

HAMPSHIRE COUNTY GROUP INSURANCE TRUST
Insurance Advisory Committee Meeting Notice and Agenda
March 25, 2026 @ 10:00 am
ZOOM Meeting

Call to Order	RC
EC Elections	RC
Approval of IAC Minutes (February 25, 2026 Meeting)	RC
Dental/Vision 7/1/26 Renewal (VOTE)	JG
Financial Update	SP
Treasurer	RC
7/1 Trust Withdrawal Formal Notice Due by 4/1	RC
FSA/HRA	DC/MG
BCBS HMO Student Rider (VOTE)	RC/MG
HILB Updates	DC
HILB Contract	RC
Other Business	RC
Adjournment	RC

Meeting Schedule

Insurance Advisory Committee – March 25, 2026, 10:00 a.m. ZOOM
Executive Committee – April 1, 2026, 9:00 a.m. ZOOM
Executive Committee – April 8, 2026, 9:00 a.m. ZOOM
Insurance Advisory Committee – THURS, April 16, 2026, 10:00 a.m. ZOOM
Executive Committee – April 29, 2026, 9:00 a.m. ZOOM

Cindy Graves is inviting you to a scheduled Zoom meeting.

Topic: IAC Meeting 3/25/26

Time: Mar 25, 2026 10:00 AM Eastern Time (US and Canada)

Join Zoom Meeting

<https://us02web.zoom.us/j/88930807709?pwd=8lrh5aar1t74flQisS4l7aLUaMOB9H.1>

Meeting ID: 889 3080 7709

Passcode: 381656

One tap mobile

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Join instructions

<https://us02web.zoom.us/join/88930807709/invitations?signature=gtvu7jyNL25khu55zxxVESDSqdzp8z0KeqpZVvIPoeg>

UNIT: _____

UNIT REPRESENTATIVE: _____

CURRENT EXECUTIVE COMMITTEE MEMBER SEATS (term through Oct 2026):

Chairperson

- _____

Representative from towns or cities of 5000 residents or more

- Joanne Misiaszek (Belchertown)

Representative from towns under 5000 residents

- Paula Harrison (Colrain)

Representative of Schools & School Districts

- Stacy Stewart (Gateway Regional S. D.)

Representatives at large (5)

- Donna Whiteley (South Hadley)
- Emily Russo (Easthampton)
- Shelley Poreda (Frontier Regional)
- Andrew Levine (Hatfield)
- _____

ELECTIONS FOR:

CHAIRPERSON:

- Shelley Poreda (Frontier Regional)**
- _____
- _____

REPRESENTATIVE AT LARGE:

- Paul McLatchy III (Ashfield)**
- _____
- _____
- _____

CURRENT EXECUTIVE COMMITTEE MEMBER SEATS (term through Oct 2026):

Chairperson

- _____

Representative from towns or cities of 5000 residents or more

- Joanne Misiaszek (Belchertown)

Representative from towns under 5000 residents

- Paula Harrison (Colrain)

Representative of Schools & School Districts

- Stacy Stewart (Gateway Regional S. D.)

Representatives at large (5)

- Donna Whiteley (South Hadley)
- Emily Russo (Easthampton)
- Shelley Poreda (Frontier Regional)
- Andrew Levine (Hatfield)
- _____

OF THE CURRENT EC MEMBERS, AN ELECTION FOR:

VICE CHAIRPERSON:

- Emily Russo (Easthampton)**
- _____
- _____

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

TO: All Member Trust Units

RE: **Minutes of February 25, 2026**
Insurance Advisory Committee
Via Zoom Teleconference

MEMBERS PRESENT:

Paul McLatchy III	Cathy Levreault	Joanne Cleveland
Jane Wolfe	Cara Leach	Sarah Reynolds
Ashley Obrzut	Meg McWherter	Rachel Emerson
Paula Harrison	Allan Kidston	Sara Kimball
Rich Carmignani, Jr.	Emily Russo	Bryan Smith
Liz Bouchard	Linda Gross	Jan Ameen
Ashley Manley	Shelley Poreda	Stacy Stewart
Ray Purington	Steve Nally	Marc Richard
Jennifer Sanders James	Patti Rutkowski	Andrew Levine
Virginia Gabert	Mia Francesconi	Saul Aguilar
Sharon Ashleigh	Ryan Mailloux	Eileen Seymour
Jessalyn Zaykoski	Michele Turner	Kristin Cormier
Andrea Crete	Jakob Voelker	Angelina Bragdon
Kari Scytowski	Barbara Miller	Donna Whiteley
Cindy Schofield	Nadine Cignoni	Mildred Colon
Carolyn Manley	Regina Purinton	Jennifer Day
Sharon Strzegowski		

OTHERS PRESENT:

Cynthia Graves	Michele Komosa	Karen Karowski
Susan Shillue	Danielle Chaplick	Mariana Gil
John Garrish	Heidi Fountain	Marshall Cook
Angela Medeiros	Dave Sirowich	Mark Shapiro
Chris Bean		

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 10:02 a.m. with a quorum present of 92.06% of the weighted vote.

