



Greater Tompkins County Municipal Health Insurance Consortium

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"Individually and collectively we invest in realizing high quality, affordable, dependable health insurance."

Audit and Finance Committee

Agenda – February 22, 2022

3:00 PM

Town of Ithaca/Zoom Meeting

(see meeting invite or contact consortium@tompkins-co.org for information to join meeting)

1. Call to Order (3:00) S. Thayer
2. Changes to Agenda
3. Approve Minutes – December 14, 2021
4. Executive Director (3:05) E. Dowd
 - a. Report (*Pkt. Pg. 13*)
 - b. Discussion: New Member Rate Stabilization Reserve
 - c. Discussion: Investment Policy (*Pkt. Pg. 15*)
5. Resolution: Adoption of Amendments to the 2022 Budget (3:30) (*Pkt. Pg. 27*)
6. Resolution: Rescinding Resolution No. 009-2020 and Renaming the Catastrophic Claims Reserve to Catastrophic Claims Self-Insurance Pool (*Pkt. Pg. 28*)
7. Financial Update (4:00)
 - a. Finance Manager Update T. Apalovich
 - b. ACTION ITEM: Abstract Approval (*Pkt. Pg. 31*)
 - c. Budget Performance Report (*Pkt. Pg. 32*) S. Locey
 - d. Report on large loss claim activity
8. Next meeting Agenda Topics (4:15)
9. Adjourn (4:20)

Next Meeting: **March 22, 2022 – 3 PM**

**Audit and Finance Committee
Minutes - DRAFT
December 14, 2021
Ithaca Town Hall/Remotely via Satellites**

Present: Mack Cook, Bud Shattuck, Eric Snow, Peter Salton (arrived at 3:07 p.m.), Laura Shawley, Steve Thayer, Rordan Hart, Amanda Anderson
Excused: Jon Munson
Staff/ Guests: Elin Dowd, Executive Director; Michelle Cocco, Clerk of the Board; Steve Locey, Rob Spenard, Locey and Cahill; Rick Snyder, Treasurer; Judy Drake, Board Chair; Don Barber, Consultant; Teri Apalovich, Finance Manager; Kylie Rodrigues, Benefits Specialist

Call to Order

Mr. Cook, Chair, called the meeting to order at 3:02 p.m.

Chair's Report

Mr. Cook reported this may be his last meeting as his employment with the City of Cortland will be ending on December 31st. He said the opportunity he has had over the last ten years to serve on the Consortium has been some of the most rewarding years of his career and thanked everyone for allowing him to contribute to its success and the benefits provided to members.

Ms. Drake thanked Mr. Cook for all he has done for the Consortium, stating he has made a huge difference in the Consortium, particularly with the number of municipalities he has helped to bring in.

Changes to the Agenda

There were two revised resolutions relating to the Catastrophic Claims Reserve added to the agenda.

Approval of Minutes of October 26, 2021

It was MOVED by Mr. Snow, seconded by Mrs. Shawley, and unanimously adopted by voice vote by members present, to approve the minutes of October 26, 2021 as submitted. MINUTES APPROVED.

Executive Director Report

Ms. Dowd reported the Committee received a written report in the agenda packet. She reported there are several groups that have just completed labor negotiations and there is movement to the Platinum Plan. Although this is normally a quiet time of year, she said staff is very busy working on making these changes to move members accordingly.

Mr. Salton arrived at this time.

Ms. Dowd said this will have ramifications to the 2022 budget and premium income; she and Ms. Apalovich will be working with Locey and Cahill to prepare for discussion on budget modifications after the first of the year. She reported the Consortium will have a new Excellus Account Manager and will introduce him at a future meeting. Ms. Dowd reported the Nominations and Engagement Committee will meet in January to discuss committee vacancies.

Ms. Dowd said the final quotes for Directors and Officers and Errors and Omissions insurance policies were recently received and at this point the increase is only 9%; she noted this type of insurance has been experiencing 15% and greater increases recently. As a follow-up to a question raised at the last meeting as to whether other insurance coverage should be considered, Ms. Dowd said she looked into this, and the Consortium is adequately insured and does not need additional coverage at this time.

Catastrophic Claims Reserve

Ms. Dowd said the minutes of the last meeting reflect that members want to talk about what the appropriate level of risk should be and this will be included in the strategic planning discussion that will take place in January. The focus of this discussion will be on the policy for 2022 as to how the Reserve is funded.

Ms. Dowd said the difference in the resolution members received in the agenda packet from what was distributed yesterday is that the recent version outlines what would be included in the Reserve. Also, the Reserve is being suggested to be renamed a "Pool" because it would be active and used. A mechanism is also being recommended to take money out of the Pool and to put money back into it. She further explained that the difference between the two resolutions is the funding of the delta between a deductible at \$600,000, that premium, and a deductible at the \$1 million level was included in the initial resolution and is not in the second resolution.

RESOLUTION NO. 035 - 2021 – RESOLUTION TO RECOGNIZE AND ACCEPT THE 2020 CATASTROPHIC CLAIMS RESERVE

Ms. Dowd said this resolution was designed based on the conversation that took place at the last meeting to accept the 2020 annual audit which reflects the Reserve at the \$5,032,220 level which not only includes the \$4.5 million and interest which was in the original policy, but also the delta between the two premiums. At the last meeting the Committee decided it did not want to go back and revise the audit but there needed to be a paper trail to accept how that Reserve was calculated.

MOVED by Mr. Hart, seconded by Mr. Salton, and unanimously adopted by voice vote by members present.

WHEREAS, by Resolution No. 9 of 2020 the Board of Directors adopted policies with respect to the Catastrophic Claims Reserve for the 2020 Fiscal Year, and

WHEREAS, the adopted policy states the Catastrophic Claims Reserve would increase to \$4.5 million and "Interest income earned on funds held in the Catastrophic Claims Reserve shall be retained within same", and

WHEREAS, in 2021 it was identified that at the end of 2020 when calculating the Catastrophic Claims Reserve, financial reporting included not only the addition of interest income, but also savings from Stop Loss premiums from the \$600,000 level to the \$1 million level being retained in the Reserve (Per Board Policy - \$4,500,000.00, Stop-loss difference adjustment - \$498,115.00, Interest - \$34,105.00; Total = \$5,032,220.00), now therefore be it

RESOLVED, on recommendation of the Audit and Finance Committee, That the Executive Committee on behalf of the Board of Directors, retroactively acknowledges and approves the increase to the Catastrophic Claims Reserve for the 2020 Fiscal Year in the amount of \$498,115

from the unrestricted fund balance to bring the total of this reserve fund to \$5,032,220 as was reported in the 2020 audited financial statements of the Consortium.

* * * * *

At this time Ms. Dowd reviewed the following resolution labeled "Suggested Amendment" that was provided to members in advance of this meeting. This resolution contains proposed revisions to the version that was included in the agenda packet.

Ms. Dowd noted section six defines everything that is going into the Pool and noted if the delta of the two different premiums are not included in 2021 the Consortium will be below \$4.5 million because there will be a need to take funds from the Reserve/Pool. She said it has been suggested that be added to section six.

In response to questions by Mr. Salton as to why the Consortium doesn't have a lower Stop Loss deductible with a higher premium, Mr. Locey explained the history. He said over the years the Consortium had purchased Specific Stop Loss and that started at a \$250,000 deductible. Over the years the deductible was increased and to offset some of the risk associated with having a higher deductible the Catastrophic Claims Reserve was created. Initially, it was \$600,000 and then grew. Later, an idea about joining a collaborative for Stop Loss was brought forward due to questions that were raised as to why the Consortium was still spending a lot of money on Stop Loss insurance. The concept was to have a higher deductible and an interim corridor that would be self-insured. The thought was that if the Consortium was going to move from a \$600,000 deductible to a \$1 million Stop Loss policy, it would save close to \$.5 million in premium to take on a lot more risk.

Mr. Locey said it was decided at that time to increase the Reserve to \$4.5 million and there was also discussion of keeping interest in the Reserve and keeping the budget at the higher premium level so that if there was a need to revert back to a Stop Loss deductible of \$600,000 or below there would already be money built into the budget and rates; nothing additional would need to be done beyond the normal rate increase to cover that additional expense. Mr. Locey said at that time the Consortium was spending \$600,000 less than it otherwise would, and it would require approximately two percent of premium to build back in that expense. The thought was that the delta between the two premiums would flow into the Reserve and could be used to offset some of the higher dollar claims, and in the years where it wasn't used it could be banked.

Ms. Dowd said to fund the pool and have the premium reflect a higher level to fund the pool, it is suggested that there be a line item as an expense in the budget that may say "funding to Catastrophic Pool" to keep the pool at the \$4.5 million level. At this time she reviewed item nos. 4-6, explaining these are the items in the resolution that reflect substantive changes from the resolution contained in the initial draft.

Mr. Salton suggested wording be added to the resolution to reflect that the Consortium is buying higher deductible Stop Loss for a lower premium but is being protected by the creation of this pool, along with a rationale for its funding level.

Mr. Locey said when Stop Loss is put out to bid it is done with various different deductible options that can be evaluated. From that process the Committee will know the cost of the different policies at the different levels and will be able to clearly see the delta from that.

Mr. Barber responded to Mr. Salton's suggestion to add additional explanatory language to the resolution and said he believes the memorandum Mr. Locey provides to the Committee

each year provides a good explanation and adding further information to the resolution may cause confusion.

Ms. Drake questioned why no. 5 references 2023. Following a brief discussion, Ms. Dowd said this could be changed to 2022.

Mr. Locey provided an example of how the pool got to its current level and also noted there are currently four claimants that have each gone over \$.5 million at different levels that are anticipated to be paid out of the Catastrophic Claims Reserve at \$752,000 total for the year. This would bring the Reserve down to \$4.9 million at year-end which is slightly above where it was originally set at.

In response to a question by Mr. Salton, Mr. Barber said in 2021 the Consortium did not budget a premium that was at \$600,000 for Stop Loss; the budget was for \$1 million. The resolution allows for taking money from fund balance and through the budget process it can be anticipated that money will be used from the fund balance to increase the Catastrophic Claims Pool. At this time there is no funds being budgeted; the money that is being funded in the Pool is from unappropriated fund balance as what was originally intended. He said now the Consortium should be consistently planning for use of the risk pool and this is part of the process to do that.

Ms. Dowd said this discussion has helped to clarify the direction and suggested withdrawing the resolution at this time and allowing her to revise the resolution to further clarify the delta and how it will be funded and how that money is reserved to go into the Pool. It was suggested that the next revision also contain an illustration to show how it will be funded.

Mr. Locey summarized this process and said it results in journal entries being made on the year-end financials that will be reflected in the audited financial statement. Aside from the journal entries, what is being done is taking unspent premium funds that flowed through to the net income and is relocated to reserves or funds that are set for statutory or discretionary. It will reflect what will be in the unencumbered balance versus monies that are being used to cover an expense or to cover a liability or exposure.

There was consensus by the Committee to withdraw the resolution to allow Ms. Dowd to work with staff and Mr. Locey to bring a revised resolution back to the next meeting.
RESOLUTION WITHDRAWN.

(WITHDRAWN)

RESOLUTION NO. – 2021 - ~~AMENDMENT OF RESOLUTION NO. 9 OF 2020 “ADOPTION OF CHANGING CATASTROPHIC CLAIMS RESERVE TO POLICY” BY RESOLUTION CLARIFYING INTENT OF CATASTROPHIC CLAIMS SELF-INSURANCE POOL~~

WHEREAS, the Greater Tompkins County Municipal Health Insurance Consortium (“GTCMHIC”) has been issued a Certificate of Authority to operate as a New York State Insurance Law Article 47 Municipal Cooperative Health Benefit Plan, and

WHEREAS, Section 4707(a)(2) of the New York State Insurance Law requires the GTCMHIC to purchase “specific stop-loss coverage with a specific retention amount or attachment point not greater than four percent of the amount certified by a qualified actuary to represent the plan’s expected claims for the current fiscal year”, and

WHEREAS, the GTCMHIC Board of Directors issued a Request for Quote (RFQ) to licensed, reputable insurance carriers seeking quotes for specific stop-loss insurance at various deductible levels and with certain required coverage parameters, and

			2013	2014	2015	2016	2017	2018	2019
Traditional Stop-Loss Insurance	Specific Stop-Loss Deductible		\$300,000.00	\$300,000.00	\$400,000.00	\$400,000.00	\$450,000.00	\$600,000.00	\$600,000.00
	Stop-Loss Insurance Premiums Paid	+	\$592,381.65	\$720,784.39	\$642,080.30	\$766,281.18	\$738,819.42	\$442,185.54	\$693,190.30
	Stop-Loss Insurance Claims Paid	-	\$292,967.64	\$184,734.14	\$125,880.36	\$242,433.49	\$8,294.21	\$453,672.85	\$29,295.28
	Insurance Company Admin. & Profit	=	\$299,414.01	\$536,050.25	\$516,199.94	\$523,847.69	\$730,525.21	(\$11,487.31)	\$663,895.02
			2013	2014	2015	2016	2017	2018	2019
Catastrophic Claims Reserve	Beginning Balance	+	\$0.00	\$600,000.00	\$606,898.00	\$1,050,000.00	\$1,050,000.00	\$1,350,000.00	\$2,000,000.00
	Initial/Annual Investment	+	\$600,000.00	\$6,898.00	\$443,102.00	\$0.00	\$300,000.00	\$650,000.00	\$800,000.00
	Ending Balance	=	\$600,000.00	\$606,898.00	\$1,050,000.00	\$1,050,000.00	\$1,350,000.00	\$2,000,000.00	\$2,800,000.00

WHEREAS, the GTCMHIC Board of Directors passed Resolution No. 040-2020 authorizing the purchase of a specific stop-loss insurance policy from Excellus BlueCross BlueShield ("Excellus") with a policy period deductible of \$1,000,000 for all covered insured members, and

WHEREAS, ~~at the close of the Executive Committee has accepted the~~ 2020 Fiscal Year the ~~GTCMHIC maintained~~ a Catastrophic Claims Reserve Fund ~~Self-Insurance Pool~~ in the amount of \$5,032,220.00 to help protect the Consortium from large dollar claimant expenses which may occur from time to time, and

WHEREAS, the GTCMHIC Board of Directors recognizes the purchasing of specific stop-loss insurance at a \$1,000,000 deductible level creates a substantive risk to the Consortium and its financial stability and it needs a policy for balancing the CCR with the predicted risk, now therefore be it

RESOLVED, the GTCMHIC Board of Directors hereby rescinds resolution 009-2020 Catastrophic Claims Reserve policy and replaces it with the following and clarifies the intent of the Consortium's Catastrophic Self-Insurance Claims Pool for the 2022 Fiscal Year as follows:

1. During the 2013 Fiscal Year the Consortium established a Catastrophic Claims Reserve in the amount of \$600,000 to help protect the Consortium from financial harm caused by large dollar claimants as the Consortium increased the Specific Stop-Loss Insurance Deductible from \$250,000 to \$300,000.
2. Over the years, as the Consortium Board of Directors made the decision to accept more risk by periodically raising the stop-loss insurance deductible. In concert with those decisions, the Consortium Board of Directors also periodically increased the amount of funds held in the Catastrophic Claims Reserve as noted in the chart below:
3. On June 25, 2020, the Board of Directors approved Resolution 009-2020, effectively converting the Catastrophic Claims Reserve into the Catastrophic Claims a Self Insurance Pool as the Board wanted to use this reserve fund to offset high-cost claims that reach a captive layer between \$500,000 and the stop-loss policy deductible. ~~operate on a more active basis. The Resolution 009-2020 stated that~~

funds used to seed the Catastrophic ~~Self-Insurance~~ Claims Reserve Pool was the combination of the \$4,500,000 which was set by Board resolution in the Catastrophic Claims Reserve on that date; ~~\$498,000 which represented the delta between the specific stop-loss insurance budgeted premium at the \$600,000 deductible policy and the actual cost of the Excellus specific stop-loss insurance policy with a \$1,000,000 deductible;~~ and the \$34,105 in interest earned on the funds in this account during the 2020 Fiscal Year.

4. ~~Starting with~~ For the 2021 and 2022 Fiscal Years, the Catastrophic Claims Reserve ~~Self-Insurance Pool~~ will be funded with the combination of the closing balance in the fund from the prior year plus; ~~the delta between the specific stop-loss insurance budgeted premium at the \$600,000 deductible policy and the actual cost of the specific stop-loss insurance policy with a \$1,000,000 deductible as determined by the annual request for quote process;~~ plus any interest earned on the funds in the Pool during the fiscal year.
5. Going forward for 2023 and beyond, Catastrophic Claims Reserve will be renamed to be the Catastrophic Claims Self-Insurance Pool.
6. The Catastrophic Claims Self-Insurance Pool will be funded through the following process:
 - a) The Consortium's Stop-Loss Insurance budget line will be for a policy with a \$600,000 deductible.
 - b) Should the Executive Committee decide to purchase a Stop-Loss policy with a higher deductible, the difference in premium between the budgeted \$600,000 deductible premium and the actual premium will be considered for funding of the Catastrophic Claims Self-Insurance Pool.
 - c) The Executive Committee, on advice from Audit and Finance Committee, will consider changing the amount of the Catastrophic Claims Self-Insurance Pool at the start of the budget year. The information to be used in that determination shall include at least the following:
 - i) an assessment of the level of risk this "pool" is covering;
 - ii) an assessment of the amount of funds that have and will be withdrawn from the previous year's high-cost claim activity in the captive layer between \$500,000 and the Stop-Loss policy deductible;
 - iii) the projected year-end Unappropriated Fund Balance
 - d) Any interest earned by the Catastrophic Claims Self-Insurance Pool fund will be credited to the fund.
7. ~~Also starting with the 2021 Fiscal Year,~~ As stated in resolution 009-2020 and going forward, funds will be transferred out of the now Catastrophic Claims Self-Insurance Pool to the Consortium's general operating fund to reimburse any covered member's claims costs, per Excellus BlueCross BlueShield's Specific Stop Loss Report, which exceed \$500,000 but are less than the Stop-Loss deductible ~~\$1,000,000~~ during the specific stop-loss insurance policy period.
 - a. The only exception, if the Consortium opted for a lower stop-loss insurance deductible, will be for any specific claimants who would have had a "laser" attached to them. We will continue the practice of applying the lasered deductible to those individuals. For example, if an individual has a laser deductible of \$750,000, we will not utilize or transfer any funds from the

Catastrophic Claims Self Insurance Pool until that individual were to incur claims above \$750,000, but less than \$1,000,000.

8. To trigger the claims transfer, said claims must be incurred during the that claim's Calendar Year and must be paid in the Calendar Year and the first 3-months of the subsequent Calendar Year.
9. Any fund transfers from the Catastrophic Claims Self-Insurance Pool to the Consortium's general operating fund will occur no more frequently than on a quarterly basis and/or no less than once per year with the timing of said transfers occurring at the discretion of the Consortium's Treasurer as directed by the Consortium's Chief Fiscal Officer.
10. Each year the GTMCHIC Board of Directors will review this policy as part of the overall budget process to ensure it continues to meet the needs of the Consortium.

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RESOLUTION NO. 027 – 2021 - AUTHORIZE PURCHASE OF STOP LOSS INSURANCE FOR 2022 WITH EXCELLUS BLUECROSS BLUESHIELD

Ms. Dowd said Locey and Cahill went to several insurance companies and all but one of them declined to quote because the Consortium is now self-funded up to the \$1 million level; therefore, premiums are significantly lower and they would not be able to complete with the quote received by Excellus. She said the percent of increase is four percent which is lower than anticipated. Mr. Hart asked if Mr. Locey foresees a situation in the future where Excellus will also not quote at this level. Mr. Locey said although he doesn't see Excellus not quoting at this level he can foresee their rate accelerating if there is a situation where other carriers can't match their rate. He noted that for other carriers this is their primary business and this is a secondary business for Excellus.

MOVED by Mr. Hart, seconded by Mr. Thayer, and unanimously adopted by voice vote by members present.

WHEREAS, the Consortium must purchase stop loss insurance, as required by Section 4707 of New York State Insurance Law, and

RESOLVED, on recommendation of the Audit and Finance Committee, That the Board of Directors authorizes the purchase of the Stop Loss insurance policy with a deductible of \$1 million for the policy period January 1, 2022 to December 31, 2022 with Excellus BlueCross BlueShield to include claims incurred from January 1, 2022 thru December 31, 2022 and paid during the period of January 1, 2022 thru March 31, 2023.

RESOLVED, further, That the Plan Consultant is directed to provide the Executive Director with a copy of said policy.

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RESOLUTION NO. 034 – 2021 - ADOPTION OF AMENDED INVOICE PAYMENT PROCEDURE (REPLACING PROCEDURE ADOPTED DECEMBER 10, 2019 BY THE AUDIT AND FINANCE COMMITTEE

Ms. Dowd said now that the Consortium has Finance staff it is relying less on outside consultants. The previous procedure has been revised to include the creation of an abstract for

this Committee to approve each month. She provided an overview of the proposed policy and noted a change to allow an additional check signer within the Department with a reconciliation to be done by the Treasurer. She said this has been reviewed by the auditors and they found no issues.

MOVED by Mrs. Shawley, seconded by Mr. Salton, and unanimously adopted by voice vote by members present.

WHEREAS, the Operations and Audit and Finance Committees were presented with recommendations of Consortium staff for streamlining current invoice payment procedures, and

WHEREAS, the Operations and Audit and Finance Committees have reviewed and recommended an amended Invoice Payment Procedure be approved by Executive Committee, now therefore be it

RESOLVED, on recommendation of the Operations and Audit and Finance Committees, That the Executive Committee, on behalf of the Board of Directors, hereby approves the following amended Invoice Payment Procedure effective January 1, 2022 to replace the procedure approved December 10, 2019 by the Audit and Finance Committee.

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GTCMHIC Invoice Approval Procedure
(Adopted December 15, 2021; effective January 1, 2022)

All invoices will be in the Monthly Financial Abstract Report submitted by the Finance Department for review at the Audit and Finance Committee Meeting. The Monthly Financial Abstract Report will detail monthly and year-to-date expenditures. The primary purpose of this report is to enable the Audit and Finance Committee to initiate appropriate action and to monitor and approve expenditures against budget line items and contractual agreements.

The Audit and Finance Committee will approve The Monthly Financial Abstract Report for payment and all invoices will be processed for payment according to the following procedures.

Previously Approved Expenditures Ready for Payment

Invoices listed below are considered ready for payment when received and will be entered for Payment by the Finance Department without further approval as assigned by the budget process or contract. The Monthly Financial Abstract Report will provide details for all pre-payments made for the following:

- Claims invoices and administrative fees from our third-party benefit administrators (medical and prescription drug) including flu clinic fees,
- State and Federal taxes and fees,
- Stop-loss,
- Business Insurance,
- Tompkins County invoices,
- Town of Ithaca Payroll invoices,
- Town of Ithaca Rent invoices.
- Contract progress payment invoices (e.g., Actuary, Claims Auditor, Bonadio,)
- Invoices for non-fixed price contract payment under \$10,000 (e.g., Consortium Consultant, newsletter production, and printing,)

- Invoices for supplies, expense reimbursements and day to day operations under \$10,000.

Audit and Finance Committee Approval Needed

Invoices not listed as Previously Approved for Payment shall be included in the Monthly Financial Abstract Report for approval at the next Audit and Finance Committee meeting.

- Invoices for non-fixed price contract payment over \$ 10,000 (e.g., financial auditor);
- Invoices for services not previously approved by contractual arrangement,
- Contract final invoices (e.g., Actuary, Auditor, Claims Auditor).

If the Audit and Finance Committee will not be meeting by the time the invoice becomes due, the Executive Director will first petition the contractor for a time extension until the Audit and Finance Committee meets. Should that petition be denied, the invoice must be approved by the Board Chair and reported to the Committee at the next meeting.

Board Chair Approval Needed

Any reimbursements made to the Executive Director must be approved by the Board Chair and will be included in the Monthly Financial Abstract Report at the next Audit and Finance Committee meeting.

Payment of Approved Invoices

- Medical and Prescription Claims/Admin Fee invoices will be paid via ACH as required by contract terms,
- Credit Card statement will be paid in advance to have payment received prior to due date.

The Monthly Financial Abstract Report will be presented at each Audit and Finance Committee meeting for review. All invoices approved by the Audit and Finance Committee will have checks prepared by the Finance Department and signed by the Executive Director. If the Executive Director is not available, then the Treasurer or Chief Financial Officer will sign the checks for payment.

Reconciliation

After the bank statements have been received the Finance Department will reconcile all related financial statements and send to the Treasurer for final approval.

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RESOLUTION NO. 031 - 2021 – RESCINDING RESOLUTION NO. 8 OF 2017 “DELEGATING RESPONSIBILITY FOR APPROVAL OF INDEPENDENT FINANCIAL AUDIT”

Explanation: This resolution acknowledges the changes that have occurred in the organization since Res. No. 8 of 2017 was adopted. That Resolution delegated authority to the Audit and Finance Committee with responsibility for audit approval and this was reconfirmed in the Executive Committee’s Bylaws. That resolution also directed that the audit be reported to the Board of Directors at its next scheduled meeting. With the change in the Board meeting schedule

there are more timely ways to get audit information to Directors than wait and present it at the annual meeting. With respect to the audit, this resolution only impacts how the approved audit is reported to the Board, the authority of the AFC to accept and approve the audit is retained by the AFC as stated in the 2nd Resolved.

MOVED by Mr. Thayer, seconded by Mr. Snow, and unanimously adopted by voice vote by members present.

WHEREAS, prior to the new governance structure that became effective in 2021 the Board of Directors delegated responsibility for specific functions to the Audit and Finance Committee, and

WHEREAS, changes to Consortium operations have occurred under the new structure and warrant the need to amend prior resolutions delegating specific responsibilities, and

WHEREAS, due to the reduction in Board of Director meetings it may no longer be timely to present a report to the full Board in person on the approved audit, now therefore be it

RESOLVED, on recommendation of the Audit and Finance Committee, That Resolution No. 8 of 2017 "Provide Audit and Finance Committee the Authority to Approve the Annual Independent Financial Audit", is hereby rescinded,

RESOLVED, further, That the Audit and Finance Committee shall maintain authority to approve the Annual Independent Financial Audit with notice provided to the Board of Directors,

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Financial Report

Mr. Locey reviewed the Budget Performance Report through November 30, 2021. He said in terms of revenue the Consortium continues to be approximately 2.85% below budget on overall premium income. This is primarily due to members moving to lower-cost benefit plans, particularly Medicare-age retirees at Tompkins County and many members from large employers moving into the Platinum Plan. He reported year-to-date the Consortium has received approximately \$1.9 million in prescription drug rebates with one additional payment anticipated before year-end. There was \$1.7 million budgeted for rebate income; the Consortium will end the year within the \$2.3 million range; this will greatly help in balancing the income budget. He noted that the Consortium receives approximately four percent of its revenue from prescription drug rebates.

With respect to expenses, Mr. Locey reported prescription drug expenses are overbudget for the year and medical claims expense is slightly under budget. Overall, total expenses are slightly one percent above budget. He reviewed the distribution of expense chart and said \$.95 of each dollar goes towards the payment of member benefits.

Mr. Locey reviewed a summary of catastrophic claims and said for the first time the Consortium has five claimants over \$.5 million. The only year there was more than one was in 2018 when there were three.

Mr. Locey responded to Ms. Drake as to how the movement to different plans by members will be addressed in the budget. He said over the last couple of years we have put together a modified budget after the new year; this year the modified budget will include adjustments based on premium experience. He said there may be a little compression at the beginning of 2002 due

to losses outpacing premium, but this should level off as the year proceeds. This will be taken into consideration when looking at the modified budget and can be discussed at the next meeting.

Mr. Locey recognized Ms. Apalovich for her expediency in getting information to Locey and Cahill which allowed information to be provided to members in advance of this meeting.

Accounts Receivable

Ms. Apalovich said there are currently no accounts outstanding at this time.

Investment Management Request for Proposals

Ms. Dowd said she and Ms. Apalovich are preparing to undertake a bid process for investment management services. Although there are mixed opinions of whether this is a good time to issue an RFP for this service, she presented the Committee with a proposal to proceed with this process by establishing a subcommittee.

The following individuals offered to serve on an RFP Review Subcommittee:

Rordan Hart
Peter Salton
Steve Thayer
Rick Snyder, Treasurer
Steve Locey, Consultant

Mr. Barber suggested the Committee decide on the weighting criteria before making any decision on proposals.

Committee Organization

The Committee agreed to meet the fourth Tuesday of each month in 2022 at 3 p.m. with no meeting in January.

