



# CITY OF SUFFOLK

P.O. BOX 1858, SUFFOLK, VA, 23439-1858, T: (757) 514-7520; FAX (757) 514-7524

## ADDENDUM NO. 8

City of Suffolk  
RFP #15089-JS  
April 28, 2015

Purchasing Division  
442 Market Street, Room 1086  
Suffolk, VA 23434-5237  
Phone: (757) 514-7520 / Fax: (757) 514-7524  
<http://www.suffolkva.us/purchasing>

The Request for Proposal (RFP) for Employee Benefits has been amended as follows:

**Section 5.0, Paragraph A, page 15.**

The following Appendixes have been added:

Appendix 24 Large Claims Medical

Appendix 25 LTD Claims

Appendix 26 Pharmacy Drug Experience

The following questions and answers are incorporated in this RFP:

Q1: Is the Medicare population for EGWP, MAPD, or PDP? If you are interested in our PDP, would it be to group enroll?

A1: No, the City is not interested in a Medicare Advantage plan for post-65 retirees.

Q2: Please provide number of open claims and dates of the open claims for LTD

A2: Included on Appendix 25 - LTD claims report.

Q3: Please provide at least 2-3 years of LTD experience with earned premium history.

A3: Included on Appendix 25 - LTD claims report.

Q4: Please provide an LTD open claims report, including DOB, date of disability, genders, gross/net benefit, diagnosis and/or expected termination date, offset information, total amount paid by individual claimant, and reserve amount by individual claimant.

- A4:** Included on Appendix 25 - LTD claims report. Diagnosis and/or expected termination date, offset amount and reserve by claimant is not available.
- Q5:** Please provide an LTD closed claims report, including DOB, date of disability, genders, gross/net benefit, offset information, total amount paid by individual claimant, and termination dates.
- A5:** Included on Appendix 25 - LTD claims report.
- Q6:** Are you able to provide 24 months of VLTD claims? Concerning Pg. 2 SOLICITATION DOCUMENTS, Administrative and Service Issues: Is The City willing to accept a designated billing and eligibility representative who is named but not solely dedicated to The City?
- A6:** Included on Appendix 25 - LTD claims report. Yes, the City would be willing to accept a billing/eligibility representative who is not solely dedicated to the City.
- Q7:** Will you please provide one year of detailed claims data, 1/1/2014 – 12/31/2014, to ensure we can offer the best possible pricing based on your utilization?
- A7:** Included on Appendix 25 - LTD claims report.
- Q8:** How many open enrollment meetings does The City contemplate in 4.0 Scope of Services 2. (7)?
- A8:** The City anticipates 33 meetings.
- Q9:** Does the City of Suffolk have Erisa or Non Erisa status?
- A9:** Non-ERISA
- Q10:** What coverages are to be included in the pre-65 retiree billing? Are we to quote on the assumption we will be awarded all lines of coverage or would we be expected to bill retirees for coverage across multiple vendors?
- A10:** For pre-65 retirees, billing will be required for medical only.
- Q11:** What coverages are to be included in the post-65 retiree billing? Are we to quote on the assumption we will be awarded all lines of coverage or would we be expected to bill retirees for coverage across multiple vendors?
- A11:** For post-65 retirees, billing for Supplement Plan F and Part D plans only
- Q12:** Will the City consider maintaining the current retiree billing administration through Flexible Benefits Administrators?
- A12:** The City will consider all proposals for retiree billing submitted.
- Q13:** Is a quote including Plan F for the 64 Medicare eligible retirees being requested?
- A13:** No, the City is not requesting Plan F proposals at this time.

Q14: Please provide a list of external vendors the City of Suffolk currently uses.

A14: The current vendors The City partners with are listed on page 6 & 7 of the RFP.

Q15: Please provide an EAP utilization report.

A15: This has been requested.

Q16: Please provide pharmacy utilization data including: script data, how many scripts were paid, home delivery penetration and generic utilization.

A16: Please see Appendix 26, this claims information is included with the City's annual report. The annual report includes claims through June 2014.

Offerors are to submit one (1) printed original and six (6) printed copies and two (2) electronic versions of their proposal. CD or flashdrives are acceptable for the electronic versions of the proposal.