MINUTES

On a motion by Barbara Miller, seconded by Paula Harrison, it was voted to amend the minutes of January 21, 2026, to reflect a 20% increase if no plan changes are approved not 15.96%. A roll call vote was taken. Motion carried as amended.

FINANCIALS

Month of Januaray 2025

The Financial Report showed a starting cash balance for January of \$5,011,250.32, with a total monthly income of \$9,402,368.84. The monthly expenses totaled \$9,661,850.17 leaving a total net monthly income of (\$259,481.33). The accounts receivable balance was \$886,444.99, which if paid on time, would have left us with a balance of \$10,610,434.08.

Shelly Poreda gave an overview of the financial report, highlighting page 9, indicating that medical claims were up and pharmaceuticals were level with December. Projections are tight but still positive.

WELLNESS UPDATE

Michele Komosa spoke of the wellness programs and monthly challenges that are offered over three platforms: AHealthyMe through BCBSMA, Wellness Concepts Inc and Learn to Live. On July 1st, BCBS awarded us 50,000 wellness credits. Wellness credits are used for onsite programs, such as cooking demonstrations, exercise programs, health fairs as well as gift cards and Fitbits used for incentives. Fourteen programs have been offered so far this year. She is currently working with BCBS to launch a "My Blue" Campaign where we would incentivize new registrants. My Blue offers everything a subscriber could need, such as finding a doctor, looking at your plan benefits, printing out your insurance card, your rewards and much more.

BOSTON MUTUAL

Marshall Cook from LifePlus/HILB gave a presentation on the various whole, term and accident plans available. It has been a long time since an open enrollment was offered for these plans so Marshall will be reaching out to each unit to offer them the opportunity this year.

HILB/PBIRX

PBIRX presented the result of the RFP for pharmaceutical coverage. The recommendation is to go with the Employers Health Coalition, which is still CVS Caremark based, with no changes to the formulary. It would also include a program called ElectRX that would cover injectable meds that require overnight delivery; this would complement our current CanaRx program. ElectRx is a voluntary program that could save the Trust nearly \$1.7 million annually if eligible members participated.

HILB provided an updated presentation on their medical recommendation based on the savings from a PBM change to Employers Health. They offered a lower premium increase and deductible recommendation than previously suggested.

On a motion by Shelley Poreda, seconded by Paula Harrison, it was voted to:

1. Renew medical coverage with BCBS effective 7/1/2026,
2. Implement the plan changes as outlined on page 18, Option A, of the agenda and increase rates 12.48%,
3. Change PBM's from CVS Caremark to the CVS Employers Health Coalition which includes the paid health foundational assistance program

4. Implement the ElectRx program.

A roll call vote was taken with 56.35% in favor, 27.03% opposed and 8.68% abstentions. Motion carried.

Chairman Carmignani expressed his appreciation to all for their participation, cooperation, insight and contributions to this process and getting us to this point.

ADJOURNMENT

Chairman Rich Carmignani, Jr. adjourned the meeting 12:15 p.m.

Respectfully submitted,
Karen Karowski

Executive Committee – March 4, 2026, 9:00 a.m., via ZOOM
Executive Committee – March 11, 2026, 9:00 a.m., via ZOOM
Insurance Advisory Committee – March 25, 2026, 10:00 a.m., via ZOOM



Dental Renewal for Hampshire County Group Insurance Trust

Carrier Effective Date Plan Option	UPDATED RENEWAL											
	Core Plan						PPO \$750 Plan					
	Network		Network		Network		Network		Network		Network	
	PPO	PREMIER	OUT	PPO	PREMIER	OUT	PPO	PREMIER	OUT	PPO	PREMIER	OUT
Office Visit Copay	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Annual Deductible	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150
Annual Maximum	\$1,250	\$1,250	\$1,250	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$750	\$750	\$750
Preventive	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Basic	100%	80%	80%	100%	100%	80%	100%	100%	80%	50%	50%	50%
Major	0%	0%	0%	50%	50%	50%	50%	50%	50%	50%	50%	50%
Endo	100%	80%	80%	100%	100%	80%	100%	100%	80%	50%	50%	50%
Perio	100%	80%	80%	100%	100%	80%	100%	100%	80%	50%	50%	50%
Anesthesia	100%	80%	80%	100%	100%	80%	100%	100%	80%	50%	50%	50%
Implants	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
UCR Level	N/A	N/A	MAC	N/A	N/A	MAC	N/A	N/A	MAC	N/A	N/A	MAC
Orthodontia	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Deductible	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Coinsurance/Copay	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Lifetime Maximum	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Participation Requirement	12 months with a 6% renewal cap											
Bundled Rates	12 months with a 6% renewal cap											
Rate Guarantee	12 months with a 6% renewal cap											
Rates / Enrollment	12 months with a 6% renewal cap											
Employee Only	495		\$26.84	408		\$50.11	106		\$26.96			
Employee + Spouse (EE+1D)	309		\$52.97	385		\$95.11	0		\$77.13			
Employee + Family	305		\$98.98	251		\$147.24	154		\$77.13			
Monthly Premium	\$59,842.43			\$94,019.47			\$14,735.78					
Combined Monthly Premium	\$59,842.43			\$94,019.47			\$14,735.78					
Annual Premium	\$2,023,172.16			\$2,023,172.16			\$2,023,172.16					
Percentage Change	13.50%			13.50%			13.50%					

* This comparison is for illustrative purposes only and is not a guarantee of rates or of how benefits will be paid. The contract issued will prevail.