Mr. Salton thanked Mr. Cook for his service to the Consortium and for serving as one of his mentors in this organization.

Next Agenda Items

The following item will be included on the December agenda:

- Discussion of a modified 2022 Budget;
- Continued discussion of Catastrophic Claims Reserve and draft resolution

Adjournment

The meeting adjourned at 4:28 p.m.

Respectfully submitted by Michelle Cocco, Clerk of the Board

Executive Director Report December 2021

Executive Director Update

Well, here we are at the end of the year already making plans for the next one to start. So much happens in the last quarter that it is hard to summarize everything that is going on. I encourage you to also read minutes from our committees for more in-depth information.

This week another milestone happened for the Consortium with the resignation of Don Barber as our Executive Consultant. As you know, Don was the sparkplug that ignited Tompkins County to embark on a shared service that included starting a Health Care Consortium. Eleven years later and we are realizing the mission and vision of our original pioneers. Sincere appreciation and gratitude go out to our founding father as he exits at the end of the year to spend more time with his family and farm.

Tompkins County helped us post a press release regarding our new members and recent territory expansion. A copy of the press release is included in the Executive Committee agenda packet and can also be viewed on our [website](#).

We are seeing several larger employers migrating away from the traditional Classic Blue Indemnity Plan to either Platinum or the Medicare Supplement Plans. This has caused our premium levels to decline, but it should also help control some of our costs. In the fourth quarter we have seen the City of Ithaca and Tompkins County negotiate offering the Platinum Plan to at least four different labor groups.

Don't forget that new ID cards will be issued to all subscribers and their dependents at the end of December to be in homes by January 1st. The new cards will include all required information from a recent government mandate. The biggest change for the Consortium will be the inclusion of ProAct coverage on the Excellus ID cards. Your employees will be able to show just one card going forward for all their medical and prescription needs.

Many members have also received statements from ProAct regarding prescription drug formulary changes slated for 2022. As you may know we receive updates from ProAct twice a year regarding formulary changes. Benefit Clerks have been notified about these letters and suggestions for how to help their subscribers navigate these changes.

Audit and Finance Committee

The Audit and Finance Committee will continue conversations on the design and use of the Catastrophic Claims Reserve. This reserve is to help offset high claims costs above \$500k and below our current Stop Loss insurance deductible of \$1M. Discussions will determine how this reserve is funded and the mechanism used to reimburse for high-cost claims experience.

Talks will commence on putting together an RFP Investment Management committee to review the market on advisors available to support our investment management needs. The RFP is slated to go out early in 2022 for review in the second quarter to determine if and when a change to a new manager is warranted.

A question came up at our Annual Board Meeting regarding administrative costs for staff and independent contractors/consultants. A historical summary of those costs is attached to this report for your review. Long-term business planning discussions will help determine the level we feel comfortable having for these fees which are currently and have historically been less than 2% of our overall expenses.

Operations Committee

The Operations Committee bid farewell to one of our members and 2022 Chairman elect Chris Wagner from Seneca County. Recommendations for a new Chair will be discussed at the January Nominations and Engagement Committee meeting.

A new policy was reviewed and resolved to be sent to the Audit and Finance Committee on how to approve, make payments, and reconcile accounts. Now that the Consortium has a full-time in-house Finance Department there is a desire to bring check cutting in house, provide the Executive Director with check signing authority, and have the Treasurer remain involved with reconciling bank statements. We hope to advance this policy to the Executive Committee with Audit and Finance Committee Support.

Nominations and Engagement Committee

The Nominations and Engagement Committee will meet again in January to secure candidates to fill vacancies created due to resignations or election results. If you are interested in playing a more active role in the Consortium, now is the time to volunteer for one of our committee openings. Please contact me for additional information.

Claims and Appeals Committee

The Claims and Appeals Committee will meet early in the first quarter of 2022 to review the BMI Audit results for our Prescription Benefit Manager. The audit is just about complete and Proact will be sent the results for comment by the end of the year. Once the audit is ready for review a Committee meeting will be scheduled.

The Joint Committee on Plan Structure and Design

The Committee had a comprehensive presentation made by our new CanaRx account representative. We learned the potential for savings to the Consortium and members by using CanaRx to fill maintenance medications safely through their expanded program. CanaRx is rebranding and are now co-branding with the Consortium, check out their new website by clicking [here](#).

The Joint Committee continues to help the Consortium build their Wellness Program. The Maintain Don't Gain Challenge is continuing through the holiday season and important information regarding beating the winter blues has been sent to Benefit Clerks.

The Joint Committee has endorsed the Consortium creating a Facebook page to promote Wellness and other information directly to members and subscribers.

Long-Term Business Planning

Members of the Executive Committee have started compiling a list of topics to explore as they continue discussing long-term business planning. A meeting in early January will commence the review of these initiatives and explore ways to create a plan that will address our long-term business needs. Please send any topics you would like discussed to my attention.

The December Newsletter will be ready for distribution the week of December 13 th .
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Respectfully submitted by Elin R. Dowd, Executive Director, December 9, 2021.



Greater Tompkins County Municipal Health Insurance Consortium

125 East Court Street • Ithaca, New York 14850 • (607)274-5590
www.healthconsortium.net • consortium@tompkins-co.org

"Individually and collectively we invest in realizing high quality, affordable, dependable health insurance."

RESOLUTION NO. 004-2018 - ADOPTION OF GREATER TOMPKINS COUNTY MUNICIPAL HEALTH INSURANCE CONSORTIUM INVESTMENT POLICY

MOVED by Mr. Cook, seconded by Mr. Baxter, and unanimously adopted by voice vote by members present.

WHEREAS, Section E(9) of the Municipal Cooperation Agreement of the Greater Tompkins County Municipal Health Insurance Consortium ("GTCMHIC" or "Consortium"), provides that the Board of Directors of the Consortium shall "establish administrative guidelines for the efficient operation of the Plan"; and

WHEREAS, Section J(5) of the Municipal Cooperation Agreement provides that the "Chief Fiscal Officer may invest moneys not required for immediate expenditure in the types of investments specified in the General Municipal Law for temporary investments or as otherwise expressly permitted by the Superintendent"; and

WHEREAS, Section 4706(b) of the New York State Insurance Law provides that the Consortium's "reserve funds and surplus account" may be invested "in obligations specified in the general municipal law or education law (as applicable) for investment of moneys in reserve funds or as otherwise expressly permitted by the superintendent"; and

WHEREAS, the Consortium desires to adopt a formal "Investment Policy" whose primary objectives in priority order, are: (1) to conform with all applicable federal, state and other legal requirements; (2) to adequately safeguard principal; (3) to provide sufficient liquidity to meet all operating requirements of the Consortium; and (4) to obtain a reasonable rate of return.

now therefore be it

RESOLVED, that the Audit and Finance Committee hereby recommends that Board of Directors:

1. Adopts the *Investment Policy for the Greater Tompkins County Municipal Health Insurance Consortium* (the "Investment Policy") attached hereto as Exhibit "A"; and
2. Delegates to the Consortium's Chief Financial Officer the authority to: (i) administer the Consortium's investment program (the "Investment Program") pursuant to the terms and conditions of the Investment Policy; and (ii) to develop, recommend, and oversee such written procedures as are necessary for the operation of the Investment Program in compliance with the Investment Policy and all applicable federal and state laws; such written procedures becoming effective only upon approval by the Board.

* * * * *

STATE OF NEW YORK)
) ss:
COUNTY OF TOMPKINS)

I hereby certify that the foregoing is a true and correct transcript of a resolution adopted by the Greater Tompkins County Municipal Health Insurance Consortium on March 22, 2018.


Michelle Pottorff, Administrative Clerk

EXHIBIT "A"

INVESTMENT POLICY

FOR

GREATER TOMPKINS COUNTY MUNICIPAL INSURANCE CONSORTIUM

Article I

Purpose and Objectives

A. The purpose of this Investment Policy (the "**Policy**") is to set forth the parameters within which the funds of the Greater Tompkins County Municipal Health Insurance Consortium (the "**Consortium**") are to be managed. In methods, procedures, and practices, the Policy formalizes the framework for the Consortium's investment activities that must be exercised to ensure effective and judicious management of its funds.

B. This Policy applies to all moneys and other financial resources of the Consortium with regard to depositing and investing its assets, and the Policy shall represent the investment constraints of all invested assets.

C. The primary objectives for implementation of the Policy, in priority order, are: (1) to conform with all applicable federal, state and other legal requirements; (2) to adequately safeguard principal; (3) to provide sufficient liquidity to meet all operating requirements of the Consortium; and (4) to obtain a reasonable rate of return.

Article II

Delegation of Authority

A. Pursuant to Section J(5) of the Municipal Cooperation Agreement of the Consortium,¹ the Board of Directors of the Consortium (the "**Board**") may delegate certain responsibilities set forth herein to the Chief Fiscal Officer of the Consortium (the "**CFO**").

B. As set forth in Article II, Section (A) above, the Board hereby delegates to the CFO, the authority to administer the Consortium's investment program (the "**Investment Program**"), and to establish written procedures for the operation of the Investment Program consistent with this Policy, and all applicable federal and state laws². However, any such written procedures shall become effective only upon approval by the Board.

Article III

Standards of Care

A. Prudence.

1. Each person responsible for managing and investing the Consortium's financial assets shall act in good faith and with the care an ordinary prudent person in a like position would exercise under similar circumstances. When making investment and management decisions, the primary objectives for implementation of the Policy set forth in Article I, Section (C) above shall be considered.

¹ See Section J(5) of the 2014 Amendment to the Municipal Cooperation Agreement.

² See Section 10 and 11 of the New York State (the "**State**") General Municipal Law, and Section 4706(b) of the State Insurance Law.

2. In making decisions regarding management and investment of the Consortium's financial assets, the following non-exclusive factors shall be considered, if relevant:

- i. general economic conditions;
- ii. the possible effect of inflation or deflation;
- iii. the role that each investment or course of action plays within the overall investment portfolio of the Consortium;
- iv. the expected total return from income and the appreciation of its investments;
- v. other resources of the Consortium;
- vi. the needs of the Consortium and the specific funds to make distributions and to preserve capital; and
- vii. an asset's special relationship or special value, if any, to the purposes of the Consortium.

B. Ethics and Conflicts of Interest. Officers, members, and employees of the Consortium involved in the investment process shall refrain from personal activity that could conflict with the proper execution and management of the Investment Program, or that could impair their ability to make impartial investment decisions. Officers, members, and employees involved in the investment process shall disclose to the Consortium's Executive Director and the Board any material financial interests they have in financial institutions that conduct business with the Consortium, and shall further disclose any personal financial/investment positions that could be related to the performance of the Consortium's investment portfolio. Officers, members, and employees involved in the Investment Program shall refrain from undertaking any personal investment transactions with the same individual with whom business is conducted on behalf of the Consortium; and shall be bound by the Consortium's Code of Ethics Policy.

Article IV **Suitable and Authorized Investments**

A. The following investments are permitted by the Policy:

1. U.S. Treasury & Government Guaranteed. Direct obligations of the United States of America and securities fully and unconditionally guaranteed as to the timely payment of principal and interest by the United States of America, provided that the Full Faith and Credit of the United States of America must be pledged to any such direct obligation or guarantee ("**Direct Obligations**").

2. Municipals. Obligations issued or guaranteed by any of the following:

- i. Obligations of the State; or
- ii. With the approval of the State Comptroller, obligations issued pursuant to Section 24.00 or 25.00 of the State Local Finance Law (i.e. Tax Anticipation Notes and Revenue Anticipation Notes), by any municipality, school district or district corporation in the State, other than the Consortium.

3. Time Deposits. Special time deposit accounts, or non-negotiable certificates of deposit ("CD") in a State "banking institution"³ or federally chartered banks, savings and loans or credit unions in excess of insured amounts which are fully collateralized with securities in accordance with State Law.

Article V

Investment Parameters

A. Diversification. Investments of funds of the Consortium shall be diversified to limit the risk of loss resulting from the concentration of assets in a specific type of investment, specific maturity, specific issuer or specific sector. The diversification strategy shall be reviewed as frequently as circumstances require, but at least annually.

The following diversification parameters have been established:

Sector Type	Sector Max (%)	Issuer Max (%)	Ratings Requirement ¹	Max Maturity
US Treasury and Government Guaranteed	100%	N/A	N/A	10 Years ²
Municipals	30%	5%	Top Three Ratings Categories	10 Years
Time Deposits and Certificates of Deposit	50%	FDIC Limit	N/A, so long as FDIC-guaranteed	5 Years
¹ By a Nationally Recognized Statistical Ratings Organization ("NRSRO")				
² Government guaranteed mortgage backed securities shall have a maximum weighted average life of 10 years				

B. Subsequent Credit Downgrades. In the event of a downgrade of a security below the minimum credit standards for a new investment of that security, the CFO shall evaluate the downgrade on a case-by-case basis, and promptly notify the Board and recommend a course of action. If the CFO and/or the Board has retained a professional investment advisor, the investment advisor shall promptly notify the CFO of any downgrade below the minimum credit standards and recommend a course of action.

Article VI

Investment Institutions

A. All financial institutions and dealers with which the Consortium transacts business shall be creditworthy, and have an appropriate level of experience, capitalization, size and other factors that make the financial institution or the dealer capable and qualified to transact business with the Consortium.

B. The CFO shall evaluate the financial position of all financial institutions and dealers with which the Consortium transacts business, and maintain a listing of proposed depositories, trading partners, and custodians. Recent Reports of Condition and Income (i.e. call reports) shall be obtained for proposed banks, and security dealers that are not affiliated with a bank, shall be required to be classified as reporting dealers affiliated with the New York Federal Reserve Bank, as "primary dealers."

Article VII

³ As such term is defined in Section 9-r of the State Banking Law.

Qualifications of Broker-Dealers

A. The Consortium shall maintain a list of approved security broker-dealers selected by a process of due diligence, which process shall require all broker-dealer candidates to supply the following:

1. Audited financial statements demonstrating compliance with State and federal capital adequacy guidelines;
2. Proof of certification from the Financial Industry Regulatory Authority;
3. Proof of State Registration required by the State General Municipal Law;
4. Evidence of adequate insurance coverage; and
5. Certification and acknowledgement of having read, understood and agreeing to comply with this Policy.

B. Approved security broker-dealers may include primary dealers or regional dealers registered with the Securities Exchange Commission ("**SEC**") that comply with SEC net capital standards under Section 15c3-1 of the Securities Exchange act of 1934 (the "**Exchange Act**").

C. The Consortium is authorized to employ an external investment advisor that shall maintain its own list of approved and qualified security broker-dealers, subject to the same process of due diligence set forth in Article VII, Section (A) above.

Article VIII **Competitive Transactions**

A. To ensure that transactions meet best execution requirements, the Consortium has established the following procedures:

1. The CFO or the investment advisor, to the extent applicable, shall seek to obtain at least three (3) competitive bids or offers on any necessary contract related to the purchase and sale of investments; and
2. The CFO or the investment advisor, to the extent applicable, shall document any competitive bids, offers, or quotations received in reliance on this Article.

B. If the Consortium hires an external investment advisor as permitted by Article VII, Section C of this Policy, the advisor must retain documentation demonstrating compliance with this Article, to the extent it is applicable, and provide such documentation to the Consortium upon request.

Article IX **Securing Deposits and Investments**

A. All deposits and investments at a bank or trust company, including all demand deposits, certificates of deposit and special time deposits (hereinafter, collectively, the "**Deposits**") made by officers of the Consortium that are in excess of the amount insured under the provisions of the Federal Deposit Insurance Act, including pursuant to a Deposit Placement Program in accordance with applicable law, shall be secured by:

1. A pledge of “**eligible securities**”⁴ with an aggregate market value that is at least equal to the aggregate amount of the Deposits;
2. A pledge of a pro rata portion of a pool of eligible securities, having in the aggregate a market value at least equal to the aggregate amount of the Deposits;
3. An “**eligible surety bond**”⁵ payable to the government for an amount at least equal to one hundred percent (100%) of the aggregate amount of the Deposits and the agreed-upon interest, if any, executed by an insurance company authorized to do business in the State, whose claims-paying ability is rated in the highest rating category by at least two (2) nationally recognized statistical rating organizations;
4. An “**eligible letter of credit**,”⁶ payable to the Consortium as security for the payment of one hundred forty percent (140%) of the aggregate amount of the Deposits and the agreed-upon interest, if any. An “eligible letter of credit” shall be an irrevocable letter of credit issued in favor of the Consortium for a term not to exceed ninety (90) days, by a qualified bank (other than the bank where the secured money is deposited). A qualified bank is either one whose commercial paper and other unsecured short-term debt obligations (or, in the case of a bank which is the principal subsidiary of a holding company, whose holding company’s commercial paper and other unsecured short-term debt obligations) are rated in one (1) of the three (3) highest rating categories by at least one (1) nationally recognized statistical rating organization, or one that is in compliance with applicable federal minimum risk-based capital requirements; and/or
5. An irrevocable letter of credit issued in favor of the Consortium by a federal home loan bank whose commercial paper and other unsecured short-term debt obligations are rated in the highest rating category by at least one (1) nationally recognized statistical rating organization, as security for the payment of one hundred percent (100%) of the aggregate amount of the Deposits, and the agreed-upon interest, if any.

Article X

Safekeeping and Custody

A. **Third-Party Safekeeping.** All investment securities purchased for or held as collateral on deposits or investments shall be held by an independent third-party safekeeping institution, such as a bank, trust company, or third-party custodial agent who may not otherwise be a counter-party to an investment transaction, selected by the Consortium (the “**Independent Safekeeping Institution**”), and subject to security and custodial agreements as follows:

1. Consistent with Section 10(3)(a) of the State General Municipal Law, the security agreement shall provide that eligible securities are being pledged to secure the Deposits together with agreed-upon interest, if any, and any costs or expenses arising out of the collection of the Deposits upon a default. It shall also provide the conditions under which the securities held may be sold, presented for payment, substituted or released and the events of default which will enable the local government⁷ to exercise its rights against the pledged securities. Such agreement shall include all provisions deemed necessary and sufficient to secure in a satisfactory manner the local government’s interest in the collateral.

⁴ As defined in Section 10(1)(f) of the State General Municipal Law, and as further set forth in Schedule “A” attached hereto and made a part hereof.

⁵ See State General Municipal Law Section 11(1)(g).

⁶ See State General Municipal Law Section 11(1)(h).

⁷ As such term is defined in Section 10(1)(a) of the State General Municipal Law.

2. The custodial agreement shall provide that the pledged securities will be held by the Independent Safekeeping Institution as agent of, and custodian for, a local government, and will be kept separate and apart from the general assets of the Independent Safekeeping Institution, and it shall also provide for the manner in which the Independent Safekeeping Institution shall confirm the receipt, substitution or release of the collateral. Such agreement shall further provide for the frequency of revaluation of collateral by the Independent Safekeeping Institution, and the substitution of collateral when a change in the rating of a security causes ineligibility pursuant to the State General Municipal Law.⁸

4. The security and custodial agreements shall also include all other provisions necessary to provide the Consortium with a perfected security interest in the eligible securities and to otherwise secure the local government's interest in the collateral, and may contain other provisions that the Board deems necessary.

B. Internal Controls. The CFO shall establish a system of internal controls, which shall be documented in writing. The internal controls shall be designed to prevent the loss of funds arising from fraud, employee error, and misrepresentation by third-parties, unanticipated changes in financial markets, or imprudent actions by employees and officers of the Consortium. The system of internal controls shall further provide a satisfactory level of accountability based upon records incorporating the description and amounts of investments, the fund(s) for which they are held, the place(s) where such funds are kept, and other relevant information, including dates of sale or other dispositions and amounts realized. In addition, the internal control procedures shall describe the responsibilities and levels of authority for key individuals involved in the Investment Program.

Article XI **Performance Standards/Evaluation**

A. Assets will be managed in accordance with the parameters specified within this Policy. Performance should be compared to a relevant benchmark or benchmark(s), at regular intervals, but at least on a quarterly basis.

B. Prior to any reporting period, a performance benchmark or benchmarks will be established by the Board. The benchmark(s) shall be reflective of the actual securities being managed and risks undertaken; and the benchmark(s) shall have a similar weighted average maturity and credit profile as the portfolio.

Article XII **Reporting/Disclosure**

A. The CFO shall prepare or have prepared an investment report each quarter, including a summary that provides an analysis of current investments (the "**Investment Report**"). The Investment Report shall be prepared in a manner that will allow the Board to ascertain whether investment activities during the reporting period have conformed to the Policy.

B. The Investment Report shall include, at a minimum, the following:

1. An asset listing showing par value, cost and accurate and complete market value of each security, type of investment, issuer, and interest rate;
2. Average maturity and duration of investments;
3. Maturity distribution; and
4. Average portfolio credit quality.

⁸ See Section 10(3)(a) of the State General Municipal Law.

Article XIII
Review of Policy

The Board shall review the Policy at least annually, within one hundred twenty (120) days of the end of the fiscal year, to reflect developments affecting the Consortium's finances and activities, and to ensure its consistency with the primary objectives set forth in Article I, Section (C) herein.

Article XIV
Policy Adoption

This Policy is adopted by the Board this 22nd day of March, 2018.

SCHEDULE “A”

Schedule of Eligible Securities for Collateralizing Deposits and Investments in Excess of FDIC Coverage ⁹

“Eligible Securities” for Collateral	For purposes of determining aggregate “market value,” eligible securities shall be valued at these percentages of “market value”:
(i) Obligations issued, or fully insured or guaranteed as to the payment of principal and interest, by the United States of America, an agency thereof or a United States government-sponsored corporation.	100%
(ii) Obligations issued or fully guaranteed by the International Bank for Reconstruction and Development, the Inter-American Development Bank, the Asian Development Bank and the African Development Bank.	100%
(iii) Obligations partially insured or guaranteed by any agency of the United States of America, at a proportion of the market value of the obligation that represents the amount of the insurance or guaranty.	100%
(iv) Obligations issued or fully insured or guaranteed by the State of New York, obligations issued by a municipal corporation, school district or district corporation of this State or obligations of any public benefit corporation which under a specific State statute may be accepted as security for deposit of public moneys.	100%
(v) Obligations of counties, cities and other governmental entities of another state having the power to levy taxes that are backed by the full faith and credit of such governmental entity and rated in one of the three highest rating categories by at least one nationally recognized statistical rating organization.	100% if rated in the highest category; 90% for 2nd highest; 80% for 3rd highest.

⁹ See State General Municipal Law Subsections (10)(1)(f)(i)-(iv) and (vii).

MINUTES - DRAFT
Investment Management RFP Subcommittee
January 25, 2022
Remote by Zoom

Present: Rordan Hart, Steve Thayer, Peter Salton (excused at 4:07 p.m.)
Staff: Elin Dowd, Executive Director; Michelle Cocco, Clerk of the Board; Teri Apalovich, Finance Manager; Paul Pelton, Rob Spenard, Locey and Cahill; Rick Snyder, Treasurer; Judy Drake, Board Chair

Call to Order

Mr. Hart, Chair, called the meeting to order at 3:21 p.m.

Committee Organization

Ms. Dowd said this is a subcommittee of the Audit and Finance Committee that will be Chaired by that Committee's Vice Chair, Rordan Hart, with primary staff support provided by Ms. Apalovich.

Changes to the Agenda

There were no changes to the agenda.

Expectations of Investment Manager

Mr. Hart said the purpose of the meeting is to identify what the expectations are of an Investment Manager and to establish the content of the Request for Proposals (RFP). He called attention to the Investment Policy that was included in the agenda packet and noted the current Investment Manager has been operating within specific parameters with respect to how they are investing the Consortium's funds. He said they are primarily using short-term treasuries that don't produce a lot of returns; however, there is some flexibility as to how much risk the Consortium can take on, while still adhering to General Municipal Law (GML) that dictates what the Consortium can invest in. Mr. Hart asked members to consider what expectations they would like to set for an Investment Manager aside from performance.

Ms. Dowd said the biggest concern from members is whether the Consortium is taking advantage of the market that is available to the Consortium. She commented that Wilmington Trust, the current Investment Manager, has established quarterly meetings to review reports that are subsequently shared with the Audit and Finance Committee. She said staff would like an Investment Manager to provide communication that includes written materials and updates on funds as week as when funds are available for change.

Mr. Snyder said it appears over the last couple of years there have been great losses because the Consortium's securities are treasury bills and bonds that are mark to market at the end of every month. While it appears as losses those have to be offset against the previous gains that have been made. He said the goal is to make sure the Consortium never loses any principal. He noted the current advisory only deals with bonds and notes and holds them to maturity and the Consortium is never part of any pool. He said even though it looks like the Consortium has lost money over the last couple of years as the bond market has deteriorated, however, it has never lost any money. Mr. Snyder stressed the importance of knowing the difference between market gains and losses versus real gains and losses. He said if the Consortium is going to have an investment strategy the primary goal should be to never lose principal. The Consortium has been asked but cannot join a number of funds as it is not allowed to lose principal under General

Municipal Law (GML). Mr. Snyder said the Consortium has stayed away from any mutual funds or bond funds to avoid risking principal. When treasuries are bought they are held until maturity and the Consortium receives the stated interest rate; however, this doesn't mean that it could not buy and sell bonds on a more active basis. Mr. Snyder said the Consortium is greatly limited by not going into things such as stocks and bond funds.

Mr. Hart asked if it is a requirement for the Jurat the Consortium's bonds to be mark to market. Mr. Snyder said the Jurat is set up with a comprehensive schedule and DFS advised on how to fill out the forms and what information was necessary. Mr. Hart said General Municipal Law Section 10 allows municipalities to invest in specific types of bonds and securities that do carry the risk of loss of principal and suggested a topic to be discussed is how much risk the Consortium is willing to take with at least some of the Consortium's money.

Mr. Hart said a decision could be made to never lose principal but this will mean using only government treasuries. If there is a will to allow for the possibility of any of the investments allowed by GML Section 10, the Consortium would be accepting some level of risk. He recalled conversations that took place at the time the current Investment Manager was selected and said he doesn't think the question of whether there is a willingness to accept any risk was answered. He asked others to provide feedback on whether there is interest in accepting any risk and if so, how much, noting the RFP would reflect what risk the Consortium is willing to assume.

Ms. Dowd said she would like to check Article 47 to see if there is any reference to investments. Mr. Snyder called attention to the Investment Policy provided in the agenda packet and said Articles 4 and 5 includes a list of the allowed investments; these are the sections of the Policy that would need to be changed if a decision was made to allow for more investments.

Mr. Snyder said he is not opposed to amending the Policy but believes that this question should be answered and a final Policy be in place before proceeding with the Request for Proposals. Mr. Hart said he is not necessarily recommending that the scope of what the Consortium can invest in be expanded but if the Board is looking for better yield and is willing to take on more scope of risk within the guidelines of GML that decision should be made now.

Mr. Thayer said he thinks a little risk is good as it allows for finding other investments that could provide a larger return; however, it needs to be limited as much as possible. He agreed that any adjustment to the Policy should be made prior to issuing an RFP. Ms. Dowd stated that any proposed Policy revisions would be presented to the Audit and Finance Committee, followed by the Executive Committee for approval.

In response to Mr. Salton, Mr. Hart said GML allows for a layer of risk to be added and although it is not a great risk it is more than is available at this time under the current Policy. Mr. Salton said he could support a reasonable increase in risk. Ms. Drake indicated she is could support assuming some, but very limited risk.

Ms. Dowd referenced notes on pages five and six of the agenda packet regarding securing deposits and investments. Mr. Pelton said the Consortium's Policy says 100 percent up to the aggregate amount of deposit. He said in Controller rulings they are looking for an amount in excess of 100 percent of deposits (101-105%). He recommended when looking at the Policy to consider when getting collateral agreements to consider 102% of the value of investments.

Mr. Salton was excused at this time.

Ms. Drake asked if what other entities similar to the Consortium are doing and how much risk they are assuming. Mr. Hart said it would need to be confirmed but he believes NYMIR (New York Municipal Insurance Reciprocal) and MEGA (Municipal Electric and Gas Alliance) both invest in funds on advice from their counsel that even though their members are municipalities that they are stand-alone entities and not subject to GML Section 10. He said a separate question is whether the Consortium would like to investigate or get a ruling from DFS (Department of Financial Services) as to whether GML Section 10 applies to the Consortium. Ms. Dowd said she has been looking into what the differences are between the Consortium and those entities but has not concluded anything at this time. Mr. Hart recalled an opinion was received on this a few years ago from John Powers, the Consortium's legal counsel.

There was consensus to refer the Investment Policy, specifically Articles 4 and 5, to the Audit and Finance Committee for consideration of whether investment parameters should be amended. If there is support to change those parameters the Committee should consider how much of what General Municipal Law allows the Consortium will allow.