**Proposals sent by email or fax will not be accepted.**

**Contract Officer:**

  
Jay Smigielski, Purchasing Agent

If you have any questions regarding this Addendum, please contact Jay Smigielski, Purchasing Agent, at [jsmigielski@suffolkva.us](mailto:jsmigielski@suffolkva.us) It is the Offeror's responsibility to ensure they have read all addendums and incorporated them in their proposal.

# CITY OF SUFFOLK

**Group Account: 05111**

Participants with Total Claims Expense Over \$25,000

For Period of : 01/2014 through 12/2014

## APPENDIX 24

PRODUCT LINE	SEX RELATIONSHIP	CONTRACT STATUS	DIAGNOSIS	MEDICAL EXPENSE	DRUG EXPENSE	CLAIMS EXPENSE
HK	FEMALE EMPLOYEE	ACTIVE	NERVOUS SYSTEM/SENSE ORGAN	\$814.96	\$68,540.90	\$69,355.86
HK	MALE EMPLOYEE	ACTIVE	HYPERTENSION	\$988.81	\$49,987.14	\$50,975.95
HK	FEMALE EMPLOYEE	ACTIVE	ROUTINE/SCREENING EXAMS	\$1,175.49	\$65,149.88	\$66,325.37
HK	MALE EMPLOYEE	ACTIVE	DIGESTIVE	\$2,323.07	\$35,157.20	\$37,480.27
HK	MALE DEPENDENT	ACTIVE	OTHER V-CODES	\$5,749.06	\$26,537.72	\$32,286.78
HK	MALE SPOUSE	ACTIVE	COMPLICATIONS OF SURGICAL AN	\$8,509.92	\$25,569.14	\$34,079.06
HK	MALE DEPENDENT	CANCELLED	SYMPTOMS/ILL-DEFINED CONDITIC	\$10,112.42	\$18,768.28	\$28,880.70
HK	FEMALE EMPLOYEE	ACTIVE	SYMPTOMS/ILL-DEFINED CONDITIC	\$13,843.10	\$41,797.43	\$55,640.53
HK	FEMALE EMPLOYEE	ACTIVE	ENDOCRINE,NUTRITIONAL,METABO	\$14,132.06	\$14,975.53	\$29,107.59
HK	FEMALE EMPLOYEE	ACTIVE	OTHER CIRCULATORY	\$15,045.90	\$30,508.46	\$45,554.36
HK	MALE EMPLOYEE	ACTIVE	SYMPTOMS/ILL-DEFINED CONDITIC	\$16,425.51	\$11,276.04	\$27,701.55
HK	FEMALE SPOUSE	ACTIVE	SYMPTOMS/ILL-DEFINED CONDITIC	\$17,132.76	\$30,931.84	\$48,064.60
HK	FEMALE SPOUSE	ACTIVE	NERVOUS SYSTEM/SENSE ORGAN	\$19,493.63	\$57,375.44	\$76,869.07
HK	FEMALE SPOUSE	ACTIVE	DIGESTIVE	\$21,371.02	\$12,680.25	\$34,051.27
HK	MALE DEPENDENT	ACTIVE	DIGESTIVE	\$23,294.61	\$3,487.59	\$26,782.20
HK	FEMALE SPOUSE	ACTIVE	MUSCULOSKELETAL	\$23,667.82	\$13,723.74	\$37,391.56
HK	MALE SPOUSE	ACTIVE	CEREBROVASCULAR DISEASE	\$24,291.62	\$936.42	\$25,228.04
HK	MALE EMPLOYEE	ACTIVE	MUSCULOSKELETAL	\$25,654.04	\$338.40	\$25,992.44
HK	FEMALE SPOUSE	ACTIVE	ENDOCRINE,NUTRITIONAL,METABO	\$25,960.92	\$399.62	\$26,360.54
HK	MALE SPOUSE	ACTIVE	HEART DISEASE	\$27,023.97	\$35,394.27	\$62,418.24
HK	MALE EMPLOYEE	ACTIVE	HEART DISEASE	\$27,495.66	\$330.72	\$27,826.38

Note: Product line of Par/PPO reflects all Par and PPO products offered through your Anthem Blue Cross and Blue Shield health care plan. Product line of HK reflects all Anthem HealthKeepers products offered. Claims expense reflects the sum of medical and drug expense. All expense values reflect fully discounted amounts.