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Hampshire County Group Insurance Trust

	CURRENT		PROPOSED	
	METLIFE		REVISED RATES	
Carrier	July 1, 2025		ATLUS	
Effective Date	July 1, 2025		July 1, 2026	
Plan Option	Network		150 Plus	
VISION	IN	OUT	IN	OUT
Exam (Copay)	\$10	Up to \$45	\$10	Up to \$55
Material (Copay)	\$25		\$25	
Frequency				
(Exam/Lenses/Frames)	12/12/24		12/12/12	
LENSES				
Single	\$25 Copay	Up to \$30	\$25 Copay	Up to \$30
Bifocal	\$25 Copay	Up to \$50	\$25 Copay	Up to \$50
Trifocal	\$25 Copay	Up to \$65	\$25 Copay	Up to \$65
Lenticular	\$25 Copay	Up to \$100	\$25 Copay	Up to \$100
Progressive	\$55 Copay	Up to \$50	\$25 Copay	Up to \$50
CONTACTS				
Elective	Up to \$130	Up to \$105	Up to \$150	Up to \$105
Medically Necessary	\$25 Copay	Up to \$210	Covered in full	Up to \$210
Frequency	12 Months		12 Months	
FRAMES				
Benefit	\$130 then 20% off remaining balance	Up to \$70	\$150 then 20% off remaining balance	Up to \$70
Participation Requirement				
Bundled Rates				
Rate Guarantee				48 Months
Rates / Enrollment				
Employee Only	171	\$6.57	171	\$6.05
Employee + Spouse	101	\$13.17	101	\$12.10
Employee + Child	29	\$11.14	29	\$12.70
Employee + Family	79	\$18.37	79	\$17.55
Monthly Premium		\$4,227.93		\$4,011.40
Annual Premium		\$50,735.16		\$48,136.80
Percentage Change				-5.12%

HAMPSHIRE COUNTY GROUP INSURANCE TRUST

FISCAL YEAR 2026 OPERATING EXPENSES (July 1, 2025 to June 30, 2026)

ITEM CODE	BUDGET ITEMS	FY-2026 Budgeted	FY-2026 Budget YTD												
			July	August	September	October	November	December	January	February	March	April	May	June	
WAGES & BENEFITS															
5110	SALARY*	426,000.00	51,204.92	28,366.64	28,097.17	28,099.98	58,916.58	29,833.27	18,132.01	17,410.72					260,061.29
5145	LONGEVITY	6,600.00													-
5120	TEMP. EMPLOYEE SAL														-
461	FICA (.062)														-
5186	MED TAX (.0145)														-
5181	CONTRIBUTORY RET.	130,358.00	135,403.39	3,407.31	3,407.31	3,407.31	3,407.31	2,264.18	2,233.68	1,641.76					155,172.25
5189	EMP. ASST. PROG. EAP														-
5184	HEALTH INSURANCE	94,400.00	6,345.67	5,891.67	6,963.74	6,963.74	6,372.74	3,612.74	3,589.09	3,395.15					43,134.54
5185	LIFE INSURANCE	350.00	28.40	28.40	28.40	28.40	28.40	28.40	28.40	28.40					227.20
5189	UNEMP. HEALTH INS TAX														-
	TOT. WAGES & BENEFITS	657,708.00	192,982.38	37,694.02	38,496.62	38,499.43	68,725.03	35,738.59	23,983.18	22,476.03					458,595.28

ITEM CODE	BUDGET ITEMS	FY-2026 Budgeted	FY-2026 Budget YTD												
			July	August	September	October	November	December	January	February	March	April	May	June	
NON SALARY EXPENSES															
5300	ADM. CONT. SERVICES (FS&PF)	13,200.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00					8,000.00
	Rent														
	Parking														
5305	ADM. CONT. SERVICES (Audi)	45,000.00													-
5320	LEGAL			8,000.00				16,000.00							31,430.00
5340	TELEPHONE/INTERNET														-
5480	FOOD SUPPLIES	500.00	29.95			104.73		20.97				90.70			246.35
5420	OFFICE & COMPUTER SUPPLIES		327.26			948.83									1,276.09
5580	MISC. EXPENSES	5,000.00	316.89			195.52		89.13				58.42			659.96
5580	NEWSPAPER/MAGS/BOOKS														-
5420	POSTAGE (Stamps)	6,000.00						22.3				11.87			34.17
5275	POSTAGE METER RENTAL		466.90												466.90
5380	MINI GRANTS/WEILLNESS	7,500.00							5500						5,500.00
5420	STATIONERY & OFF. SUPP.														-
5780	SURETY BONDS	1,250.00						88.83				153.12			537.30
5340	TELEPHONES				100										100.00
5320	TRAINING														-
5710	TRAVEL/INOUT of STATE	3,000.00	42.00			30.8		92.40							165.20
5188	UTILITIES	6,000.00	694.33	437.23	425.84	441.35	380.01	391.81	386.16	390.51					3,547.24
	TOT. Interest Costs														-
	Total Non-Salary	87,450.00	2,877.33	1,437.23	9,525.84	2,721.23	1,693.64	17,687.16	6,886.16	33,134.62					75,963.21