Review Draft Request for Proposals:

At this time the Committee reviewed the draft RFP that was included in the agenda packet.

Mr. Snyder said the current fee schedule is based on the size of the portfolio and asked if there are any alternative fee arrangements, such as being based on the returns. Mr. Hart said there are generally no other fee arrangements for the Consortium's type of structure. There can be a flat investment advisor fee that is regardless of performance or assets, however, because the goal is to attract more assets under management most firms lean towards the percentage of total assets fee. He said the Investment Company Act of 1940 prohibits charging incentive-based fees except for specific classifications of funds such as hedge funds. Mr. Hart said if a decision is made to take the safest investment course possible there needs to be more emphasis on fees. If there is an expansion on what the Consortium can do from an investment standpoint, he thinks areas that should be looked at include how the Advisor manages, what their experience is within those confines, what their track record looks like, and how often are they looking to trade out of a bond issue that has appreciated in value versus holding it for its income.

Ms. Dowd suggested adding in the vendor selection a rubric that includes criteria that would present how information received will be weighed. This would inform responders of what is important to the Consortium when going out to bid.

There were no changes made to the draft RFP.

Set Next Meeting

The next meeting will be scheduled following discussion of the Investment Policy at the next Audit and Finance Committee meeting.

Adjournment

The meeting adjourned at 4:30 p.m.



Greater Tompkins County Municipal Health Insurance Consortium

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"Individually and collectively we invest in realizing high quality, affordable, dependable health insurance."

RESOLUTION NO. -2022 – ADOPTION OF AMENDMENTS TO THE 2022 BUDGET

WHEREAS, the Board of Directors adopted the 2022 Budget, Reserve amounts, and Premium Equivalent Rates on September 23, 2021, and

WHEREAS, the 2022 budget has been impacted by several factors and primarily from the movement of members from higher-cost health plans to Metal Level Plans, and

WHEREAS, there is a need to amend budget lines in order to ensure the Consortium operates with a budget that reflects actual performance for the year, now therefore be it

RESOLVED, on recommendation of the Audit and Finance Committee, That the Executive Committee, on behalf of the Board of Directors, hereby approves amendments to the Consortium's 2022 budget,

RESOLVED, further, That a copy of the amended budget shall be made available on the Consortium's website.

* * * * *



Greater Tompkins County Municipal Health Insurance Consortium

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"Individually and collectively we invest in realizing high quality, affordable, dependable health insurance."

RESOLUTION NO. – 2022 - RESCINDING RESOLUTION NO. 009-2020 AND RENAMING THE CATASTROPHIC CLAIMS RESERVE TO CATASTROPHIC CLAIMS SELF-INSURANCE POOL

WHEREAS, the Greater Tompkins County Municipal Health Insurance Consortium ("GTCMHIC") has been issued a Certificate of Authority to operate as a New York State Insurance Law Article 47 Municipal Cooperative Health Benefit Plan, and

WHEREAS, Section 4707(a)(2) of the New York State Insurance Law requires the GTCMHIC to purchase "specific stop-loss coverage with a specific retention amount or attachment point not greater than four percent of the amount certified by a qualified actuary to represent the plan's expected claims for the current fiscal year", and

WHEREAS, the GTCMHIC Board of Directors issued a Request for Quote (RFQ) to licensed, reputable insurance carriers seeking quotes for specific stop-loss insurance at various deductible levels and with certain required coverage parameters, and

WHEREAS, the GTCMHIC Board of Directors passed Resolution No. 040-2020 authorizing the purchase of a specific stop-loss insurance policy from Excellus BlueCross BlueShield ("Excellus") with a policy period deductible of \$1,000,000 for all covered insured members, and

WHEREAS, the Executive Committee has accepted the 2020 Fiscal Year Catastrophic Claims Reserve Fund in the amount of \$5,032,220.00 to help protect the Consortium from large dollar claimant expenses which may occur from time to time, and

WHEREAS, the GTCMHIC Board of Directors recognizes the purchasing of specific stop-loss insurance at a \$1,000,000 deductible level creates a substantive risk to the Consortium and its financial stability and it needs a policy for balancing the CCR with the predicted risk, now therefore be it

RESOLVED, the GTCMHIC Board of Directors hereby rescinds resolution 009-2020 Catastrophic Claims Reserve policy and replaces it with the following and clarifies the intent of the Consortium's Catastrophic Self-Insurance Claims Pool for the 2022 Fiscal Year as follows:

1. During the 2013 Fiscal Year the Consortium established a Catastrophic Claims Reserve in the amount of \$600,000 to help protect the Consortium from financial harm caused by large dollar claimants as the Consortium increased the Specific Stop-Loss Insurance Deductible from \$250,000 to \$300,000.
2. Over the years, as the Consortium Board of Directors made the decision to accept more risk by periodically raising the stop-loss insurance deductible. In concert with those decisions, the Consortium Board of Directors also periodically increased the amount of funds held in the Catastrophic Claims Reserve as noted in the chart below:

RESOLUTION NO. – 2022 - RESCINDING RESOLUTION NO. 009-2020 AND RENAMING THE CATASTROPHIC CLAIMS RESERVE TO CATASTROPHIC CLAIMS SELF-INSURANCE POOL

			2013	2014	2015	2016	2017	2018	2019
Traditional Stop-Loss Insurance	Specific Stop-Loss Deductible		\$300,000.00	\$300,000.00	\$400,000.00	\$400,000.00	\$450,000.00	\$600,000.00	\$600,000.00
	Stop-Loss Insurance Premiums	+	\$592,381.65	\$720,784.39	\$642,080.30	\$766,281.18	\$738,819.42	\$442,185.54	\$693,190.30
	Stop-Loss Insurance Claims Paid	-	\$292,967.64	\$184,734.14	\$125,880.36	\$242,433.49	\$8,294.21	\$453,672.85	\$29,295.28
	Insurance Company Admin. &	=	\$299,414.01	\$536,050.25	\$516,199.94	\$523,847.69	\$730,525.21	(\$11,487.31)	\$663,895.02
			2013	2014	2015	2016	2017	2018	2019
Catastrophic Claims Reserve	Beginning Balance	+	\$0.00	\$600,000.00	\$606,898.00	\$1,050,000.00	\$1,050,000.00	\$1,350,000.00	\$2,000,000.00
	Initial/Annual Investment	+	\$600,000.00	\$6,898.00	\$443,102.00	\$0.00	\$300,000.00	\$650,000.00	\$800,000.00
	Ending Balance	=	\$600,000.00	\$606,898.00	\$1,050,000.00	\$1,050,000.00	\$1,350,000.00	\$2,000,000.00	\$2,800,000.00

3. On June 25, 2020, the Board of Directors approved Resolution 009-2020, effectively converting the Catastrophic Claims Reserve into a Self-Insurance Pool as the Board wanted to use this reserve fund to offset high-cost claims that reach a captive layer between \$500,000 and the stop-loss policy deductible. Resolution 009-2020 stated that funds used to seed the Catastrophic Claims Reserve was the combination of the \$4,500,000 which was set by Board resolution in the Catastrophic Claims Reserve on that date; and the \$34,105 in interest earned on the funds in this account during the 2020 Fiscal Year.
4. For the 2021 Fiscal Year and going forward, Catastrophic Claims Reserve will be renamed to be the Catastrophic Claims Self-Insurance Pool and **will be funded through the following process:**
 - a) The Consortium's Stop-Loss Insurance budget line will be for a policy at the \$600,000 level.
 - b) Any premium savings realized by purchasing a Stop Loss Insurance policy for a deductible higher than the \$600,000 level will be credited to the pool from the general fund on an annual basis.
 - c) Any interest earned by the Catastrophic Claims Self-Insurance Pool fund will be credited to the pool on an annual basis.
 - d) The Executive Committee, on advice from Audit and Finance Committee, will consider changing the amount of the Catastrophic Claims Self-Insurance Pool at the start of the budget year. The information to be used in that determination shall include at least the following:
 - i) an assessment of the level of risk this "pool" is covering;
 - ii) an assessment of the amount of funds that have and will be withdrawn from the previous year's high-cost claim activity in the captive layer between \$500,000 and the Stop-Loss policy deductible;
 - iii) the projected year-end Unappropriated Fund Balance

The following represents calculation for the year 2020, 2021 and 2022:

GTCMHIC Catastrophic Claims Pool

	Actual FY 2020	Actual FY 2021	Estimate FY 2022
Beginning Balance	\$ 4,500,000.00	\$ 5,032,220.00	\$ 4,642,294.20
Interest Income	\$ 34,105.00	\$ (19,009.15)	\$ 23,211.47 *
Stop Loss Premium Savings \$1M-\$600K	\$ 498,115.00	\$ 434,450.00	\$ 436,366.00
Catastrophic Claims between \$500K and \$1M	\$ -	\$ (805,366.65)	\$ -
Year End Balance	<u>\$ 5,032,220.00</u>	<u>\$ 4,642,294.20</u>	<u>\$ 5,101,871.67</u>
Pool change Year over year		\$ (389,925.80)	\$ 459,577.47

*per Budget 0.5% of balance

**RESOLUTION NO. – 2022 - RESCINDING RESOLUTION NO. 009-2020 AND RENAMING THE
CATASTROPHIC CLAIMS RESERVE TO CATASTROPHIC CLAIMS
SELF-INSURANCE POOL**

5. As stated in resolution 009-2020 and going forward, funds will be transferred out of the now Catastrophic Claims Self-Insurance Pool to the Consortium's general operating fund to reimburse any covered member's claims costs, per Excellus BlueCross BlueShield's Specific Stop Loss Report, which exceed \$500,000 but are less than the Stop-Loss deductible during the specific stop-loss insurance policy period.
6. The only exception, if the Consortium opted for a lower stop-loss insurance deductible, will be for any specific claimants who would have had a "laser" attached to them. We will continue the practice of applying the lasered deductible to those individuals. For example, if an individual has a laser deductible of \$750,000, we will not utilize or transfer any funds from the Catastrophic Claims Self-Insurance Pool until that individual were to incur claims above \$750,000, but less than the Stop Loss deductible.
7. To trigger the claims transfer, said claims must be incurred during that claim's Calendar Year and must be paid in the Calendar Year and the first 3-months of the subsequent Calendar Year.
8. Any fund transfers from the Catastrophic Claims Self-Insurance Pool to the Consortium's general operating fund will occur no more frequently than on a quarterly basis and/or no less than once per year with the timing of said transfers occurring as directed by the Consortium's Chief Fiscal Officer.
9. Each year the GTMCHIC Board of Directors will review this policy as part of the overall budget process to ensure it continues to meet the needs of the Consortium.

Greater Tompkins County Municipal Hlth Insurance Consortium

MONTHLY ABSTRACT - JANUARY AND FEBRUARY 2022

						Accrual Basis
Type	Date	Pymt Num	Invoice #	Name	Memo	Amount
Check	01/05/2022	5100		TOMPKINS COUNTY CHARGES	Town of Ithaca 2021 Copies	112.62
Check	01/05/2022	5101		TOWN OF ITHACA NY	2021-12	45,765.87
Check	01/05/2022	5102		HAYLOR, FREYER & COON, INC.	2022 Insurance	58,266.00
Check	01/05/2022	5103		CanaRx GROUP INC	12/15/2021-12/31/2021	12,154.50
Check	01/06/2022	5104		ITHACA COLLEGE	Newsletter Printing	847.61
Check	01/07/2022	A1766224		EXCELLUS HEALTH PLAN - CLAIMS	12/29/2021-01/04/2022	703,505.88
Check	01/07/2022	A1762335		PROACT, INC.	12/16/2021-12/31/2021	720,837.03
Check	01/13/2022	A1786381		EXCELLUS HEALTH PLAN - CLAIMS	01052022-01112022	606,005.11
Check	01/19/2022	5105		CHASE	Credit Card Bill	789.61
Check	01/19/2022	5106		TOMPKINS COUNTY CHARGES	Dec Phones	19.33
Check	01/20/2022	A1801138		EXCELLUS HEALTH PLAN-GROUP	Feb 2022	164,226.72
Check	01/20/2022	5107		CanaRx GROUP INC	01/01/2022-01/15/2022	3,550.40
Check	01/21/2022	A1804712		WILMINGTON TRUST	10/01/2021-12/31/2021	3,037.93
Check	01/21/2022	A1806544		EXCELLUS HEALTH PLAN - CLAIMS	01/12/2022-01/18/2022	943,083.70
Check	01/21/2022	A1806544		EXCELLUS HEALTH PLAN - CLAIMS	12312021 Covered Lives	28,847.77
Check	01/21/2022	A1808869		PROACT, INC.	01/01/2022-01/15/2022	595,650.87
Check	01/28/2022	A1827315		EXCELLUS HEALTH PLAN - CLAIMS	01/19/2022-01/25/2022	723,358.99
Check	02/04/2022	A1849905		EXCELLUS HEALTH PLAN - CLAIMS	01/26/2022-02/01/2022	704,615.06
Check	02/09/2022	A1862431		PROACT, INC.	01/16/2022-01/31/2022	630,606.37
Bill	02/07/2022		INV-9116	BMI Audit Services, LLC	Progress billing Rx Claims	13,250.00
Bill	01/31/2022		INV# 324342	CanaRx GROUP INC	01/16/2022-01/31/2022	8,379.70
Bill	01/31/2022		02072022	CHASE	Credit Card Bill	161.92
Bill	02/02/2022		72046	ITHACA COLLEGE	Flyer Printing	117.60
Bill	01/01/2022		17226	LOCEY & CAHILL	January	7,625.00
Bill	02/01/2022		17240	LOCEY & CAHILL	February	7,625.00
Bill	02/09/2022		IS22-009	TOMPKINS COUNTY CHARGES	Tompkins County ITS Annual Contract	6,681.00
Bill	01/31/2022		2022-01	TOWN OF ITHACA NY	Payroll	30,770.18
Bill	02/01/2022		Feb 2022 Rent	TOWN OF ITHACA NY	Feb 2022 Rent	800.00
						6,020,691.77



2021 Fiscal Year Budget Performance Report As of December 31, 2021

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E-mail: slocey@loceycahill.com



Section 1

2021 Fiscal Year-to-Date Income Budget vs Actual Results

2021 Income Budget vs Actual (12/31/2021)

Greater Tompkins County Municipal Health Insurance Consortium (GTCMHIC)

2021 Budget Performance Analysis

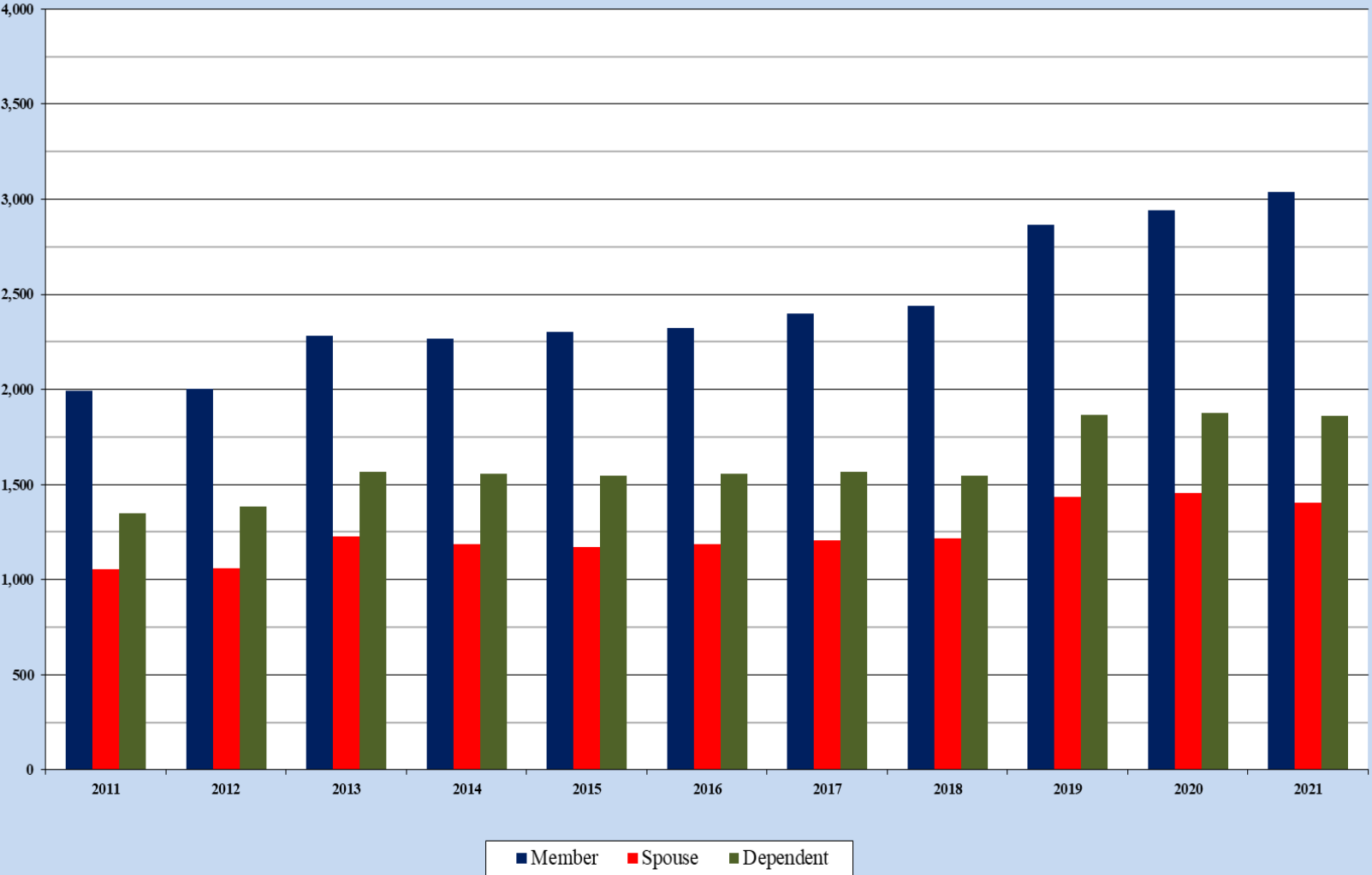
Results as of: 12/31/2021
of Months: 12

		2021 Adopted Budget	2021 Revised Budget	2021 Year-to-Date	2021 Actual Results	Variance	% Difference
Income							
	Medical and Rx Plan Premiums *	\$55,875,290.81	\$55,002,327.38	\$55,002,327.38	\$53,389,901.70	-\$1,612,425.68	-2.93%
9020	Interest	\$45,534.44	\$45,534.44	\$45,534.44	-\$93,846.98	-\$139,381.42	-306.10%
9010	Rx Rebates	\$1,400,000.00	\$1,700,000.00	\$1,700,000.00	\$2,385,590.60	\$685,590.60	40.33%
9040	Stop-Loss Claim Reimbursements	\$0.00	\$0.00	\$0.00	\$0.00		
9035	Finance Charge Income	\$0.00	\$5,463.46	\$5,463.46	\$0.00	-\$5,463.46	n/a
9030	Other	\$5,463.64	\$0.00	\$0.00	\$0.00		
Total Income		\$57,326,288.89	\$56,753,325.28	\$56,753,325.28	\$55,681,645.32	-\$1,071,679.96	-1.89%

Key Facts:

1. Premium Income was **2.93% below** budget for the fiscal period. Based on our analysis, the following factors have resulted in a lower than expected premium :
 - a. There has been some additional movement of covered members from traditional Indemnity and PPO Plans to the Consortium's Platinum PPO Plan. This movement results in a lower overall premium base, but also lowers claims costs.
 - b. The County of Tompkins moved all Medicare-aged retirees into the Consortium's Medicare Supplement Plan (MS4)

Greater Tompkins County
Municipal Health Insurance Consortium
Average Monthly Covered Lives by Relationship
2011 to 2021 (as of December 31, 2021)



2021 Income Budget vs Actual (12/31/2021)

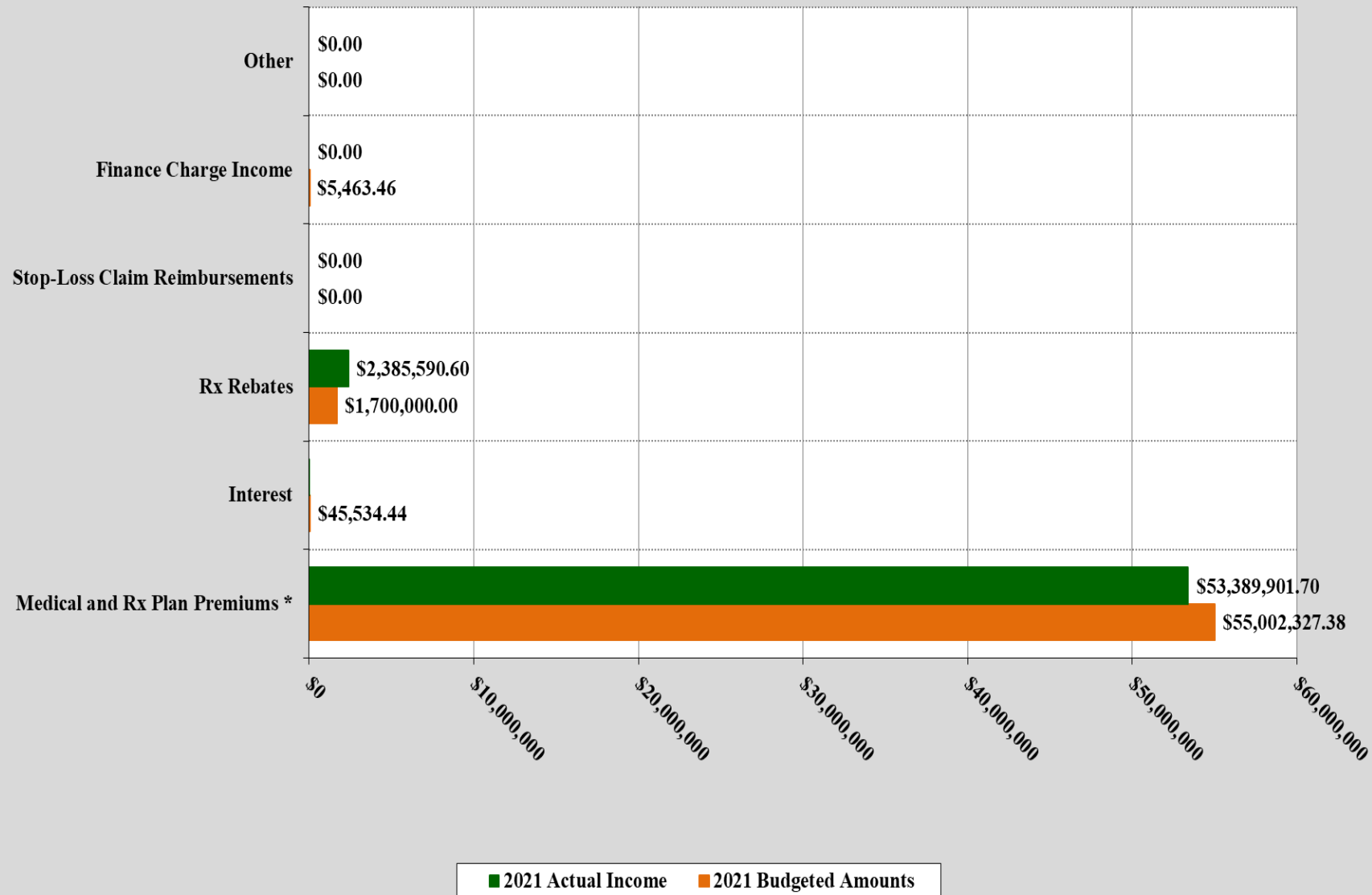
Key Facts (continued):

2. The Consortium invests in notes/bonds which are held to maturity but record gains and/or losses on a monthly basis (“mark to market”). It should be noted that with interest rates falling dramatically during the COVID-19 pandemic, the Consortium’s budget was greatly reduced relative to expected interest earnings for the 2021 Fiscal Year. The Interest Income to date, although down from previous years, is close to projected levels.
3. The Consortium has received prescription drug quarterly rebate payments totaling \$2,385,590.60 for the 2021 Fiscal Year.
4. The Consortium did not receive any reimbursements for claims which exceeded the Specific Stop-Loss Insurance Deductible of \$1 million. To date, there have been no claims in excess of \$1,000,000 for this year or the previous year.
5. There was nothing recorded in Finance Charge Income and there were no receipts recorded in the “Other” income category as of December 31st. Even when the Consortium does register some miscellaneous income, the impact is negligible at best and has very little effect on the overall net position of the Consortium.