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Participants with Total Claims Expense Over \$25,000

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PRODUCT LINE	SEX RELATIONSHIP	CONTRACT STATUS	DIAGNOSIS	MEDICAL EXPENSE	DRUG EXPENSE	CLAIMS EXPENSE
HK	FEMALE SPOUSE	ACTIVE	SYMPTOMS/ILL-DEFINED CONDITIC	\$27,638.66	\$31.80	\$27,670.46
HK	FEMALE EMPLOYEE	ACTIVE	BENIGN NEOPLASMS	\$28,124.17	\$59.56	\$28,183.73
HK	MALE SPOUSE	ACTIVE	DIGESTIVE	\$28,643.68	\$161.89	\$28,805.57
HK	FEMALE SPOUSE	ACTIVE	HEART DISEASE	\$29,787.99	\$4,463.30	\$34,251.29
HK	MALE EMPLOYEE	ACTIVE	HEART DISEASE	\$32,245.03	\$973.97	\$33,219.00
HK	FEMALE SPOUSE	ACTIVE	MALIGNANT NEOPLASMS	\$34,373.77	\$680.98	\$35,054.75
HK	FEMALE DEPENDENT	ACTIVE	LIVEBORN INFANTS	\$35,791.35	\$187.54	\$35,978.89
HK	MALE EMPLOYEE	CANCELLED	SYMPTOMS/ILL-DEFINED CONDITIC	\$36,368.31	\$681.39	\$37,049.70
HK	MALE EMPLOYEE	ACTIVE	HEART DISEASE	\$37,076.13	\$694.16	\$37,770.29
HK	MALE DEPENDENT	ACTIVE	BLOOD AND BLOOD ORGANS	\$37,526.88	\$8,780.63	\$46,307.51
HK	MALE EMPLOYEE	ACTIVE	MUSCULOSKELETAL	\$38,176.44	\$1,015.74	\$39,192.18
HK	FEMALE EMPLOYEE	ACTIVE	GENITOURINARY	\$41,253.70	\$244.69	\$41,498.39
HK	MALE EMPLOYEE	ACTIVE	COMPLICATIONS OF SURGICAL AN	\$44,975.23	\$1,074.52	\$46,049.75
HK	MALE EMPLOYEE	ACTIVE	HEART DISEASE	\$46,148.01	\$510.85	\$46,658.86
HK	FEMALE SPOUSE	ACTIVE	MUSCULOSKELETAL	\$47,424.99	\$1,892.90	\$49,317.89
HK	FEMALE EMPLOYEE	ACTIVE	MALIGNANT NEOPLASMS	\$48,699.14	\$10,999.82	\$59,698.96
HK	MALE EMPLOYEE	ACTIVE	DIGESTIVE	\$49,847.74	\$662.71	\$50,510.45
HK	MALE EMPLOYEE	ACTIVE	MALIGNANT NEOPLASMS	\$55,036.76	\$0.00	\$55,036.76
HK	FEMALE SPOUSE	CANCELLED	MUSCULOSKELETAL	\$55,115.90	\$645.38	\$55,761.28
HK	MALE EMPLOYEE	ACTIVE	MUSCULOSKELETAL	\$56,040.94	\$118.85	\$56,159.79
HK	FEMALE EMPLOYEE	ACTIVE	MALIGNANT NEOPLASMS	\$60,446.30	\$188.62	\$60,634.92

Note: Product line of Par/PPO reflects all Par and PPO products offered through your Anthem Blue Cross and Blue Shield health care plan. Product line of HK reflects all Anthem HealthKeepers products offered. Claims expense reflects the sum of medical and drug expense. All expense values reflect fully discounted amounts.