ITEM CODE	BUDGET ITEMS	FY-2026 Budgeted	FY-2026 Budget YTD														
			July	August	September	October	November	December	January	February							
	I.T.																
6000	COMPUTER HARDWARE	2,500.00															
5420	COMPUTER SOFTWARE																
5420	COMPUTER SUPPLIES	1,000.00															
5850	DESK TOP PCs																
5300	MISC PROF & TECH SERV.**	80,000.00	14,846.00	1,431.00	9,464.76	7,958.20	7,719.03	7,815.00	7,840.45	5,626.27							
	TOTAL DATA PROCESSING	83,500.00	14,846.00	1,431.00	9,464.76	7,958.20	7,719.03	7,815.00	7,840.45	5,626.27							
TOTALS		828,658.00	210,705.71	40,562.25	57,487.22	49,178.86	78,137.70	61,240.75	38,709.79	61,236.92							597,259.20

2/2/2026 ACH	2,819,642.24	BCBS	FEB Monthly Claim prefunding & DEC settlement
2/3/2026 ACH	1,000.00	M&B Holdings	Rent FEB
2/3/2026 ACH	197,031.11	Stealth Partner Group	Reinsurance- FEB
2/3/2026 ACH	545,929.68	CVS	Rx weekly
2/3/2026	49.25	Boston Mutual	Life Ins
2/3/2026	5,565.01	CanRx	Rx expense 1/16-1/31
2/3/2026	4,000.00	Edward Haber	IT work
2/3/2026	195.75	ACSA/PPI	Dental/Vision Ins - FEB
2/3/2026	314.11	Cindy Graves	Office Expenses
2/5/2026 ACH	288.59	Comcast	Internet
2/10/2026 ACH	640,462.88	CVS	Rx weekly
2/10/2026 ACH	1,626.27	Netlogix	IT service
2/11/2026 ACH	8,766.97	Checkwriters	payroll 2/12
2/16/2026 ACH	3,063,950.00	BCBS	FEB Monthly claim funding, second half
2/17/2026 ACH	587,419.19	CVS	Rx weekly
2/17/2026	1,203.02	CanRx	Rx expense 2/1-2/15
2/17/2026	6,321.00	HCGIT	Health Insurance - mar
2/17/2026	31,430.00	The HILB Group	Consultant Fee - DEC and JAN
2/25/2026 ACH	516,066.08	CVS	Rx weekly
2/25/2026 ACH	8,643.75	Checkwriters	payroll 2/26
2/25/2026	101.92	CMS	Phone
2/25/2026	1,641.76	Hamp Retirement	FEB Deductions
2/27/2026 ACH	760,169.33	Blue Medicare Rx	Medicare RX PDP - JAN

9,201,817.91

Hampshire County Group Insurance Trust

TRANSACTION REPORT FEBRUARY 2026 (FY26)

