43,875.30	32,701.03	1,116,730.87	1,002,230.88		(114,499.99)		
							297,712.36	CVS Rebate	**154,532.38**
April	1,366,157.66	43,936.75	32,721.97	1,442,816.38	1,002,946.12		(439,870.26)		
May	1,179,883.68	43,875.30	32,566.90	1,256,325.88	998,516.40		(257,809.48)		
June	1,032,831.47	43,629.50	32,438.43	1,108,899.40	994,417.28		(114,482.12)	**IY2022**	**(691,761.01)**
							290,350.87	CVS Rebate	**(521,810.99)**
July	1,072,010.87	46,148.95	29,471.59	1,147,631.41	1,062,125.08		(85,506.33)		
August	1,206,201.87	46,824.90	29,895.68	1,282,922.45	1,077,421.68		(205,500.77)		
September	1,544,483.78	47,808.10	30,089.77	1,622,381.65	1,085,151.04		(537,230.61)		
							358,536.51	CVS Rebate	**(469,701.20)**
October	938,412.83	48,729.85	30,913.87	1,018,056.55	1,114,452.04		96,395.49		
November	1,175,259.85	48,852.75	31,023.75	1,255,136.35	1,118,358.84		(136,777.51)		
December	1,233,989.23	48,545.50	30,893.25	1,313,427.98	1,113,544.48		(199,883.50)		
							338,672.80	CVS Rebate	**98,407.28**
Jan-23	1,239,788.19	45,872.12	30,525.83	1,316,186.14	1,100,393.60		(215,792.54)		
February	1,300,902.81	45,754.80	30,488.05	1,377,145.66	1,098,963.12		(278,182.54)		
March	1,480,634.21	45,930.78	30,580.77	1,557,145.76	1,102,347.00		(454,798.76)		
							355,057.40	CVS Rebate	**(593,716.44)**
April	1,212,164.98	45,754.80	30,524.10	1,288,443.88	1,100,201.28		(188,242.60)		
May	1,075,950.45	45,344.18	30,211.62	1,151,506.25	1,089,003.80		(62,502.45)		
June	1,396,113.69	45,226.86	30,209.89	1,471,550.44	1,088,811.48		(382,738.96)		
							302,303.30	CVS Rebate	**(331,180.71)**
July	957,388.98	49,239.58	35,692.16	1,042,320.72	1,236,098.00		193,777.28		
August	1,159,577.22	49,715.90	35,821.84	1,245,114.96	1,240,849.00		(4,265.96)		
September	1,383,112.04	50,013.60	35,927.44	1,469,053.08	1,244,639.00		(224,414.08)		
							377,500.33	CVS Rebate	**342,597.57**
October	1,644,978.12	50,549.46	36,274.64	1,731,802.22	1,256,713.00		(475,089.22)		
November	1,071,962.61	50,370.84	36,211.28	1,158,544.73	1,254,439.00		95,894.27		97,116.69
December	1,305,282.67	49,775.44	35,960.80	1,391,018.91	1,245,546.00		(145,472.91)		
						EST	**325,000.00**	CVS Rebate	**(102,551.17)**
								12 months	**(684,850.75)**

Admin Fee Increase = 1.5 % Approximately $41k

Stop Loss premium Increase = 10% Approximately $214k (a very conservative guess)

PPO Increase of 5% = $750,000 of new premium

HMO Increase of 10.25% = $5,177,000 of new premium

Aggregate increase of 9% = $5,900,000 of new premium

Aggregate increase of 8% = $5,240,000 of new premium

MASSACHUSETTS

Account Name	HAMPSHIRE COUNTY INSURANCE GRO
Account ID	0260919
Policy Period	7/01/2024 - 6/30/2025
Financial Arr.	Self Insured

SIC Code	9311
Broker/Consultant	
Sales Executive	Heidi Fountain

Net of Rebates Expected Claims	Medical & Rx Expected Claims	Medical & Rx Working Rates	Subscribers
Network Blue New England			
Single:	$726.87	$753.40	1314
2 Party:	$1,692.90	$1,754.69	726
Family:	$2,098.82	$2,175.44	1179
CPC w/Rx Carve In:		$52.83	
Monthly:	$4,658,658	$4,828,716	3219
Est. Monthly Deposit:		$4,829,000	
Blue Care Elect Preferred			
Single:	$777.84	$807.14	379
Family:	$2,130.39	$2,210.62	467
CPC w/Rx Carve In:		$57.41	
Monthly:	$1,289,695	$1,338,262	846
Est. Monthly Deposit:		$1,338,000	

Additional Information

Commissions	Medical:	Excluded
Reinsurance		No

Caveats:

a) Truveris Ingredients Costs and Rebate amounts used as a starting point for Pharmacy costs

b) Member Cost share has not been accounted for in Pharmacy costs

c) The estimated rebates removed from total costs have also accounted for Commission payments ($402,000 annually) that will be subtracted from quarterly rebate credits

d) Assumed 5% reduction in existing CPC for Rx Carve In

e) These are conservative estimates and not guaranteed

	Current Rate	9% Proposed Rate	BCBS MA Working Rate **
HMO Single	$ 658.00	$ 717.22	$ 753.40
HMO +1	$ 1,532.00	$ 1,669.88	$ 1,754.69
HMO Family	$ 1,889.00	$ 2,059.01	$ 2,175.44
PPO Single	$ 758.00	$ 826.22	$ 807.14
PPO Family	$ 2,071.00	$ 2,257.39	$ 2,210.62

** Does not factor in Stop Loss premium expense or Trust Operating expense

VOTE

To increase premium rates by 9% on all active plan products for FY 2025 (7/1/24-6/30/25).

MASSACHUSETTS

FITNESS ENHANCEMENTS (FULLY INSURED 100+ AND ASC) (OPTIONAL)

Effective 1/1/24, upon renewal, new optional Fitness riders will be available. Accounts can choose to add **one** of the following riders to their existing fitness benefit. Adding any of these riders will not change the account's current fitness reimbursement amount.

Bicycles/Bicycle Helmets - Bicycles that are purchased for recreational use and bicycle helmets. This reimbursement is not provided for bicycle rentals, bicycle helmet rentals, and bike share programs.

Athletic Shoes- Athletic shoes designed to be worn for sports, exercising, or recreational activity. This reimbursement is not provided for casual and dress shoes.

Sports Activity Fees- Sports activity fees including (but not limited to): ski passes, fees for sports leagues (such as town sports, tennis, golf, or basketball), and race participation fees.

All Inclusive Rider - This rider includes all 3 options above.

Please let your Account Executive know if you would like more information about these optional riders.