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HK	FEMALE EMPLOYEE	ACTIVE	CEREBROVASCULAR DISEASE	\$62,607.47	\$848.90	\$63,456.37
HK	MALE SPOUSE	ACTIVE	HEART DISEASE	\$73,889.85	\$1,871.90	\$75,761.75
HK	MALE EMPLOYEE	ACTIVE	HEART DISEASE	\$83,673.86	\$65.77	\$83,739.63
HK	FEMALE SPOUSE	ACTIVE	MALIGNANT NEOPLASMS	\$140,473.82	\$2,959.99	\$143,433.81
HK	MALE EMPLOYEE	CANCELLED	MUSCULOSKELETAL	\$163,630.73	\$213.13	\$163,843.86
HK	FEMALE EMPLOYEE	ACTIVE	DIGESTIVE	\$20,830.10	\$7,629.79	\$28,459.89
HK	MALE EMPLOYEE	ACTIVE	NERVOUS SYSTEM/SENSE ORGAN	\$40,942.28	\$27,993.74	\$68,936.02
HK	MALE EMPLOYEE	ACTIVE	MUSCULOSKELETAL	\$57,832.74	\$4,948.38	\$62,781.12
HK	MALE EMPLOYEE	CANCELLED	MALIGNANT NEOPLASMS	\$62,471.17	\$1,704.66	\$64,175.83
Par/PPO	MALE EMPLOYEE	ACTIVE	INFECTIOUS/PARASITIC	\$91.65	\$29,780.92	\$29,872.57
Par/PPO	MALE SPOUSE	ACTIVE	ROUTINE/SCREENING EXAMS	\$4,361.56	\$79,209.89	\$83,571.45
Par/PPO	MALE EMPLOYEE	ACTIVE	HEART DISEASE	\$20,940.97	\$4,377.49	\$25,318.46
Par/PPO	FEMALE SPOUSE	ACTIVE	COMPLICATIONS OF PREGNANCY	\$25,509.71	\$616.45	\$26,126.16
Par/PPO	MALE SPOUSE	ACTIVE	HEART DISEASE	\$25,537.72	\$4,993.24	\$30,530.96
Par/PPO	FEMALE EMPLOYEE	ACTIVE	CEREBROVASCULAR DISEASE	\$26,316.03	\$8,538.28	\$34,854.31
Par/PPO	FEMALE SPOUSE	ACTIVE	MUSCULOSKELETAL	\$28,415.28	\$8,271.87	\$36,687.15
Par/PPO	FEMALE SPOUSE	CANCELLED	MALIGNANT NEOPLASMS	\$38,060.65	\$767.98	\$38,828.63
Par/PPO	MALE EMPLOYEE	ACTIVE	COMPLICATIONS OF SURGICAL AN	\$43,734.41	\$314.35	\$44,048.76
Par/PPO	MALE EMPLOYEE	ACTIVE	HEART DISEASE	\$49,136.06	\$3,107.83	\$52,243.89
Par/PPO	FEMALE EMPLOYEE	ACTIVE	DIGESTIVE	\$63,039.00	\$1,940.70	\$64,979.70
Par/PPO	FEMALE SPOUSE	ACTIVE	MALIGNANT NEOPLASMS	\$195,718.23	\$179.57	\$195,897.80

Note: Product line of Par/PPO reflects all Par and PPO products offered through your Anthem Blue Cross and Blue Shield health care plan. Product line of HK reflects all Anthem HealthKeepers products offered. Claims expense reflects the sum of medical and drug expense. All expense values reflect fully discounted amounts.

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Par/PPO	FEMALE EMPLOYEE	ACTIVE	MALIGNANT NEOPLASMS	\$8,043.19	\$53,518.21	\$61,561.40
Par/PPO	MALE EMPLOYEE	ACTIVE	FRACTURES	\$25,130.67	\$2,337.33	\$27,468.00
Par/PPO	MALE EMPLOYEE	ACTIVE	HEART DISEASE	\$28,124.46	\$11,813.45	\$39,937.91
Par/PPO	MALE EMPLOYEE	ACTIVE	HEART DISEASE	\$31,633.87	\$11,115.17	\$42,749.04
Par/PPO	MALE EMPLOYEE	CANCELLED	MALIGNANT NEOPLASMS	\$33,260.84	\$342.62	\$33,603.46
Par/PPO	FEMALE EMPLOYEE	ACTIVE	MUSCULOSKELETAL	\$56,376.08	\$0.00	\$56,376.08
Par/PPO	MALE EMPLOYEE	ACTIVE	HEART DISEASE	\$80,587.58	\$4,767.02	\$85,354.60
TOTAL CLAIMANT COUNT = 70				\$2,685,617.45	\$852,163.94	\$3,537,781.39