STARTING BALANCE GENERAL FUND (M&T BANK)				\$ 2,334,553.44
2026	TRANSACTION	A/P DEBIT	A/R CREDIT	
FEB	M&T BANK			
				\$ 2,334,553.44
2	BLUE CROSS BLUE SHIELD	5,883,592.24		\$ (3,549,038.80)
3	M&T BANK		38,458.00	\$ (3,510,580.80)
17	M&T BANK (FROM ESB)		3,500,000.00	\$ (10,580.80)
17	M&T BANK		744,641.81	\$ 734,061.01
19	M&T BANK		261,784.15	\$ 995,845.16
25	M&T BANK		441,106.00	\$ 1,436,951.16
25	M&T BANK		958,076.40	\$ 2,395,027.56
27	M&T BANK		728,056.97	\$ 3,123,084.53
27	M&T BANK		16,547.00	\$ 3,139,631.53
27	CVS CAREMARK	2,289,877.83		\$ 849,753.70
27	PAYROLL	17,410.72		\$ 832,342.98
27	INTEREST		4,677.15	\$ 837,020.13
				\$ 837,020.13
				\$ 837,020.13
				\$ 837,020.13
STARTING BALANCE GENERAL FUND (EASTHAMPTON SAVINGS BANK x5596)				\$ 2,417,215.55
2026	TRANSACTION	A/P DEBIT	A/R CREDIT	
FEB	EASTHAMPTON SAVINGS BANK			
				\$ 2,417,215.55
2	STEALTH/STOP LOSS	197,031.11		\$ 2,220,184.44
2	ESB		8,953.00	\$ 2,229,137.44
2	ESB		111,955.00	\$ 2,341,092.44
2	ESB		315,278.07	\$ 2,656,370.51
2	ESB		6,734.00	\$ 2,663,104.51
2	ESB		3,334.00	\$ 2,666,438.51
2	ESB		277,846.06	\$ 2,944,284.57
4	ESB		111,636.86	\$ 3,055,921.43
11	ESB		8,953.00	\$ 3,064,874.43
12	ESB		160,745.00	\$ 3,225,619.43
12	ESB		116,123.00	\$ 3,341,742.43
13	ESB		13,811.00	\$ 3,355,553.43
17	ESB (TO MTB)	3,500,000.00		\$ (144,446.57)
17	ESB		76,625.00	\$ (67,821.57)
17	ESB		276,533.66	\$ 208,712.09
18	ESB		166,862.77	\$ 375,574.86
18	ESB		74,549.00	\$ 450,123.86
19	ESB		225,755.07	\$ 675,878.93
19	ESB		285,259.00	\$ 961,137.93
19	ESB		55,578.00	\$ 1,016,715.93
19	ESB		301,633.20	\$ 1,318,349.13
19	ESB		110,007.14	\$ 1,428,356.27
20	ESB		18,691.00	\$ 1,447,047.27
23	ESB		82,972.00	\$ 1,530,019.27
24	ESB		216,040.74	\$ 1,746,060.01
24	ESB		16,005.00	\$ 1,762,065.01
25	ESB		9,747.00	\$ 1,771,812.01
25	ESB		6,239.00	\$ 1,778,051.01
25	ESB		111,494.00	\$ 1,889,545.01
25	ESB		17,635.00	\$ 1,907,180.01

HAMPSHIRE COUNTY GROUP INSURANCE TRUST

INCOME AND EXPENSE REPORT

ITEMS	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC	JAN	FEB
Starting Cash Balance	1,374,868.15	2,585,805.86	(1,211,050.10)	1,726,324.83	1,289,856.50	3,928,350.63	2,065,435.68	3,072,941.07	1,435,636.70	479,076.67	5,011,250.32	4,751,768.99
Adjustments												
Total Starting Balance	1,374,868.15	2,585,805.86	(1,211,050.10)	1,726,324.83	1,289,856.50	3,928,350.63	2,065,435.68	3,072,941.07	1,435,636.70	479,076.67	5,011,250.32	4,751,768.99
MONTHLY INCOME												
Total Premium Collected	7,113,861.16	5,733,876.86	8,662,499.92	4,216,395.73	11,883,562.27	8,540,065.72	8,941,123.65	9,943,338.15	8,121,068.55	11,862,397.44	9,392,264.73	10,029,689.64
Interest Income (MMDT)	4,915.06	2,880.52	5,955.54	5,133.53	4,826.21	6,403.21	7,314.26	5,578.63	5,283.97	6,773.75	10,104.11	8,980.07
CVS Rebate (Quarterly)										3,025,188.26	0.00	0.00
Other Income or Adjustments												
BCBS SR Premium Collected												
TOTAL MONTHLY INCOME	7,118,776.22	5,736,757.38	8,668,455.46	4,221,529.26	11,888,388.48	8,546,468.93	8,948,437.91	9,948,916.78	8,126,352.52	14,894,359.45	9,402,368.84	10,038,669.71
MONTHLY EXPENSES												
BCBS Admin Cost (estimate)												
Claim Deposit	6,453,754.80	6,057,531.86	5,962,534.78	5,786,383.98	8,943,510.34	7,166,257.06	6,153,533.46	7,910,554.94	6,689,348.23	6,069,200.00	6,127,900.00	6,127,900.00
BCBS Settlement										890,712.03	208,600.07	(244,307.76)
Reinsurance (Ind.&Agg.)	(3,407.47)	55,503.18	28,970.51	(31,398.30)	(35,796.67)	(296,941.76)	202,462.12	200,838.53	201,549.04	200,805.13	199,134.15	197,031.11
Recon adjust w/Finance												
BCBS Sr Premium Paid												
Other Exp. & Claim Settlement	1,055,857.82	3,453,317.77	3,487,583.52	1,641,677.58	3,587,364.65	3,506,306.64	1,528,056.25	3,425,648.82	3,388,945.61			
CVS Claims										2,471,503.84	2,417,052.60	2,289,877.83
Blue Medicare RX PDP										657,904.38	659,710.82	760,169.33
CanRx										10,819.67	10,742.74	6,768.03
Total Plan Expenses	7,506,205.15	9,566,352.81	9,479,088.81	7,396,663.26	12,495,078.32	10,375,621.94	7,884,051.83	11,537,042.29	10,279,842.88	10,300,945.05	9,623,140.38	9,137,438.54
Total Unit Operating Expenses	51,633.36	67,260.53	51,991.72	61,334.33	210,705.71	40,562.25	57,487.22	49,178.86	78,137.70	61,240.75	38,709.79	61,236.92
TOTAL MONTHLY EXPENSES	7,557,838.51	9,633,613.34	9,531,080.53	7,457,997.59	12,705,784.03	10,416,184.19	7,941,539.05	11,586,221.15	10,357,980.58	10,362,185.80	9,661,850.17	9,198,675.46
TOTAL NET MONTHLY INCOME	(439,062.29)	(3,896,855.96)	(862,625.07)	(3,236,468.33)	(817,395.55)	(1,869,715.26)	1,006,898.86	(1,637,304.37)	(2,231,628.06)	4,532,173.65	(259,481.33)	839,994.25
BALANCE												
Cash Balance	935,805.86	(1,311,050.10)	(2,073,675.17)	(1,510,143.50)	472,460.95	2,058,635.37	3,072,334.54	1,435,636.70	(795,991.36)	5,011,250.32	4,751,768.99	5,591,763.24
Adjustments	1,650,000.00	100,000.00	3,800,000.00	2,800,000.00	3,455,889.68	6,800.31	606.53		1,275,068.03	0.00	0.00	0.00
ENDING MONTHLY BALANCE	2,585,805.86	(1,211,050.10)	1,726,324.83	1,289,856.50	3,928,350.63	2,065,435.68	3,072,941.07	1,435,636.70	479,076.67	5,011,250.32	4,751,768.99	5,591,763.24