Greater Tompkins County Municipal Health Ins. Consortium

2021 Income Distribution

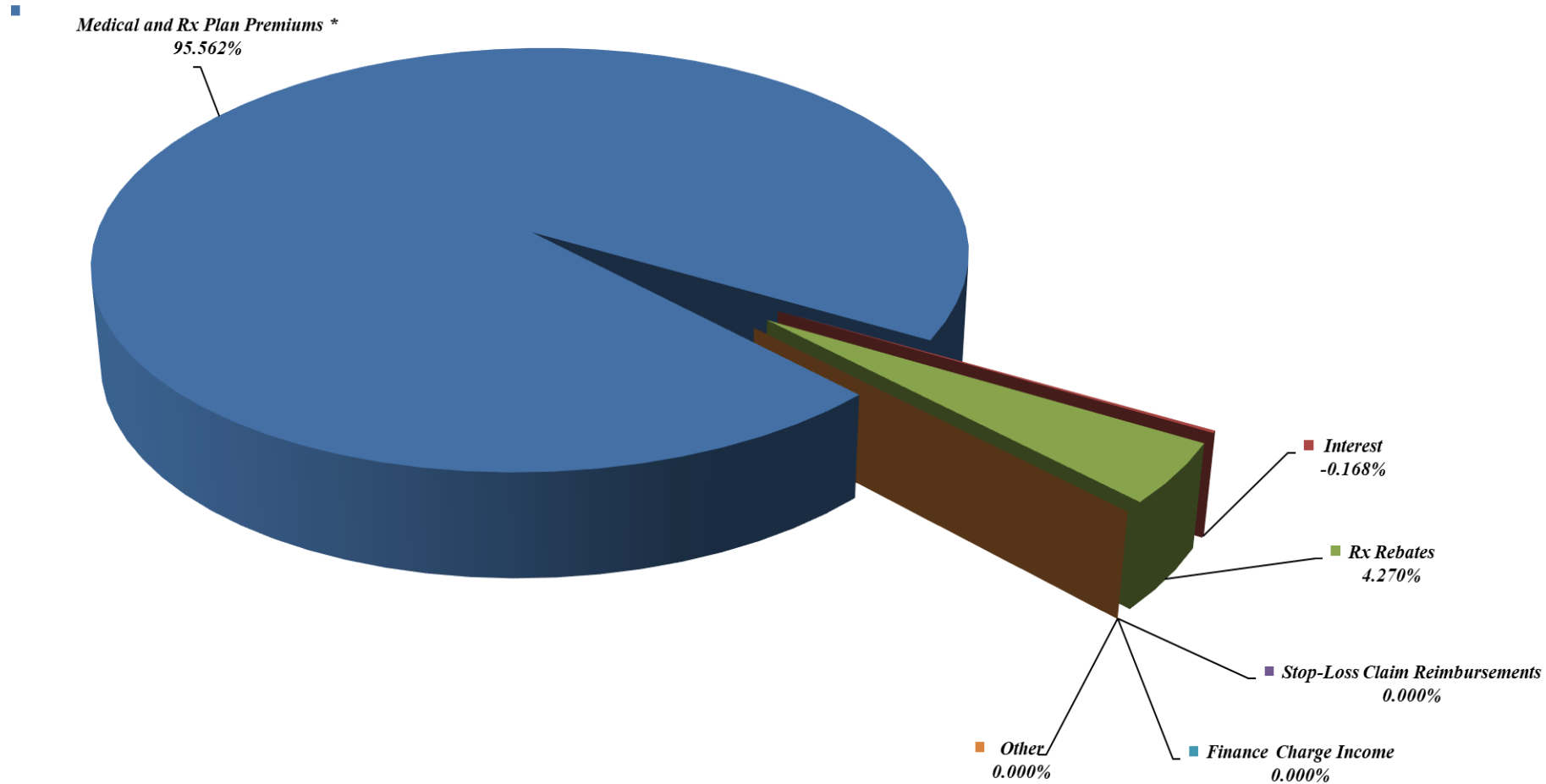
January 1, 2021 to December 31, 2021



Greater Tompkins County Municipal Health Ins. Consortium

2021 Income Distribution

January 1, 2021 to December 31, 2021



■ Medical and Rx Plan Premiums * ■ Interest ■ Rx Rebates ■ Stop-Loss Claim Reimbursements ■ Finance Charge Income ■ Other



Section 2

2021 Fiscal Year-to-Date Expense Budget vs Actual Results

2021 Expense Budget vs Actual Results (12/31/2021)

Includes Expense Codes 8081, 8082, & 8083

Balance Sheet Item 3500

Expenses	2021 Adopted Budget	2021 Revised Budget	2021 Year-to-Date	2021 Actual Results	Variance	% Difference
8090 Medical Paid Claims	\$39,058,334.44	\$38,838,424.24	\$38,838,424.24	\$39,054,847.14	\$216,422.90	0.56%
Advance Deposit / Pre-Paid Claims	\$109,150.71	\$109,150.71	\$7,100.00	\$7,100.00	\$0.00	0.00%
8120 Rx Paid Claims - ProAct	\$15,355,131.00	\$15,355,131.00	\$15,355,131.00	\$16,173,194.34	\$818,063.34	5.33%
8121 Rx Paid Claims - CanaRx	\$150,108.45	\$150,108.45	\$150,108.45	\$152,978.80	\$2,870.35	1.91%
8084 Flu Clinic Fees	\$15,000.00	\$15,000.00	\$15,000.00	\$22,371.00	\$7,371.00	49.14%
8050 Medical Admin Fees	\$1,440,535.40	\$1,477,304.64	\$1,477,304.64	\$1,458,890.21	-\$18,414.43	-1.25%
Rx Admin Fees	\$200,930.34	\$200,930.34	\$200,930.34	\$219,993.03	\$19,062.69	9.49%
8091 NYS Covered Lives Assessment	\$373,317.01	\$373,317.01	\$373,317.01	\$346,416.20	-\$26,900.81	-7.21%
9060 ACA PCORI Fee	\$17,987.06	\$17,987.06	\$17,987.06	\$16,691.50	-\$1,295.56	-7.20%
8110 Specific Stop-Loss Insurance (Actual)	\$302,450.00	\$273,000.00	\$273,000.00	\$270,471.20	-\$2,528.80	-0.93%
8000 Accounting Fees	\$25,750.00	\$25,750.00	\$25,750.00	\$18,800.00	-\$6,950.00	-26.99%
8010 Actuarial Fees	\$53,045.00	\$15,000.00	\$15,000.00	\$8,500.00	-\$6,500.00	-43.33%
8020 Audit Fees (Financial)	\$13,390.00	\$13,390.00	\$13,390.00	\$14,000.00	\$610.00	4.56%
8021 Audit Fees (Claims)	\$41,200.00	\$41,200.00	\$41,200.00	\$34,000.00	-\$7,200.00	-17.48%
8055 Consultant Fees (Barber)	\$25,000.00	\$20,000.00	\$20,000.00	\$10,350.00	-\$9,650.00	-48.25%
8030 Consultant Fees (L&C)	\$90,176.50	\$90,176.50	\$90,176.50	\$88,980.00	-\$1,196.50	-1.33%
8070 Legal Fees	\$12,360.00	\$12,360.00	\$12,360.00	\$1,375.00	-\$10,985.00	-88.88%
8065 Wellness Program Costs	\$25,000.00	\$25,000.00	\$25,000.00	\$2,707.91	-\$22,292.09	-89.17%
66001 Executive Director (Salary)	\$94,760.00	\$93,636.00	\$93,636.00	\$93,635.88	-\$0.12	0.00%
66002 Fringe Benefits	\$67,980.00	\$110,374.87	\$110,374.87	\$77,910.39	-\$32,464.48	-29.41%
66003 Clerk of the Board (Salary)	\$37,080.00	\$72,134.40	\$72,134.40	\$71,882.97	-\$251.43	-0.35%
66004 Admin/Comp Asst (Salary)	\$52,530.00	\$0.00	\$0.00	\$0.00		
66005 Benefits Specialist (Salary)	\$41,250.00	\$43,680.00	\$43,680.00	\$24,969.00	-\$18,711.00	-42.84%
66006 Finance Manager (Salary)	\$0.00	\$73,000.00	\$73,000.00	\$53,846.00	-\$19,154.00	-26.24%
8060 Insurances (D&O / Prof. Liability)	\$48,070.00	\$50,850.00	\$50,850.00	\$50,588.03	-\$261.97	-0.52%
8041 Internal Coordination (Finance)	\$80,000.00	\$68,660.00	\$68,660.00	\$58,001.65	-\$10,658.35	-15.52%
8042 Internal Coordination (Support)	\$0.00	\$0.00	\$0.00	\$0.00		
8040 Internal Coordination Fees (Other)	\$0.00	\$0.00	\$0.00	\$0.00		
8045 Internal Coordination (Town of Ithaca)	\$7,210.00	\$7,210.00	\$7,210.00	\$6,000.00	-\$1,210.00	-16.78%
8044 Internal Coordination (IT Support)	\$11,845.00	\$11,845.00	\$11,845.00	\$6,295.00	-\$5,550.00	-46.86%
9065 Marketing Expenses	\$2,500.00	\$2,500.00	\$2,500.00	\$647.57	-\$1,852.43	-74.10%
9055 Investment Management Services	\$26,780.00	\$14,000.00	\$14,000.00	\$15,568.80	\$1,568.80	11.21%
8150 Supplies Expense	\$2,500.00	\$2,500.00	\$2,500.00	\$1,638.80	-\$861.20	-34.45%
8151 Computer Equipment	\$5,150.00	\$5,150.00	\$5,150.00	\$2,422.78	-\$2,727.22	-52.96%
8152 Lease Expense / Parking Fees	\$9,500.00	\$9,500.00	\$9,500.00	\$12,229.70	\$2,729.70	28.73%
8153 Mileage- Travel Expenses	\$1,000.00	\$1,000.00	\$1,000.00	\$69.44	-\$930.56	-93.06%
8154 Software	\$0.00	\$0.00	\$0.00	\$887.03	\$887.03	
8155 Postage	\$0.00	\$0.00	\$0.00	\$835.38	\$835.38	
8158 Subscriptions	\$0.00	\$0.00	\$0.00	\$325.00	\$325.00	
9060 Other Expenses / Supplies	\$10,927.27	\$10,927.27	\$10,927.27	\$13,879.44	\$2,952.17	27.02%
Total Expenses	\$57,807,948.19	\$57,630,197.49	\$57,528,146.78	\$58,393,299.19	\$865,152.41	1.50%

2021 Expense Budget vs Actual Results (12/31/2021)

	Budget	Revised Budget	Year-to-Date	Actual		
Paid Claims	\$54,687,724.60	\$54,467,814.40	\$54,365,763.69	\$55,410,491.28	\$1,044,727.59	1.92%
Claims Admin. Fees	\$1,641,465.74	\$1,678,234.98	\$1,678,234.98	\$1,678,883.24	\$648.26	0.04%
Stop-Loss	\$302,450.00	\$273,000.00	\$273,000.00	\$270,471.20	-\$2,528.80	-0.93%
Taxes and Fees	\$391,304.07	\$391,304.07	\$391,304.07	\$363,107.70	-\$28,196.37	-7.21%
Professional Services	\$285,921.50	\$242,876.50	\$242,876.50	\$178,712.91	-\$64,163.59	-26.42%
Insurance/Internal Fees	\$499,082.27	\$576,967.54	\$576,967.54	\$491,632.86	-\$85,334.68	-14.79%
Total Expenses	\$57,807,948.19	\$57,630,197.49	\$57,528,146.78	\$58,393,299.19	\$865,152.41	1.50%
Net Income	-\$481,659.30	-\$876,872.21	-\$774,821.50	-\$2,711,653.87	-\$1,936,832.37	

The above provides an “easier to read” summary version of the expense data for the Consortium through December 31, 2021. As you will note, the paid claims which collectively include medical, prescription drug, CanaRx, Flu Clinic and any pre-paid claims account for 94.89% of the total expenses of the Consortium for 2021. We show the overall paid claims and advance deposit (pre-payment of claims) to be 1.92% above budget for the 2021, with prescription drugs accounting for the vast majority of the overage.

2021 Expense Budget vs Actual Results (12/31/2021)

Key Facts:

1. Over the past several months, we have worked with the Consortium's Executive Director and Financial Team to allocate budgeted funds into their correct expense line-item based on their code. This was done to provide a more detailed and accurate summary of the internal and external professional support costs. In addition, we updated some of the budget numbers based on the addition of new members and changes in enrollment by existing members.
2. While most of the expenditure line items finished under budget, the higher than budgeted claims led to the overall actual expenditures exceeding the budgeted amount by 1.50% or approximately \$850k. The last quarter of 2021 saw significantly higher than normal paid claims, leading to the budget shortfall.
3. When new members are added to the Consortium, their paid claims will not be mature until the 3rd month, (claims incurred on or before December 31st), so the "run-out" of claims are the responsibility of their prior insurance carrier. This will be true of new members added for January 1, 2022.

2021 Expense Budget vs Actual Results (12/31/2021)

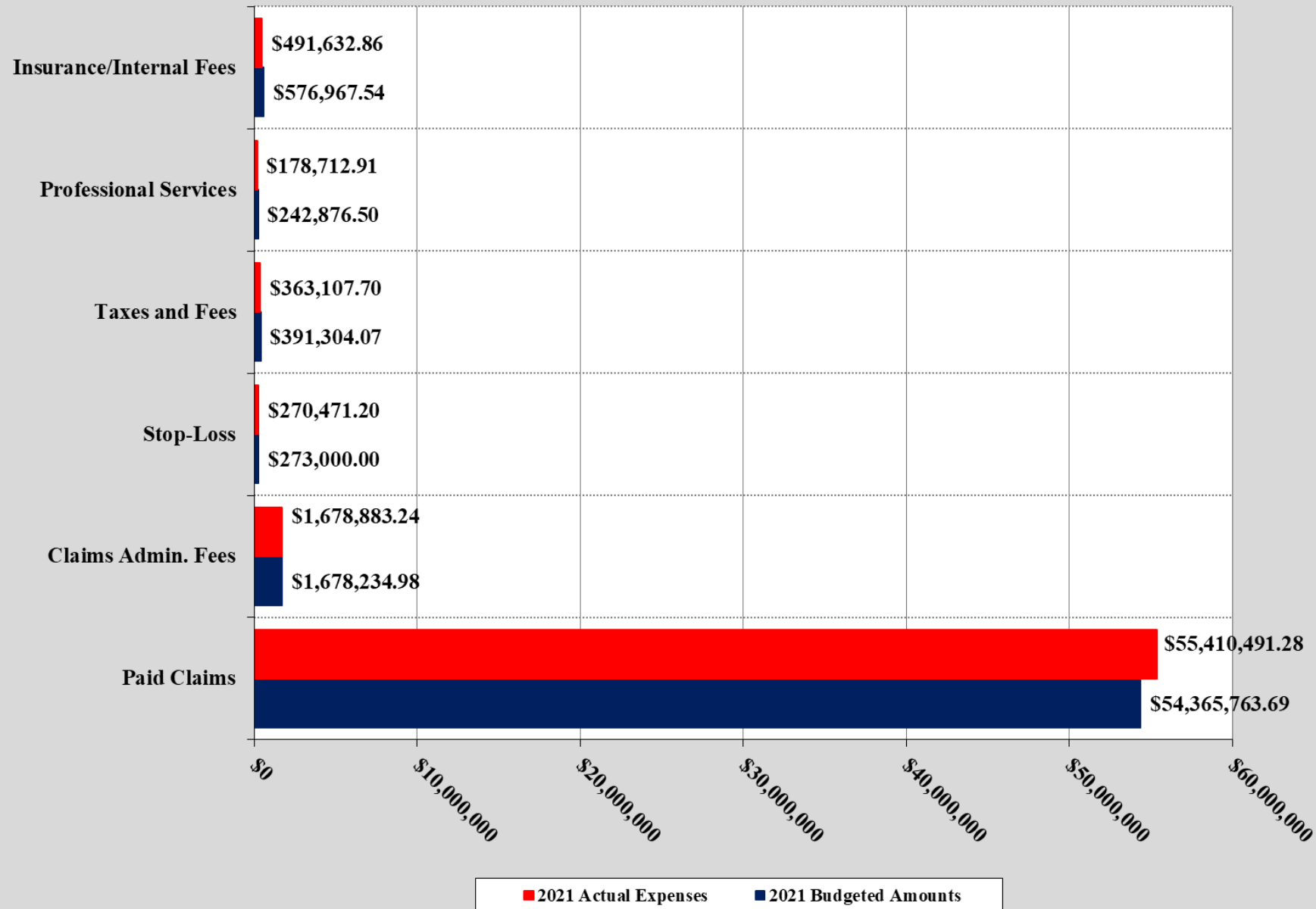
Key Facts:

4. Medical Paid Claims exceeded budget in December and finished the year **0.56% above budget**.
 - a) An increase in the covered lives ($\uparrow 0.46\%$) and in the number of contracts ($\uparrow 3.16\%$) played a roll in the claims result.
 - b) There was an increase in the number of catastrophic claims in 2021. Sixty-three (63) participants had claims in excess of \$100,000 paid through December 31st. This number may grow for any services provided by December 31st and billed for through March 31, 2022. More importantly five (5) of these claims were in excess of \$500,000, compared with only one (1) in 2020.
 - c) As of 12/31/2021, total medical high claims were approximately \$8.2m compared to \$6.8m on 12/31/2020.
5. Rx Paid Claims were **5.33% above budget** for the 2021 Fiscal Year. As of 12/31/2021, total Rx high claims were approximately \$5.0m compared to \$3.4m on 12/31/2020.

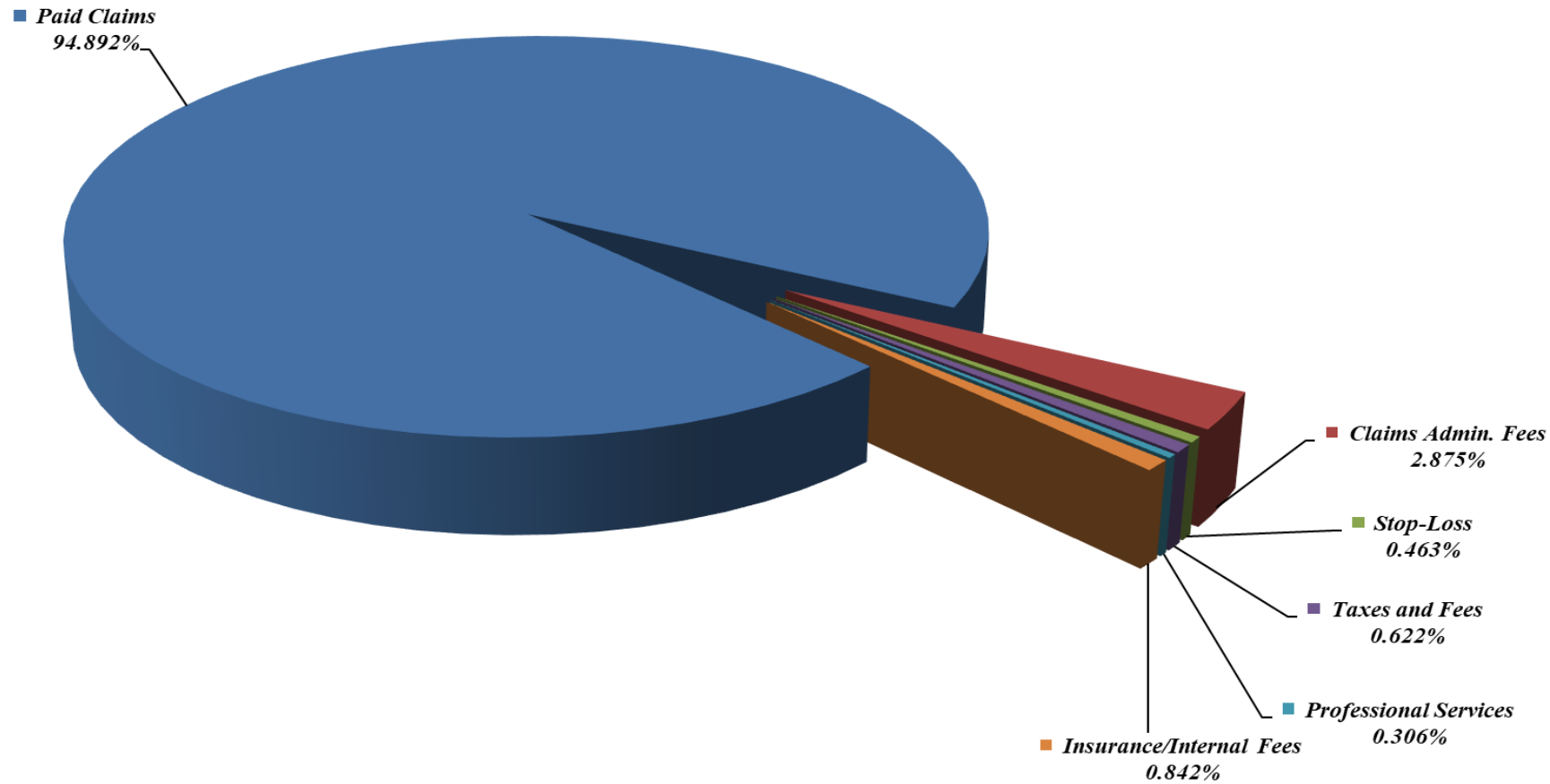
Greater Tompkins County Municipal Health Ins. Consortium

2021 Expense Distribution

January 1, 2021 to December 31, 2021



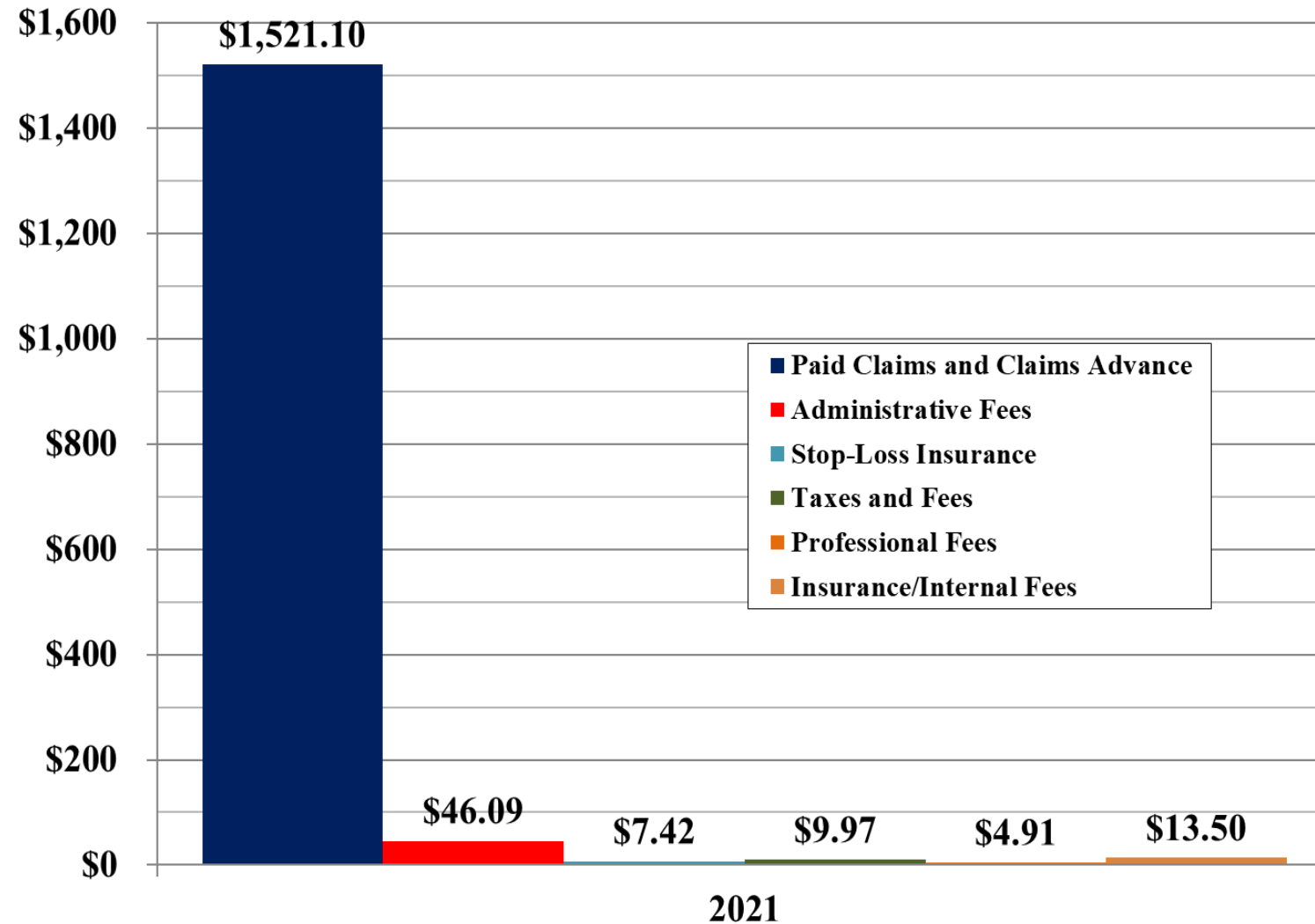
Greater Tompkins County Municipal Health Ins. Consortium
2021 Expense Distribution
January 1, 2021 to December 31, 2021



Greater Tompkins County Municipal Health Insurance Consortium

2021 Expense Distribution Per Contract Per Month

January 1, 2021 to December 31, 2021



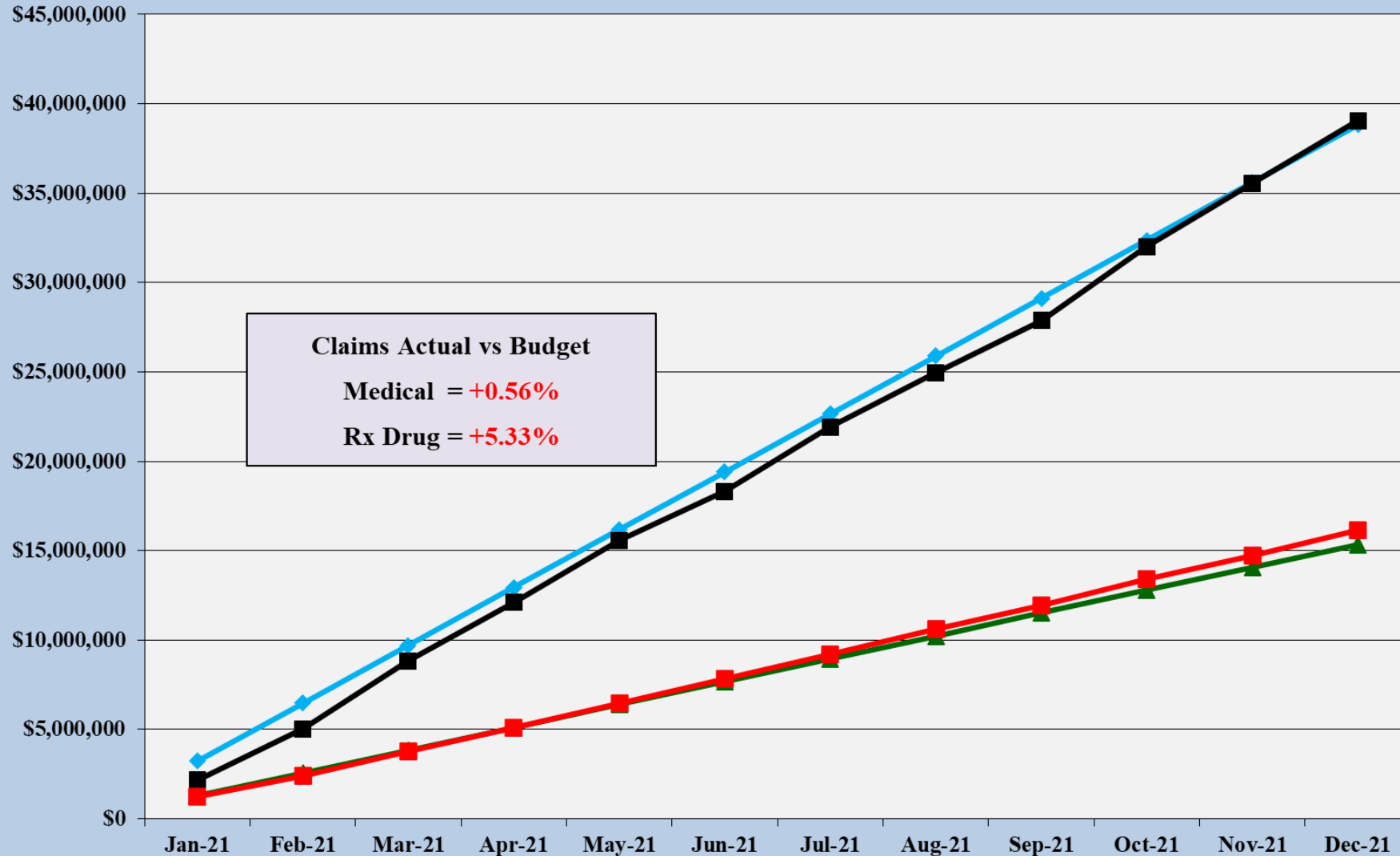
A 3D red line graph with a large upward arrow, set against a background of a grid and green geometric shapes. The line graph shows a series of peaks and valleys, with the final peak being the highest, indicating an overall upward trend. The background features a light gray grid and green geometric shapes on the right side.