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HK	FEMALE EMPLOYEE	ACTIVE	GENITOURINARY	\$340.91	\$55,243.25	\$55,584.16
HK	FEMALE DEPENDENT	ACTIVE	ENDOCRINE, NUTRITIONAL, METABOLIC	\$2,929.76	\$50,060.51	\$52,990.27
HK	MALE EMPLOYEE	ACTIVE	NERVOUS SYSTEM/SENSE ORGAN	\$3,276.31	\$52,244.00	\$55,520.31
HK	FEMALE SPOUSE	ACTIVE	MUSCULOSKELETAL	\$3,720.82	\$27,551.60	\$31,272.42
HK	MALE EMPLOYEE	ACTIVE	DIGESTIVE	\$5,786.93	\$36,225.89	\$42,012.82
HK	MALE SPOUSE	ACTIVE	NERVOUS SYSTEM/SENSE ORGAN	\$9,366.50	\$27,801.29	\$37,167.79
HK	FEMALE EMPLOYEE	ACTIVE	DIGESTIVE	\$10,209.58	\$29,748.60	\$39,958.18
HK	MALE EMPLOYEE	ACTIVE	HEART DISEASE	\$13,026.12	\$12,151.78	\$25,177.90
HK	FEMALE SPOUSE	ACTIVE	NERVOUS SYSTEM/SENSE ORGAN	\$15,007.64	\$40,199.84	\$55,207.48
HK	MALE DEPENDENT	ACTIVE	OTHER V-CODES	\$15,951.43	\$9,074.83	\$25,026.26
HK	FEMALE SPOUSE	ACTIVE	HEART DISEASE	\$18,141.95	\$30,112.39	\$48,254.34
HK	MALE DEPENDENT	ACTIVE	OTHER V-CODES	\$18,970.80	\$23,371.33	\$42,342.13
HK	FEMALE EMPLOYEE	ACTIVE	GENITOURINARY	\$19,347.26	\$10,334.16	\$29,681.42
HK	FEMALE SPOUSE	ACTIVE	MUSCULOSKELETAL	\$20,623.10	\$38,604.85	\$59,227.95
HK	FEMALE SPOUSE	ACTIVE	COMPLICATIONS OF SURGICAL AN	\$21,123.08	\$12,661.97	\$33,785.05
HK	FEMALE SPOUSE	ACTIVE	HEART DISEASE	\$21,471.94	\$4,323.03	\$25,794.97
HK	FEMALE SPOUSE	ACTIVE	DIGESTIVE	\$23,258.29	\$3,829.37	\$27,087.66
HK	FEMALE SPOUSE	ACTIVE	MUSCULOSKELETAL	\$23,975.56	\$1,812.87	\$25,788.43
HK	FEMALE SPOUSE	ACTIVE	MUSCULOSKELETAL	\$24,601.52	\$1,326.91	\$25,928.43
HK	FEMALE EMPLOYEE	ACTIVE	MUSCULOSKELETAL	\$25,558.91	\$1,207.64	\$26,766.55
HK	MALE EMPLOYEE	ACTIVE	OTHER INJURIES	\$25,767.81	\$816.97	\$26,584.78

Note: Product line of Par/PPO reflects all Par and PPO products offered through your Anthem Blue Cross and Blue Shield health care plan. Product line of HK reflects all Anthem HealthKeepers products offered. Claims expense reflects the sum of medical and drug expense. All expense values reflect fully discounted amounts.