HAMPSHIRE COUNTY GROUP INSURANCE TRUST

Fund And Investment Information

FUNDS	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC	JAN	FEB
Post Employee Ben. S.B.	58,988.91	57,930.13	56,871.35	55,982.59	55,923.81	53,695.01	53,806.25	52,747.47	51,688.69	49,459.89	47,511.11	47,647.38
Funding	1,170.02	1,170.02	2,340.04	1,170.02		2,340.04	1,170.02	1,170.02	0.00	1,170.02	3,278.72	1,639.36
Expenses	2,228.80	2,228.80	2,228.80	2,228.80	2,228.80	2,228.80	2,228.80	2,228.80	2,228.80	3,118.80	3,142.45	3,142.45
Total	57,930.13	56,871.35	56,982.59	55,923.81	53,695.01	53,806.25	52,747.47	51,688.69	49,459.89	47,511.11	47,647.38	46,144.29
Accrued 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	4,463,551.96	4,463,551.96	4,463,551.96	4,463,551.96	4,463,551.96	4,488,051.96	4,501,551.96	4,501,551.96	4,526,051.96	4,526,051.96	4,550,551.96	4,550,551.96
Deposits					24,500.00	13,500.00	24,500.00	24,500.00	0.00	24,500.00	0.00	36,750.00
Total Member Deposits	4,463,551.96	4,463,551.96	4,463,551.96	4,463,551.96	4,488,051.96	4,501,551.96	4,526,051.96	4,526,051.96	4,526,051.96	4,550,551.96	4,550,551.96	4,587,301.96
OPEB Trust	329,648.46	331,048.34	332,408.81	333,721.52	334,897.77	336,078.17	337,186.99	338,413.84	339,606.67	340,645.65	341,721.59	342,702.80
Interest	1,399.88	1,360.47	1,312.71	1,176.25	1,180.40	1,108.82	1,226.85	1,192.83	1,038.98	1,075.94	981.21	906.12
OPEB Trust	331,048.34	332,408.81	333,721.52	334,897.77	336,078.17	337,186.99	338,413.84	339,606.67	340,645.65	341,721.59	342,702.80	343,608.92
Investments												
CD's	5,555,405.94	3,923,230.27	3,839,051.76	2,047,431.42	1,253,632.84	1,258,956.49	1,263,580.83	1,268,178.34	1,272,648.39	0.00	0.00	0.00
Deposit/Withdrawal	(1,650,000.00)	(100,000.00)	(1,800,000.00)	(800,000.00)					(1,275,062.97)	0.00	0.00	0.00
Interest	17,824.33	15,821.49	8,379.66	6,201.42	5,323.65	4,624.34	4,597.51	4,470.05	2,414.58	0.00	0.00	0.00
Balance	3,923,230.27	3,839,051.76	2,047,431.42	1,253,632.84	1,258,956.49	1,263,580.83	1,268,178.34	1,272,648.39	0.00	0.00	0.00	0.00
Portfolio Value	7,228,416.19	6,953,131.67	6,851,991.84	5,154,766.73	3,364,488.66	7,302.39	571.53	0.00	5.06	0.00	0.00	0.00
Deposit/Withdrawal			(2,000,000.00)	(2,000,000.00)	(3,455,889.66)	(8,050.31)	(606.53)	5.06	(5.06)	0.00	0.00	0.00
Interest	(275,284.52)	(101,139.83)	302,774.89	209,721.93	98,703.41	1,319.45	35.00					
Market Change												
Total	6,953,131.67	6,851,991.84	5,154,766.73	3,364,488.66	7,302.39	571.53	0.00	5.06	0.00	0.00	0.00	0.00
Accounts Receivable	534,150.97	1,900,280.17	328,596.28	4,456,131.78	862,927.27	657,555.64	1,479,153.64	1,180,816.21	2,699,778.94	655,974.66	886,444.99	642,547.84
Total With Accounts Receivable	18,880,167.16	16,264,423.75	14,142,693.29	15,249,801.28	10,966,679.88	8,911,006.84	10,744,304.28	8,837,771.64	8,126,331.07	10,638,327.60	10,610,434.08	11,242,684.21