Section 3

2021 Fiscal Year-to-Date Paid Claims Budget vs Actual Results

Greater Tompkins County Municipal Health Insurance Consortium

2021 Cumulative Paid Claims and Budgeted Claims by Month



Claims Actual vs Budget

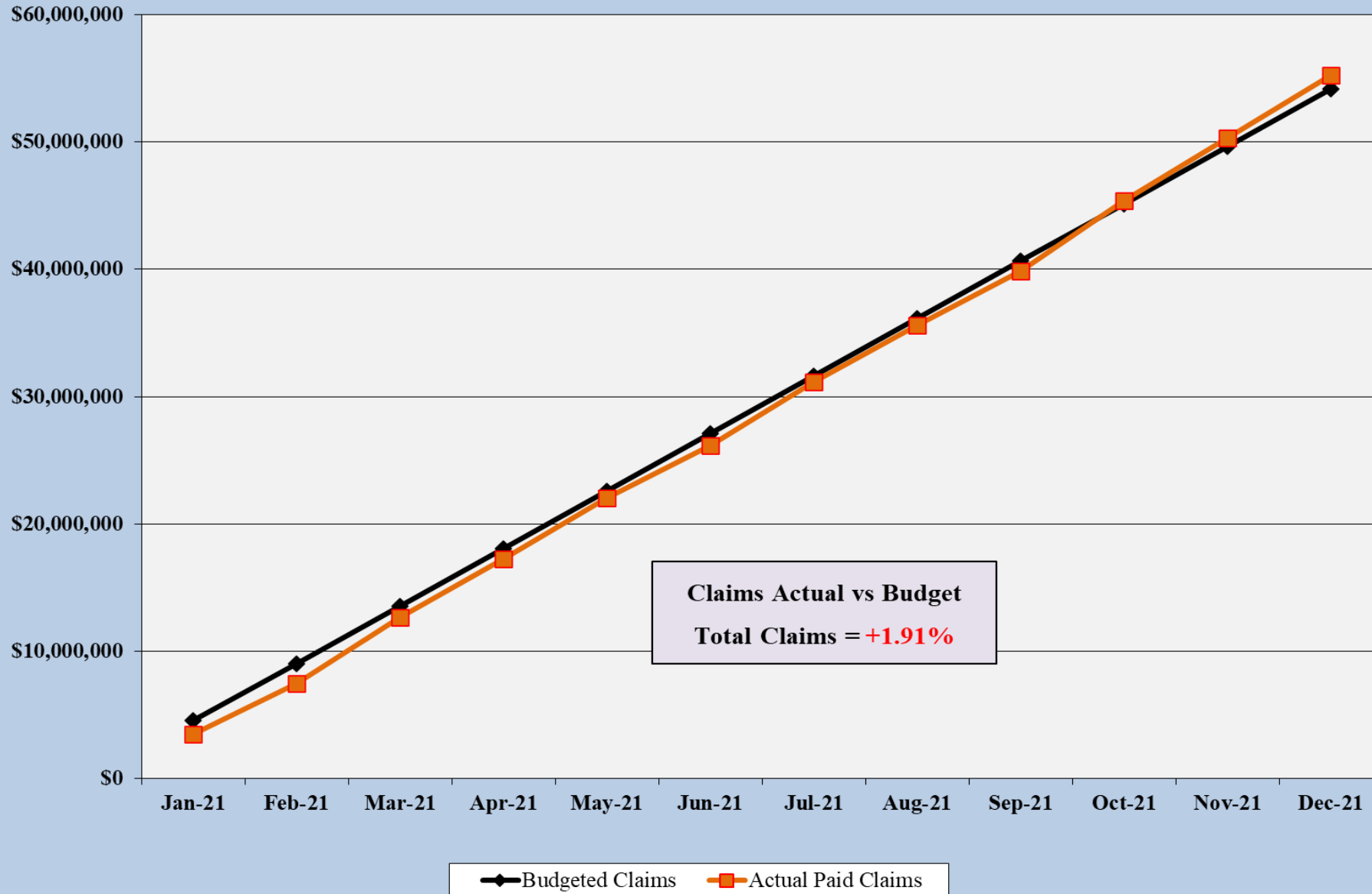
Medical = +0.56%

Rx Drug = +5.33%

Medical Plan Budgeted Claims Medical Plan Actual Paid Claims Rx Plan Budgeted Claims Rx Paid Claims

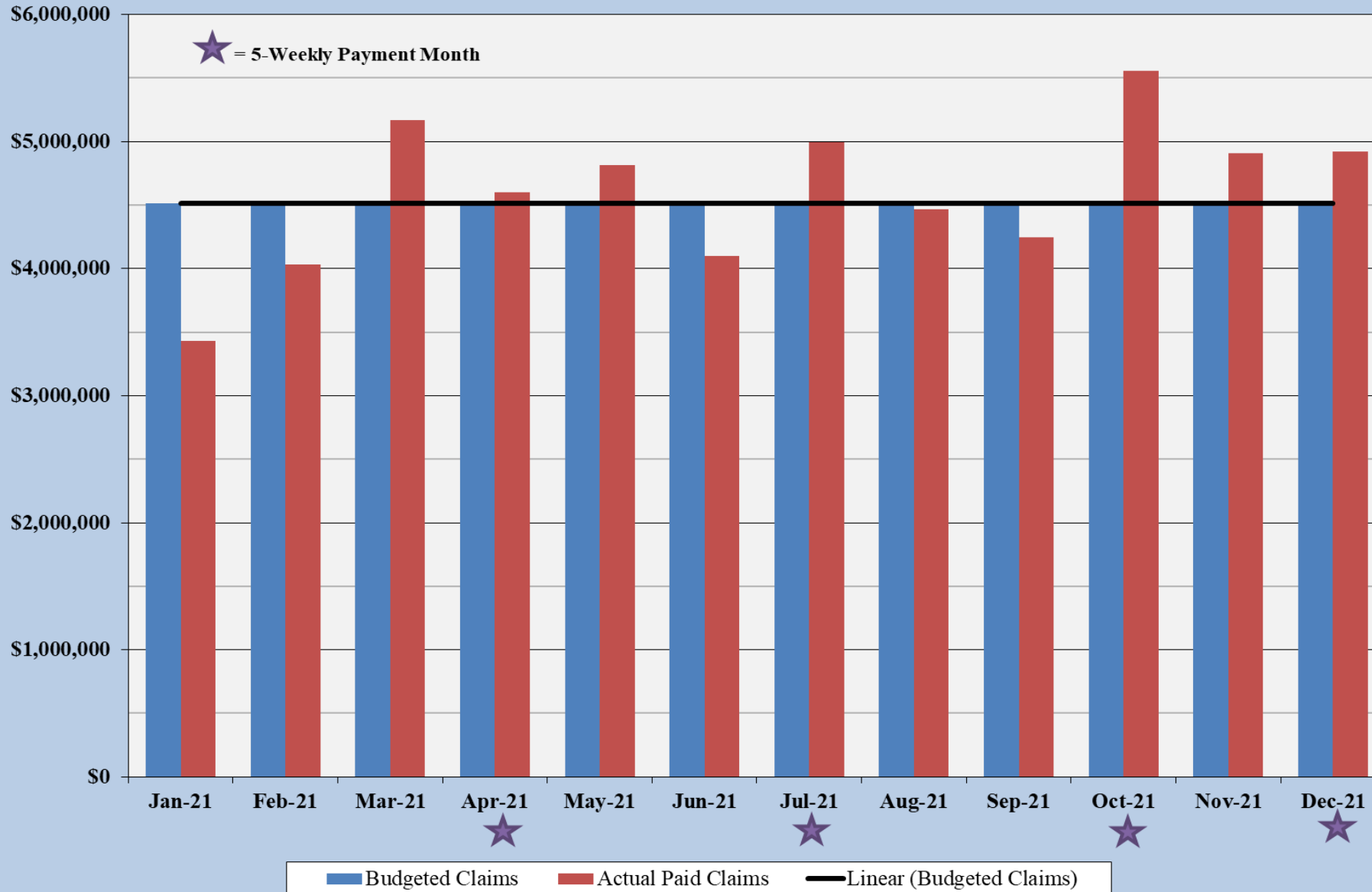
Greater Tompkins County Municipal Health Insurance Consortium

2021 Cumulative Paid Claims and Budgeted Claims by Month



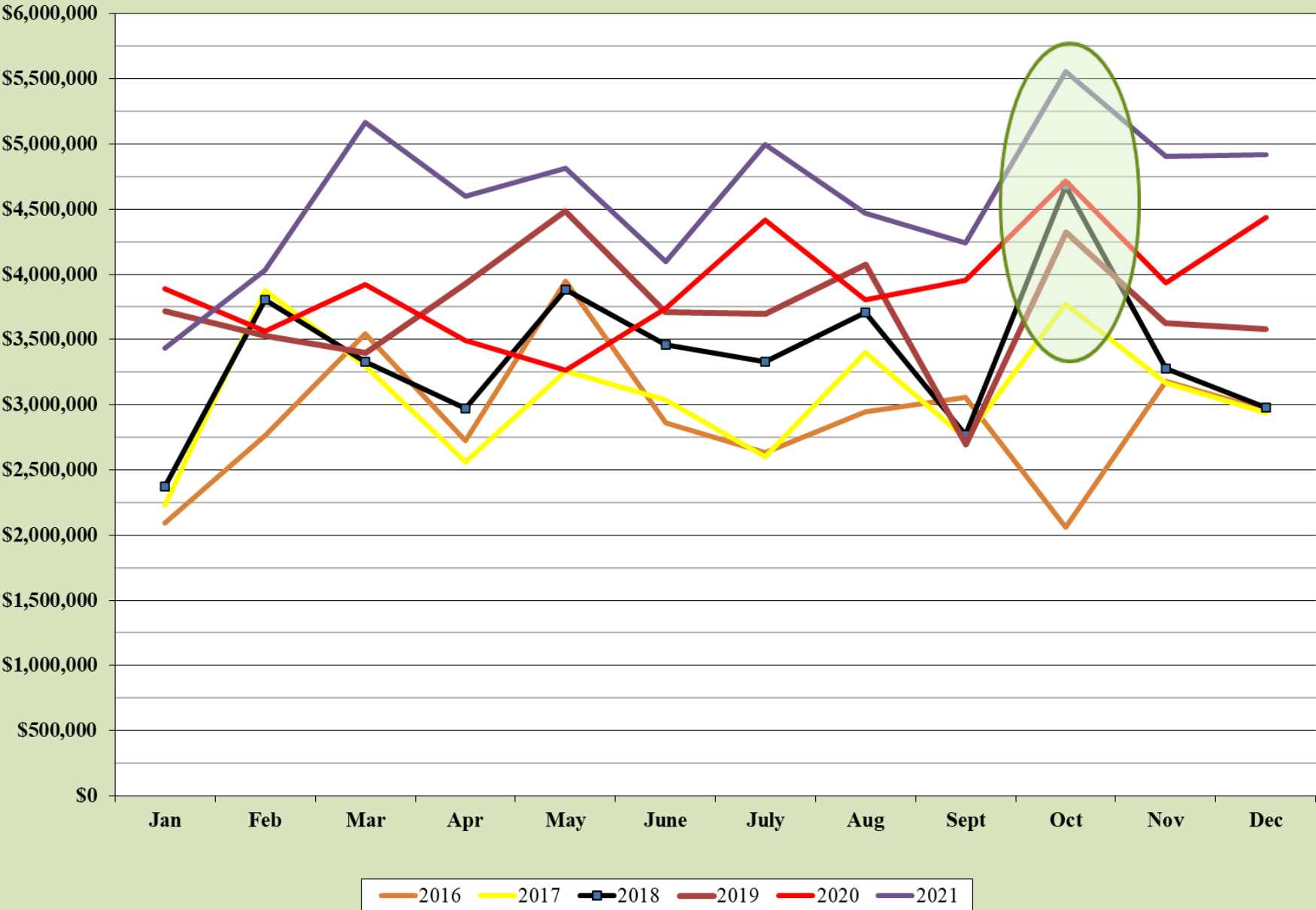
Greater Tompkins County Municipal Health Insurance Consortium

2021 Budgeted vs Actual Paid Claims by Month

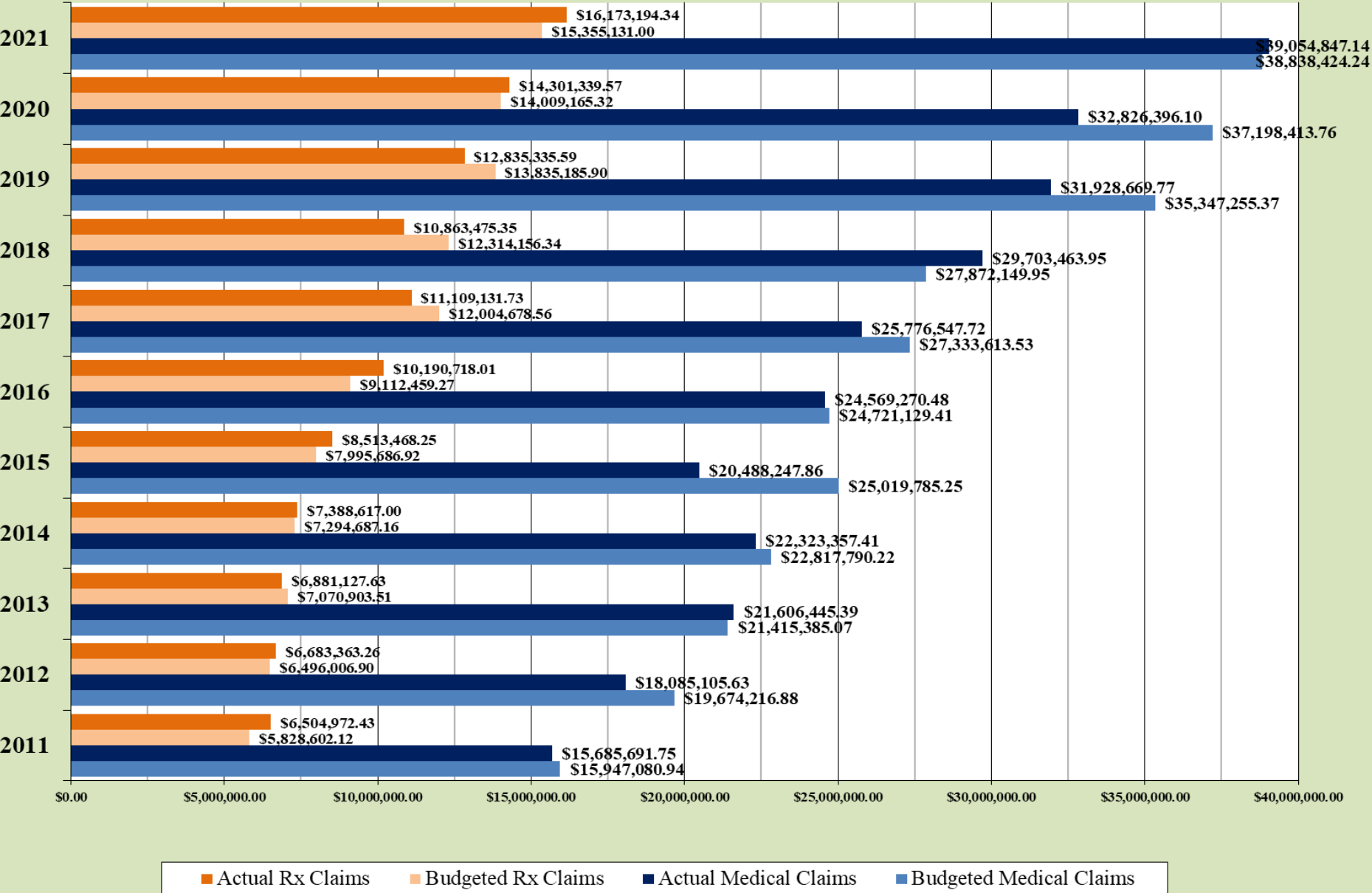


Greater Tompkins County Municipal Health Ins Consortium

2016-2021 Monthly Paid Claims by Fiscal Year



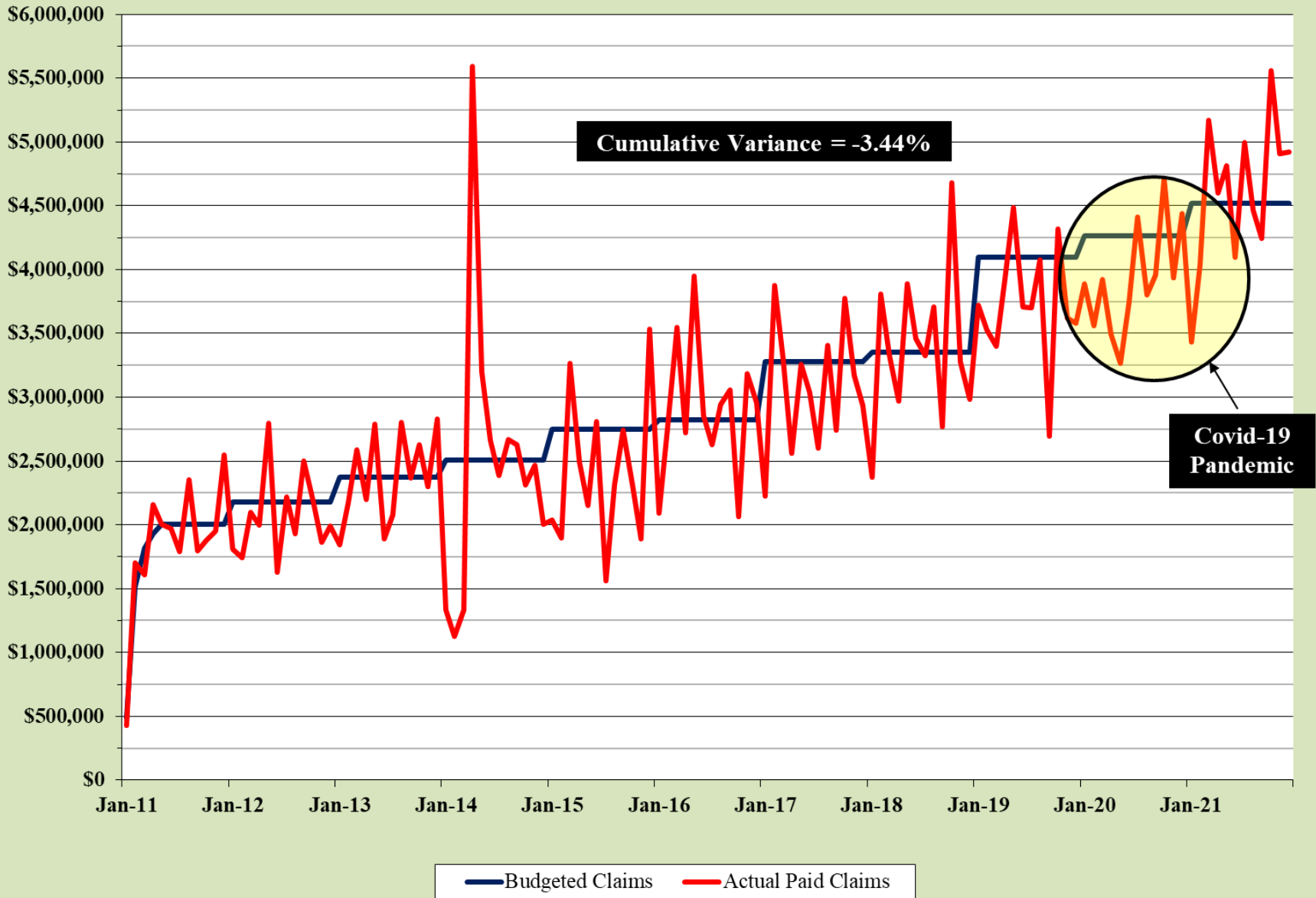
Greater Tompkins County Municipal Health Ins Consortium
2011-2021 (as of 12/31/2021) Annual Paid Claims v Budgeted Claims



Greater Tompkins County Municipal Health Ins Consortium

2011-2021 Monthly Paid Claims v Budgeted Claims

January 1, 2011 to December 31, 2021



APPROVED
MEDICAL
CLAIM



Section 4

High-Cost Claimants Catastrophic Self-Insurance Pool

Large Loss and Catastrophic Claims History

Greater Tompkins County Municipal Health Insurance Consortium

Large Loss and Catastrophic Claims History (as of December 31, 2021)

Fiscal Year	Specific Stop-Loss Deductible	Number of Covered Lives	# of Claimants with Claims >\$100,000	# of Claimants with Claims >\$200,000	# of Claimants with Claims >\$300,000	# of Claimants with Claims >\$400,000	# of Claimants with Claims >\$500,000	Total Large Loss Claims Paid	Claim Dollars in Excess of Deductible	Stop-Loss Insurance Premium Paid
2011	\$250,000.00	4,400	13	3	1	0	0	\$2,357,898.22	\$146,063.45	\$384,392.52
2012	\$275,000.00	4,448	16	6	3	2	1	\$3,904,221.28	\$1,136,196.38	\$361,366.41
2013	\$300,000.00	5,077	22	7	4	1	0	\$4,079,308.91	\$292,967.64	\$592,381.65
2014	\$300,000.00	5,012	18	6	1	1	0	\$3,494,872.81	\$184,734.14	\$720,784.39
2015	\$400,000.00	5,021	23	2	1	1	1	\$3,722,006.77	\$125,880.36	\$642,080.30
2016	\$400,000.00	5,063	39	4	1	1	1	\$6,070,055.86	\$242,433.49	\$766,281.18
2017	\$450,000.00	5,172	24	12	1	1	0	\$3,057,208.40	\$8,294.21	\$738,819.42
2018	\$600,000.00	5,201	45	10	4	3	3	\$8,913,105.20	\$453,672.85	\$442,185.54
2019	\$600,000.00	6,174	46	14	3	2	1	\$8,874,919.83	\$29,295.28	\$693,190.30
2020	\$1,000,000.00	6,277	60	18	5	3	1	\$11,290,214.72	\$0.00	\$264,390.72
2021	\$1,000,000.00	6,304	63	22	8	5	5	\$13,310,337.06	\$0.00	\$270,471.20
Totals		58,149	369	104	32	20	13	\$69,074,149.06	\$2,619,537.80	\$5,876,343.63
Averages	\$506,818.18	5,286	33.545	9.455	2.909	1.818	1.182	\$6,279,468.10	\$238,139.80	\$534,213.06

Overall Stop-Loss Insurance Loss Ratio (Paid Claims ÷ Premium) = 44.58%

Large Loss and Catastrophic Claims History

Fiscal Year	Specific Stop-Loss Deductible	Number of Covered Lives	Number of Large Loss Claimants	Large Loss Claimants % of Covered Lives	Stop-Loss Insurance Premium Paid	Total Large Loss Claims Paid	Annual Paid Claims Total	Large Loss Claims % of Total Claims	Catastrophic Claims Reserve	Catastrophic Reinsurance Pool Payments
2011	\$250,000.00	4,400	13	0.30%	\$384,392.52	\$2,357,898.22	\$22,190,664.18	10.63%	n/a	n/a
2012	\$275,000.00	4,448	16	0.36%	\$361,366.41	\$3,904,221.28	\$24,768,468.89	15.76%	n/a	n/a
2013	\$300,000.00	5,077	22	0.43%	\$592,381.65	\$4,079,308.91	\$28,487,573.02	14.32%	n/a	n/a
2014	\$300,000.00	5,012	18	0.36%	\$720,784.39	\$3,494,872.81	\$29,711,974.41	11.76%	\$600,000.00	n/a
2015	\$400,000.00	5,021	23	0.46%	\$642,080.30	\$3,722,006.77	\$29,001,716.11	12.83%	\$1,050,000.00	n/a
2016	\$400,000.00	5,063	39	0.77%	\$766,281.18	\$6,070,055.86	\$34,338,926.47	17.68%	\$1,050,000.00	n/a
2017	\$450,000.00	5,172	24	0.46%	\$738,819.42	\$3,057,208.40	\$36,885,679.45	8.29%	\$1,350,000.00	n/a
2018	\$600,000.00	5,201	45	0.87%	\$442,185.54	\$8,913,105.20	\$40,566,939.30	21.97%	\$2,000,000.00	n/a
2019	\$600,000.00	6,174	46	0.75%	\$693,190.30	\$8,874,919.83	\$44,764,005.36	19.83%	\$2,800,000.00	n/a
2020	\$1,000,000.00	6,277	60	0.96%	\$264,390.72	\$11,290,214.72	\$47,284,890.14	23.88%	\$5,032,220.00	\$0.00
2021	\$1,000,000.00	6,304	63	1.00%	\$270,471.20	\$13,310,337.06	\$55,410,491.28	24.02%	\$4,986,101.85	\$805,366.65

On Average 0.63% of the Covered Lives Account for 17.56% of Paid Claims

Catastrophic Claims Self-Insurance Pool Activity

		<i>Actual</i>	<i>as of 12/31/2021</i>
		2020 Fiscal Year	2021 Fiscal Year
Budgeted Premium	\$600,000 Deductible	\$762,505.96	\$876,881.85
Actual Premium Paid	\$1,000,000 Deductible	\$264,390.72	\$270,471.20
Premium Savings		\$498,115.23	\$606,410.65
Member # 000001179452	Deductible (Laser Applied)	\$1,000,000.00	\$1,000,000.00
	Actual Claims Paid	\$798,499.59	\$592,519.30
	Catastrophic Claims Pool	\$0.00	\$0.00
Member # 000014335319	Deductible	\$500,000.00	\$500,000.00
	Actual Claims Paid		\$686,798.19
	Catastrophic Claims Pool	\$0.00	\$186,798.19
Member # 000014235037	Deductible	\$500,000.00	\$500,000.00
	Actual Claims Paid		\$633,727.34
	Catastrophic Claims Pool	\$0.00	\$133,727.34
Member # 000012168307	Deductible	\$500,000.00	\$500,000.00
	Actual Claims Paid		\$836,622.21
	Catastrophic Claims Pool	\$0.00	\$336,622.21
Member # 000001551134	Deductible	\$500,000.00	\$500,000.00
	Actual Claims Paid		\$648,218.91
	Catastrophic Claims Pool	\$0.00	\$148,218.91
Net Impact on Fund Balance		\$498,115.23	-\$198,956.00

* **Budgeted Premium** is defined as the premium amount the Consortium would have paid if they continued with the previous stop-loss insurance policy of a \$600,000 Deductible

* **Actual Premium Paid** is defined as the actual premium amount paid by the Consortium for the current stop-loss insurance policy of a \$1,000,000 Deductible

* **Laser Applied** is defined as the laser deductible the stop-loss insurance company would have applied to the specific individual if a \$600,000 Deductible stop-loss insurance policy was selected

The “Catastrophic Claims Self-Insurance Pool” was established by the Consortium’s Board of Directors prior to the start of the 2020 Fiscal Year to allow the Consortium to lower the cost of stop-loss insurance by raising the specific deductible and ultimately assuming more risk on an annual basis. To cover this risk, the Catastrophic Claims Reserve totaling \$4.5 million was converted to this “Pool”. In addition, each year the estimated premium variance between a \$600,000 specific deductible stop-loss insurance plan and a \$1 million specific deductible stop-loss insurance plan will be ceded into this “Pool” as part of the budget process. Lastly, any interest earned on this “Pool” will be credited to the “Pool” to help replenish funds when/if catastrophic claims are paid out of the “Pool”.

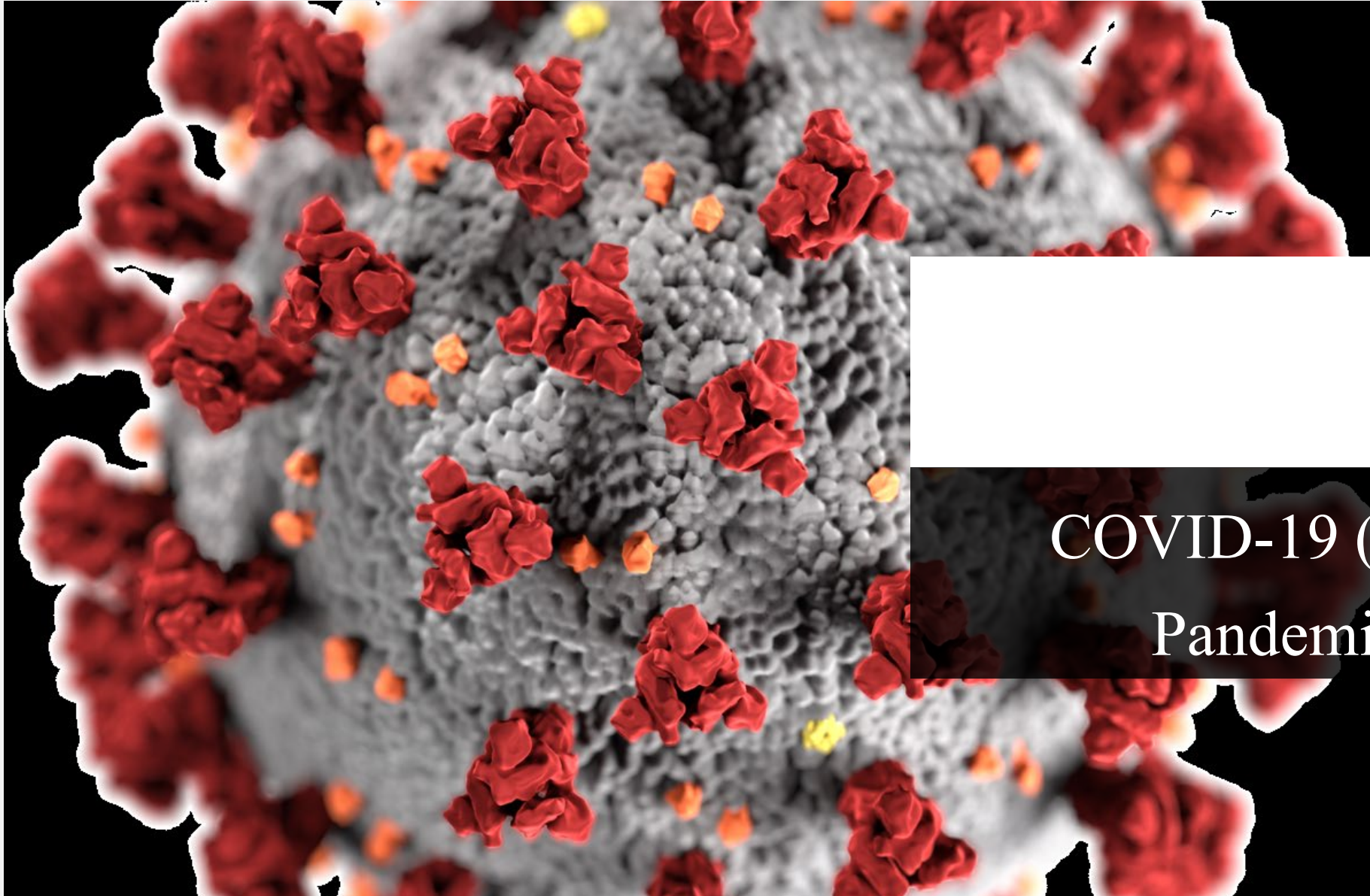
Catastrophic Claims Self-Insurance Pool Examples

	<i>Actual</i>	<i>as of 12/31/2021</i>
	2020 Fiscal Year	2021 Fiscal Year
Beginning Balance	\$4,500,000	\$5,032,220
Interest Income	\$34,105	\$0
Premium Savings	\$498,115	\$606,411
(Catastrophic Claims)	\$0	(\$805,367)
Ending Balance	\$5,032,220	\$4,833,264

In the example above, we show what the transfer of funds would look like based on the resolution as it is currently drafted. This model would budget the Specific Stop-Loss Insurance Premium based on a policy with a \$600,000 deductible. The delta between the budgeted premium and actual premium would flow through to the Catastrophic Claims Self-Insurance Pool from Unencumbered Fund Balance which would then be used along with the existing balance to pay any claims which fall in the corridor of more than \$500,000 but less than \$1,000,000.