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HK	MALE SPOUSE	ACTIVE	MUSCULOSKELETAL	\$26,336.12	\$0.00	\$26,336.12
HK	FEMALE EMPLOYEE	ACTIVE	ECTOPIC/ABORTIVE OUTCOME	\$26,716.29	\$68.96	\$26,785.25
HK	FEMALE SPOUSE	ACTIVE	MUSCULOSKELETAL	\$27,163.55	\$167.09	\$27,330.64
HK	FEMALE EMPLOYEE	ACTIVE	MALIGNANT NEOPLASMS	\$27,262.03	\$474.94	\$27,736.97
HK	MALE EMPLOYEE	ACTIVE	MUSCULOSKELETAL	\$27,327.56	\$1,598.98	\$28,926.54
HK	FEMALE EMPLOYEE	ACTIVE	MUSCULOSKELETAL	\$27,462.17	\$3,180.76	\$30,642.93
HK	MALE DEPENDENT	ACTIVE	OTHER INJURIES	\$28,090.84	\$660.74	\$28,751.58
HK	FEMALE SPOUSE	ACTIVE	MALIGNANT NEOPLASMS	\$28,887.72	\$128.73	\$29,016.45
HK	MALE DEPENDENT	ACTIVE	LIVEBORN INFANTS	\$31,158.50	\$26.94	\$31,185.44
HK	MALE EMPLOYEE	ACTIVE	FRACTURES	\$32,764.33	\$0.00	\$32,764.33
HK	FEMALE SPOUSE	ACTIVE	CHEMOTHERAPY	\$32,942.01	\$233.93	\$33,175.94
HK	FEMALE SPOUSE	ACTIVE	GENITOURINARY	\$35,013.81	\$2,224.21	\$37,238.02
HK	MALE DEPENDENT	ACTIVE	BLOOD AND BLOOD ORGANS	\$35,065.05	\$23,190.70	\$58,255.75
HK	MALE EMPLOYEE	ACTIVE	MUSCULOSKELETAL	\$36,253.71	\$1,598.53	\$37,852.24
HK	FEMALE SPOUSE	ACTIVE	ENDOCRINE,NUTRITIONAL,METABO	\$37,169.53	\$352.61	\$37,522.14
HK	MALE SPOUSE	ACTIVE	HEART DISEASE	\$37,431.37	\$1,616.89	\$39,048.26
HK	FEMALE SPOUSE	ACTIVE	SYMPTOMS/ILL-DEFINED CONDITIC	\$38,942.12	\$157.97	\$39,100.09
HK	MALE EMPLOYEE	ACTIVE	MUSCULOSKELETAL	\$39,209.32	\$153.16	\$39,362.48
HK	FEMALE SPOUSE	ACTIVE	GENITOURINARY	\$43,127.50	\$2.79	\$43,130.29
HK	MALE EMPLOYEE	ACTIVE	OTHER CIRCULATORY	\$54,515.58	\$39.67	\$54,555.25
HK	FEMALE SPOUSE	ACTIVE	MUSCULOSKELETAL	\$56,668.08	\$1,882.44	\$58,550.52

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HK	MALE EMPLOYEE	ACTIVE	MALIGNANT NEOPLASMS	\$60,541.54	\$5,179.48	\$65,721.02
HK	FEMALE SPOUSE	ACTIVE	RESPIRATORY	\$60,614.74	\$1,457.16	\$62,071.90
HK	FEMALE SPOUSE	ACTIVE	MALIGNANT NEOPLASMS	\$130,956.82	\$330.92	\$131,287.74
HK	FEMALE SPOUSE	ACTIVE	COMPLICATIONS OF SURGICAL AN	\$149,484.13	\$5,533.08	\$155,017.21
HK	FEMALE DEPENDENT	ACTIVE	CONGENITAL ANOMALIES	\$153,084.10	\$0.00	\$153,084.10
HK	MALE EMPLOYEE	ACTIVE	SYMPTOMS/ILL-DEFINED CONDITIC	\$13,755.57	\$13,986.95	\$27,742.52
HK	FEMALE EMPLOYEE	ACTIVE	MALIGNANT NEOPLASMS	\$29,171.72	\$1,486.29	\$30,658.01
HK	FEMALE EMPLOYEE	ACTIVE	MUSCULOSKELETAL	\$41,137.46	\$1,501.27	\$42,638.73
HK	FEMALE EMPLOYEE	ACTIVE	MUSCULOSKELETAL	\$45,759.43	\$5,829.90	\$51,589.33
HK	MALE EMPLOYEE	ACTIVE	NERVOUS SYSTEM/SENSE ORGAN	\$59,537.25	\$24,243.00	\$83,780.25
Par/PPO	FEMALE SPOUSE	ACTIVE	ROUTINE/SCREENING EXAMS	\$1,744.57	\$25,467.04	\$27,211.61
Par/PPO	MALE SPOUSE	ACTIVE	MALIGNANT NEOPLASMS	\$2,949.23	\$57,443.83	\$60,393.06
Par/PPO	MALE SPOUSE	ACTIVE	MUSCULOSKELETAL	\$7,027.26	\$24,026.75	\$31,054.01
Par/PPO	FEMALE SPOUSE	ACTIVE	MUSCULOSKELETAL	\$9,287.30	\$27,783.37	\$37,070.67
Par/PPO	FEMALE EMPLOYEE	CANCELLED	COMPLICATIONS OF PREGNANCY	\$24,913.23	\$382.22	\$25,295.45
Par/PPO	FEMALE EMPLOYEE	ACTIVE	NORMAL DELIVERY	\$29,389.53	\$32.54	\$29,422.07
Par/PPO	FEMALE SPOUSE	ACTIVE	MUSCULOSKELETAL	\$37,111.02	\$2,016.60	\$39,127.62
Par/PPO	MALE SPOUSE	ACTIVE	SYMPTOMS/ILL-DEFINED CONDITIC	\$38,827.12	\$3,912.25	\$42,739.37
Par/PPO	MALE DEPENDENT	ACTIVE	LIVEBORN INFANTS	\$39,006.96	\$20.11	\$39,027.07
Par/PPO	FEMALE EMPLOYEE	CANCELLED	MUSCULOSKELETAL	\$50,091.22	\$1,255.94	\$51,347.16
Par/PPO	FEMALE EMPLOYEE	ACTIVE	HEART DISEASE	\$51,138.78	\$6,126.59	\$57,265.37