12/17/25 IAC Meeting: Projections 20% 10/1/25 + 20% MEDEX 1/1/26

	July	August	September	October	November	December	January	February	March	April	May	June	Total
Revenue													
Premium	8,350,000	8,350,000	9,820,000	9,820,000	9,820,000	10,070,000	9,780,000	9,780,000	9,780,000	9,780,000	9,780,000	9,780,000	114,910,000
Stop Loss reimbursement	400,000	200,000	150,000					100,000	100,000	200,000	250,000	250,000	1,650,000
CVS Rebate		2,100,000	2,100,000	9,820,000	9,820,000	12,170,000	9,780,000	9,880,000	11,680,000	9,980,000	10,030,000	11,830,000	7,800,000
Total Revenue	8,750,000	8,550,000	12,070,000	9,820,000	9,820,000	12,170,000	9,780,000	9,880,000	11,680,000	9,980,000	10,030,000	11,830,000	124,360,000
Expenses													
BCBS Funding	(6,069,200)	(6,069,200)	(7,000,000)	(7,500,000)	(6,069,200)	(7,000,000)	(6,200,000)	(7,500,000)	(6,200,000)	(6,200,000)	(7,500,000)	(7,000,000)	(80,307,600)
CVS Claims	(2,900,000)	(2,900,000)	(2,900,000)	(2,200,000)	(2,200,000)	(2,200,000)	(2,200,000)	(2,200,000)	(2,200,000)	(2,200,000)	(2,200,000)	(2,200,000)	(28,500,000)
CanRx	(10,500)	(10,500)	(10,500)	(10,500)	(10,500)	(10,500)	(11,000)	(11,000)	(11,000)	(11,000)	(11,000)	(11,000)	(129,000)
Fed Pcori Fee	(40,000)												(40,000)
Hamp Retirement Assessment	(130,000)												(130,000)
HCGIT Op Expenses	(60,000)	(60,000)	(60,000)	(60,000)	(60,000)	(60,000)	(60,000)	(60,000)	(60,000)	(60,000)	(60,000)	(60,000)	(720,000)
Blue Medicare Rx fee	(640,000)	(640,000)	(640,000)	(640,000)	(640,000)	(640,000)	(704,000)	(704,000)	(704,000)	(704,000)	(704,000)	(704,000)	(8,064,000)
Stop Loss Premium	(204,500)	(204,500)	(204,500)	(204,500)	(204,500)	(204,500)	(204,500)	(204,500)	(204,500)	(204,500)	(204,500)	(204,500)	(2,454,000)
Total Expenses	(10,054,200)	(9,884,200)	(10,815,000)	(10,615,000)	(9,184,200)	(10,115,000)	(9,379,500)	(10,679,500)	(9,379,500)	(9,379,500)	(10,679,500)	(10,179,500)	(120,344,600)
Net Cash	(1,304,200)	(1,334,200)	1,255,000	(795,000)	635,800	2,055,000	400,500	(799,500)	2,300,500	600,500	(649,500)	1,650,500	4,015,400

3/25/26 IAC Meeting: Actuals + 20% 10/1/25 + 19.0% MEDEX 1/1/26

	July	August	September	October	November	December	January	February	March	April	May	June	Total
Revenue													
Premium	8,308,728	8,343,313	9,762,643	9,666,501	9,635,519	9,809,495	9,618,569	9,700,285	9,469,723	9,780,000	9,780,000	9,780,000	113,654,775
Stop Loss reimbursement	240,086	500,123	-	1,863	20				100,000	200,000	250,000	250,000	1,542,091
CVS Rebate		2,208,604	2,208,604	9,668,363	9,635,538	12,834,683	9,618,569	9,700,285	11,369,723	9,980,000	10,030,000	11,830,000	8,833,792
Total Revenue	8,548,814	8,843,436	11,971,247	9,668,363	9,635,538	12,834,683	9,618,569	9,700,285	11,369,723	9,980,000	10,030,000	11,830,000	124,030,658
Expenses													
BCBS Funding	(6,153,533)	(7,910,555)	(6,689,348)	(6,959,912)	(6,277,800)	(5,824,892)	(6,682,939)	(7,990,296)	(6,200,000)	(6,200,000)	(7,500,000)	(7,000,000)	(81,389,276)
CVS Claims	(2,899,440)	(2,844,728)	(3,078,596)	(2,765,466)	(2,714,476)	(2,471,504)	(2,417,053)	(2,289,878)	(2,200,000)	(2,200,000)	(2,200,000)	(2,200,000)	(30,281,140)
CanRx	(11,918)	(10,970)	(5,628)	(8,023)	(16,766)	(10,820)	(10,743)	(6,768)	(11,000)	(11,000)	(11,000)	(11,000)	(125,636)
Fed Pcori Fee	(39,719)												(39,719)
Hamp Retirement Assessment	(130,358)												(130,358)
HCGIT Op Expenses	(74,458)	(40,562)	(57,487)	(49,179)	(78,138)	(61,241)	(38,710)	(61,237)	(60,000)	(60,000)	(60,000)	(60,000)	(701,011)
Blue Medicare Rx fee	(636,287)	(650,608)	(652,436)	(652,160)	(657,703)	(657,904)	(659,711)	(760,169)	(704,000)	(704,000)	(704,000)	(704,000)	(8,142,979)
Stop Loss Premium	(204,290)	(203,181)	(202,462)	(202,701)	(201,569)	(200,805)	(199,134)	(197,031)	(204,500)	(204,500)	(204,500)	(204,500)	(2,429,173)
Total Expenses	(10,150,003)	(11,660,604)	(10,685,957)	(10,637,441)	(9,946,452)	(9,227,166)	(10,008,290)	(11,305,379)	(9,379,500)	(9,379,500)	(10,679,500)	(10,179,500)	(123,239,292)
Net Cash	(1,601,189)	(2,817,168)	1,285,289	(969,077)	(310,914)	3,607,517	(389,720)	(1,605,093)	1,990,223	600,500	(649,500)	1,650,500	791,367