In the example below, we show what the transfer of funds would look like based on the budget reflecting only the premium for the \$1,000,000 Specific Stop-Loss Insurance Deductible. In this example, only the existing balance in the Catastrophic Claims Self-Insurance Pool would be used to pay any claims which fall in the corridor of more than \$500,000 but less than \$1,000,000.

	<i>Actual</i>	<i>as of 12/31/2021</i>
	2020 Fiscal Year	2021 Fiscal Year
Beginning Balance	\$4,500,000	\$5,032,220
Interest Income	\$34,105	\$0
Premium Savings	\$498,115	\$0
(Catastrophic Claims)	\$0	(\$805,367)
Ending Balance	\$5,032,220	\$4,226,854



Section 5

COVID-19 (coronavirus) Pandemic Impact

3/2020 - 1/2022 COVID-19 Pandemic Impact

Tompkins County Key Facts:

1. Tompkins County has approximately 103,000 residents.
2. According to the New York State Department of Health web-site, as of January 29th
 - a) There have been approximately 2,886,850 tests conducted of people in Tompkins County for the presence of COVID-19 (coronavirus).
 - b) There have been 16,282 positive test results in Tompkins County, which is 0.564% of the tested population and approximately 15.808% of the County's total population with 76 reported deaths amongst county residents.
3. The other Counties in the Consortium have the following results:

a) Cayuga	323,804 Tests Conducted	14,965 Positive Results (4.62%)
b) Cortland	260,028 Tests Conducted	9,754 Positive Results (3.75%)
c) Seneca	112,390 Tests Conducted	5,395 Positive Results (4.80%)
d) Tioga	187,303 Tests Conducted	9,981 Positive Results (5.33%)

2020-2021 COVID-19 Pandemic Impact

Impact on the Greater Tompkins County Municipal Health Insurance Consortium

1. Paid medical claims have primarily been below budget since March 2020. This trend has shifted the last half of 2021, primarily due to several high-cost claims.

Fiscal Year	Per Excellus BCBS Reports		Per ProAct, Inc. Reports			
	Medical Claims		Rx Claims		Combined Paid Claims	
	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount
2016	\$24,998,992.90	\$962,874.68	\$10,645,984.27	\$640,466.47	\$35,644,977.17	\$1,603,341.15
2017	\$26,235,020.36	\$1,065,840.07	\$11,079,834.05	\$664,302.99	\$37,314,854.41	\$1,730,143.06
2018	\$30,139,463.68	\$1,080,901.79	\$10,863,500.35	\$652,109.29	\$41,002,964.03	\$1,733,011.08
2019	\$28,483,790.87	\$1,182,457.28	\$12,839,601.51	\$744,713.47	\$41,323,392.38	\$1,927,170.75
2020	\$26,919,706.56	\$1,034,775.49	\$13,943,138.60	\$766,424.77	\$40,862,845.16	\$1,801,200.26
2021	\$32,014,401.22	\$1,132,612.91	\$16,172,798.24	\$885,892.19	\$48,187,199.46	\$2,018,505.10
Totals	\$168,791,375.59	\$6,459,462.22	\$75,544,857.02	\$4,353,909.18	\$244,336,232.61	\$10,813,371.40
	96.31%	3.69%	94.55%	5.45%	95.76%	4.24%

2019 Average Monthly Medical Claims	\$2,373,649.24
2020 First 3-Months Avg. Monthly Medical Claims	\$2,411,071.18
2020 Last 9-Months April to December Medical Claims	\$2,187,388.11
2021 Average Monthly Medical Claims	\$2,667,866.77

2020-2021 COVID-19 Medical Claims Costs

Date	Number of Contracts	Number of Members	Number of Tests	Number of Members Diagnosed	Inpatient Plan Cost	Outpatient Plan Cost	Physician Plan Cost	Other Plan Cost	Total Plan Cost
Jan-20	2,962	6,326	0	0	\$0.00	\$0.00	\$695.86	\$0.00	\$695.86
Feb-20	2,964	6,344	0	0	\$0.00	\$9,452.56	\$2,474.16	\$0.00	\$11,926.72
Mar-20	2,953	6,326	75	2	\$0.00	\$29,099.60	\$2,593.66	\$0.00	\$31,693.26
Apr-20	2,956	6,317	87	3	\$29,437.22	\$39,228.57	\$4,800.92	\$0.00	\$73,466.71
May-20	2,961	6,328	263	10	\$7,024.08	\$76,125.84	\$14,364.56	\$253.12	\$97,767.60
Jun-20	2,944	6,282	283	6	\$34,111.26	\$69,793.02	\$15,139.62	\$0.00	\$119,043.90
Jul-20	2,941	6,276	330	3	\$12,928.56	\$101,043.60	\$18,325.92	\$125.52	\$132,423.60
Aug-20	2,932	6,262	272	5	\$75,018.76	\$88,168.96	\$16,343.82	\$62.62	\$179,594.16
Sep-20	2,932	6,246	245	6	\$124,857.54	\$122,296.68	\$25,046.46	\$124.92	\$272,325.60
Oct-20	2,930	6,227	338	12	\$231,333.05	\$90,416.04	\$33,688.07	\$622.70	\$356,059.86
Nov-20	2,922	6,195	350	23	\$159,954.90	\$76,322.40	\$46,462.50	\$867.30	\$283,607.10
Dec-20	2,927	6,198	186	16	\$0.00	\$48,902.22	\$25,163.88	\$1,797.42	\$75,863.52
Jan-21	3,045	6,343	856	93	\$184,391.01	\$299,706.75	\$54,740.09	\$2,664.06	\$541,501.91
Feb-21	3,043	6,333	300	28	\$406,261.95	\$114,310.65	\$37,174.71	\$63.33	\$557,810.64
Mar-21	3,048	6,347	455	31	\$363,302.28	\$196,185.77	\$41,953.67	\$698.17	\$602,139.89
Apr-21	3,040	6,322	426	22	\$285,122.20	\$200,154.52	\$34,834.22	\$1,643.72	\$521,754.66
May-21	3,021	6,287	301	14	\$195,902.92	\$156,169.08	\$29,863.25	\$314.35	\$382,249.60
Jun-21	3,024	6,296	242	8	\$428,568.72	\$152,489.12	\$24,428.48	\$188.88	\$605,675.20
Jul-21	3,025	6,286	182	2	\$461,518.12	\$68,894.56	\$22,252.44	\$62.86	\$552,727.98
Aug-21	3,022	6,281	441	28	\$264,430.10	\$259,028.44	\$34,671.12	\$62.81	\$558,192.47
Sep-21	3,035	6,287	609	40	\$762,675.97	\$234,505.10	\$59,537.89	\$46,586.67	\$1,103,305.63
Oct-21	3,031	6,272	412	40	\$239,653.12	\$139,426.56	\$65,605.12	\$125.44	\$444,810.24
Nov-21	3,041	6,288	341	53	\$241,396.32	\$159,086.40	\$69,733.92	\$2,326.56	\$472,543.20
Dec-21	3,053	6,305	279	85	\$78,686.40	\$64,374.05	\$53,844.70	\$1,261.00	\$198,166.15
Totals	71,752	150,974	7,273	530	\$4,586,574.48	\$2,795,180.49	\$733,739.04	\$59,851.45	\$8,175,345.46

Above data represents hospital, medical, and surgical claims costs reported to and adjudicated by Excellus BlueCross BlueShield related to covered members who presented a diagnosis of coronavirus (COVID-19) from January 1, 2020 through December 31, 2021.

2020-2021 COVID-19 Pandemic Impact

Impact on the Greater Tompkins County Municipal Health Insurance Consortium (continued)

2. The Excellus data shows paid claims for 2020 and 2021 Fiscal Years as of December 31, 2021 were collectively just under \$4.155 million below the budgeted amount for the time period.
3. October 2021, again, was a relatively high claim month. We show for the past 5-years that October was above budget each year. The last six months, medical claims ran higher than the typical trend.
4. Currently we still do not see any major negative impacts to the Consortium from a paid claim's perspective as:
 - a) The hospitals and doctors can only perform so many procedures in a day which we believe means that there will not be any major compression when they start performing services on a more regular schedule.
 - b) Most of the severe cases have involved older members who are on Original Medicare Parts A and B which limits the claims exposure to the Consortium to some extent.
 - c) There will likely be some hesitation in patients seeking care due to concerns that they may expose themselves to the coronavirus or other illness.

2020 - 2021 COVID-19 Pandemic Impact

Impact on the Greater Tompkins County Municipal Health Insurance Consortium (continued)

5. The pandemic has “forced” covered members to embrace telehealth and telemedicine approaches to medical care as covered members have not been able to see their primary care physicians for minor or routine services in recent months.
 - a) In 2020, the Consortium paid for 11,871 telehealth visits for 6,282 covered members at a total cost of \$1,185,518.42. In 2021 these numbers totaled 13,636 visits for 6,814 covered members with a total paid amount of \$1,374,179.10. To put this in perspective, in 2019 there were a total of 40 telehealth visits associated with Consortium covered members for a total cost of \$996.98 for the entire year.
 - b) According to Excellus’ reports, the Consortium had a total of 90 covered members registered for telemedicine services as of January 2020. As of December 31, 2021, this number has nearly doubled to 178. Although the increase, it is clear from these numbers that most enrollees are more comfortable using this type of technology with their own personal physician as opposed to enrolling in a service offered by an insurance carrier, like Excellus BlueCross BlueShield.



Section 6

2020 Fiscal Year-End
Net Income, Liabilities, and Reserves

2020 Net Income, Liabilities & Reserves

	<i>Actual Results 2016 Fiscal Year</i>	<i>Actual Results 2017 Fiscal Year</i>	<i>Actual Results 2018 Fiscal Year</i>	<i>Actual Results 2019 Fiscal Year</i>	<i>Actual Results 2020 Fiscal Year</i>
Total Assets	\$24,290,896	\$26,531,122	\$27,063,899	\$32,080,107	\$33,511,789
Liabilities and Reserves					
IBNR Claims Reserve	\$4,430,732	\$4,540,654	\$4,931,847	\$5,637,280	\$5,828,922
Accounts Payable	\$497,510	\$494,991	\$488,269	\$605,015	\$610,385
Deferred Revenue	\$361,369	\$171,520	\$20	\$509,798	\$1,072,302
Capital Surplus Account	\$1,925,998	\$2,038,725	\$2,120,085	\$2,514,837	\$2,409,497
Catastrophic Claims Reserve	\$1,050,000	\$1,350,000	\$2,000,000	\$2,800,000	\$5,032,220
Rate Stabilization Reserve	\$1,758,496	\$1,868,819	\$2,100,000	\$2,184,812	\$3,391,769
Unencumbered Fund Balance	\$14,266,791	\$16,066,413	\$15,423,678	\$17,828,365	\$15,166,694
Fund Balance as % of Premium	37.04%	39.40%	36.38%	35.45%	31.47%

Prior to the “premium holiday”, the 2020 Fiscal Year Net Income was substantially above the projected budget for the year. This resulted in the net cash assets (unencumbered fund balance) being well above the targeted level as set by the Consortium’s Audit & Finance Committee. This result was achieved even with the increase in the Rate Stabilization Reserve from 5% of Expected Paid Claims to 7.5% of Expected Paid Claims and with an increase in the Catastrophic Claims Reserve from \$2.8 million to \$5.03 million, plus interest and the stop-loss premium variance. Even with the “premium holiday”, the Consortium still finished the year with an Unencumbered Fund Balance which exceeded the budget projections at over \$15 million.

2021 Year to Date Net Income, Liabilities and Reserves

	2021 <i>Adopted Budget</i>	2021 <i>Revised Budget</i>	2021 <i>Year-to-Date</i>	2021 <i>Actual Results</i>	<i>Variance</i>	<i>% Difference</i>
Total Income	\$57,326,288.89	\$56,753,325.28	\$56,753,325.28	\$55,681,645.32	-\$1,071,679.96	-1.89%
Total Expenses	\$57,807,948.19	\$57,630,197.49	\$57,528,146.78	\$58,393,299.19	\$865,152.41	1.50%
Net Income	-\$481,659.30	-\$876,872.21	-\$774,821.50	-\$2,711,653.87	-\$1,936,832.37	

Ending Balance	\$30,835,445.34	\$31,155,532.43	\$30,542,283.14	\$29,320,750.77	-\$1,221,532.37	-4.00%
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Liabilities and Reserves						
4010	IBNR Claims Liability Per §4706(a)(1)	\$6,144,909.49	\$6,144,909.49	\$6,144,909.49	\$6,649,258.95	12.0% of Incurred Claims
5010	Surplus Account Per §4706(a)(5)	\$2,637,289.44	\$2,637,289.44	\$2,637,289.44	\$2,669,495.09	5.0% of Premium Income
5014	Rate Stabilization Reserve	\$3,840,568.43	\$3,840,568.43	\$3,840,568.43	\$4,155,786.85	7.5% of Paid Claims
5012	Catastrophic Claims Reserve	\$4,500,000.00	\$4,986,101.85	\$4,986,101.85	\$5,032,220.00	Calculation Per Resolution
3500	Excellus BCBS Advance Deposit	\$761,400.00	\$722,400.00	\$722,400.00	\$722,400.00	Adj. for Prior Period Adj. (\$46,100)
Total Liabilities and Reserves		\$17,884,167.36	\$18,331,269.21	\$18,331,269.21	\$19,229,160.88	

Unencumbered Fund Balance	\$12,951,277.99	\$12,824,263.22	\$12,211,013.93	\$10,091,589.89
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Pending Audit & Cat. Claims Adj.

The Catastrophic Claims Self-Insurance Pool Reimbursements and Funding is proposed to be adjusted annually per the Resolution being presented for consideration. This resolution lays out the funding formula moving forward. The actual funding levels will be reviewed and acted on an annual basis at each fiscal year end.

The Unencumbered Fund Balance shown above for the 2021 Fiscal Year “Actual Results” represents slightly more than 18% of the Consortium’s Total Income for the year.

Liabilities and Reserves - Defined

LIABILITIES

- The liabilities associated with the Consortium's operations are directly related to covered medical benefits that are incurred by Consortium Members which have yet to be received or paid by the insurance company or plan administrator. For example, if the Consortium were to end its operations on any given December 31st there are going to be covered medical services received by covered members on or before December 31st which will not be paid until sometime after December 31st. This is commonly referred to in the industry as an Incurred but Not Reported (IBNR) and Incurred but Not Paid (IBNP) Claims Liabilities.
- In recent years with the increases in technology associated with the billing and payment of medical benefit claims and with the increase in the volume of prescription drug claims which are inherently electronic in nature, the overall value of this liability has decreased as a percentage of expected/paid claims. In fact, twenty years ago, this liability equaled approximately the value of three (3) months (24%) of annual expected/paid claims. Today, this value is closer to one (1) month (8%) of expected incurred claims and the New York State Department of Financial Services has set this liability for the 2020 Fiscal Year to equal 12.00% of the expected incurred claims estimate for the year.

Liabilities and Reserves - Defined

RESERVES

- The reserves held by the Consortium are the cash assets which have been assigned to cover a direct liability or to assist the Consortium with cash flow and provide protection during times when paid claim projections are exceeded. These cash assets have also been a source of revenue through the interest earned to the Consortium which has allowed the Consortium to hold premium increases down in previous years.
- The Consortium has historically maintained the following reserves:
 - Incurred But Not Report (IBNR) Claims Liability Reserve (statutory reserve)
 - Surplus Account (statutory reserve)
 - Catastrophic Claims Reserve (discretionary reserve)
 - Rate Stabilization Reserve (discretionary reserve)
- Please refer to the following slides for a detailed description of each reserve classification.

Liabilities and Reserves - Defined

INCURRED BUT NOT REPORTED (IBNR) CLAIMS LIABILITY RESERVE

- The IBNR Claims Reserve is required for the Consortium to be compliant with §4706(a)(1) of the New York State Insurance Law. The New York State Department of Financial Services requires this reserve to be funded at an amount equal to 12.0% of expected incurred claims. We believe this is a conservative estimate of the liability, but we understand the Department has always acted based on their philosophy to maintain this level of reserve as they want the Consortium Member Claims to be fully-funded at all times.
- Maintaining this reserve at an insufficient amount to cover the liability could result in a Municipal Corporation owing a significant amount of money if they chose to leave the Consortium. A Municipal Corporation's decision to leave or stay in the Consortium should not be affected by the Consortium's lack of adequate reserves and this is a philosophy we feel the Consortium should embrace, even during tougher economic times.
- At the end of the 2020 Fiscal Year this reserve was funded at \$5,828,922 (12.0% of projected hospital, medical, surgical, and prescription drug incurred claims). It should be noted that Excellus BlueCross BlueShield does provide an estimate of this liability in their annual renewal documents. For the 2020 Fiscal Year, Excellus' estimate of this liability was \$4,277,400 which is approximately 8% of the expected claims cost for the year.

Liabilities and Reserves - Defined

SURPLUS ACCOUNT

- The Consortium is required to fund the Surplus Account at an amount equal to 5.0% of expected premium income for the year. By funding this reserve at this level, the Consortium is operating in compliance with §4706(a)(5)(A) of the New York State Insurance Law.
- Article 47 of the New York State Insurance Law describes this reserve as being established and maintained for the sole purpose of satisfying unexpected obligations of the Municipal Cooperative Health Benefits Plan. Article 47 further states that this reserve is for the purpose of satisfying unexpected obligations of the Plan in the event of termination or abandonment.
- At the end of the 2020 Fiscal Year this reserve was funded at \$2,409,497 (5.0% of actual premium income of \$48,189,940). It should be noted that the Consortium's premium income will show below budget for the fiscal year due to the premium holiday. As a result, the Consortium may be required to calculate this reserve based on the full expected premium for the fiscal period which means this reserve level may be slightly higher at the end of the year than the projected amount.

Liabilities and Reserves - Defined

CATASTROPHIC CLAIMS RESERVE

- This reserve was established by the Consortium's Board of Directors to protect the financial integrity of the Consortium as the Board made the decision to increase the deductible associated with the Specific Stop-Loss Policy to reduce expenses. It was agreed that the Consortium's risk pool is so substantial in size that it can absorb a significant number of large losses without damaging the financial integrity of the Consortium.
- It was our professional opinion and the opinion of the Board of Directors that there was an acceptable reward versus risk ratio between the reduction of this significant expense, the exposure of large losses, and the cash asset position of the Consortium. This conclusion led the Board of Directors to increase the Specific Stop-Loss Insurance Deductible to \$1,000,000 for the 2020 Fiscal Year. It was recognized that this decision created a sizeable increase in the exposure to the Plan. To mitigate this exposure, the Board of Directors made the decision to fund this reserve at an amount equal to \$5,032,220 for the 2021 Fiscal Year.

Liabilities and Reserves - Defined

RATE STABILIZATION RESERVE

- When the Consortium's cash assets were at a sufficient level, the Board of Directors made the decision to establish the Rate Stabilization Reserve at an amount equal to 7.5% of the expected hospital, medical, surgical, and prescription drug claim payments for the year.
- It is our goal to work with the Consortium to ensure future fiscal year budgets are developed with this reserve being maintained.
- These funds would be used to “bridge the gap” during an associated hyper-inflationary period relative to paid claims allowing the Board of Directors to establish a multiple year plan to adjust revenue (premiums) and prevent a significant increase in premium rates during a single fiscal period.



Section 7

2021 Fiscal Year-to-Date Summary & Observations

2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

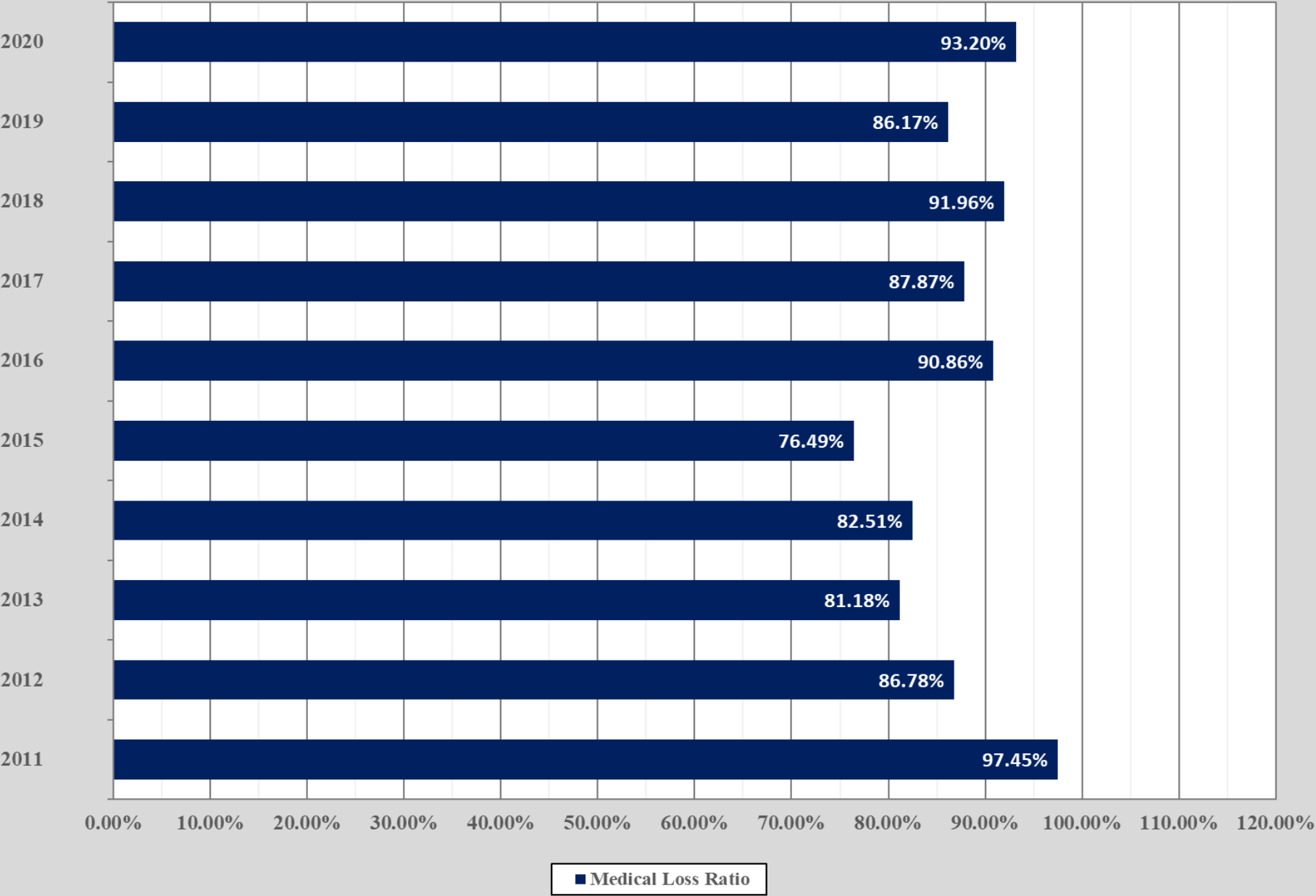
2021 Fiscal Year-to-Date Summary & Observations

1. The **overall revenue of the Consortium is 1.89% below budget** for the 2021 fiscal year. We had estimated that Consortium would be within 2% - 2.5% of its revenue budget forecast. This result was improved by enhanced pharmaceutical manufacturer rebates received from ProAct, Inc. The Consortium did receive a RX Rebate payment in December, which improved the financial position. Unfortunately, even with the increased management of the cash assets by the Consortium's Financial Team, which includes the assistance from Wilmington Trust, the pandemic caused interest income to underperform the results seen in prior years.
2. The combined **Medical and Rx Paid Claims were 1.91% above budget** for the fiscal year ended December 31, 2021. We continue to monitor paid claims as the medical community continues to evolve with COVID-19. Historically, the claims paid during the latter part of the Calendar Year tend to be a bit higher as annual deductibles and out-of-pocket maximums are met. In addition, we do anticipate some modest growth in medical claims costs as covered members have procedures performed which had been delayed due to the pandemic.

2021 Fiscal Year-to-Date Summary & Observations

3. Overall, the Greater Tompkins County Municipal Health Insurance Consortium finished the year with a larger operating deficit than planned. Several larger claims in the later months pushed this a bit higher than projected only three months ago. However, with the strong financial position of the Consortium, we are still hopeful that the Consortium will be able to maintain modest premium increases for the next several fiscal years, therefore, providing financial stability to the Participating Municipalities.
4. Lastly, we want to point out that the “unaudited” fiscal results experienced by the Consortium clearly support the Board of Director’s decision to increase premium rates by a modest 5% for the 2022 Fiscal Year, especially following the premium holiday that was approved for December 2020. We must continue to carefully monitor the financial results over the 2022 Fiscal Year, especially the varying impact of COVID-19, as we begin the development of the 2023 Fiscal Year Budget. Through proper management of established reserve funds, we hope the Consortium Board of Directors will have the opportunity to continue to keep premium increases at a very modest level for the next several fiscal periods.