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For Period of : 01/2013 through 12/2013

PRODUCT LINE	SEX RELATIONSHIP	CONTRACT STATUS	DIAGNOSIS	MEDICAL EXPENSE	DRUG EXPENSE	CLAIMS EXPENSE
Par/PPO	FEMALE EMPLOYEE	ACTIVE	CEREBROVASCULAR DISEASE	\$51,749.90	\$8,295.33	\$60,045.23
Par/PPO	FEMALE SPOUSE	ACTIVE	ENDOCRINE,NUTRITIONAL,METABO	\$61,028.49	\$9,713.03	\$70,741.52
Par/PPO	MALE SPOUSE	ACTIVE	RESPIRATORY	\$76,034.12	\$3,521.87	\$79,555.99
Par/PPO	FEMALE DEPENDENT	ACTIVE	PERINATAL	\$119,681.64	\$0.00	\$119,681.64
Par/PPO	MALE SPOUSE	CANCELLED	MALIGNANT NEOPLASMS	\$154,839.82	\$0.16	\$154,839.98
Par/PPO	FEMALE EMPLOYEE	ACTIVE	MALIGNANT NEOPLASMS	\$19,515.23	\$19,194.04	\$38,709.27
Par/PPO	FEMALE EMPLOYEE	ACTIVE	DIGESTIVE	\$28,815.93	\$179.11	\$28,995.04
Par/PPO	FEMALE EMPLOYEE	ACTIVE	MALIGNANT NEOPLASMS	\$33,998.21	\$559.71	\$34,557.92
Par/PPO	MALE EMPLOYEE	ACTIVE	SYMPTOMS/ILL-DEFINED CONDITIC	\$47,958.12	\$641.85	\$48,599.97
Par/PPO	FEMALE SPOUSE	ACTIVE	MUSCULOSKELETAL	\$63,900.84	\$6,252.94	\$70,153.78
Par/PPO	MALE EMPLOYEE	ACTIVE	COMPLICATIONS OF SURGICAL AN	\$84,357.92	\$8,996.55	\$93,354.47
Par/PPO	MALE EMPLOYEE	CANCELLED	DIGESTIVE	\$84,950.88	\$0.00	\$84,950.88
Par/PPO	MALE EMPLOYEE	ACTIVE	MUSCULOSKELETAL	\$97,215.76	\$2,059.10	\$99,274.86
Par/PPO	FEMALE EMPLOYEE	CANCELLED	MALIGNANT NEOPLASMS	\$100,030.68	\$603.63	\$100,634.31
Par/PPO	MALE EMPLOYEE	ACTIVE	MALIGNANT NEOPLASMS	\$185,360.20	\$258.45	\$185,618.65
TOTAL CLAIMANT COUNT = 78				\$3,296,930.13	\$774,754.18	\$4,071,684.31

Note: Product line of Par/PPO reflects all Par and PPO products offered through your Anthem Blue Cross and Blue Shield health care plan. Product line of HK reflects all Anthem HealthKeepers products offered. Claims expense reflects the sum of medical and drug expense. All expense values reflect fully discounted amounts.