Variance

	(296,989)	(1,482,968)	30,289	(174,077)	(946,714)	1,552,517	(790,220)	(805,593)	(310,277)	-	-	-	(3,224,033)
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18

Hampshire County Group Insurance Trust - PLAN COUNTS

2025

2026

JAN FEB MAR APR MAY JUNE JULY AUG SEPT OCT NOV DEC JAN FEB MAR APR

NETWORK BLUE NE (HMO)

G1 - Individual	619	611	612	614	610	605	633	627	613	618	618	615	618	614	616
G1 - Employee + 1	320	315	313	315	313	313	330	326	331	344	341	333	339	330	329
G1 - Family	537	541	536	531	530	530	553	552	547	562	559	550	556	534	527
G1 - TOTAL HMO	1476	1467	1461	1460	1453	1448	1516	1505	1491	1524	1518	1498	1487	1478	1472
G2 - Individual	715	716	723	723	723	728	718	708	699	720	707	707	706	700	707
G2 - Employee + 1	377	379	370	371	368	366	379	379	375	369	363	358	360	356	354
G2 - Family	641	638	642	639	641	641	645	645	644	668	676	667	675	659	652
G2 - TOTAL HMO	1733	1733	1735	1733	1732	1735	1742	1732	1718	1757	1746	1732	1741	1715	1713
TOTAL INDIVIDUAL	1334	1327	1335	1337	1333	1333	1351	1335	1312	1338	1325	1322	1324	1314	1323
TOTAL EMP+1 PLANS	697	694	683	686	681	679	709	705	706	713	704	691	699	686	683
TOTAL FAMILY PLANS	1178	1179	1178	1170	1171	1171	1198	1197	1191	1230	1235	1217	1231	1193	1179
TOTAL HMO PLANS	3209	3200	3196	3193	3185	3183	3258	3237	3209	3281	3264	3230	3254	3193	3185

BLUE CARE ELECT PREFERRED (PPO)

G1 - Individual	207	209	209	211	210	215	217	215	212	203	207	205	207	201	205
G1 - Family	271	272	270	270	272	271	267	264	266	246	240	237	239	231	228
G1 - TOTAL PPO	478	481	479	481	482	486	484	479	478	449	447	442	446	432	433
G2 - Individual	176	174	176	176	181	180	177	178	172	164	165	160	162	164	161
G2 - Family	221	223	225	228	226	225	229	227	232	206	202	203	202	205	203
G2 - TOTAL PPO	397	397	401	404	407	405	406	405	404	370	367	363	364	369	364
TOTAL INDIVIDUAL	383	383	385	387	391	395	394	393	384	367	372	365	369	365	366
TOTAL FAMILY PLANS	492	495	495	498	498	496	496	491	498	452	442	440	441	436	431
TOTAL PPO PLANS	875	878	880	885	889	891	890	884	882	819	814	805	810	801	797

MEDEX

G1 - Individual	1435	1440	1443	1447	1447	1447	1491	1507	1511	1511	1517	1539	1523	1535	1538
G2 - Individual	1417	1411	1416	1422	1424	1422	1430	1434	1441	1447	1451	1451	1451	1449	1444
TOTAL MEDEX PLANS	2852	2851	2859	2869	2871	2869	2921	2941	2952	2958	2968	2990	2974	2984	2982
TOTAL - ALL PLANS	6936	6929	6935	6947	6945	6943	7069	7062	7043	7058	7046	7025	7038	6978	6964

REMINDER:

Formal notification from units leaving the Trust effective 7/1/2026 are due no later than 4/1/2026.

Please email letters to Cindy at cindys@hcgit.org.