Greater Tompkins County Municipal Health Insurance Consortium
Medical Loss Ratio (Paid Claims ÷ Premium)



2021 Fiscal Year
Medical Loss Ratio
Equals 103.78%

Greater Tompkins County Municipal Health Insurance Consortium
Hospital, Medical, and Surgical Paid Claims and Claims Related Expenses

	Per Excellus BCBS Reports				Per ProAct, Inc. Reports									
	Medical Claims		Rx Claims		Combined Paid Claims		Member Cost Per Life		Plan Cost Per Life		Member Cost Per Contract		Plan Cost Per Contract	
Date	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount	Number of Covered Lives	Average Cost Per Life	Number of Covered Lives	Average Cost Per Life	Number of Contracts	Average Cost Per Contract	Number of Contracts	Average Cost Per Contract
Jan-16	\$2,043,291.56	\$115,782.65	\$799,819.81	\$57,214.31	\$2,843,111.37	\$172,996.96	5,059	\$34.20	5,059	\$561.99	2,304	\$75.09	2,304	\$1,233.99
Feb-16	\$1,840,838.04	\$117,718.25	\$933,726.34	\$53,091.61	\$2,774,564.38	\$170,809.86	5,051	\$33.82	5,051	\$549.31	2,303	\$74.17	2,303	\$1,204.76
Mar-16	\$1,820,573.52	\$90,330.05	\$915,649.56	\$60,635.85	\$2,736,223.08	\$150,965.90	5,059	\$29.84	5,059	\$540.86	2,307	\$65.44	2,307	\$1,186.05
Apr-16	\$2,188,634.36	\$113,955.13	\$896,383.62	\$56,065.25	\$3,085,017.98	\$170,020.38	5,059	\$33.61	5,059	\$609.81	2,315	\$73.44	2,315	\$1,332.62
May-16	\$2,691,492.74	\$79,882.77	\$889,116.68	\$55,691.68	\$3,580,609.42	\$135,574.45	5,058	\$26.80	5,058	\$707.91	2,321	\$58.41	2,321	\$1,542.70
Jun-16	\$1,891,215.43	\$72,175.98	\$965,883.68	\$54,831.90	\$2,857,099.11	\$127,007.88	5,043	\$25.18	5,043	\$566.55	2,318	\$54.79	2,318	\$1,232.57
Jul-16	\$2,142,171.02	\$75,052.38	\$854,493.12	\$52,156.03	\$2,996,664.14	\$127,208.41	5,046	\$25.21	5,046	\$593.87	2,321	\$54.81	2,321	\$1,291.11
Aug-16	\$2,073,058.60	\$57,517.23	\$914,551.17	\$54,142.52	\$2,987,609.77	\$111,659.75	5,067	\$22.04	5,067	\$589.62	2,329	\$47.94	2,329	\$1,282.79
Sep-16	\$2,207,020.23	\$66,208.68	\$872,005.50	\$50,106.38	\$3,079,025.73	\$116,315.06	5,070	\$22.94	5,070	\$607.30	2,329	\$49.94	2,329	\$1,322.04
Oct-16	\$1,575,853.49	\$56,598.45	\$846,753.48	\$50,345.99	\$2,422,606.97	\$106,944.44	5,074	\$21.08	5,074	\$477.46	2,330	\$45.90	2,330	\$1,039.75
Nov-16	\$1,887,835.55	\$59,784.20	\$848,632.31	\$47,303.25	\$2,736,467.86	\$107,087.45	5,082	\$21.07	5,082	\$538.46	2,342	\$45.72	2,342	\$1,168.43
Dec-16	\$2,637,008.36	\$57,868.91	\$908,969.00	\$48,881.70	\$3,545,977.36	\$106,750.61	5,090	\$20.97	5,090	\$696.66	2,347	\$45.48	2,347	\$1,510.86
Totals	\$24,998,992.90	\$962,874.68	\$10,645,984.27	\$640,466.47	\$35,644,977.17	\$1,603,341.15	60,758	\$316.76	60,758	\$7,039.80	27,866	\$691.14	27,866	\$15,347.66
	96.29%	3.71%	94.33%	5.67%	95.70%	4.30%								

	Per Excellus BCBS Reports				Per ProAct, Inc. Reports									
	Medical Claims		Rx Claims		Combined Paid Claims		Member Cost Per Life		Plan Cost Per Life		Member Cost Per Contract		Plan Cost Per Contract	
Date	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount	Number of Covered Lives	Average Cost Per Life	Number of Covered Lives	Average Cost Per Life	Number of Contracts	Average Cost Per Contract	Number of Contracts	Average Cost Per Contract
Jan-17	\$1,600,852.30	\$58,258.48	\$1,029,465.44	\$62,790.74	\$2,630,317.74	\$121,049.22	5,203	\$23.27	5,203	\$505.54	2,399	\$50.46	2,399	\$1,096.42
Feb-17	\$2,611,052.60	\$181,094.39	\$847,986.02	\$48,897.68	\$3,459,038.62	\$229,992.07	5,199	\$44.24	5,199	\$665.33	2,400	\$95.83	2,400	\$1,441.27
Mar-17	\$2,451,855.43	\$142,906.32	\$846,476.55	\$58,701.97	\$3,298,331.98	\$201,608.29	5,201	\$38.76	5,201	\$634.17	2,404	\$83.86	2,404	\$1,372.02
Apr-17	\$2,147,886.70	\$101,289.01	\$834,321.13	\$50,232.30	\$2,982,207.83	\$151,521.31	5,205	\$29.11	5,205	\$572.95	2,406	\$62.98	2,406	\$1,239.49
May-17	\$1,871,057.57	\$90,810.01	\$968,911.34	\$58,583.02	\$2,839,968.91	\$149,393.03	5,177	\$28.86	5,177	\$548.57	2,398	\$62.30	2,398	\$1,184.31
Jun-17	\$2,360,986.68	\$93,829.33	\$1,017,500.09	\$57,361.17	\$3,378,486.77	\$151,190.50	5,173	\$29.23	5,173	\$653.10	2,393	\$63.18	2,393	\$1,411.82
Jul-17	\$1,777,407.10	\$59,473.16	\$862,229.27	\$55,400.52	\$2,639,636.37	\$114,873.68	5,158	\$22.27	5,158	\$511.76	2,389	\$48.08	2,389	\$1,104.91
Aug-17	\$2,122,773.00	\$56,667.85	\$878,157.12	\$54,715.07	\$3,000,930.12	\$111,382.92	5,158	\$21.59	5,158	\$581.80	2,392	\$46.56	2,392	\$1,254.57
Sep-17	\$2,235,121.49	\$73,283.96	\$927,066.53	\$54,900.16	\$3,162,188.02	\$128,184.12	5,153	\$24.88	5,153	\$613.66	2,395	\$53.52	2,395	\$1,320.33
Oct-17	\$2,334,880.53	\$75,935.54	\$974,753.22	\$55,915.42	\$3,309,633.75	\$131,850.96	5,142	\$25.64	5,142	\$643.65	2,393	\$55.10	2,393	\$1,383.05
Nov-17	\$2,254,677.13	\$60,708.68	\$916,695.77	\$52,085.90	\$3,171,372.90	\$112,794.58	5,143	\$21.93	5,143	\$616.64	2,394	\$47.12	2,394	\$1,324.72
Dec-17	\$2,466,469.83	\$71,583.34	\$976,271.57	\$54,719.04	\$3,442,741.40	\$126,302.38	5,148	\$24.53	5,148	\$668.75	2,402	\$52.58	2,402	\$1,433.28
Totals	\$26,235,020.36	\$1,065,840.07	\$11,079,834.05	\$664,302.99	\$37,314,854.41	\$1,730,143.06	62,060	\$334.31	62,060	\$7,215.92	28,765	\$721.57	28,765	\$15,566.18
	96.10%	3.90%	94.34%	5.66%	95.57%	4.43%								

Greater Tompkins County Municipal Health Insurance Consortium
Hospital, Medical, and Surgical Paid Claims and Claims Related Expenses

	Per Excellus BCBS Reports				Per ProAct, Inc. Reports									
	Medical Claims		Rx Claims		Combined Paid Claims		Member Cost Per Life		Plan Cost Per Life		Member Cost Per Contract		Plan Cost Per Contract	
Date	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount	Number of Covered Lives	Average Cost Per Life	Number of Covered Lives	Average Cost Per Life	Number of Contracts	Average Cost Per Contract	Number of Contracts	Average Cost Per Contract
Jan-18	\$2,008,493.31	\$112,675.58	\$991,547.92	\$65,438.75	\$3,000,041.23	\$178,114.33	5,211	\$34.18	5,211	\$575.71	2,427	\$73.39	2,427	\$1,236.11
Feb-18	\$2,277,627.17	\$153,157.03	\$884,565.37	\$56,318.31	\$3,162,192.54	\$209,475.34	5,220	\$40.13	5,220	\$605.78	2,440	\$85.85	2,440	\$1,295.98
Mar-18	\$2,923,824.86	\$135,951.53	\$869,153.35	\$59,805.21	\$3,792,978.21	\$195,756.74	5,212	\$37.56	5,212	\$727.74	2,434	\$80.43	2,434	\$1,558.33
Apr-18	\$2,247,898.94	\$91,997.51	\$864,749.25	\$56,193.34	\$3,112,648.19	\$148,190.85	5,218	\$28.40	5,218	\$596.52	2,436	\$60.83	2,436	\$1,277.77
May-18	\$2,261,291.01	\$87,044.89	\$998,451.63	\$57,582.02	\$3,259,742.64	\$144,626.91	5,169	\$27.98	5,169	\$630.63	2,420	\$59.76	2,420	\$1,347.00
Jun-18	\$2,932,001.34	\$96,915.25	\$965,921.67	\$54,464.07	\$3,897,923.01	\$151,379.32	5,180	\$29.22	5,180	\$752.49	2,428	\$62.35	2,428	\$1,605.40
Jul-18	\$1,889,911.38	\$70,290.17	\$913,096.06	\$54,337.40	\$2,803,007.44	\$124,627.57	5,188	\$24.02	5,188	\$540.29	2,439	\$51.10	2,439	\$1,149.24
Aug-18	\$3,267,398.46	\$72,706.74	\$847,785.39	\$52,544.08	\$4,115,183.85	\$125,250.82	5,200	\$24.09	5,200	\$791.38	2,446	\$51.21	2,446	\$1,682.41
Sep-18	\$2,159,431.75	\$65,247.47	\$852,995.85	\$47,901.40	\$3,012,427.60	\$113,148.87	5,202	\$21.75	5,202	\$579.09	2,449	\$46.20	2,449	\$1,230.06
Oct-18	\$3,276,163.63	\$70,337.86	\$922,972.61	\$51,226.40	\$4,199,136.24	\$121,564.26	5,209	\$23.34	5,209	\$806.13	2,452	\$49.58	2,452	\$1,712.54
Nov-18	\$2,746,081.57	\$72,592.76	\$885,078.96	\$48,158.07	\$3,631,160.53	\$120,750.83	5,199	\$23.23	5,199	\$698.43	2,449	\$49.31	2,449	\$1,482.71
Dec-18	\$2,149,340.26	\$51,985.00	\$867,182.29	\$48,140.24	\$3,016,522.55	\$100,125.24	5,208	\$19.23	5,208	\$579.21	2,451	\$40.85	2,451	\$1,230.73
Totals	\$30,139,463.68	\$1,080,901.79	\$10,863,500.35	\$652,109.29	\$41,002,964.03	\$1,733,011.08	62,416	\$333.12	62,416	\$7,883.42	29,271	\$710.85	29,271	\$16,808.30
	96.54%	3.46%	94.34%	5.66%	95.94%	4.06%								

	Per Excellus BCBS Reports				Per ProAct, Inc. Reports									
	Medical Claims		Rx Claims		Combined Paid Claims		Member Cost Per Life		Plan Cost Per Life		Member Cost Per Contract		Plan Cost Per Contract	
Date	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount	Number of Covered Lives	Average Cost Per Life	Number of Covered Lives	Average Cost Per Life	Number of Contracts	Average Cost Per Contract	Number of Contracts	Average Cost Per Contract
Jan-19	\$2,264,097.73	\$125,129.90	\$960,853.48	\$64,701.02	\$3,224,951.21	\$189,830.92	6,156	\$30.84	6,156	\$523.87	2,844	\$66.75	2,844	\$1,133.95
Feb-19	\$2,235,181.68	\$147,604.11	\$972,521.63	\$61,909.01	\$3,207,703.31	\$209,513.12	6,161	\$34.01	6,161	\$520.65	2,853	\$73.44	2,853	\$1,124.33
Mar-19	\$2,713,253.18	\$157,925.60	\$1,023,860.68	\$65,997.73	\$3,737,113.86	\$223,923.33	6,151	\$36.40	6,151	\$607.56	2,851	\$78.54	2,851	\$1,310.81
Apr-19	\$2,657,587.77	\$102,134.17	\$1,087,866.27	\$66,319.95	\$3,745,454.04	\$168,454.12	6,144	\$27.42	6,144	\$609.61	2,850	\$59.11	2,850	\$1,314.19
May-19	\$2,809,903.89	\$114,223.72	\$1,118,904.26	\$63,257.60	\$3,928,808.15	\$177,481.32	6,162	\$28.80	6,162	\$637.59	2,859	\$62.08	2,859	\$1,374.19
Jun-19	\$2,336,165.20	\$94,963.81	\$1,049,697.07	\$63,732.22	\$3,385,862.27	\$158,696.03	6,181	\$25.67	6,181	\$547.79	2,872	\$55.26	2,872	\$1,178.92
Jul-19	\$2,475,212.33	\$67,547.99	\$1,102,667.22	\$62,451.15	\$3,577,879.55	\$129,999.14	6,195	\$20.98	6,195	\$577.54	2,875	\$45.22	2,875	\$1,244.48
Aug-19	\$2,472,074.61	\$89,073.27	\$1,131,696.79	\$62,983.30	\$3,603,771.40	\$152,056.57	6,200	\$24.53	6,200	\$581.25	2,881	\$52.78	2,881	\$1,250.88
Sep-19	\$1,875,906.42	\$68,888.57	\$1,041,209.68	\$62,412.41	\$2,917,116.10	\$131,300.98	6,182	\$21.24	6,182	\$471.87	2,873	\$45.70	2,873	\$1,015.36
Oct-19	\$2,266,310.19	\$66,703.35	\$1,281,044.16	\$63,259.97	\$3,547,354.35	\$129,963.32	6,180	\$21.03	6,180	\$574.01	2,880	\$45.13	2,880	\$1,231.72
Nov-19	\$2,610,451.15	\$88,143.91	\$1,034,917.47	\$52,985.41	\$3,645,368.62	\$141,129.32	6,181	\$22.83	6,181	\$589.77	2,888	\$48.87	2,888	\$1,262.25
Dec-19	\$1,767,646.72	\$60,118.88	\$1,034,362.80	\$54,703.70	\$2,802,009.52	\$114,822.58	6,192	\$18.54	6,192	\$452.52	2,899	\$39.61	2,899	\$966.54
Totals	\$28,483,790.87	\$1,182,457.28	\$12,839,601.51	\$744,713.47	\$41,323,392.38	\$1,927,170.75	74,085	\$312.30	74,085	\$6,694.03	34,425	\$672.47	34,425	\$14,407.61
	96.01%	3.99%	94.52%	5.48%	95.54%	4.46%								

Greater Tompkins County Municipal Health Insurance Consortium
Hospital, Medical, and Surgical Paid Claims and Claims Related Expenses

	Per Excellus BCBS Reports				Per ProAct, Inc. Reports									
	Medical Claims		Rx Claims		Combined Paid Claims		Member Cost Per Life		Plan Cost Per Life		Member Cost Per Contract		Plan Cost Per Contract	
Date	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount	Number of Covered Lives	Average Cost Per Life	Number of Covered Lives	Average Cost Per Life	Number of Contracts	Average Cost Per Contract	Number of Contracts	Average Cost Per Contract
Jan-20	\$2,656,982.48	\$164,088.31	\$1,117,016.74	\$78,117.34	\$3,773,999.22	\$242,205.65	6,326	\$38.29	6,326	\$596.59	2,962	\$81.77	2,962	\$1,274.14
Feb-20	\$2,091,508.81	\$165,934.99	\$1,004,928.55	\$66,152.12	\$3,096,437.36	\$232,087.11	6,344	\$36.58	6,344	\$488.09	2,964	\$78.30	2,964	\$1,044.68
Mar-20	\$2,484,722.26	\$122,643.82	\$1,183,622.26	\$73,298.86	\$3,668,344.52	\$195,942.68	6,326	\$30.97	6,326	\$579.88	2,953	\$66.35	2,953	\$1,242.24
Apr-20	\$1,566,366.43	\$62,316.83	\$1,101,096.33	\$66,660.46	\$2,667,462.76	\$128,977.29	6,317	\$20.42	6,317	\$422.27	2,956	\$43.63	2,956	\$902.39
May-20	\$2,211,727.69	\$61,046.12	\$1,107,376.77	\$55,938.18	\$3,319,104.46	\$116,984.30	6,328	\$18.49	6,328	\$524.51	2,961	\$39.51	2,961	\$1,120.94
Jun-20	\$1,852,585.78	\$65,283.97	\$1,111,933.57	\$66,819.98	\$2,964,519.35	\$132,103.95	6,282	\$21.03	6,282	\$471.91	2,944	\$44.87	2,944	\$1,006.97
Jul-20	\$2,385,688.98	\$83,846.93	\$1,305,357.66	\$67,665.11	\$3,691,046.64	\$151,512.04	6,271	\$24.16	6,271	\$588.59	2,940	\$51.53	2,940	\$1,255.46
Aug-20	\$2,193,840.37	\$59,698.92	\$1,145,506.06	\$61,227.91	\$3,339,346.43	\$120,926.83	6,257	\$19.33	6,257	\$533.70	2,931	\$41.26	2,931	\$1,139.32
Sep-20	\$2,111,230.35	\$62,345.71	\$1,235,251.26	\$56,696.14	\$3,346,481.61	\$119,041.85	6,241	\$19.07	6,241	\$536.21	2,930	\$40.63	2,930	\$1,142.14
Oct-20	\$2,862,694.70	\$77,831.64	\$1,153,522.01	\$57,915.13	\$4,016,216.71	\$135,746.77	6,224	\$21.81	6,224	\$645.28	2,929	\$46.35	2,929	\$1,371.19
Nov-20	\$2,281,919.11	\$51,901.97	\$1,181,973.81	\$56,654.85	\$3,463,892.92	\$108,556.82	6,191	\$17.53	6,191	\$559.50	2,920	\$37.18	2,920	\$1,186.26
Dec-20	\$2,220,439.60	\$57,836.28	\$1,295,553.58	\$59,278.69	\$3,515,993.18	\$117,114.97	6,192	\$18.91	6,192	\$567.83	2,923	\$40.07	2,923	\$1,202.87
Totals	\$26,919,706.56	\$1,034,775.49	\$13,943,138.60	\$766,424.77	\$40,862,845.16	\$1,801,200.26	75,299	\$286.60	75,299	\$6,514.35	35,313	\$611.45	35,313	\$13,888.61
	96.30%	3.70%	94.79%	5.21%	95.78%	4.22%								

	Per Excellus BCBS Reports				Per ProAct, Inc. Reports									
	Medical Claims		Rx Claims		Combined Paid Claims		Member Cost Per Life		Plan Cost Per Life		Member Cost Per Contract		Plan Cost Per Contract	
Date	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount	Number of Covered Lives	Average Cost Per Life	Number of Covered Lives	Average Cost Per Life	Number of Contracts	Average Cost Per Contract	Number of Contracts	Average Cost Per Contract
Jan-21	\$2,839,595.60	\$98,932.82	\$1,248,569.04	\$83,001.85	\$4,088,164.64	\$181,934.67	6,343	\$28.68	6,343	\$644.52	3,045	\$59.75	3,045	\$1,342.58
Feb-21	\$2,289,069.96	\$110,494.29	\$1,174,685.51	\$75,743.36	\$3,463,755.47	\$186,237.65	6,333	\$29.41	6,333	\$546.94	3,043	\$61.20	3,043	\$1,138.27
Mar-21	\$2,675,627.93	\$107,491.17	\$1,369,738.41	\$89,412.10	\$4,045,366.34	\$196,903.27	6,347	\$31.02	6,347	\$637.37	3,048	\$64.60	3,048	\$1,327.22
Apr-21	\$2,810,948.88	\$129,816.25	\$1,315,680.71	\$76,476.00	\$4,126,629.59	\$206,292.25	6,322	\$32.63	6,322	\$652.74	3,040	\$67.86	3,040	\$1,357.44
May-21	\$2,919,393.05	\$98,910.49	\$1,350,738.38	\$71,267.17	\$4,270,131.43	\$170,177.66	6,287	\$27.07	6,287	\$679.20	3,021	\$56.33	3,021	\$1,413.48
Jun-21	\$2,225,447.79	\$90,369.48	\$1,368,008.21	\$76,190.10	\$3,593,456.00	\$166,559.58	6,296	\$26.45	6,296	\$570.75	3,024	\$55.08	3,024	\$1,188.31
Jul-21	\$2,939,073.55	\$104,367.51	\$1,391,231.89	\$70,344.97	\$4,330,305.44	\$174,712.48	6,286	\$27.79	6,286	\$688.88	3,025	\$57.76	3,025	\$1,431.51
Aug-21	\$2,445,790.17	\$84,249.79	\$1,413,203.61	\$71,440.93	\$3,858,993.78	\$155,690.72	6,281	\$24.79	6,281	\$614.39	3,022	\$51.52	3,022	\$1,276.97
Sep-21	\$2,165,302.31	\$74,853.70	\$1,326,045.62	\$66,343.27	\$3,491,347.93	\$141,196.97	6,287	\$22.46	6,287	\$555.33	3,035	\$46.52	3,035	\$1,150.36
Oct-21	\$3,318,384.27	\$84,534.66	\$1,438,407.36	\$68,773.90	\$4,756,791.63	\$153,308.56	6,272	\$24.44	6,272	\$758.42	3,031	\$50.58	3,031	\$1,569.38
Nov-21	\$2,485,674.77	\$72,775.62	\$1,352,074.71	\$70,272.02	\$3,837,749.48	\$143,047.64	6,288	\$22.75	6,288	\$610.33	3,041	\$47.04	3,041	\$1,262.00
Dec-21	\$2,900,092.94	\$75,817.13	\$1,424,414.79	\$66,626.52	\$4,324,507.73	\$142,443.65	6,305	\$22.59	6,305	\$685.89	3,053	\$46.66	3,053	\$1,416.48
Totals	\$32,014,401.22	\$1,132,612.91	\$16,172,798.24	\$885,892.19	\$48,187,199.46	\$2,018,505.10	75,647	\$320.09	75,647	\$7,644.75	36,428	\$664.90	36,428	\$15,874.01
	96.58%	3.42%	94.81%	5.19%	95.98%	4.02%								

Greater Tompkins County Municipal Health Insurance Consortium
Hospital, Medical, and Surgical Paid Claims and Claims Related Expenses

Per Excellus BCBS Reports

Per ProAct, Inc. Reports

	Medical Claims		Rx Claims		Combined Paid Claims		Member Cost Per Life		Plan Cost Per Life		Member Cost Per Contract		Plan Cost Per Contract	
Fiscal Year	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount	Number of Covered Lives	Average Cost Per Life	Number of Covered Lives	Average Cost Per Life	Number of Contracts	Average Cost Per Contract	Number of Contracts	Average Cost Per Contract
2016	\$24,998,992.90	\$962,874.68	\$10,645,984.27	\$640,466.47	\$35,644,977.17	\$1,603,341.15	5,063	\$316.67	5,063	\$7,040.06	2,322	\$690.45	2,322	\$15,349.88
2017	\$26,235,020.36	\$1,065,840.07	\$11,079,834.05	\$664,302.99	\$37,314,854.41	\$1,730,143.06	5,172	\$334.54	5,172	\$7,215.25	2,397	\$721.77	2,397	\$15,566.77
2018	\$30,139,463.68	\$1,080,901.79	\$10,863,500.35	\$652,109.29	\$41,002,964.03	\$1,733,011.08	5,201	\$333.19	5,201	\$7,883.16	2,439	\$710.47	2,439	\$16,809.66
2019	\$28,483,790.87	\$1,182,457.28	\$12,839,601.51	\$744,713.47	\$41,323,392.38	\$1,927,170.75	6,174	\$312.16	6,174	\$6,693.40	2,869	\$671.78	2,869	\$14,404.67
2020	\$26,919,706.56	\$1,034,775.49	\$13,943,138.60	\$766,424.77	\$40,862,845.16	\$1,801,200.26	6,275	\$287.05	6,275	\$6,512.09	2,943	\$612.08	2,943	\$13,885.94
2021	\$32,014,401.22	\$1,132,612.91	\$16,172,798.24	\$885,892.19	\$48,187,199.46	\$2,018,505.10	6,304	\$320.20	6,304	\$7,644.01	3,036	\$664.93	3,036	\$15,873.68
Totals	\$168,791,375.59	\$6,459,462.22	\$75,544,857.02	\$4,353,909.18	\$244,336,232.61	\$10,813,371.40	34,189	\$1,903.80	34,189	\$42,987.97	16,006	\$4,071.48	16,006	\$91,890.60
	96.31%	3.69%	94.55%	5.45%	95.76%	4.24%								

Greater Tompkins County Municipal Health Insurance Consortium
Hospital, Medical, and Surgical Paid Claims and Claims Related Expenses

												Per Excellus BCBS Reports		Per ProAct, Inc. Reports			
												Medical Claims		Rx Claims		Combined Paid Claims	
Date	Provider Charged Amount	Total Cost	Claim Paid Amount	Member Copayment	Member Coinsurance	Member Deductible	Other Carrier Liability	HCRA Surcharge	ITS Access Fee	AEA Fee	ITS Surcharge	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount
Jan-16	\$5,458,867.75	\$2,626,362.75	\$1,948,187.31	\$12,883.64	\$38,841.33	\$64,057.68	\$467,288.54	\$88,098.29	\$5,280.41	\$1,687.00	\$38.55	\$2,043,291.56	\$115,782.65	\$799,819.81	\$57,214.31	\$2,843,111.37	\$172,996.96
Feb-16	\$5,101,197.54	\$2,301,326.70	\$1,763,444.35	\$11,936.74	\$49,078.96	\$56,702.55	\$342,770.41	\$64,388.41	\$10,513.13	\$2,165.00	\$327.15	\$1,840,838.04	\$117,718.25	\$933,726.34	\$53,091.61	\$2,774,564.38	\$170,809.86
Mar-16	\$4,292,519.61	\$2,190,086.55	\$1,753,291.48	\$12,880.20	\$46,318.32	\$31,131.53	\$279,182.98	\$61,947.13	\$3,534.04	\$1,788.00	\$12.87	\$1,820,573.52	\$90,330.05	\$915,649.56	\$60,635.85	\$2,736,223.08	\$150,965.90
Apr-16	\$5,736,265.47	\$2,697,950.42	\$2,106,809.93	\$16,933.61	\$64,066.51	\$32,955.01	\$395,360.93	\$68,658.67	\$10,714.59	\$2,404.00	\$47.17	\$2,188,634.36	\$113,955.13	\$896,383.62	\$56,065.25	\$3,085,017.98	\$170,020.38
May-16	\$5,220,034.16	\$3,055,737.21	\$2,614,705.04	\$12,113.56	\$51,576.26	\$16,192.95	\$284,361.70	\$64,921.45	\$9,662.77	\$2,186.50	\$16.98	\$2,691,492.74	\$79,882.77	\$889,116.68	\$55,691.68	\$3,580,609.42	\$135,574.45
Jun-16	\$4,652,320.67	\$2,291,435.18	\$1,822,495.18	\$13,933.33	\$43,598.00	\$14,644.65	\$328,043.77	\$62,246.42	\$4,287.53	\$2,257.00	-\$70.70	\$1,891,215.43	\$72,175.98	\$965,883.68	\$54,831.90	\$2,857,099.11	\$127,007.88
Jul-16	\$5,783,203.18	\$2,604,882.03	\$2,054,310.62	\$15,472.89	\$48,367.69	\$11,211.80	\$387,658.63	\$75,116.96	\$10,676.43	\$2,025.00	\$42.01	\$2,142,171.02	\$75,052.38	\$854,493.12	\$52,156.03	\$2,996,664.14	\$127,208.41
Aug-16	\$5,441,890.81	\$2,508,195.94	\$1,990,231.24	\$12,247.83	\$37,799.70	\$7,469.70	\$377,620.11	\$71,953.49	\$8,032.87	\$2,581.50	\$259.50	\$2,073,058.60	\$57,517.23	\$914,551.17	\$54,142.52	\$2,987,609.77	\$111,659.75
Sep-16	\$6,576,595.31	\$2,852,507.71	\$2,114,332.70	\$16,180.44	\$42,557.73	\$7,470.51	\$579,278.80	\$80,743.56	\$10,087.61	\$1,768.75	\$87.61	\$2,207,020.23	\$66,208.68	\$872,005.50	\$50,106.38	\$3,079,025.73	\$116,315.06
Oct-16	\$4,046,409.06	\$1,941,120.65	\$1,506,249.71	\$12,235.23	\$36,185.93	\$8,177.29	\$308,668.71	\$63,471.16	\$4,396.79	\$1,731.00	\$4.83	\$1,575,853.49	\$56,598.45	\$846,753.48	\$50,345.99	\$2,422,606.97	\$106,944.44
Nov-16	\$5,077,820.30	\$2,379,392.53	\$1,802,048.25	\$13,417.89	\$35,411.30	\$10,955.01	\$431,772.78	\$73,288.43	\$9,423.78	\$2,156.00	\$919.09	\$1,887,835.55	\$59,784.20	\$848,632.31	\$47,303.25	\$2,736,467.86	\$107,087.45
Dec-16	\$5,796,769.03	\$3,062,165.37	\$2,506,008.17	\$16,285.73	\$35,970.73	\$5,612.45	\$367,288.10	\$113,783.18	\$14,690.61	\$2,526.00	\$0.40	\$2,637,008.36	\$57,868.91	\$908,969.00	\$48,881.70	\$3,545,977.36	\$106,750.61
Totals	\$63,183,892.89	\$30,511,163.04	\$23,982,113.98	\$166,521.09	\$529,772.46	\$266,581.13	\$4,549,295.46	\$888,617.15	\$101,300.56	\$25,275.75	\$1,685.46	\$24,998,992.90	\$962,874.68	\$10,645,984.27	\$640,466.47	\$35,644,977.17	\$1,603,341.15
2.49%												96.29%	3.71%	94.33%	5.67%	95.70%	4.30%