APPENDIX 25

CLAIMS ANALYSIS  
SUFFOLK CITY OF

Group Long Term Disability Insurance

Group # 1284

From Through	1/1/2011 12/31/2011	1/1/2012 12/31/2012	1/1/2013 12/31/2013	1/1/2014 12/31/2014	1/1/2015 3/31/2015	Combined
Earned Premium	\$ 77,142	\$ 79,081	\$ 86,678	\$ 94,808	\$ 25,812	\$ 363,520
Paid Claims	\$ 77,792	\$ 7,366	\$ 0	\$ 0	\$ 0	\$ 85,158
Open Reserves	\$ 129,250	\$ 0	\$ 0	\$ 0	\$ 0	\$ 129,250
IBNR	\$ 0	\$ 0	\$ 0	\$ 15,982	\$ 13,076	\$ 29,059
Total Incurred Claims	\$ 207,042	\$ 7,366	\$ 0	\$ 15,982	\$ 13,076	\$ 243,466
<b>Loss Ratio</b>	<b>268%</b>	<b>9%</b>	<b>0%</b>	<b>17%</b>	<b>51%</b>	<b>67%</b>

National Insurance Services

Date Prepared: 4/24/15  
HN

National Insurance Services

UW: HN

Date: 4/24/2015

CLOSED CLAIM LISTING

SUFFOLK CITY OF

Group Long Term Disability Insurance

Carrier Number: 1284

Listing of Currently Closed Claims as of 3/2015

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<u>Gender</u>	<u>Date of Birth</u>	<u>Date of Loss</u>	<u>Closed Date</u>	<u>Total Paid</u>
F	04/24/1966	10/05/2011	03/30/2012	7573.4
M	06/04/1953	10/29/2012	03/28/2013	0
M	09/05/1966	11/05/2012	09/17/2013	4394.54
M	03/13/1978	10/24/2012	11/18/2013	2971.54
M	12/06/1979	02/23/2014	08/19/2014	0

National Insurance Services

UW: HN

Date: 4/24/2015

**OPEN CLAIM LISTING**

**SUFFOLK CITY OF**

Group Long Term Disability Insurance

Carrier Number: 1284

**Listing of Currently Open Claims as of 3/2015**

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<u>Gender</u>	<u>Date of Birth</u>	<u>Date of Loss</u>	<u>Monthly Benefit</u>
F	12/25/1960	01/18/2011	3,964.40

APPENDIX 26

CITY OF SUFFOLK

Group Account: 05111

07/2013 through 06/2014

Pharmacy Drug Experience by Type of Drug  
Current Year Utilization Statistics  
Combined Group Total

TIER LEVEL	PHARMACY SOURCE	NUMBER OF SCRIPTS	% OF SCRIPTS	GROUP EXPENSE	% OF EXPENSE	AVERAGE GROUP PAID/SCRIPT	PATIENT LIABILITY	AVERAGE PATIENT PAID/SCRIPT	COMBINED TOTAL COST	AVERAGE TOTAL COST/SCRIPT	AVERAGE TOTAL COST/DAYS SUPPLY
TIER 1	RETAIL	22,732	74.4%	\$482,740.59	22.2%	\$21.24	\$243,925.81	\$10.73	\$726,666.40	\$31.97	\$1.26
	MAIL SERVICE	908	3.0%	\$66,141.84	3.0%	\$72.84	\$11,430.98	\$12.59	\$77,572.82	\$85.43	\$0.98
	TOTAL TIER 1	23,640	77.4%	\$548,882.43	25.3%	\$23.22	\$255,356.79	\$10.80	\$804,239.22	\$34.02	\$1.23
TIER 2	RETAIL	5,743	18.8%	\$1,096,321.76	50.5%	\$190.90	\$167,725.47	\$29.21	\$1,264,047.23	\$220.10	\$7.90
	MAIL SERVICE	222	0.7%	\$249,139.89	11.5%	\$1,122.25	\$16,849.87	\$75.90	\$265,989.76	\$1,198.15	\$14.36
	TOTAL TIER 2	5,965	19.5%	\$1,345,461.65	62.0%	\$225.56	\$184,575.34	\$30.94	\$1,530,036.99	\$256.50	\$8.57
TIER 3	RETAIL	919	3.0%	\$215,700.95	9.9%	\$234.71	\$56,390.41	\$61.36	\$272,091.36	\$296.07	\$10.48
	MAIL SERVICE	37	0.1%	\$59,726.26	2.8%	\$1,614.22	\$3,751.55	\$101.39	\$63,477.81	\$1,715.62	\$21.78
	TOTAL TIER 3	956	3.1%	\$275,427.21	12.7%	\$288.10	\$60,141.96	\$62.91	\$335,569.17	\$351.01	\$11.62
	TOTAL	30,561	100.0%	\$2,169,771.29	100.0%	\$71.00	\$500,074.09	\$16.36	\$2,669,845.38	\$87.36	\$3.10