

EXHIBIT

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Stop Loss Renewal

City of Round Rock
January 1, 2019 through December 31, 2019

Aetna Life Insurance Company
Customer Number - 819919

Firm Stop Loss Quote

- This exhibit outlines your firm renewal rates effective January 1, 2019.
- Pricing assumes plan enrollment of 835 employees. If actual enrollment varies by more than 10% in total and/or the plan design changes we reserve the right to readjust the stop loss premium.
- In an environment where healthcare costs are increasing, maintaining the same deductible shifts more of the claim cost to the stop loss provider.
- To help reduce the effect of leveraging, it is recommended that a plan sponsor consider increasing their Stop Loss deductible to keep pace with medical trend.
- Please refer to the stop loss policy for detailed Stop Loss information.

	Current 1/1/2018	Firm Renewal 1/1/2019	Option \$250K ISL 1/1/2019	Option \$300K ISL 1/1/2019
<u>STOP LOSS COVERAGE SPECIFICATIONS</u>				
Policy Period Length (months):	12	12	12	12
Number of Employees Covered Under Stop Loss:	812	835	835	835
Producer Compensation:	0.0%	0.0%	0.0%	0.0%
Terminal Liability Option:	None	None	None	None
Claims Paid Basis for Medical Coverages:	Cleared	Cleared	Cleared	Cleared
Claims Paid Basis for APM Rx coverage is on a cleared basis				

INDIVIDUAL STOP LOSS COVERAGE SPECIFICATIONS

Individual Stop Loss Level:	\$200,000	\$200,000	\$250,000	\$300,000
Contract Type:	Paid	Paid	Paid	Paid
Coinurance %:	100%	100%	100%	100%
M/N Claims Apply to ISL (Aetna Administered only):	Yes	Yes	Yes	Yes
Rx Claims Applied to ISL (Aetna Administered only):	Yes	Yes	Yes	Yes
Individual Specific Stop Loss Limits (Lasering):	No	No	No	No
Individual Lifetime Stop Loss Payment Amount:	Unlimited	Unlimited	Unlimited	Unlimited
Reimbursement Method:	Immediate	Immediate	Immediate	Immediate

AGGREGATE STOP LOSS COVERAGE SPECIFICATIONS

Aggregate Stop Loss Percentage:	125%	125%	125%	125%
Contract Type:	Paid	Paid	Paid	Paid
Maximum Annual ASL Payment Amount:	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000
Reimbursement Method:	Monthly Budget Feature	Monthly Budget Feature	Monthly Budget Feature	Monthly Budget Feature
Prior Carrier Runoff Cap:	\$0	\$0	\$0	\$0
Total Claims Applied to Aggregate Stop Loss:	\$10,489,422	\$10,087,175	\$10,207,114	\$10,290,862
Benefits that apply to ASL-Medical:	\$7,524,589	\$7,380,237	\$7,380,237	\$7,380,237
Benefits that apply to ASL-Drug:	\$2,964,833	\$2,706,938	\$2,706,938	\$2,706,938
Lasering Adjustment:	\$0	\$0	\$0	\$0
Pooling and Coinsurance Adjustment:	\$0	\$0	\$119,939	\$203,687

FINANCIAL INFORMATION

Stop Loss Premium:	\$1,275,197	\$1,430,656	\$1,141,078	\$925,447
State Assessment Fee	\$0	\$0	\$0	\$0
Total Stop Loss Premium:	\$1,275,197	\$1,430,656	\$1,141,078	\$925,447
Total Premium (PEPM) Composite Rate:	\$130.87	\$142.78	\$113.88	\$92.36
Individual Stop Loss premium as % of Total Premium:	93.85%	95.98%	94.90%	93.66%
Stop Loss Aggregate Limit*:	\$13,111,778	\$12,608,969	\$12,758,893	\$12,863,578
Stop Loss Aggregate Limit (PEPM) Composite Factor:	\$1,345.63	\$1,258.38	\$1,273.34	\$1,283.79
ISL rate:	\$124.58	\$137.04	\$108.07	\$86.50
ASL rate:	\$6.29	\$5.74	\$5.81	\$5.86

*Minimum Stop Loss Aggregate Limit will be set using the first month enrollment x Stop Loss Aggregate Limit (PEPM) Composite Factor x # of contract Months.

Premium rates are billed and Aggregate Factors are administered on a composite basis.