												Per Excellus BCBS Reports		Per ProAct, Inc. Reports			
												Medical Claims		Rx Claims		Combined Paid Claims	
Date	Provider Charged Amount	Total Cost	Claim Paid Amount	Member Copayment	Member Coinsurance	Member Deductible	Other Carrier Liability	HCRA Surcharge	ITS Access Fee	AEA Fee	ITS Surcharge	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount
Jan-17	\$4,470,193.37	\$2,072,779.29	\$1,526,981.74	\$8,144.66	\$24,831.02	\$25,282.80	\$413,668.51	\$56,201.59	\$7,191.14	\$1,509.00	\$8,968.83	\$1,600,852.30	\$58,258.48	\$1,029,465.44	\$62,790.74	\$2,630,317.74	\$121,049.22
Feb-17	\$5,914,626.42	\$3,090,662.66	\$2,479,677.69	\$22,025.32	\$63,609.78	\$95,459.29	\$298,515.67	\$119,046.88	\$8,898.38	\$2,517.00	\$912.65	\$2,611,052.60	\$181,094.39	\$847,986.02	\$48,897.68	\$3,459,038.62	\$229,992.07
Mar-17	\$6,248,702.46	\$3,085,099.20	\$2,338,945.67	\$19,160.00	\$69,197.17	\$54,549.15	\$490,337.45	\$100,413.67	\$10,066.85	\$2,341.00	\$88.24	\$2,451,855.43	\$142,906.32	\$846,476.55	\$58,701.97	\$3,298,331.98	\$201,608.29
Apr-17	\$5,579,984.50	\$2,736,830.94	\$2,052,592.72	\$15,168.97	\$58,314.06	\$27,805.98	\$487,655.23	\$84,734.30	\$8,366.05	\$2,225.00	-\$31.37	\$2,147,886.70	\$101,289.01	\$834,321.13	\$50,232.30	\$2,982,207.83	\$151,521.31
May-17	\$4,831,905.14	\$2,372,508.83	\$1,790,719.90	\$15,265.00	\$55,572.26	\$19,972.75	\$410,641.25	\$66,530.50	\$11,656.17	\$2,151.00	\$0.00	\$1,871,057.57	\$90,810.01	\$968,911.34	\$58,583.02	\$2,839,968.91	\$149,393.03
Jun-17	\$6,116,372.76	\$3,021,871.54	\$2,268,128.60	\$18,815.00	\$54,290.83	\$20,723.50	\$567,055.53	\$76,464.04	\$14,414.04	\$1,980.00	\$0.00	\$2,360,986.68	\$93,829.33	\$1,017,500.09	\$57,361.17	\$3,378,486.77	\$151,190.50
Jul-17	\$5,025,749.56	\$2,213,844.72	\$1,713,834.36	\$14,140.00	\$34,212.80	\$11,120.36	\$376,964.46	\$54,228.92	\$7,306.48	\$2,036.00	\$1.34	\$1,777,407.10	\$59,473.16	\$862,229.27	\$55,400.52	\$2,639,636.37	\$114,873.68
Aug-17	\$6,179,763.01	\$2,655,812.60	\$2,027,635.94	\$12,238.41	\$31,726.07	\$12,703.37	\$476,371.75	\$77,478.91	\$15,136.29	\$2,514.00	\$7.86	\$2,122,773.00	\$56,667.85	\$878,157.12	\$54,715.07	\$3,000,930.12	\$111,382.92
Sep-17	\$5,883,068.26	\$2,625,467.18	\$2,143,408.11	\$17,361.81	\$40,690.00	\$15,232.15	\$317,061.73	\$82,324.83	\$7,487.40	\$1,899.75	\$1.40	\$2,235,121.49	\$73,283.96	\$927,066.53	\$54,900.16	\$3,162,188.02	\$128,184.12
Oct-17	\$6,128,833.42	\$2,937,535.75	\$2,243,267.66	\$13,411.85	\$47,842.03	\$14,681.66	\$526,719.68	\$85,468.47	\$3,710.75	\$2,415.00	\$18.65	\$2,334,880.53	\$75,935.54	\$974,753.22	\$55,915.42	\$3,309,633.75	\$131,850.96
Nov-17	\$5,416,494.35	\$2,756,813.53	\$2,152,989.18	\$15,190.00	\$38,092.17	\$7,426.51	\$441,427.72	\$92,427.12	\$7,070.83	\$2,190.00	\$0.00	\$2,254,677.13	\$60,708.68	\$916,695.77	\$52,085.90	\$3,171,372.90	\$112,794.58
Dec-17	\$6,145,251.74	\$3,042,793.02	\$2,360,960.52	\$16,598.86	\$45,550.59	\$9,433.89	\$504,739.85	\$93,491.32	\$9,697.03	\$2,309.75	\$11.21	\$2,466,469.83	\$71,583.34	\$976,271.57	\$54,719.04	\$3,442,741.40	\$126,302.38
Totals	\$67,940,944.99	\$32,612,019.26	\$25,099,142.09	\$187,519.88	\$563,928.78	\$314,391.41	\$5,311,158.83	\$988,810.55	\$111,001.41	\$26,087.50	\$9,978.81	\$26,235,020.36	\$1,065,840.07	\$11,079,834.05	\$664,302.99	\$37,314,854.41	\$1,730,143.06
2.65%												96.10%	3.90%	94.34%	5.66%	95.57%	4.43%

Greater Tompkins County Municipal Health Insurance Consortium
Hospital, Medical, and Surgical Paid Claims and Claims Related Expenses

												Per Excellus BCBS Reports		Per ProAct, Inc. Reports			
												Medical Claims		Rx Claims		Combined Paid Claims	
Date	Provider Charged Amount	Total Cost	Claim Paid Amount	Member Copayment	Member Coinsurance	Member Deductible	Other Carrier Liability	HCRA Surcharge	ITS Access Fee	AEA Fee	ITS Surcharge	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount
Jan-18	\$5,539,327.32	\$2,579,303.53	\$1,922,473.21	\$14,404.19	\$37,205.27	\$61,066.12	\$458,134.64	\$76,128.36	\$7,463.75	\$2,422.00	\$5.99	\$2,008,493.31	\$112,675.58	\$991,547.92	\$65,438.75	\$3,000,041.23	\$178,114.33
Feb-18	\$6,065,634.34	\$2,809,016.06	\$2,174,817.01	\$18,980.25	\$59,871.34	\$74,305.44	\$378,231.86	\$87,356.09	\$12,463.49	\$2,624.00	\$366.58	\$2,277,627.17	\$153,157.03	\$884,565.37	\$56,318.31	\$3,162,192.54	\$209,475.34
Mar-18	\$8,223,748.77	\$3,677,256.65	\$2,802,921.70	\$22,365.79	\$68,124.99	\$45,460.75	\$617,480.26	\$109,216.44	\$8,853.31	\$2,746.00	\$87.41	\$2,923,824.86	\$135,951.53	\$869,153.35	\$59,805.21	\$3,792,978.21	\$195,756.74
Apr-18	\$6,103,214.96	\$2,948,537.50	\$2,154,454.00	\$17,740.00	\$48,282.05	\$25,975.46	\$608,641.05	\$84,314.47	\$6,804.47	\$2,326.00	\$0.00	\$2,247,898.94	\$91,997.51	\$864,749.25	\$56,193.34	\$3,112,648.19	\$148,190.85
May-18	\$8,195,811.72	\$3,200,828.30	\$2,173,525.08	\$17,586.52	\$50,621.94	\$18,836.43	\$852,492.40	\$77,134.66	\$8,250.43	\$2,374.00	\$6.84	\$2,261,291.01	\$87,044.89	\$998,451.63	\$57,582.02	\$3,259,742.64	\$144,626.91
Jun-18	\$7,477,027.63	\$3,683,405.80	\$2,820,977.45	\$20,699.12	\$58,632.88	\$17,583.25	\$654,489.21	\$101,224.91	\$7,374.88	\$2,420.00	\$4.10	\$2,932,001.34	\$96,915.25	\$965,921.67	\$54,464.07	\$3,897,923.01	\$151,379.32
Jul-18	\$4,679,905.78	\$2,302,747.53	\$1,809,754.14	\$18,310.38	\$39,309.20	\$12,670.59	\$342,545.98	\$70,153.78	\$7,770.34	\$2,209.00	\$24.12	\$1,889,911.38	\$70,290.17	\$913,096.06	\$54,337.40	\$2,803,007.44	\$124,627.57
Aug-18	\$8,701,058.19	\$3,869,575.00	\$3,099,509.71	\$29,454.63	\$36,822.74	\$6,429.37	\$529,469.80	\$155,367.97	\$10,253.88	\$2,260.00	\$6.90	\$3,267,398.46	\$72,706.74	\$847,785.39	\$52,544.08	\$4,115,183.85	\$125,250.82
Sep-18	\$5,821,524.30	\$2,815,562.53	\$2,060,632.21	\$19,695.10	\$31,814.83	\$13,737.54	\$590,883.31	\$90,625.56	\$6,097.86	\$2,073.00	\$3.12	\$2,159,431.75	\$65,247.47	\$852,995.85	\$47,901.40	\$3,012,427.60	\$113,148.87
Oct-18	\$6,881,049.05	\$3,770,894.15	\$3,195,349.11	\$22,537.76	\$37,725.67	\$10,074.43	\$424,392.66	\$65,279.14	\$12,879.63	\$2,655.75	\$0.00	\$3,276,163.63	\$70,337.86	\$922,972.61	\$51,226.40	\$4,199,136.24	\$121,564.26
Nov-18	\$7,494,051.15	\$3,488,042.34	\$2,642,809.12	\$23,625.94	\$36,920.02	\$12,046.80	\$669,368.01	\$93,126.07	\$7,695.73	\$2,450.25	\$0.40	\$2,746,081.57	\$72,592.76	\$885,078.96	\$48,158.07	\$3,631,160.53	\$120,750.83
Dec-18	\$5,339,273.76	\$2,766,022.36	\$2,070,116.63	\$17,874.08	\$25,641.02	\$8,469.90	\$564,697.10	\$70,960.22	\$6,096.39	\$2,144.00	\$23.02	\$2,149,340.26	\$51,985.00	\$867,182.29	\$48,140.24	\$3,016,522.55	\$100,125.24
Totals	\$80,521,626.97	\$37,911,191.75	\$28,927,339.37	\$243,273.76	\$530,971.95	\$306,656.08	\$6,690,826.28	\$1,080,887.67	\$102,004.16	\$28,704.00	\$528.48	\$30,139,463.68	\$1,080,901.79	\$10,863,500.35	\$652,109.29	\$41,002,964.03	\$1,733,011.08
2.64%												96.54%	3.46%	94.34%	5.66%	95.94%	4.06%

												Per Excellus BCBS Reports		Per ProAct, Inc. Reports			
												Medical Claims		Rx Claims		Combined Paid Claims	
Date	Provider Charged Amount	Total Cost	Claim Paid Amount	Member Copayment	Member Coinsurance	Member Deductible	Other Carrier Liability	HCRA Surcharge	ITS Access Fee	AEA Fee	ITS Surcharge	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount
Jan-19	\$5,946,829.80	\$2,928,286.20	\$2,167,475.07	\$20,111.68	\$40,203.29	\$64,814.93	\$539,058.57	\$87,365.28	\$7,169.13	\$2,088.25	\$0.00	\$2,264,097.73	\$125,129.90	\$960,853.48	\$64,701.02	\$3,224,951.21	\$189,830.92
Feb-19	\$5,784,909.02	\$2,874,931.73	\$2,148,582.86	\$24,130.79	\$54,906.43	\$68,566.89	\$492,145.94	\$74,568.05	\$9,981.02	\$2,049.75	\$0.00	\$2,235,181.68	\$147,604.11	\$972,521.63	\$61,909.01	\$3,207,703.31	\$209,513.12
Mar-19	\$7,523,574.32	\$3,399,760.81	\$2,599,744.70	\$32,008.02	\$73,066.43	\$52,851.15	\$528,582.03	\$99,867.69	\$11,290.87	\$2,347.00	\$2.92	\$2,713,253.18	\$157,925.60	\$1,023,860.68	\$65,997.73	\$3,737,113.86	\$223,923.33
Apr-19	\$6,413,555.99	\$3,230,745.13	\$2,552,746.13	\$23,795.20	\$51,042.06	\$27,296.91	\$471,023.19	\$94,437.18	\$7,849.96	\$2,554.50	\$0.00	\$2,657,587.77	\$102,134.17	\$1,087,866.27	\$66,319.95	\$3,745,454.04	\$168,454.12
May-19	\$7,474,909.80	\$3,387,844.20	\$2,694,944.67	\$28,302.25	\$59,913.93	\$26,007.54	\$463,716.59	\$98,197.73	\$14,199.28	\$2,554.75	\$7.46	\$2,809,903.89	\$114,223.72	\$1,118,904.26	\$63,257.60	\$3,928,808.15	\$177,481.32
Jun-19	\$6,211,292.18	\$2,947,051.38	\$2,242,403.63	\$25,349.78	\$49,500.99	\$20,113.04	\$515,922.37	\$83,096.60	\$9,147.97	\$1,517.00	\$0.00	\$2,336,165.20	\$94,963.81	\$1,049,697.07	\$63,732.22	\$3,385,862.27	\$158,696.03
Jul-19	\$5,965,190.44	\$2,970,948.36	\$2,383,806.76	\$21,392.96	\$34,758.47	\$11,396.56	\$428,188.04	\$79,744.60	\$9,229.55	\$2,420.75	\$10.67	\$2,475,212.33	\$67,547.99	\$1,102,667.22	\$62,451.15	\$3,577,879.55	\$129,999.14
Aug-19	\$6,941,429.41	\$3,263,140.88	\$2,380,389.55	\$28,963.43	\$43,961.08	\$16,148.76	\$701,993.00	\$78,877.46	\$10,667.60	\$2,140.00	\$0.00	\$2,472,074.61	\$89,073.27	\$1,131,696.79	\$62,983.30	\$3,603,771.40	\$152,056.57
Sep-19	\$5,598,069.09	\$2,486,269.09	\$1,807,822.05	\$25,532.28	\$32,169.21	\$11,187.08	\$541,474.10	\$57,720.11	\$8,013.26	\$2,351.00	\$0.00	\$1,875,906.42	\$68,888.57	\$1,041,209.68	\$62,412.41	\$2,917,116.10	\$131,300.98
Oct-19	\$5,444,777.83	\$2,755,586.53	\$2,167,933.17	\$25,575.64	\$31,108.44	\$10,019.27	\$422,572.99	\$86,169.46	\$10,124.46	\$2,075.00	\$8.10	\$2,266,310.19	\$66,703.35	\$1,281,044.16	\$63,259.97	\$3,547,354.35	\$129,963.32
Nov-19	\$7,558,466.26	\$3,330,771.13	\$2,496,800.55	\$33,289.65	\$42,890.14	\$11,964.12	\$632,176.07	\$98,954.84	\$12,678.26	\$2,016.00	\$1.50	\$2,610,451.15	\$88,143.91	\$1,034,917.47	\$52,985.41	\$3,645,368.62	\$141,129.32
Dec-19	\$4,990,192.01	\$2,198,691.05	\$1,692,413.54	\$23,667.93	\$28,085.97	\$8,364.98	\$370,925.45	\$64,537.01	\$8,593.67	\$2,102.50	\$0.00	\$1,767,646.72	\$60,118.88	\$1,034,362.80	\$54,703.70	\$2,802,009.52	\$114,822.58
Totals	\$75,853,196.15	\$35,774,026.49	\$27,335,062.68	\$312,119.61	\$541,606.44	\$328,731.23	\$6,107,778.34	\$1,003,536.01	\$118,945.03	\$26,216.50	\$30.65	\$28,483,790.87	\$1,182,457.28	\$12,839,601.51	\$744,713.47	\$41,323,392.38	\$1,927,170.75
2.43%												96.01%	3.99%	94.52%	5.48%	95.54%	4.46%

Greater Tompkins County Municipal Health Insurance Consortium
Hospital, Medical, and Surgical Paid Claims and Claims Related Expenses

												Per Excellus BCBS Reports		Per ProAct, Inc. Reports			
												Medical Claims		Rx Claims		Combined Paid Claims	
Date	Provider Charged Amount	Total Cost	Claim Paid Amount	Member Copayment	Member Coinsurance	Member Deductible	Other Carrier Liability	HCRA Surcharge	ITS Access Fee	AEA Fee	ITS Surcharge	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount
Jan-20	\$6,847,270.72	\$3,387,553.69	\$2,549,971.83	\$32,034.67	\$45,127.00	\$86,926.64	\$566,482.90	\$95,136.63	\$9,533.02	\$2,341.00	\$0.00	\$2,656,982.48	\$164,088.31	\$1,117,016.74	\$78,117.34	\$3,773,999.22	\$242,205.65
Feb-20	\$6,133,476.95	\$2,719,239.29	\$2,002,188.33	\$33,263.38	\$55,995.32	\$76,676.29	\$461,795.49	\$79,692.36	\$7,228.62	\$2,399.50	\$0.00	\$2,091,508.81	\$165,934.99	\$1,004,928.55	\$66,152.12	\$3,096,437.36	\$232,087.11
Mar-20	\$6,274,502.79	\$3,052,266.93	\$2,372,458.33	\$28,145.88	\$58,152.36	\$36,345.58	\$444,900.85	\$95,733.21	\$14,040.72	\$2,490.00	\$0.00	\$2,484,722.26	\$122,643.82	\$1,183,622.26	\$73,298.86	\$3,668,344.52	\$195,942.68
Apr-20	\$4,856,725.05	\$2,081,211.45	\$1,514,812.39	\$14,871.04	\$32,556.66	\$14,889.13	\$452,528.19	\$40,457.42	\$9,085.30	\$1,726.00	\$285.32	\$1,566,366.43	\$62,316.83	\$1,101,096.33	\$66,660.46	\$2,667,462.76	\$128,977.29
May-20	\$6,185,064.30	\$2,765,754.93	\$2,126,371.71	\$14,391.45	\$32,772.14	\$13,882.53	\$492,981.12	\$75,359.86	\$8,336.77	\$1,659.35	\$0.00	\$2,211,727.69	\$61,046.12	\$1,107,376.77	\$55,938.18	\$3,319,104.46	\$116,984.30
Jun-20	\$4,951,720.58	\$2,289,470.80	\$1,780,533.76	\$18,310.64	\$30,860.15	\$16,113.18	\$371,601.05	\$61,273.95	\$8,653.62	\$2,124.45	\$0.00	\$1,852,585.78	\$65,283.97	\$1,111,933.57	\$66,819.98	\$2,964,519.35	\$132,103.95
Jul-20	\$7,338,348.57	\$3,319,627.78	\$2,278,866.44	\$26,777.23	\$39,936.29	\$17,133.41	\$850,091.87	\$94,898.10	\$9,635.61	\$2,288.35	\$0.48	\$2,385,688.98	\$83,846.93	\$1,305,357.66	\$67,665.11	\$3,691,046.64	\$151,512.04
Aug-20	\$6,218,635.71	\$2,771,844.44	\$2,107,918.41	\$24,515.78	\$24,757.53	\$10,425.61	\$518,305.15	\$76,505.04	\$7,184.24	\$2,231.00	\$1.68	\$2,193,840.37	\$59,698.92	\$1,145,506.06	\$61,227.91	\$3,339,346.43	\$120,926.83
Sep-20	\$6,957,048.66	\$2,990,755.56	\$2,009,672.94	\$24,968.12	\$27,835.71	\$9,541.88	\$817,179.50	\$70,705.35	\$28,632.02	\$2,218.70	\$1.34	\$2,111,230.35	\$62,345.71	\$1,235,251.26	\$56,696.14	\$3,346,481.61	\$119,041.85
Oct-20	\$9,002,485.24	\$3,822,531.25	\$2,741,897.85	\$29,482.57	\$37,025.60	\$11,323.47	\$882,004.91	\$100,796.67	\$17,530.18	\$2,470.00	\$0.00	\$2,862,694.70	\$77,831.64	\$1,153,522.01	\$57,915.13	\$4,016,216.71	\$135,746.77
Nov-20	\$6,123,672.65	\$2,785,304.87	\$2,188,449.64	\$20,761.31	\$22,546.12	\$8,594.54	\$451,483.79	\$76,669.42	\$14,250.35	\$2,549.70	\$0.00	\$2,281,919.11	\$51,901.97	\$1,181,973.81	\$56,654.85	\$3,463,892.92	\$108,556.82
Dec-20	\$5,997,522.98	\$2,803,572.86	\$2,122,115.68	\$23,251.04	\$25,765.40	\$8,819.84	\$525,296.98	\$78,570.61	\$17,182.96	\$2,570.35	\$0.00	\$2,220,439.60	\$57,836.28	\$1,295,553.58	\$59,278.69	\$3,515,993.18	\$117,114.97
Totals	\$76,886,474.20	\$34,789,133.85	\$25,795,257.31	\$290,773.11	\$433,330.28	\$310,672.10	\$6,834,651.80	\$945,798.62	\$151,293.41	\$27,068.40	\$288.82	\$26,919,706.56	\$1,034,775.49	\$13,943,138.60	\$766,424.77	\$40,862,845.16	\$1,801,200.26
2.31%												96.30%	3.70%	94.79%	5.21%	95.78%	4.22%

												Per Excellus BCBS Reports		Per ProAct, Inc. Reports				
												Medical Claims		Rx Claims		Combined Paid Claims		
Date	Provider Charged Amount	Total Cost	Claim Paid Amount	Member Copayment	Member Coinsurance	Member Deductible	Other Carrier Liability	HCRA Surcharge	ITS Access Fee	AEA Fee	ITS Surcharge	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount	
Jan-21	\$8,057,138.14	\$3,724,842.67	\$2,707,331.86	\$16,595.99	\$33,379.66	\$48,957.17	\$786,314.25	\$117,487.98	\$12,094.76	\$2,681.00	\$0.00	\$2,839,595.60	\$98,932.82	\$1,248,569.04	\$83,001.85	\$4,088,164.64	\$181,934.67	
Feb-21	\$6,235,789.93	\$2,769,818.81	\$2,185,619.64	\$16,460.18	\$38,833.60	\$55,200.51	\$370,254.56	\$88,559.34	\$11,920.96	\$2,952.70	\$17.32	\$2,289,069.96	\$110,494.29	\$1,174,685.51	\$75,743.36	\$3,463,755.47	\$186,237.65	
Mar-21	\$6,952,050.60	\$3,162,206.21	\$2,542,802.90	\$24,832.90	\$43,282.16	\$39,376.11	\$379,087.11	\$109,405.26	\$19,840.77	\$3,579.00	\$0.00	\$2,675,627.93	\$107,491.17	\$1,369,738.41	\$89,412.10	\$4,045,366.34	\$196,903.27	
Apr-21	\$7,226,074.16	\$3,302,572.87	\$2,682,150.64	\$27,639.78	\$54,463.62	\$47,712.85	\$361,807.74	\$111,336.67	\$14,456.42	\$2,962.00	\$43.15	\$2,810,948.88	\$129,816.25	\$1,315,680.71	\$76,476.00	\$4,126,629.59	\$206,292.25	
May-21	\$7,122,373.17	\$3,382,619.27	\$2,790,377.37	\$21,518.65	\$49,961.41	\$27,430.43	\$364,315.73	\$114,440.89	\$12,071.86	\$2,497.35	\$5.58	\$2,919,393.05	\$98,910.49	\$1,350,738.38	\$71,267.17	\$4,270,131.43	\$170,177.66	
Jun-21	\$6,124,466.57	\$2,614,194.04	\$2,131,714.39	\$23,953.82	\$42,767.55	\$23,648.11	\$298,376.77	\$80,727.52	\$10,501.54	\$2,497.00	\$7.34	\$2,225,447.79	\$90,369.48	\$1,368,008.21	\$76,190.10	\$3,593,456.00	\$166,559.58	
Jul-21	\$7,852,078.58	\$3,397,059.13	\$2,812,606.09	\$28,153.60	\$50,275.34	\$25,938.57	\$353,618.07	\$114,561.38	\$9,371.36	\$2,525.70	\$9.02	\$2,939,073.55	\$104,367.51	\$1,391,231.89	\$70,344.97	\$4,330,305.44	\$174,712.48	
Aug-21	\$7,640,695.82	\$2,993,146.69	\$2,330,537.93	\$22,354.26	\$42,097.95	\$19,797.58	\$463,106.73	\$102,416.94	\$10,303.27	\$2,512.00	\$20.03	\$2,445,790.17	\$84,249.79	\$1,413,203.61	\$71,440.93	\$3,858,993.78	\$155,690.72	
Sep-21	\$6,592,940.02	\$2,620,518.30	\$2,080,400.43	\$25,333.29	\$37,215.33	\$12,305.08	\$380,362.29	\$75,317.29	\$7,472.54	\$2,054.00	\$58.05	\$2,165,302.31	\$74,853.70	\$1,326,045.62	\$66,343.27	\$3,491,347.93	\$141,196.97	
Oct-21	\$8,197,988.26	\$3,723,188.35	\$3,137,188.83	\$32,603.50	\$39,055.04	\$12,876.12	\$320,269.42	\$169,821.82	\$8,986.03	\$2,295.00	\$92.59	\$3,318,384.27	\$84,534.66	\$1,438,407.36	\$68,773.90	\$4,756,791.63	\$153,308.56	
Nov-21	\$6,207,187.12	\$2,906,652.95	\$2,376,924.47	\$28,256.26	\$31,771.50	\$12,747.86	\$348,202.56	\$96,678.82	\$9,521.51	\$2,519.00	\$30.97	\$2,485,674.77	\$72,775.62	\$1,352,074.71	\$70,272.02	\$3,837,749.48	\$143,047.64	
Dec-21	\$7,023,773.89	\$3,396,243.94	\$2,766,228.82	\$30,869.17	\$30,834.95	\$14,113.01	\$420,333.87	\$123,642.43	\$7,597.55	\$2,613.00	\$11.14	\$2,900,092.94	\$75,817.13	\$1,424,414.79	\$66,626.52	\$4,324,507.73	\$142,443.65	
Totals	\$85,232,556.26	\$37,993,063.23	\$30,543,883.37	\$298,571.40	\$493,938.11	\$340,103.40	\$4,846,049.10	\$1,304,396.34	\$134,138.57	\$31,687.75	\$295.19	\$32,014,401.22	\$1,132,612.91	\$16,172,798.24	\$885,892.19	\$48,187,199.46	\$2,018,505.10	
2.71%												4573485.889	96.58%	3.42%	94.81%	5.19%	95.98%	4.02%

Greater Tompkins County Municipal Health Insurance Consortium
Hospital, Medical, and Surgical Paid Claims and Claims Related Expenses

												Per Excellus BCBS Reports		Per ProAct, Inc. Reports			
												Medical Claims		Rx Claims		Combined Paid Claims	
Fiscal Year	Provider Charged Amount	Total Cost	Claim Paid Amount	Member Copayment	Member Coinsurance	Member Deductible	Other Carrier Liability	HCRA Surcharge	ITS Access Fee	AEA Fee	ITS Surcharge	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount	Group Billed Amount	Member Paid Amount
2016	\$63,183,892.89	\$30,511,163.04	\$23,982,113.98	\$166,521.09	\$529,772.46	\$266,581.13	\$4,549,295.46	\$888,617.15	\$101,300.56	\$25,275.75	\$1,685.46	\$24,998,992.90	\$962,874.68	\$10,645,984.27	\$640,466.47	\$35,644,977.17	\$1,603,341.15
2017	\$67,940,944.99	\$32,612,019.26	\$25,099,142.09	\$187,519.88	\$563,928.78	\$314,391.41	\$5,311,158.83	\$988,810.55	\$111,001.41	\$26,087.50	\$9,978.81	\$26,235,020.36	\$1,065,840.07	\$11,079,834.05	\$664,302.99	\$37,314,854.41	\$1,730,143.06
2018	\$80,521,626.97	\$37,911,191.75	\$28,927,339.37	\$243,273.76	\$530,971.95	\$306,656.08	\$6,690,826.28	\$1,080,887.67	\$102,004.16	\$28,704.00	\$528.48	\$30,139,463.68	\$1,080,901.79	\$10,863,500.35	\$652,109.29	\$41,002,964.03	\$1,733,011.08
2019	\$75,853,196.15	\$35,774,026.49	\$27,335,062.68	\$312,119.61	\$541,606.44	\$328,731.23	\$6,107,778.34	\$1,003,536.01	\$118,945.03	\$26,216.50	\$30.65	\$28,483,790.87	\$1,182,457.28	\$12,839,601.51	\$744,713.47	\$41,323,392.38	\$1,927,170.75
2020	\$76,886,474.20	\$34,789,133.85	\$25,795,257.31	\$290,773.11	\$433,330.28	\$310,672.10	\$6,834,651.80	\$945,798.62	\$151,293.41	\$27,068.40	\$288.82	\$26,919,706.56	\$1,034,775.49	\$13,943,138.60	\$766,424.77	\$40,862,845.16	\$1,801,200.26
2021	\$85,232,556.26	\$37,993,063.23	\$30,543,883.37	\$298,571.40	\$493,938.11	\$340,103.40	\$4,846,049.10	\$1,304,396.34	\$134,138.57	\$31,687.75	\$295.19	\$32,014,401.22	\$1,132,612.91	\$16,172,798.24	\$885,892.19	\$48,187,199.46	\$2,018,505.10
Totals	\$449,618,691.46	\$209,590,597.62	\$161,682,798.80	\$1,498,778.85	\$3,093,548.02	\$1,867,135.35	\$34,339,759.81	\$6,212,046.34	\$718,683.14	\$165,039.90	\$12,807.41	\$168,791,375.59	\$6,459,462.22	\$75,544,857.02	\$4,353,909.18	\$244,336,232.61	\$10,813,371.40
2.54%												96.31%	3.69%	94.55%	5.45%	95.76%	4.24%